



Policy on Infection Control

The overall aims of this policy are:

- To promote and protect the health of all of the children and adults in the service and reduce the risk of infection.
- To provide guidelines to parents/guardians/carers as users of the service about the attendance of sick children and to keep the incidence of infectious disease to a minimum.
- To help differentiate between minor (can attend the service) and more significant (should not remain in the service) infections and to give guidance on the prevention and management of infectious disease

It is also important to encourage and support parents/guardians to maintain their children's immunisation schedules.

Definitions/Glossary

Infectious disease	An illness in which the symptoms and signs of illness are caused by germs. These germs can be any of a number of different types - bacteria, viruses, fungi, protozoa and parasites. For example, strep throat is caused by a bacteria called 'group A streptococcus' and impetigo, a common bacterial skin infection in children, can be caused by this or other bacteria, whereas measles, mumps and chickenpox are all caused by viruses.
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Contagious disease	Any illness caused by germs is an infectious illness, but that which can pass from one person to another is contagious. Not all infectious diseases are contagious. Ear infections are caused by germs, but are not passed from child to child. Thus, although an ear infection is an infectious disease it is not a contagious disease. On the other hand, chickenpox rapidly spreads from person to person and is an example of a highly contagious infectious disease.
Standard precautions	Basic good hygiene measures (e.g. handwashing, appropriate use of protective clothing, environmental cleaning etc.) that should be practiced by all caregivers at all times 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 applied routinely in all early years settings. (HPSC, 2012)
Cleaning	The removal of food residues, dirt and grease using a detergent.
Disinfection	A process that reduces the numbers of bacteria to a safe level.
Disinfectant	A chemical that will reduce the number of germs to a level at which they are not harmful.
Detergent	An artificial cleansing agent capable of breaking down oils and fats.
Sanitisers	A combined detergent and disinfectant.

Policy Statement

The aim of this policy is to ensure an environment is provided in which children and adults are kept safe and staff members may safely carry out their roles.

This policy must be read in conjunction with [Management of Infectious Disease in Childcare Facilities and Other Childcare Settings](#) (2012) from the Preschool and Childcare Facility Subcommittee at the Health Protection Surveillance Centre (HPSC), which guides practice in infection control in this early years service.

There are three basic principles of infection prevention outlined in the HPSC guidance:

1. Handwashing is the single most effective way of preventing the spread of infection and should be used at every opportunity
2. Immunisation. All children and staff should be appropriately immunised
3. Exclusion. Any unwell staff member or child should be excluded

Standard precautions are applied when anyone has contact with:

- Blood
- All body fluids, secretions (nasal secretions) and excretions (urine, faeces, vomit) except sweat, regardless of whether or not they contain visible blood
- Non-intact skin (broken skin, sores)
- Mucous membranes (eyes and mouth).

The key elements of standard precautions taken in the service include:

- Handwashing and skin care
- Use of protective clothing, e.g. gloves and plastic apron
- Management of spillages, i.e. blood or other body fluids
- Management of cuts, bites and needle-stick injuries
- Coughing and sneezing etiquette
- Environmental hygiene
- Safe handling of laundry
- Safe handling and disposal of waste including sharps
- Food hygiene.

Children are excluded only if they are actually ill, present a danger or a risk to others (children or adults) or are unable to benefit from the service's normal activities.

There are some particular illnesses where exclusion is necessary. In general, parents/guardians are asked to keep their child away from the service, and staff members are required to stay away until they have seen their GP if any of the following are evident:

- Diarrhoea¹ and vomiting.
- A temperature of 101°F / 38°C or above.
- Eye discharge.
- Rash or skin disorder.
- Strep throat.
- An earache or a bad cough.

This list applies to symptoms seen before any GP visit or diagnosis. Specific exclusion periods are necessary, and are applied, for particular diagnosed illnesses as outlined in [Management of Infectious Disease in Childcare Facilities and Other Childcare Settings](#) (2012) Preschool and Childcare Facility Subcommittee Health Protection Surveillance Centre (HPSC).

[This guide must be made available for easy consultation by all staff members in the service – it can be downloaded and printed from <http://www.hpsc.ie/a-z/lifestages/childcare/>]

Any ill child in the service who becomes ill with fever, headache and vomiting will be sent home as soon as their parents/guardians can be contacted. Parents will immediately be made aware of the staff's concerns for the child's wellbeing. In this situation, if there is any significant delay in contacting the child's parents/guardians the child will be brought directly to the local hospital Emergency Department. **A child with fever, headache and vomiting must not be allowed to wait indefinitely in the service.**

Parents/guardians are included in the team approach to infection control. A co-operative approach between parents and the service will help to ensure a healthy environment for the children.

Parents/guardians who feel their child is too ill or unwell to participate in indoor or outdoor activity, are advised to keep them home to ensure a complete recovery.

Keeping immunisation records for all children attending the service is a legal requirement. Prior to enrolment parents/guardians are asked for a copy of their child's immunisation passport or record card. Parents/guardians are encouraged to ensure that their child is fully up to date with their immunisations and are required to inform the service if their child has not received any of the standard vaccinations.

Parents/guardians must inform the service of any known infectious illness in their child. This is of particular importance if the illness might affect others in the service, for example, if a child develops chickenpox or measles or other such contagious illnesses.

Parents/guardians are informed if there are any outbreaks of infection in the service. *[The service should have a standard notification letter for some of the common conditions (see www.hpsc.ie/az/lifestages/childcare/File,13445,en.pdf for templates)]*

Parents/guardians of children with any chronic (persistent or long-term) infectious conditions will be encouraged to share this information with the service.

All female staff members need to know if they are immune to Rubella. (A simple blood test can tell if someone is susceptible to infection.) All parents/guardians/carers and staff members will be notified of any known incidence of Rubella in the service.

Procedures & Practices

Prevention of Spread of Infection

Handwashing

- Posters of correct hand washing procedures are available at wash hand basins for adults and children. (See Appendix A.)
- Warm running water is available for hand washing at a temperature no greater than 43°C at children's wash hand basins.
- A cleaning agent such as soap is used when hand washing.

- Hand drying facilities are available (state here what hand drying facilities are used e.g. disposable paper towels, single use cloth towels).
- Children's hand washing and hand drying is supervised at all times.
- Hands are washed and dried after using the toilet, after handling animals, after sneezing, blowing nose, coughing, or touching a cut or sore and before eating or handling food.

Respiratory hygiene (coughing and sneezing)

All adults and children cover their mouths and nose with a tissue when coughing or sneezing. (See Appendix B.)

As required, we will notify the Tusla Early Years Inspectorate when the department of Public Health has confirmed to us that there is a diagnosis of a child attending the service, an employee, unpaid worker, contractor or other person working in the service as suffering from an infectious disease within the meaning of [The Infectious Diseases Regulations 1981](#) (SI No 390 of 1981) and amendments. www.hpsc.ie/NotifiableDiseases/ListofNotifiableDiseases/

We will contact the local Department of Public Health:

- If we have a concern about a communicable disease or infection, or if we need advice on infection control.
- If we are concerned that the number of children who have developed similar symptoms is higher than normal / if we think that we may have an outbreak of infectious disease in the service.
- If we are not sure whether to exclude a child or member of staff.
- Before sending letters to parents/guardians about an infectious disease.

Other Standard Precautions

Cleaning the environment

- A cleaning programme is in place
- Detergents and disinfectants are used correctly

- Detergents and disinfectants are used according to the manufacturers' instructions.

The school employs cleaning contractors who clean the classrooms, bathrooms and floors on a daily basis. Therefore, the following is the cleaning schedule implemented by Club Spraoi on a daily/weekly basis.

Cleaning Program		
<i>Area/Item</i>	<i>Method</i>	<i>Frequency / Comments</i>
<p>Toilets:</p> <p>Wash hand basins, taps, surrounding counters, soap dispensers.</p> <p>Both sides of toilet seat, toilet handles, door knobs or cubicle handles.</p> <p>Toilet bowls</p>	<p>Clean with detergent and warm water.</p> <p>Use toilet cleaner as per manufacturers instructions.</p>	<p>At least daily and immediately if soiled.</p> <p>If soiled with blood or body fluids, following cleaning, disinfect, rinse and dry.</p>
Desks	Clean with neutral detergent, warm water and clean cloth	Daily and immediately if soiled i.e. if soiled with blood or body fluids, following cleaning, disinfect, rinse and dry
Chairs		At least daily and immediately if soiled.
Hard toys/items that go into the mouth or have been in contact with saliva or other body fluids.	<p>Clean with warm water and detergent, rinsed and dried thoroughly.</p> <p>Alternatively, they may be washed in a dishwasher</p>	Immediately after each use.
Small rugs	Launder	Weekly

Personal protective clothing

Protective clothing is used when required (gloves and aprons).

Blood and body fluid spillages

Standard Precautions as outlined in [Management of Infectious Disease in Childcare Facilities and Other Childcare Settings](#) (2012) are used when any member of staff has contact with:

- Blood
- All body fluids, secretions (nasal secretions) and excretions (urine, faeces, vomit) except sweat, regardless of whether or not they contain visible blood
- Non-intact skin (broken skin, sores)
- Mucous membranes (eyes and mouth)

Spillages of blood, faeces, urine and vomit are cleaned immediately using disposable cloths and disposed of in closed bin. Mops are never used for cleaning blood, urine, vomit or faeces.

Extreme care must be taken in cleaning up bodily fluids using Standard Precautions.

It should be assumed that blood is infectious, regardless of its source.

The procedure used for dealing with blood and body fluid spillages is as outlined in [Management of Infectious Disease in Childcare Facilities and Other Childcare Settings](#) (2012) on Page 13.

First Aid should not be withheld if gloves are not available. While due care and caution is important in handling potentially infectious fluids, fear of infection should never prevent First Aid being given.

Avoid direct contact with blood or bloody fluids. Should blood come in contact with skin the likelihood of transmission of infection through intact skin is very remote. DO NOT PANIC. Wash the area with soap and water. If blood splashes into the eye or mouth, rinse with water.

Laundry

- Soiled linen is washed separately at the hottest wash the fabric will tolerate.
- Gloves and aprons are used when handling soiled linen.
- Children's soiled clothing is placed in a plastic bag sealed and sent home with parents/guardians.

Waste

- Waste is recycled in accordance with local authority policy where possible.
- Foot operated pedal bins are used to dispose of gloves, aprons and soiled dressings.
- External bins are stored away from children's access.

Perishable food

All perishable food is kept in a refrigerator at temperatures of 0° – 5°C.

Perishable food is not left at room temperature for more than two hours.

Perishable food left at room temperature for two hours or longer is discarded.

Other precautions

- Toys and other play materials are not allowed into the toilet area.
- Individual combs, hairbrushes, toothbrushes, personal clothing, bedding and towels are labelled and not shared.
- At least once a day, even in winter, the children's playrooms and staff-rooms are aired and the windows opened.
- A box of tissues is always readily available to all children and adults.

Immunisation

On enrolment, parents/guardians are asked for their child's immunisation record.

[Full information on the schedule of immunisation is available at:

- *National Primary Childhood Immunisation Schedule*

www.hse.ie/eng/health/immunisation/pubinfo/pcischedule/immschedule/

- *Health Service Executive: Immunisation Guidelines for Ireland*

www.hse.ie/eng/health/immunisation/hcpinfo/guidelines/*]*

Parents/guardians of children who are **not** immunised are made aware of the dangers of infectious diseases. Parents are encouraged to keep to up to date with current vaccination requirements and to ensure that the service is kept informed and the child's record updated when required.

Parents/guardians are not required to have their children immunised to gain admission to the service but where a child's immunisation record is not up-to-date parents/guardians are encouraged to have their child vaccinated.

If a child is not immunised, parents/guardians must be advised that their children will be excluded from the service during outbreaks of some vaccine preventable diseases such as Measles, Whooping Cough etc., even if their child is well. This is to protect their non-immunised child.

Illness

When a child is unwell, parents/guardians are asked to keep them at home if they are unable to participate in all of the activities of the day and/or if there may be a risk of passing the illness to another child or adult in the service.

This is likely if the child has any of the following symptoms:

- Diarrhoea and vomiting
- A temperature of 101°F / 38°C or above
- Eye discharge
- Rash or skin disorder
- Strep throat
- An earache or a bad cough.

If a child is ill or becomes ill in the service, we will expect the parent/guardian or a nominated carer to come for their child within 30 minutes.

We will do our best to keep a sick child separate from well children.

If all attempts at contacting a parent/guardian/carer or authorised person are unsuccessful, the next action may have to be to transfer the child to hospital by ambulance.

Any child ill with fever, headache and vomiting must be sent home as soon as their parents/guardians can be contacted. Parents will be advised to contact their doctor immediately.

If there is any significant delay in contacting parents/guardians of the child with fever, headache and vomiting, CALL AN AMBULANCE and then continue to try to contact the child's parents/guardians. A child with fever, headache and vomiting must not be allowed to wait indefinitely in the service.

In addition to these symptoms, children with meningococcal infection often develop a rash that starts as red spots but will progress to purple freckles and blotches, and even bruising (see Appendix C). If this occurs CALL AN AMBULANCE, GET MEDICAL ATTENTION first and then contact the parents/guardians.

Exclusion periods for infectious illnesses

Ill children and staff should only return when they have recovered. See exclusion notes for the different diseases outlined in Chapter 9 of [Management of Infectious Disease in Childcare Facilities and Other Childcare Settings](#) (2012) page 33.

Procedure for notifying infectious diseases

When the service is informed by the Department of Public Health of a diagnosis of a child attending the service or an employee, unpaid worker, contractor or other person working in the service, as suffering from an infectious disease within the meaning of the Infectious Disease Regulations 1981(SI No 390 of 1981) and amendments – See: www.hpsc.ie/NotifiableDiseases/ListofNotifiableDiseases/ – this will be notified to Tusla Early Years Inspectorate by *[the owner/manager]* using the Child Care Act (Early Years Services) Regulations 2016 Part VIII, Article 31, [Notification of Incident Form](#) available at:

Outbreak of an infectious disease

When to contact the local Department of Public Health:

- If there is a concern about a communicable disease or infection, or advice is needed on controlling them.
- If there is a concern that the number of children who have developed similar symptoms is higher than normal.
- If there is an outbreak of infectious disease in the service.
- To check whether to exclude a child or member of staff
- Before sending letters to parents/guardians about an infectious disease.

Communication Plan *[For staff & families]*

All parents/guardians are to be informed of the policy and procedures regarding Infection Control on enrolment and made aware that it is applied equally to all children, aimed at maintaining a healthy environment for all children and adults.

Staff members will check with parents/guardians that they have read and understood the policy and provide any assistance needed.

A summary of this policy will be included in the parent handbook. This policy will also be reviewed with staff at induction and annual staff training.

Handouts on infection may be given to parents/guardians/carers as a guide.

A copy of all policies will be available during all hours of operation to staff members and parents/guardians in the Policy Folder located at the entrance to the classroom.

Parents/guardians may receive a copy of the policy at any time upon request. Parents/guardians and all staff members will receive written notification of any updates.

Contact Information

If you need more information about this policy, contact:

Name: Priscilla McCann

Phone: 086 379 10 10

Email: info@clubspraoui.ie

This policy was adopted by Club Spraoui on: 1st May 2019

Signed by: Priscilla McCann (Owner)

Review Date: 1st May 2020

Appendix A Sample of Hand Washing Guide

Washing your hands

Hand washing is important:

- ◆ If hands are not clean they can spread germs.
- ◆ **You should wash your hands thoroughly and often** with soap and warm water and **especially**:
 - * When hands look dirty
 - * Before and after preparing, serving or eating food
 - * Before and after dealing with sick people
 - * Before and after changing the baby's nappy
 - * Before and after treating a cut or a wound
 - * After handling raw meat
 - * After going to the toilet or bringing someone to the toilet
 - * After blowing your nose, coughing or sneezing
 - * After handling rubbish or bins
 - * After handling an animal or animal litter/droppings
 - * After contact with flood water
- ◆ A quick rinse will not work – your hands will still have germs. To wash hands properly:
 - ~ Rub all parts of the hands and wrists with soap and water for **at least 15 seconds** (or as long as it takes to sing the “Happy Birthday to you” song two times!)
 - ~ Don't miss out on washing your finger tips, between your fingers, the back of your hands and the bottom of your thumbs – the pictures here will help.

Getting ready to wash your hands:

1



- ◆ Remove hand & wrist jewellery - rings, watch, bracelets

2



- ◆ Wet hands thoroughly under warm running water

3



- ◆ Apply a squirt of liquid soap to cupped hand

4



- ◆ Rub palm to palm 5 times making a lather/suds

5



- ◆ Rub your right palm over the back of your left hand and up to your wrist 5 times
- ◆ Repeat on the other hand

6



- ◆ With right hand over the back of left hand, rub fingers 5 times
- ◆ Repeat on the other hand

7



- ◆ Rub palm to palm with fingers interlaced

8



- ◆ Wash both thumbs using rotating movement

9



- ◆ Wash nail beds—rub the tips of your fingers against the opposite palm

Rinsing and drying your hands:

10



- ◆ Rinse hands well making sure all the soap is gone

11



- ◆ Dry hands fully using a clean hand towel or a fresh paper towel
- ◆ Bin paper towel after use

**Remember -
Clean hands save lives &
stop the spread of many infections**

HSE Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Compiled by Dept of Public Health, Midlands.
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Adapted from [Handwashing technique poster HSE Strategy for Antimicrobial Resistance in Ireland](#); additional image: [Dreamstime.com](#); *Putting some soap on hands* © Adamgregor

[Other handwashing posters are available on pages 72–74 of [Management of Infectious Disease in Childcare Facilities and Other Childcare Settings](#)]

Appendix B Respiratory Hygiene (coughing and sneezing)

Coughing and Sneezing

- Turn your head away from others
- Use a tissue to cover your nose and mouth



- Drop your tissue into a waste bin



- No tissues? Use your sleeve



- Clean your hands after discarding tissue using soap and water or alcohol gel for at least 15 seconds



Appendix C

Seek medical attention immediately if you are worried that someone has Meningitis / Septicaemia.

Meningitis and septicaemia

Know the symptoms

Red symptoms are more specific to meningitis and septicaemia and less common in milder illnesses. Not everyone gets all these symptoms.



MENINGITIS	SEPTICAEMIA
Fever and/or vomiting	Fever and/or vomiting
Severe headache	Limb/joint/muscle pain
Rash	Cold hands and feet/shivering
Stiff neck	Pale or mottled skin
Dislike of bright lights	Breathing fast/breathless
Very sleepy/vacant/difficult to wake	Rash
Confused/delirious	Very sleepy/vacant/difficult to wake
Seizures (fits)	Confused/delirious