



## **OUTBREAK CONTROL PROCEDURE/INFECTION CONTROL/BODILY FLUIDS**

Definition of an outbreak: - An outbreak has been defined as two or more related cases of infectious disease. Occasionally one case of an infection with important public health implications may be considered an outbreak e.g. cases of polio or diphtheria.

### **The objectives of the procedure are to ensure:-**

- 1) Prompt action.
- 2) Determine the cause of the outbreak
- 3) Prevent further spread
- 4) Prevent recurrence
- 5) All necessary agencies are promptly informed of possible outbreak
- 6) **Rules and responsibilities in the event of an outbreak:-**
  - 1) The manager or deputy should inform the Health Protection team if an outbreak is suspected.
  - 2) Provide the Health Protection team of numbers of children absent with suspected outbreak.
  - 3) Inform Health Protection team of daily absences until outbreak is over.
  - 4) Liaise with Ofsted, Early year's advisory services, staff, parents and any other agencies as necessary during the outbreak.
  - 5) Arrange as necessary further cleaning schedules to cover the outbreak.
  - 6) Review extra requirements such as adequate staffing levels and ensure adequate facilities are available to launder soiled linen and dispose of extra waste.

### **Practitioners will be expected to: -**

- 7) Inform the manager or deputy if she /he notice an increase in specific communicable diseases in relation to the nursery so they can report this to the Health Protection Team.
- 8) Staff should be familiar with the nurseries infection control policies. During an outbreak staff should use practices in relation to the type of infection causing the outbreak.
- 9) Liaise with the manager and deputy so that information and advice can be provided to parents. A member of the Health protection team will assess the extent of the outbreak and ensure that steps are taken to control it and ascertain the source. They will also liaise with the nursery manager and deputy as appropriate. If a major outbreak is confirmed the outbreak procedure will be implemented.



10)

### **Infection control**

Virus and infections can pass easily from one person to another by breathing in air containing the virus when the infected person coughs or sneezes also by hand/face contact.

The best way to prevent infection from moving around the nursery is to maintain high hygiene standards.

To do this follow the guidance below:-

- Encourage children when coughing or sneezing to catch all germs.
- Ensure tissues are disposed of in a hygienic way and staff and children wash or antibac their hands once the tissue is disposed of.
- Encourage all children to do the above by discussing good hygiene procedures.

**Bodily fluids-** Blood, vomit, mucus and faeces all have infectious micro-organisms contained in them so the following procedures should be followed.

Practitioners/students are to remember to protect themselves with gloves and aprons when dealing with bodily fluids.

- Spills of bodily fluid include blood, vomit, nasal and eye discharge, saliva and vomit should be cleaned up immediately.
- Wear disposable gloves and aprons-Be careful not to get any fluids on you such as in cuts and grazes. Don't touch eyes, mouth, nose or any sores you may have.
- Clean and disinfect any surfaces which may have any fluids on them.
- Dispose/discard of any contaminated materials in plastic bags dispose of them in a bin or nappy bin which is sealed along with any gloves or aprons.
- Mops should be removed for washing or thrown away.

**Clothes-** All clothes that have been urinated, soiled, vomited on or have blood on them should be put into **red** disposable washing bags that are stored in the bathroom. These bags can be put into the washing machine as they dissolve in the wash and little contact will be made with the clothing.

### **HIV/AIDS- HIV/Aids in Childcare**

HIV/AIDS stands for Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome. It is an infectious disease caused by a virus. Over time the virus attacks and destroys the body's immune system.

**HIV/Aids Spreads Through:** Contact of mucous membranes or openings in the skin with infected blood and body fluids that contain blood, semen and



cervical discharges. Breastfeeding Dirty needles or sharp instruments Mother passes to infant before birth Sexual contact HIV/AIDS is NOT spread through the type of contact that occurs in childcare and school settings such as touching, hugging, playing, feeding or by contact with surfaces touched by infected people. It is not spread by saliva, tears, stool (bowel movements), urine or kissing.

**Signs and Symptoms** A child with HIV/AIDS may have some of these signs: Failure to grow and develop well Enlarged liver or lymph nodes Swelling of glands in the neck and face (salivary glands) Frequent infections

Treatment of HIV/Aids There is no cure, but doctors can use several different drugs to treat HIV/AIDS. When the Child Should Not Go to School or Childcare Exclude a child from the group setting if: The child has fever or change in behaviour The child has weeping skin sores that cannot be covered The child has bleeding problems There is a risk of the child being exposed to a particular infection in the group setting. A sick child should NOT attend childcare if: The child has an illness that poses a risk of spreading serious disease to others. The caregiver is NOT able to offer the extra care needed to comfort a sick child without affecting the care of other children. The child is not able to keep up with most activities, even after resting or taking a longer nap.

**Notes to Childcare Provider Disclosure** – Parents and guardians do not have to share information about the HIV status of their children. If parents or guardians do share the HIV status, this information is not to be shared with other staff or teachers without written permission from parents or guardians.

Since HIV/AIDS does not have to be disclosed, or families may not even know that a family member is infected, standard safety measures should be followed when handling blood or blood-containing body fluids. Risk factors – The child should be evaluated by his doctor and the childcare program director if he has one or more potential risk factors for spreading HIV/AIDS. A child may return to the group setting when his doctor says it is safe. Once he has returned, any skin lesions should be dry and covered. If the child has bleeding problems or weeping skin lesions that cannot be covered, he should be taken out of the group setting. Biting – If a bite results in blood exposure to EITHER person involved, persons should follow up immediately with their healthcare provider