

INFECTION CONTROL POLICY – HUCKLEBERRIES NURTURE FARM CIC

Member Committee Responsible: Full Members Board

Status and Review Cycle: Statutory annual

Approved by: Full Members Board

Date of Next Review: May 2021

Version: 1.0

Revision History

Version	Changes	Approval Date	Author
1.0	Based on template by Surrey Recovery Team May 20	29 May 2020	B Cook

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This policy incorporates Public Health England guidance Health protection in schools and other childcare facilities and Department for Education guidance COVID-19 infection prevention and control. It is based on the template issued by the Surrey Planning Recovery Team 21 May 2020.

Introduction

Educational and farm settings are common sites for transmission of infections. Children are particularly susceptible because:

- they have immature immune systems
- have close contact with other children
- sometimes have no or incomplete vaccinations
- have a poor understanding of hygiene practices

This policy provides information for staff managing a range of common and important childhood infections in educational and farm settings. It includes the principles of infection prevention and control to enable safe working during the coronavirus (COVID-19) outbreak.

Infection in childcare and farm settings

Infections in children are common. This is because a child's immune system is immature. Added to this, young children often have close contact with their friends, for example through play, and lack good hygiene habits, making it easier for infections to be passed on. Many diseases can spread before the individual shows any symptoms at all (during the infectious period).

Farm animals can carry diseases that may be transferred to humans (zoonoses), and whilst it is uncommon for members of the public to become ill after visiting farms, in the past in the UK there have been a small number of cases of ill-health caused by exposure to micro-organisms that can be carried by animals (such as E.coli, Cryptosporidium, or Leptospirosis (weils disease) through contact with contaminated water and Borreliosis (lymes disease) carried by ticks.

Infection prevention and control measures aim to interrupt the cycle of infection by promoting the routine use of good standards of hygiene so that transmission of infection is reduced overall. This is usually through:

- immunisation of the population
- good hand washing
- making sure the environment is kept clean

Where a case of infection is known, measures aim to reduce or eliminate the risk of spread through information and prompt exclusion of a case.

How infection spreads

Infections are spread in many ways:

Respiratory spread:

Contact with cough or other secretions from an infected person, like influenza. This can happen by being near the infected person when they cough and then breathe in the organism; or by picking up the organism from an infected item, for example, a used tissue or on an object in the environment, and then touching your nose or mouth.

Direct contact spread:

By direct contact with the infecting organism, for example, contact with the skin during close contact, like impetigo or staphylococcal infections.

Gastrointestinal spread:

Resulting from contact with contaminated food or water (hepatitis A or leptospirosis), contact with infected faeces or unwashed hands after using the toilet (typhoid fever).

Blood borne virus spread:

By contact with infected blood or body fluids, for example, while attending to a bleeding person or puncture wound with a contaminated needle. Human mouths are inhabited by a wide variety of organisms, some of which can be transmitted by bites. Human bites resulting in puncture or breaking of the skin are potential sources of exposure to blood borne infections, therefore, it is essential that they are managed promptly.

Transmission of COVID-19 (coronavirus) mainly occurs via respiratory droplets generated during breathing, talking, coughing and sneezing. These droplets can directly infect the respiratory tracts of other people if there is close contact. They also infect others indirectly. This happens when the droplets get onto and contaminate surfaces which are then touched and introduced into the mouth or eyes of an uninfected person.

In all education settings, preventing the spread of coronavirus involves preventing:

- direct transmission, for instance, when in close contact with those sneezing and coughing
- indirect transmission, for instance, touching contaminated surfaces

Prevention and control

Hand washing is one of the most important ways of controlling the spread of infections, especially those that cause diarrhoea and vomiting and respiratory disease. Liquid soap, running water and paper towels are provided.

All staff, pupils and visitors are advised to:

- wash their hands after using the toilet, before eating or handling food and before and after touching the animals.
- Cover all cuts and abrasions with a waterproof dressing.

- Children and adults are encouraged to cover their mouth and nose with a disposable tissue when coughing or sneezing and wash hands after using or disposing of tissues. Spitting should be discouraged.
- Wear disposable gloves and plastic aprons if there is a risk of splashing or contamination with blood or body fluids during an activity. Gloves should be disposable, non-powdered vinyl or latex-free and CE marked. Wear goggles/visor and face mask if there is a risk of splashing to the face.

Bites

- If a bite does not break the skin: clean with soap and water and no further action is needed.
- If a bite breaks the skin: clean immediately with soap and running water. Record incident in accident book. Seek medical advice as soon as possible (on the same day) to treat potential infection, to protect against hepatitis B, for reassurance about HIV

Managing needle stick injuries

Occasionally children or staff may injure themselves with discarded used hypodermic needles which they have found. Dispose of the needle safely to avoid the same thing happening to someone else in the sharps box in the animal first aid kit or by contacting the local authority. If someone pricks or scratches themselves with a used hypodermic needle:

- wash the wound thoroughly with soap and water
- cover it with a waterproof dressing
- record it in the accident book and complete the accident form
- seek immediate medical attention from your local Accident and Emergency department

Cleaning blood and body fluid spills

All spillages of blood, faeces, saliva, vomit, nasal and eye discharges should be cleaned up immediately, wearing PPE (gloves, apron, face mask &/or visor).

Clean spillages using the disinfectant provided that is effective against both bacteria and viruses. Always follow the manufacturer's instructions. Use disposable paper towels to clean up blood and body fluid spills and dispose of after use. The red buckets in the welfare room contain a spillage kit for bodily fluids like blood, vomit and urine and should be used. Ensure the buckets are re-lined with a bin liner. All Covid-19 suspected waste should be double bagged and left in a designated bin for 72 hours before disposal with general waste.

Sanitary facilities

Good hygiene practices depend on adequate facilities. A hand wash tap and basin with foot pump running water and liquid pump action antibacterial soap is provided in the portaloos toilet.

Toilet paper and sanitary disposal bags and bin are available in the toilet cubicle.

A separate handwash tap and pump action antibacterial soap is also provided in the basecamp.

Disposable paper towels are mounted in a dispenser next to the hand wash tap, together with a foot-operated waste paper bin.

Children with continence aids

Pupils who use continence aids (like continence pads, catheters) should be encouraged to be as independent as possible. Intimate care will be carried out by the school staff member (not Huckleberries staff) in line with their intimate care policy. The principles of basic hygiene should be applied by both pupils and school staff involved in the management of these aids.

Continence pads should be changed in the toilet cubicle and disposed of in the bin.

Disposable powder-free non-sterile latex gloves and a disposable plastic apron should also be worn. Gloves and aprons should be changed after every pupil. Hand washing facilities should be readily available.

Dealing with contaminated clothing

Clothing of either the child or the first-aider may become contaminated with blood or body fluids. Clothing should be removed as soon as possible and placed in a plastic bag and sent home with the child with advice for the parent on how to launder the contaminated clothing. The clothing should be washed separately in a washing machine, using a pre-wash cycle, on the hottest temperature that the clothes will tolerate.

COVID-19 prevention and control

A range of approaches and actions should be employed. These provide a hierarchy of controls that, when implemented, create an inherently safer system where the risk of transmission of infection is substantially reduced.

These include:

- Minimise contact with individuals who are unwell. Parents of an unwell child will be contacted to collect the child immediately.
- Clean your hands often
- Promote respiratory hygiene (catch it, bin it, kill it)
- Clean surfaces that are touched frequently
- Minimise contact and mixing
- Personal protective equipment (PPE) is provided for use when needed
- Social distancing measures are implemented
- Soft furnishings and hammocks have been removed
- The nurture tent has been replaced with an open sided Coleman shelter
- The use of shared resources has been reduced
- Air flow is optimised by the children spending all their time outdoors

What to do if you suspect an outbreak of infection

An outbreak or incident may be defined as:

- an incident in which 2 or more people experiencing a similar illness are linked in time or place
- a greater than expected rate of infection compared with the usual background rate for the place and time where the outbreak has occurred

When to report

Huckleberries programme leader will contact the Head Teacher for the child(ren)s school and local Health Protection Team (HPT), as soon as they suspect an outbreak to discuss the situation and agree if any actions are needed.

It is useful to have the information listed below available before this discussion as it will help to inform the size and nature of the outbreak:

- total numbers affected (staff and children)
- symptoms
- date(s) when symptoms started
- number of sessions/schools affected

If you suspect cases of infectious illness including coronavirus but are unsure if it is an outbreak, please call your local HPT.

How to report

Huckleberries will telephone their local HPT as soon as possible to report any serious or unusual illness particularly for:

- Escherichia coli (VTEC) (also called E. coli 0157) or E coli VTEC infection
- food poisoning
- hepatitis
- measles, mumps, rubella (rubella is also called German measles)
- meningitis
- tuberculosis
- typhoid
- whooping cough (also called pertussis)
- COVID-19

The full list of notifiable diseases was updated in 2010.

The local HPT can also draft letters and provide factsheets for parents and carers to ensure the most up to date information is given.

Cleaning the environment

Cleaning of the environment, including resources and equipment, is an important function for the control of infection in educational and farm settings. It is important that cleaning schedules clearly describe the activities needed, the frequency and who will carry them out. Cleaning staff should be appropriately trained and have access to personal protective equipment.

Disposal of waste:

Waste from possible cases and cleaning of areas where possible cases have been (including disposable cloths and tissues):

- Should be put in a plastic rubbish bag and tied when full.
- The plastic bag should then be placed in a second bin bag and tied.
- It should be put in a suitable and secure place and marked for storage until the individual's test results are known or for at least 72 hours.

Waste should be stored safely and kept away from children. The waste should not be put in communal waste areas until negative test results are known, or the waste has been stored for at least 72 hours.

- If the individual tests negative, this can be put in with the normal waste
- If the individual tests positive, then store it for at least 72 hours and put in with the normal waste
- If storage for at least 72 hours is not appropriate, arrange for collection as a Category B infectious waste either by your local waste collection authority if they currently collect your waste or otherwise by a specialist clinical waste contractor. They will supply you with orange clinical waste bags for you to place your bags into so the waste can be sent for appropriate treatment.

Toys and equipment

Toys will not be brought to Huckleberries. If they are accidentally brought, they will be kept in a safe place and handed back to the child at home time.

COVID-19 advice:

Clay will be portioned out for single use as will soil, seeds or other supplies to avoid cross contamination.

All equipment will be cleaned between uses by different groups of children.

Remove soft furnishings, soft toys and toys that are hard to clean such as those with intricate parts.

Enhanced cleaning during an outbreak of infection

In the event of an outbreak of infection at your school, the local health protection team will recommend enhanced or more frequent cleaning, to help reduce transmission.

COVID-19 advice:

Areas where a symptomatic individual has passed through and spent minimal time, such as corridors which are not visibly contaminated with body fluids can be cleaned thoroughly as normal.

All surfaces that the symptomatic person has come into contact with must be cleaned and disinfected, including:

- objects which are visibly contaminated with body fluids

- all potentially contaminated high-contact areas such as toilet, door handles, gate posts, brooms and equipment

Use disposable cloths or paper roll and disposable mop heads, to clean all hard surfaces, floors, chairs, door handles and sanitary fittings, following one of the options below:

Use either a combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine or a household detergent followed by disinfection (1000 ppm av.cl.) Avoid creating splashes and spray when cleaning. Any cloths and mop heads used must be disposed of and should be put into waste bags as outlined below.

Any items that are heavily contaminated with body fluids and cannot be cleaned by washing should be disposed of.

Staff welfare

Staff immunisation

All staff, practitioners and volunteers should ensure they are up to date with immunisations, including Measles, Mumps, Rubella (MMR).

Exclusion

Staff, practitioners and volunteers will have the same rules regarding exclusion applied to them as are applied to children. They may return to work when they are no longer infectious, provided they feel well enough to do so.

Pregnant staff

If a pregnant woman develops a rash or is in direct contact with someone with a rash who is potentially infectious, she should consult her doctor or midwife.

Chickenpox can affect the pregnancy if a woman has not already had the infection. The GP and midwife should be informed promptly. Shingles is caused by the same virus as chickenpox therefore anyone who has not had chickenpox is potentially vulnerable to the infection if they have close contact with a case of shingles.

Measles during pregnancy can result in early delivery or even loss of the baby. If a pregnant woman is exposed, the midwife should be informed immediately. All female staff under the age of 25 years, working with young children, should have evidence of 2 doses of MMR vaccine or a positive history of measles.

If a pregnant woman comes into contact with German measles, she should inform her GP and midwife immediately. The infection may affect the developing baby if the woman is not immune and is exposed in early pregnancy.

All female staff under the age of 25 years, working with young children, should have evidence of 2 doses of MMR vaccine or a positive history of Rubella.

Slapped cheek disease (Parvovirus B19) can occasionally affect an unborn child if exposed early in pregnancy. The pregnant woman should inform their midwife promptly.

Food handling staff

Food handlers and catering staff may present a particular risk to the health of pupils and staff if they become infected or have close contact with diseases that can be transmitted to others via the medium of food or drink. These diseases commonly affect the gastrointestinal system (stomach and bowel) and usually cause diarrhoea or vomiting, or both.

Food handling staff suffering from such diseases must be excluded from all food handling activity until advised by the local Environmental Health Officer that they are clear to return to work. There are legal powers for the formal exclusion of such cases, but usually voluntary exclusion will suffice with 'off work' certificates from the GP, as necessary.

Staff, practitioners and volunteers should not be present at Huckleberries if they are currently suffering from diarrhoea or vomiting, or both. At the very least, persons suffering from gastro-intestinal diseases should not return to work until 48 hours post recovery (no further diarrhoea or vomiting).

Employers are to notify their local Environmental Health Department immediately that they are informed of a member of staff engaged in the handling of food has become aware that he or she is suffering from, or is the carrier of, any infection likely to cause food poisoning.

This policy should be made clear to the person in charge of the kitchen and all catering staff at the time of appointment. Food handlers are required by law to inform their employer immediately if they are suffering from:

- typhoid fever
- paratyphoid fever
- other salmonella infections
- dysentery
- shigellosis
- diarrhoea (cause of which has not been established)
- infective jaundice
- staphylococcal infections likely to cause food poisoning like impetigo, septic skin lesions, exposed infected wounds, boils
- E. coli VTEC infection

COVID-19 advice:

Staff testing: Access to testing is already available to all essential workers. Education settings as employers can book tests through an online digital portal. There is also an option for employees to book tests directly on the portal.

Shielded and clinically vulnerable adults: Clinically extremely vulnerable individuals are advised not to work outside the home. It is strongly advising people, including education

staff, who are clinically extremely vulnerable, those with serious underlying health conditions which put them at very high risk of severe illness from coronavirus and have been advised by their clinician or through a letter, to rigorously follow shielding measures in order to keep themselves safe. Staff in this position are advised not to attend work. Read [COVID-19: guidance on shielding and protecting people defined on medical grounds as extremely vulnerable](#) for more advice.

Clinically vulnerable individuals who are at higher risk of severe illness (for example, people with some pre-existing conditions as set out in the [Staying at home and away from others \(social distancing\) guidance](#) have been advised to take extra care in observing social distancing and should work from home where possible. Education settings should endeavour to support this. If clinically vulnerable (but not clinically extremely vulnerable) individuals cannot work from home, they should be offered the safest available on-site roles, staying 2 metres away from others wherever possible, although the individual may choose to take on a role that does not allow for this distance if they prefer to do so. If they must spend time within 2 metres of other people, settings must carefully assess and discuss with them whether this involves an acceptable level of risk.

Living with a shielded or clinically vulnerable person: If a child, young person or a member of staff lives with someone who is clinically vulnerable (but not clinically extremely vulnerable), including those who are pregnant, they can attend their education or childcare setting.

If a child, young person or staff member lives in a household with someone who is extremely clinically vulnerable, as set out in the [COVID-19: guidance on shielding and protecting people defined on medical grounds as extremely vulnerable guidance](#), it is advised they only attend an educational setting if stringent social distancing can be adhered to and, in the case of children, they are able to understand and follow those instructions. This may not be possible for very young children and older children without the capacity to adhere to the instructions on social distancing. If stringent social distancing cannot be adhered to, we do not expect those individuals to attend. They should be supported to learn or work at home.

Exclusion: Follow Public Health England advice on [stay at home: guidance for households with possible coronavirus infections](#).

Managing specific diseases and infections

Please refer to Public Health England advice on specific diseases and infections - <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-9-managing-specific-infectious-diseases>

COVID-19

Huckleberries will follow advice from the Department for Education and Public Health England: <https://www.gov.uk/coronavirus/education-and-childcare>

A risk assessment is in place to assess the risk of COVID-19 and the control measures. This risk assessment will be reviewed on a regular basis and in light with any change in guidance.

In the event a member of staff or pupil has COVID-19, Huckleberries will follow Public Health England advice. The Programme Lead will contact the Health Protection Team immediately about any suspected cases of coronavirus, even if they are unsure, and discuss if any further action needs to be taken; there is also the option to call the Department of Education Schools helpline.

Please refer to Surrey County Councils guidance on cleaning and sanitising, social distancing, PPE and testing.

Contact with Farm Animals

There are a number of diseases that can be passed on to pupils and staff from infected farm animals such as campylobacter, salmonella and cryptosporidium. It is not possible to know which animals are carriers so a standard approach to reducing the risk of transmission of infection to children and staff is applied.

All visitors to Huckleberries receive an induction which emphasises the importance of hand hygiene during and after the visit. Regular hand washing and hand sanitising is encouraged, and children are educated not to eat, drink or put their fingers in their mouths, except when in designated eating areas and after they have washed their hands.

Food is only eaten in the designated picnic areas and children are reminded not to eat anything which may have fallen on the ground. They should not eat or drink unpasteurised products like milk, or taste animal feedstuff such as silage and concentrates.

Drinking taps are clearly marked and sited in a clean area away from the animals.

During handling, feeding or mucking-out the animals, the children are asked not to put their faces against the animals or put their hands in their own mouths afterwards.

Children are supervised to ensure they wash and dry their hands thoroughly after contact with animals and particularly before eating and drinking.

Manure presents a particular risk of infection and children should be warned against touching it. If they do, ensure hands are promptly washed and dried.

Water based activities

There is a risk of infection associated with any water-based activity in rivers, ditches, streams, ponds and puddles. All water-based activities have a full risk assessment carried out, and management practices will be implemented to mitigate risk.

Children and staff should cover all cuts, scratches and abrasions with a waterproof dressing prior to the activity, and hands must be washed prior to eating or drinking and immediately after the water-based activity.

Anyone taking part in water-based activities who becomes ill within 3 to 4 weeks of the activity is advised to seek medical advice.

It should be made clear to parents and carers that if their child becomes ill following participation in outdoor or water-based activities, the treating doctor should be made aware of the child's participation in these activities.

Appendices

Diarrhoea and vomiting outbreak – school action checklist

Date Completed:			
Checklist Completed By (Print Name):			
Name & Tel No of Institution:			
Name of Head Teacher/Manager:			
	Yes	No	Comments:
Deploy 48 hour exclusion rule for ill children and staff			
Liquid soap and paper hand towels available			
Staff to check/encourage/supervise hand washing in children			
Check that deep cleaning, ie twice daily (min) cleaning and follow through with bleach/Milton/ appropriate disinfectant is being carried out, (especially toilets, frequently touched surfaces eg handles and taps and including any special equipment and play areas). Ensure that all staff/contractors involved in cleaning are aware of, and are following, the guidance			
Disposable protective clothing available (ie non-powdered latex/synthetic vinyl gloves & aprons)			
Appropriate waste disposal systems in place for infectious waste			
Advice given on cleaning of vomit (including steam cleaning carpets/furniture or machine hot washing of soft furnishings)			
Clean and disinfect hard toys daily (with detergent and water followed by bleach/Milton). Limit and stock rotate toys			
Suspend use of soft toys plus water/sand play and cookery activities during outbreak			
Segregate infected linen (and use dissolvable laundry bags where possible)			
Visitors restricted. Essential visitors informed of outbreak and advised on hand washing			
New children joining institution suspended			
Keep staff working in dedicated areas (restrict food handling if possible). Inform HPT of any affected food handlers.			
Check if staff work elsewhere (restrict) and that all staff are well (including agency). Exclude if unwell (see above re 48 hour rule)			
HPT informed of any planned events at the institution			
Inform School Nurse and discuss about informing OFSTED, if applicable.			

List of notifiable diseases

Diseases notifiable (to Local Authority Proper Officers) under the Health Protection (Notification) Regulations 2010:

- acute encephalitis
- acute meningitis
- acute poliomyelitis
- acute infectious hepatitis
- anthrax
- botulism
- brucellosis
- cholera
- diphtheria
- enteric fever (typhoid or paratyphoid fever)
- food poisoning
- haemolytic uraemic syndrome (HUS)
- infectious bloody diarrhoea
- invasive group A streptococcal disease and scarlet fever
- legionnaires' disease
- leprosy
- malaria
- measles
- meningococcal septicaemia
- mumps
- plague
- rabies
- rubella
- SARS
- smallpox
- tetanus
- tuberculosis
- typhus
- viral haemorrhagic fever (VHF)
- whooping cough
- yellow fever
- Covid-19

Local health protection contact information

Get support from your local health protection team (HPT) to prevent and reduce the effect of diseases and chemical and radiation hazards.

HPTs provide support to health professionals, including:

- local disease surveillance
- alert systems
- investigating and managing health protection incidents
- national and local action plans for infectious diseases

If you need to send information that might reveal someone's identity, put it in an encrypted email. Do not put personal information in the subject line.

PHE Surrey and Sussex Health Protection Team (South East),
County Hall, Chart Way,
Horsham,
RH12 1XA

PHE.sshpu@nhs.net Phone: 0344 225 3861 (option 1 to 4 depending on area)

Out of hours for health professionals only: please phone 0844 967 0069

Useful links

Exclusion Table:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/789369/Exclusion_table.pdf

Covid-19 Public Health England Guidance:

<https://www.gov.uk/coronavirus/education-and-childcare>

Public Health England pet and animal contact:

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-8-pets-and-animal-contact>

Public Health England advice on specific diseases and infections:

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-9-managing-specific-infectious-diseases>

NHS Immunisation information:

<https://www.nhs.uk/conditions/vaccinations/>

Health protection in schools and other childcare facilities information:

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

Children and Family Health Surrey school nursing

<https://childrenshealthsurrey.nhs.uk/services/school-nursing-general>

Public Health England School Zone- e-Bug stop germs spreading with fun e-Bug resources
<https://campaignresources.phe.gov.uk/schools>