Pioneering Care Partnership Infection Control Procedure

Purpose

The aim of this procedure is to provide guidance on the process to be followed when employees have symptoms of and/or test positive for infectious diseases. It is not intended to be used as a tool for diagnosing disease, but rather a series of procedures informing staff what steps to take to prevent infection and what actions to take when infection occurs.



The implementation of this procedure will minimise the risk of infectious diseases spreading in the workplace through effective prevention and management.

In the event of a pandemic, the PCP will issue advise based on National guidance, which may supersede this procedure.

Scope

This procedure applies to all staff who work for PCP whether full-time or part-time, employed through an agency and placement students. This procedure also applies to PCP volunteers, including PCP Trustees.

Definitions

Infectious diseases - disease caused by pathogenic microorganisms, such as bacteria, viruses, parasites or fungi; the diseases can be spread, directly or indirectly, from one person to another. Examples of infectious diseases include:

- Common cold
- Influenzas (flu)
- Respiratory infections (including COVID-19)
- Gastroenteritis (stomach flu)
- Malaria
- Measles

Infectious diseases can be spread through several ways, including:

Respiratory spread – spreading of infectious disease via contact with coughs or other secretions from an infected person.

Direct contact spread – spreading of infectious disease via direct contact with the infecting organism, e.g., skin-on-skin contact.

Gastrointestinal spread – spreading of infectious disease via contact with contaminated food or water, or contact with infected faeces or unwashed hands.

Blood borne virus spread – spreading of infectious disease via contact with infected blood or bodily fluids, e.g., via bites or used needles.

Procedure

Preventative Measures

PCP actively prevent the spread of infection via the following measures:

- Maintaining high standards of personal hygiene and practice
- Maintaining a clean, well-ventilated environment
- Offering immunisations (e.g., seasonal flu jab)
- Taking appropriate action when infection occurs

Preventing the spread of infection

PCP employees will not attend the physical workplace or community settings (face to face) in the following circumstances. The employee:

- Has a high temperature/fever
- Has been vomiting and/or had diarrhoea within the last 48 hours
- Has an infection and the minimum recommended exclusion period has not yet passed; see Appendix A

PCP employees displaying any of the signs of becoming unwell 'onsite' will be sent home, and recommended to see a doctor. If an employee is suffering from vomiting and diarrhoea, they will be sent home and may not return until 48 hours have passed without symptoms.

Respiratory illnesses (including COVID)

PCP employees who have symptoms of a respiratory infection (including COVID), and who have a high temperature or do not feel well enough to go to work, are advised to stay at home and avoid contact with other people. They are not required to take a COVID-19 test and should follow the guidance for people with symptoms of a respiratory infection including COVID-19 - they should stay at home until they no longer have a high temperature (if they had one), or until they no longer feel unwell. If employees have a positive COVID-19 test result, regardless of whether they have symptoms, they should follow guidance for the general public who have a positive test result (see **Appendix A**).

PCP employees may choose to work from home if able and agreed with Line Manager.

Line Managers should undertake a risk assessment before community/service provision employees return to work in line with normal return to work processes.

Medication

When medication has been prescribed by doctor, dentist, nurse or pharmacist, PCP recommend the first dose is administered at home, in case of an adverse reaction. If an employee returns to work (onsite) whilst taking prescribed medication, a *Medicine Management Risk Assessment* should be carried out by the Line Manager in conjunction with their RTW interview.

Pregnant Employees

If a pregnant employee develops a rash, or is in direct contact with someone who has a potentially contagious rash, we will strongly encourage the employee to speak to their doctor or midwife.

Chickenpox: If a pregnant employee has not already had chickenpox or shingles, becoming infected can affect the pregnancy. If a pregnant employee believes they have been exposed to chickenpox or shingles and have not had either infection previously, they must speak to their midwife or GP as soon as possible. If a pregnant employee is unsure whether they are immune, we encourage them to take a blood test.

Measles/Rubella: If a pregnant employee is exposed to measles/rubella, they will inform their midwife immediately.

Slapped cheek disease (Parvovirus B19): If a pregnant employee is exposed to slapped cheek disease, they will inform their midwife promptly.

Staff Members with Long Term Health Conditions

If an employee with a long term health condition (such as an autoimmune disease) feels ill, notices something unusual (e.g., a rash) or has been in direct contact with someone who has a potential contagious illness – they should take appropriate action as soon as possible and contact their GP.

Reporting Illness

If an employee has symptoms of and/or tests positive for an infectious disease, they must inform their line manager no later than 9:30am on the first day of illness (if out of hours, the next available working day). If line manager is unavailable, the employee must inform the Senior Manager and HR in accordance with sickness management procedure.

If you have an infection and the minimum recommended exclusion period has not yet passed (see **Appendix A**) you must not attend the physical workplace or community settings as part of your role.

You should work from home if your job allows this.

Where an employee is well but unable to work from home, a special leave provision will be provided or we will adapt duties for that period. Exclusion must be noted in the Sage HR special leave time off request details box.

When an employee is too unwell to work, they will receive contractual sick pay or Statutory Sick Pay (SSP).

See the following PCP <u>policies/procedures</u> for further details on absence and reporting absence:

- Absence Management Policy
- Sickness Management Procedure

Responsibilities

Senior Managers and Line Managers are responsible for ensuring this procedure is followed.

Employees are responsible for adhering and understanding this procedure.

HR is responsible for updating this procedure.

Communication

PCP will ensure that:

- The up to date procedure is saved in the accessible Policies and Procedures folder
- Employees are notified of all changes to this procedure in a timely manner

Monitoring and Review

This procedure will be reviewed by Operations Manager on a regular basis to ensure that it remains compliant. A full formal review will also take place every 3 years as part of the Review Cycle.

July 2024

Procedure document tracking

Action	Date(s)
Draft to SLT:	01/05/2024
Approved by SLT:	09/05/2024
Approved Procedure uploaded to shared and circulated:	01/07/2024

Interim Review Date:	N/A
Main Review Date:	July 2027
SLT Lead for Review	Operations Manager

If this procedure is not reviewed in line with the review date indicated then this version remains valid until such time it is updated and reviewed.

Appendix A: Infectious Diseases & Absence Periods

Note, this is not an exhaustive list of infectious diseases. If you are at all concerned about any symptoms of illness, you are urged to contact 111, or your GP immediately. For NHS guidance for individual illnesses, visit: Health A to Z - NHS (www.nhs.uk).

Disease	Symptoms	Considerations	Absence Period
Chicken pox	Sudden onset of fever with a runny nose, cough and generalised rash. The rash then blisters and scabs over. Several blisters	Cases are advised to consult their GP.	See NHS website for up to date guidance on absence period: <u>Chickenpox - NHS (www.nhs.uk)</u>
	may develop at once, so there may be scabs in various stages of development. Some mild infections may not present symptoms.	Chickenpox is infectious from 48 hours prior to a rash appearing up to five days after the onset of a rash.	
Cold sores	The first signs of cold sores are tingling, burning or itching in the affected area. Around 24 hours after the first signs appear the area will redden and swell, resulting in a fluid-filled blister. After blistering, they break down to form ulcers then dry up and crust over.	Cases are advised not to touch the cold sore, or to break or pick the blisters. Sufferers of cold sores should avoid kissing people and should not share items such as cups, towels and facecloths.	Absence not necessary, but employees should speak to line manager if working directly with service users to discuss any work adaptations.
Conjunctivitis	The eye(s) become reddened and swollen, and there may be a yellow or green discharge. Eyes may feel itchy and 'gritty'.	Cases are encouraged to seek advice, wash their hands frequently and not to rub their eyes.	Absence not necessary, but employees should speak to line manager if working directly with service users to discuss any work adaptations.
Respiratory Infection, including Coronavirus	A new, continuous cough and a high temperature are the main symptoms of coronavirus. Testing positive for COVID-19.	 People are no longer required to self-isolate if they test positive for COVID. Government guidelines recommend: try to stay at home and avoid contact with other people for 3 	Work from home if possible. Employees should speak to line manager if working directly with service users to discuss any work adaptations.
		 days after the day the test was taken if you or your child are under 18 years old – children and young people tend to be infectious to other people for less time than adults try to stay at home and avoid contact with other people for 5 	See NHS website for up to date guidance on absence period: <u>COVID-19 symptoms and what</u> to do - NHS (www.nhs.uk)

		 days after the day you took your test if you are 18 years old or over avoid meeting people who are more likely to get seriously ill from viruses, such as people with a weakened immune system, for 10 days after the day you took your test 	
Food poisoning (e.g., salmonella, e-coli)	Symptoms normally appear within one to two days of contaminated food being consumed, although they may start at any point between a few hours and several weeks later. The main symptoms are likely to be nausea, vomiting, diarrhoea, stomach cramps and fever.	Cases will be sent home and recommended to consult with GP.	Cases will be excluded from workplace setting as per the NHS guidelines - Food poisoning - NHS (www.nhs.uk)
Giardia	Symptoms include abdominal pain, bloating, fatigue and pale, loose stools.	Cases will be sent home.	Cases will be excluded from workplace setting as per the NHS guidelines - <u>Giardiasis -</u> <u>NHS (www.nhs.uk)</u>
Gastroenteritis	Symptoms include three or more liquid or semi-liquid stools in a 24-hour period.	Cases will be sent home.	Cases will be excluded from workplace setting as per the NHS guidelines - <u>Diarrhoea and vomiting - NHS</u> (www.nhs.uk)
Glandular fever	Symptoms include severe tiredness, aching muscles, sore throat, fever, swollen glands and occasionally jaundice.	The sufferer may feel unwell for several months and the PCP will provide reasonable adjustments where necessary.	Exclusion is not necessary, and cases can return to work as soon as they feel well.
Influenza (Flu)	Symptoms include headache, fever, cough, sore throat, aching muscles and joints, and tiredness.	Those in risk groups will be encouraged to have the influenza vaccine.	Cases will remain home until they have fully recovered - <u>Flu -</u> <u>NHS (www.nhs.uk)</u>
Measles	Symptoms include a runny nose, cough, conjunctivitis, high fever and small white spots around the cheeks. Around the third day, a rash of flat red or brown blotches may appear on the face then spread around the body.	Staff members encouraged to be up- to-date with their MMR vaccinations. Pregnant staff members and those with weak immune systems will be encouraged to contact their GP	Cases will be excluded from workplace setting as per the NHS guidelines - <u>Measles - NHS (www.nhs.uk)</u>

		immediately for advice if they come into contact with measles.	
Meningitis	Symptoms include fever, severe headaches, photophobia, stiff neck, non-blanching rash, vomiting and drowsiness.	Contact GP / 111 immediately for further tests and treatment.	Once a case has received any necessary treatment, employee can return to workplace setting.
Meticillin resistant staphylococcus aureus (MRSA)	Symptoms are rare but include skin infections and boils.	All infected wounds will be covered.	No exclusion is required; stringent hand washing / sanitising is recommended - <u>MRSA - NHS (www.nhs.uk)</u>
Mumps	Symptoms include a raised temperature and general malaise. Then, stiffness or pain in the jaws and neck is common. Following this, the glands in the cheeks and under the jaw swell up and cause pain (this can be on one or both sides). Mumps may also cause swelling of the testicles.	Staff members encouraged to be up- to-date with their MMR vaccinations. The case will be encouraged to consult their GP.	Cases will be excluded from workplace setting as per the NHS guidelines - <u>Mumps - NHS (www.nhs.uk)</u>
Scarlet Fever	Symptoms include acute inflammation of the pharynx or tonsils, with tonsils reddening in colour and becoming partially covered with a thick, yellowish exudate. In severe cases, there may be a high fever, difficulty swallowing and tender, enlarged lymph nodes. A rash develops on the first day of fever and is red, generalised, pinhead in size and gives the skin a sandpaper-like texture, with the tongue developing a strawberry-like appearance.	Cases will be sent home and recommended to consult with GP.	Cases will be excluded from the workplace setting as per the NHS guidelines - <u>Scarlet fever -</u> <u>NHS (www.nhs.uk)</u>
Shingles	Early symptoms include tingling / painful feeling in an area of skin and / or a head ache and generally feeling unwell. A rash will usually appear a few days later. In rare cases shingles can cause pain without a rash. Usually, a rash will appear on the chest and tummy, but it can appear anywhere on the body including on the face, eyes and genitals.	Cases will be sent home and recommended to consult with GP as soon as possible.	Cases will be excluded from the workplace setting as per the NHS guidelines - <u>Shingles - NHS</u> (www.nhs.uk)