# **INFECTION CONTROL POLICY**

| Introdu              | ction                                             | 2  |
|----------------------|---------------------------------------------------|----|
| Policy S             | Statement                                         | 2  |
| Procedures/Practices |                                                   |    |
| 1.                   | Standard Precautions                              |    |
| 2.                   | Handwashing                                       | 2  |
| 3.                   | How to Wash Hands                                 | 3  |
| 4.                   | Respiratory Hygiene and Cough Etiquette           | 4  |
| 5.                   | Protective Clothing                               | 4  |
| 6.                   | Management of Spillages of Blood or Bodily Fluids | 5  |
| 7.                   | Management of Cuts, Nose Bleeds or Bites          | 6  |
| 8.                   | Environmental Hygiene                             | 7  |
| 9.                   | Waste Management                                  | 11 |
| 10.                  | Laundry                                           | 12 |
| 11.                  | Food Hygiene                                      | 12 |
| 12.                  | Infection Control During Outbreaks                | 13 |
| 13.                  | Animals & Infection Control                       | 13 |
| 14.                  | Farm/Zoo Visits                                   | 14 |
| Communication Plan   |                                                   |    |
| Related              | d Policies, Procedures and Forms                  | 14 |
| Policy R             | Review                                            | 14 |
|                      |                                                   |    |



#### Introduction

Tigers Childcare is committed to the promotion of a healthy environment and a high standard of personal hygiene for adults and children. In order to minimise the risk of infection, standard infection control precautions are used routinely in the service.

### **Policy Statement**

This policy is underpinned by

- The Child Care (Pre-School Service) Regulations 2016
- Tusla (2018) Quality and regulatory framework; Full day care service and part-time day care service. Dublin: Tusla Early Years Inspectorate
- HSPC/HSE (2012) Preschool and childcare facility subcommittee: Management of infectious disease in childcare facilities and other childcare settings and Appendices.
- HSPC/HSE's document 'Infection Prevention and Control Guidance for Settings providing childcare during the Covid-19 Pandemic'.

### **Procedures/Practices**

### 1. Standard Precautions

Standard precautions are basic good hygiene measures e.g., handwashing, appropriate use of protective clothing etc. that should be used by all colleagues always and with all children. It is not always possible to tell who has an infectious disease, infection can be spread by a person who has no signs and symptoms of illness or is incubating an infection e.g., flu, chickenpox. For this reason, it is essential that good hygiene practices are routinely applied in the service.

Standard precautions within the service are:

- Handwashing
- Use of protective clothing e.g., gloves and plastic apron
- · Management of spillages i.e., blood or bodily fluids
- Management of cuts & bites
- Coughing & sneezing etiquette
- Environmental Hygiene
- Safe handling of laundry
- Safe handling & disposal of waste

# 2. Handwashing

Handwashing is one of the most important ways to prevent the spread of infectious diseases, especially those that cause diarrhoea and vomiting, and respiratory illness, including Covid-19.

Colleagues and children should wash their hands after any contact with blood, nasal secretions, saliva, vomit, urine, stool, skin sores or genital secretions.

### colleagues should wash their hands before;

- The start of each work shift
- Eating handling/preparing food or assisting/feeding a child
- Preparing meals, snacks, and drinks (including bottles)

### colleagues should wash their hands after:

- Using the toilet or helping a child to use the toilet i.e., after taking off gloves
- Nappy changing/handling potties i.e., after taking off gloves
- Playing with or handling items outside e.g., sand, toys, water
- Handling secretions e.g., from a child's nose, mouth, from sores or cuts.
- Cleaning up vomit or faeces
- Handling or dealing with waste
- Removing disposable gloves and/or aprons
- Handling pets/pet litter, animals/cages/animal soil etc.
- Moving from one room to another or from outside to inside areas.
- Whenever hands are visibly dirty.
- Their shift ends.

#### **Children** should wash hands:

- Upon arrival
- Before eating & drinking
- After toileting
- After wiping noses or sneezing
- After coughing into hands
- After playing outside
- After playing with or handling items outside e.g., sand, toys, water.
- Whenever hands are visibly dirty.
- Children can avail of handwashing facilities as needed and will be encouraged and supported to practice this skill.
- The water available will be no hotter than 43 degrees, liquid soap and paper towels supplied too.
- Children are encouraged and supported to develop self-help and personal hygiene skills, as evidenced by colleagues showing the children proper technique for hand washing.

# 3. How to Wash Hands

Handwashing should be performed as follows:

- Wet hands under warm running water to wrist level.
- Apply liquid soap. Lather it evenly covering all areas of the hands for at least 20 seconds. Include thumbs, fingertips, palms and in between fingers, rubbing backwards and forwards at every stroke.



- Rinse hands thoroughly under warm running water.
- Dry with paper towels using a patting motion to reduce friction, taking special care between the fingers.
- Use the disposable paper towel that has been used to dry hands to turn off taps.
- Dispose of the disposable paper towel in a waste bin using the foot pedal to avoid contaminating hands that have just been washed.

### 4. Respiratory Hygiene and Cough Etiquette

Everyone should cover their mouth and nose when coughing and sneezing to prevent germs spreading. In addition:

- A plentiful supply of disposable tissues should be readily available for nose wiping.
- A different tissue should be used for each child, and colleagues must wash their hands after nose wiping.
- Children and colleagues should be taught to cover their mouth when they cough or sneeze and to wash their hands afterwards.
- Everyone should put their used tissues in a bin and wash their hands after contact with respiratory secretions.
- All adults & children should cover their mouth with a tissue when coughing or sneezing. Hands should be washed after disposing of tissues.
- Cots and sleeping mats are kept at least 50cm apart.

### 5. Protective Clothing

Basic protective clothing i.e., gloves and/or aprons are required for incidents where contact with blood or body fluid is anticipated. This includes dealing with non-intact (broken) skin.

### **Gloves**

Colleagues should wear disposable gloves when dealing with blood, body fluids, broken/grazed skin and mucous membranes e.g., eyes, nose, mouth. This includes activities such as:

- Nappy changing.
- Cleaning potties.
- Cleaning up blood e.g., after a fall or nosebleed.
- Handling waste.

Gloves should be single use & well fitting.

Gloves should be changed:

- After caring for each child.
- After doing different care activities on the same child.

Colleagues should wash hands after gloves are removed. Gloves are not a substitute for handwashing.

#### **Aprons**

Colleagues should wear disposable aprons if there is a risk of blood or body fluid splashing onto your skin or clothing e.g., cleaning spillages of body fluid (vomit, blood) or dealing with nosebleeds. This includes activities such as:

- Nappy changing.
- Cleaning potties.
- Cleaning up blood e.g., after a fall or nosebleed.
- · Handling waste.

Aprons should be single use and changed after caring for individual children.

### 6. Management of Spillages of Blood or Bodily Fluids

#### **General Points**

- Blood and body fluid spillages should be dealt with immediately.
- Children should be kept away from any spillages until the area has been cleaned and disinfected (if required) e.g., a spill occurring on a floor where infants are crawling.
- Spills should be removed using absorbent material e.g., disposable paper towels or kitchen roll before the area is cleaned and disinfected.
- A chlorine-based disinfectant should be used when disinfection is required.
- The area should be well ventilated if a chlorine-based disinfectant is used.
- Liquids should not be added to spills in case it increases the size of the spill.
- Each care room should have a 'spillage kit' readily available to include gloves, aprons, paper towels/kitchen towel and a plastic waste bag.

### Spillages of Body Fluids (e.g., urine, faeces or vomit)

The following steps should be followed:

- Put on a disposable apron & gloves.
- Use absorbent disposable paper towels or kitchen towels to soak up the spillage.
- Clean the area using warm water and a general-purpose detergent.
- Apply a chlorine-based disinfectant if required.
- Dry the surface using disposable paper towels.
- Dispose of soiled/sodden paper towels, gloves, aprons in a manner that prevents another person coming into contact with these items e.g., bag separately prior to disposal.
- Wash & dry hands thoroughly.
- Change any soiled clothing immediately.

# **Blood Spillages**

The following steps should be followed:

- Put on disposable an apron and gloves.
- Use absorbent disposable paper towels or kitchen towels to soak up the spillage.



- Apply a chlorine-based disinfectant to the area. It should be left in place for at least two minutes.
- Wash the area thoroughly using warm water and a general-purpose detergent and dry using disposable paper towels.
- Dispose of soiled/sodden paper towels, gloves, aprons in a manner that prevents another person coming into contact with these items e.g., bag separately prior to disposal.
- Wash & dry hands thoroughly.
- Change any soiled clothing immediately.

# 7. Management of Cuts, Nose Bleeds or Bites

#### **General Points**

- colleagues should avoid getting blood on their skin if possible. If it happens, they should wash it off immediately with antibacterial soap and warm water.
- Cuts, abrasions, or sores should be covered with a waterproof dressing Absorbent material should be used to stop a child bleeding.
- Disposable gloves should be worn by care colleagues when there is a lot of blood or they are dealing with open cuts.

### **Dealing with Cuts & Nose Bleeds**

When dealing with cuts & nose bleeds, colleagues should follow first-aid procedures. They should:

- Put on disposable gloves/aprons.
- Stop the bleeding by applying pressure to the wound with a dry, clean absorbent dressing.
- Place a clean dressing on the wound and refer the child for medical treatment if required e.g. stitches required or bleeding that cannot be controlled.
- Once bleeding has stopped, dispose of gloves/apron immediately in a manner that prevents another person coming into contact with the blood.
- Wash & dry hands.

#### **Human Bites**

Human mouths carry a wide variety of germs, some of which can be transmitted to others by bites. Human bites resulting in puncture or breaking of the skin are potential sources of exposure to certain blood borne viruses (e.g., HIV and Hepatitis B) and other bacterial infections, therefore, it is essential that they are managed promptly

If a child is bitten by another child:

- First aid gently rinse the area with warm running water.
- If a bite does not break the skin:
  - Clean with soap & water.
  - No further first-aid action is required.

If a bite breaks the skin and bleeds:

- Encourage the wound to bleed if not bleeding freely (apply pressure to the sides of the wound).
- Wash the wound thoroughly with warm running water.
- Cover it with a waterproof dressing.
- If the bite is on the hand, the arm should be elevated.
- If the biter has blood in the mouth, they should rinse it out with tap water
- Children who may have been exposed to the above-mentioned blood borne viruses and bacterial infections should be medically evaluated

Follow accident/incident and behaviour management policies for reporting and followup.

### 8. <u>Environmental Hygiene</u>

Environmental hygiene is a vital part of good infection prevention and control. The purpose of environmental hygiene is to reduce the number of germs to a level that is not harmful to health. If the environment is not cleaned regularly there is a build up of dirt, which supports the growth of germs.

#### **Room Temperature**

Colleagues are responsible for maintaining room temperatures between 18-22°C to reduce the risk of the spread of infection. [Note that, sleep room temperature requirements differ from other occupied rooms as a safe-sleep measure]. If the room temperature exceeds 22°C, colleagues are required to report to management immediately. Colleagues and management work together to take additional control measures to reduce the temperature of the room. Examples include:

- spending the maximum amount of time in the outdoors
- opening windows and doors safely carry out a risk-assessment)
- removing heavy clothing from children.
- always making water visibly available and accessible for children

The manager on duty is responsible for arranging portable air conditioning units and fans. Colleagues always make water visibly available and accessible for children.

#### Cleaning

Cleaning is essential in the prevention of infection. Thorough cleaning followed by drying will remove large numbers of germs.

Thorough cleaning with detergents should remove all contaminants including dust, dirt, faeces, blood, pus, urine, other body fluids and large numbers of germs. Cleaning is necessary because these contaminants harbour bacteria and germs and increase the risk of the spread of infection.



#### **TERMINOLOGY**

**Cleaning** is the removal of food residues, dirt and grease using a detergent.

**Disinfection** is a process that reduces the numbers of bacteria to a safe level.

**Disinfectant** is a chemical that will reduce the number of germs to a level at which they are not harmful

**Detergent** is an artificial cleansing agent capable of breaking down oils and fats leading to the solubilising of soil.

**Sanitisers** are a combined detergent and disinfectant

#### How to clean

The effectiveness of cleaning not only depends on the product used but also in the way it is applied, i.e. on the mechanical action of wiping or scrubbing. Cleaning is best achieved by using a general purpose detergent and warm water, clean cloths, mops and elbow grease. The area should then be rinsed and dried.

- Fresh solutions of cleaning agents should be made up daily or as instructed by the manufacturer as some solutions rapidly become inactive. Document the date the solution was created on the container.
- Expiry dates should be routinely checked on packaging.
- colleagues should ensure that they observe any specified health and safety precautions. Product material safety data sheets should be available.
- All chemicals should be stored in a cool, dry, well-ventilated place. The chemical store should be secured so that children do not have access

The following basic principles should be followed:

- A 'clean as you go' practice should be in place.
- All areas should be cleaned regularly as part of a rota.
- Disposable cloths should be disposed of after use.
- Reusable cloths must be laundered daily on a hot wash cycle (at least 60°C) in a washing machine and then tumble dried.
- Separate colour coded cleaning cloths and cleaning equipment are used across kitchen, children's and sanitary areas.
- Mop-heads should be removed and washed in a washing machine at 60°C at the end of each day or in accordance to the manufacturer's instructions.
- If this is not possible the mop should be cleaned with warm water and detergent, rinsed and air-dried after use. Store dry and inverted.
- Mop-heads/buckets should not be cleaned in a sink that is used for food preparation. Mop-heads should not be left soaking in dirty water.
- Buckets should be emptied after use, washed with detergent and warm water and stored dry.
- All cleaning equipment must be stored clean and dry. If equipment is stored wet, it allows germs to grow, increasing the risk of spreading infection.

# Cleaning of toys and equipment

In order to reduce the risk of cross infection, it is important that all toys are cleaned on a regular basis.

- All toys and equipment is cleaned weekly to remove dust and dirt that harbour germs
- Toys that children put in their mouths are cleaned and disinfected after each use and before use by another child. A 'For sterilisation box' system is used.
- All toys that are visibly dirty or contaminated with blood or body fluids are taken out
  of use immediately for cleaning or disposal.
- Toys waiting to be cleaned are stored separately.
- Soft toys and materials are machine washed on a hot cycle weekly.
- Replace soft modelling materials and dough regularly (minimum of weekly or when visibly dirty).
- Washed and disinfected toys are left to dry out of reach of children in a space that allows for effective drying

### <u>Cleaning Procedure</u>

- Wash the toy in warm soapy water, using a brush to get into crevices if necessary.
- Thoroughly dry the toy.
- Hard plastic toys may be suitable for cleaning in the dishwasher.
- Toys that cannot be immersed in water i.e. electronic or wind-up should be wiped with a damp cloth and dried.

### Disinfection Procedure

Disinfection is a process used to reduce the number of germs to a level where they are unlikely to be a danger to health. In certain circumstances where there is a higher risk of cross-infection (e.g. during outbreaks), the use of a disinfectant is recommended.

In some situations, toys/equipment will need to be disinfected following cleaning. For example:

- Toys/equipment that children place in their mouths.
- Toys/equipment that have been soiled with blood or body fluids.

# If disinfection is required:

- Use a chlorine-based disinfectant e.g., milton or domestos at a concentration of 1,000ppm available chlorine (see table below).
- Always clean the toys first and then apply disinfectant.



#### INDICATIONS FOR USE:

| Use                                                                   | % Hypochlorite | Parts per million available chlorine (ppm available chlorine) |
|-----------------------------------------------------------------------|----------------|---------------------------------------------------------------|
| Blood spills                                                          | i              | 10, 000 ppm                                                   |
| Environmental disinfection (walls, floors, toilets, general surfaces) | 0.1            | 1, 000 ppm                                                    |
| Infant feeding utensils, catering surfaces and equipment              | 0.0125         | 125 ppm                                                       |

#### **EXAMPLES:**

| For Blood Spillages                                    | For Environmental Disinfection                      |  |
|--------------------------------------------------------|-----------------------------------------------------|--|
| Use neat (gives 10,000 ppm available chlorine)         | 1: 10 dilution (gives 1,000 ppm available chlorine) |  |
| 1:10 dilution (gives 10,000 ppm<br>available chlorine) | 1:100 dilution (gives 1,000 ppm available chlorine) |  |

# Sensory Equipment, Ball Pool, Water/Soft Play Areas, Sand Pits

- Clean equipment weekly or more frequently if usage is high and when contaminated.
- All crevices should be cleaned and dried properly.
- Ensure children wash their hands before and following water/sand/ball pool play.
- The use of communal play areas e.g. sand or water play may need to be suspended at certain times i.e. during an outbreak of infection.
- Sandpits should be covered to prevent contamination by animal faeces. Sand should be changed regularly.
- Water play equipment should be drained, cleaned and dried at the end of the session and stored dry until the next use.
- Outdoor areas should be checked regularly for animal fouling.

### Soother management

- Soothers are not shared between children
- Soothers are individually identifiable and stored in labelled individual containers
- If soothers are used when children are awake, colleagues are vigilant to ensure that soothers are not shared between children
- Both the soothers and the containers are cleaned and disinfect daily, or more frequently if needed
- Suitable disinfecting equipment is used for disinfecting soothers

### Potty/Toilet Management

- Toilet areas must be cleaned frequently during the day in accordance with the cleaning schedule and immediately if soiled.
- Particular attention should be paid to toilet seats, toilet handles, door handles and wash hand basins, especially taps.
- Potties should be emptied carefully into the toilet and cleaned with hot water and detergent, wiped over with a disinfectant and dried thoroughly using disposable paper towels.
- Separate cloths should be used for cleaning the toilet and hand wash basis to reduce the risk of spreading germs from the toilet to the hand wash basin.
- Where trainer seats are used, they should be thoroughly cleaned and disinfected after each use.
- Toys and other play materials are not allowed into the toilet area.

### **Nappy Changing**

See nappy changing policy for step-by-step procedures

- Ensure creams and lotions are clearly labelled with children's names
- Ensure creams and lotions are not shared between children.
- Clean and dry the changing mat after each use. If soiled, then clean and disinfect using a chlorine-based disinfectant.
- All surfaces are cleaned and disinfected daily including the nappy changing unit and surrounding surfaces.
- Changing mats are checked on a regular basis and discarded if the cover is torn or cracked.
- Toys and other play materials are not allowed into the nappy changing area.

#### 9. <u>Waste Management</u>

Waste should be stored in appropriately sealed bins in an area that is not accessible to children and in such a manner as not to cause a nuisance. Waste is managed in a hygienic manner and is removed from the building on a daily basis. Bins are maintained in good repair and in a clean condition.

### Internally

#### Sanitary Area

- Disposable nappies are disposed of in a foot-operated, lined, lidded bin that is leak proof, sealable and easy to clean. Foot-operated bins minimise the number of surfaces touched by colleagues immediately after changing a nappy, when hands can be potentially contaminated, which reduces the risk of contamination of surfaces, therefore reducing the risk of spreading infection.
- Bins containing soiled nappies are managed so that malodours are not permitted to linger in a sanitary area. The bins are emptied daily and more often in the event of a malodour.
- o Bins containing soiled nappies are not accessible to children
- Food & hazardous waste is stored in covered containers.



### Externally

- Waste is stored in rigid containers and fenced off from the external play area.
- There are enough waste bins to contain all waste.
- Waste is be collected and removed on a frequent basis.

### 10. Laundry

- Bedding/linen is allocated to each child and stored in a named bag/drawer when not in use.
- Wash bedding weekly or when visibly dirty.
- Keep clean linen in a clean, dry area separate from soiled or used linen.
- If linen or clothing has been dirtied by faeces carefully dispose of the faeces in the toilet.
- Do not rinse dirty or wet clothing by hand. Put in a named, sealed plastic bag for the child's parent/carer to collect. Tell the parent/carer that the clothing is dirty.
- Before washing, put dirty and used linen in an area that children do not have access to.
- Wash all laundry at the hottest temperature specified by the manufacturer.

### 11. Food Hygiene

Food safety may be defined as protecting food from contamination by foreign objects, poison/chemicals and harmful bacteria and viruses. This is to ensure that food is safe, and wholesome when it is consumed. Where food is consumed on the premises there should be adequate and suitable facilities for the storage, preparation and serving of food.

HACCP procedures are in place in the service and followed by all colleagues involved in the preparation of food. The following steps should also be adhered to:

- Perishable food is kept in a refrigerator or cool place at temperatures between 0-5°c
- Perishable food is not left at room temperature for more than 2 hours.
- Perishable food left at room temperature for 2 or more hours is discarded.
- Children's lunchboxes should be stored in a location where there is no risk of contamination.

# Infant Bottle storage

#### Powdered Infant Formula (PIF)

- Feeds should be prepared at home as per Food Safety Authority (<a href="https://www.fsai.ie/uploadedFiles/Resources\_and\_Publications/Resources/PIF%20in%20Child%20Day-care%20Settings%20FINAL.pdf">https://www.fsai.ie/uploadedFiles/Resources\_and\_Publications/Resources/PIF%20in%20Child%20Day-care%20Settings%20FINAL.pdf</a> (accessed 24/08/2022)
- Cooled feeds should be labeled with the child's name and stored in the body of a fridge below 5°C until they are completely cold prior to transportation but for no longer than 24 hours.
  - Parents should bring only the required number of feeds to Tigers Childcare each day.

- On arrival to Tigers Childcare the feeds should be transferred into the fridge in the service.
- Colleagues remove 1 bottle from the fridge just before it is needed. The label on the bottle will be checked to make sure it is given to the correct child. If necessary, the feed will be warmed to feeding temperature by using a bottle warmer.
- Feed which has not been consumed within 2 hours of warming/first use will be discarded.
- Colleagues rinse out bottles after use and place them back in the infant's bag to return home with them at the end of the day.
- Used bottles should be cleaned thoroughly at home and sterilised as recommended.

#### Expressed Breast milk

- If breast milk is being provided for an infant, the expressed milk must be provided in sterilised, labeled feeding bottles that will be stored in the fridge. Separate feeding bottles must be provided for each feed.
- To feed, Tigers Childcare colleagues will remove 1 container/bottle from the fridge just before it is needed. The bottle/container will be checked to make sure the name on the bottle corresponds to the infant requiring feeding. If necessary, the feed will be warmed to feeding temperature by using a bottle.
- Feed which has not been consumed within 2 hours of warming/first use will be discarded.
- Bottles will be rinsed after use by Tigers Childcare colleagues and placed back in the infant's bag to return home with them at the end of the day.
- Used bottles should be cleaned thoroughly at home and sterilised as recommended.

### 12. Infection Control During Outbreaks

When there is a suspected outbreak of diarrhoea/vomiting in the service, effective infection control is crucial. In order to minimise the spread of infection close attention must be paid to:

- Regular handwashing.
- Ensuring hygienic nappy changing.
- Ensuring hygienic management of toys.
- Suspending certain communal activities e.g., sand or water play if necessary.
- Washing soiled clothing or bed linen using detergent & hot water (at least 60°C).
- Proper disposal of waste e.g., contaminated

### 13. Animals & Infection Control

From time to time, children in the service may come into contact with animals – either through visits to zoos or farms or when animals or pets visit the service.

# Pets/animals visit the service:

Only animals in good health will be allowed into the facility.



- Children will be supervised when handling pets.
- Pets/Animals will not be allowed to wander freely around the childcare area.
- They will be housed in a segregated, enclosed area away from the main areas in which children are cared for.
- They should be kept & fed in this dedicated area.
- Hands (colleagues & children) will be washed following contact with any animals, their food or bedding.

#### 14. Farm/Zoo Visits

- Before the visit an 'Outing Risk Assessment' will be carried out.
- The organiser must ensure that adequate infection control measures are in place.
- The organiser must ensure that available handwashing facilities are adequate, accessible to small children, with running hot and cold water, liquid soap and disposable paper towels, clean towels or air dryers and waste containers.
- Children will be well supervised at all times.
- Any cuts & grazes must be covered with a waterproof plaster.
- Hands should be washed with warm running water and dried thoroughly after contact with animals/animal feed, before eating and drinking, using the toilet and leaving the farm.
- Children should not eat or drink anything while touring the farm.
- Children should only eat in designated areas.
- Children/colleagues should not drink from taps unless specifically labelled as drinking water.
- Boots and clothes can become contaminated during a visit to a farm/zoo so it is
  important to remember to get children to wash their hands after they have
  removed the clothes & boots and before doing anything e.g. eating.

#### Communication Plan

A copy of all policies will be available during hours of operation to colleagues and parents/carers in the Policy Folder located in Tigers Childcare.

Parents/Carers may receive a copy of the policy at any time upon request.

Parents/guardians and colleagues will receive written notification of any updates via emails and/or Child Paths.

# Related Policies, Procedures and Forms

Cleaning sheets

### **Policy Review**

Policy Created: October 2015
Policy Updated: November 2022

Policy Reviewed: Annually