



## Infection Control Policy

Approved by:	Governing Body	Date: Autumn 2024
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## **BRIERLEY CE (VC) PRIMARY SCHOOL**

### **Our Vision**

Though we are many, we are one body. Together, we learn and grow.

God is at the heart of all we do, shining His light to guide us on our journey. Together, we face change and transformation with courage.

In love, we nurture all to be resilient, hopeful and aspirational; to become the very best version of ourselves, knowing that we are loved.

Each member of our school community is honoured and celebrated for their unique character and qualities: difference is met with dignity and compassion. Though we are many, we are one body.

Our community at Brierley stretches beyond the school, where we share God's message of love through our actions, our thoughts and our words as we continue on life's path.

### **POLICY STATEMENT**

When people live or work closely together they are more at risk from spreading diseases. When a person has an infectious illness strict precautions will be observed. It is Brierley CE Primary School's policy to:

- Train staff so they are aware of any risks and the precautions to be taken to prevent the spread of infection.
- Provide preventative measures such as procedures, training and personal protective equipment.
- Report notifiable infections to the Local Authority.

### **PROCEDURE**

#### **Control of infection**

- In cases of infection, all areas will be identified and procedures implemented to control the risk of the infection being spread.
- Advice will be sought from the Local Authority, if necessary
- Where required, staff involved will be given ad hoc training in the particular infection control procedures.
- Close communication will be maintained with parents/guardians in the case of infections to pupils.

#### **Procedure for control of infectious disease**

- If an infectious disease is suspected, inform Head Teacher.
- pupils with an infectious disease should not be allowed to come to School.
- Disinfect toilet seats, handles, hand basins and taps after use by any infected person.
- Ensure staff wear disposable portable protective equipment (PPE).
- Staff to contact parents in the event of a pupil vomiting, diarrhoea, rashes, discharges, etc.
- Infected staff should not return to work until medical clearance is given.

### **Prevention of infection – Procedure to clear up body spillage**

- In cases of any spillage of blood, bodily fluids, or excreta, then Personal Protective Equipment (PPE), including disposable plastic gloves and disposable aprons, must be worn and disposed of appropriately after use
- Immediately clean up any body fluid spills: blood, faeces, nasal and eye discharges, saliva and vomit, using PPE. Avoid getting splashes in eyes, nose, mouth or open sores or cuts.
- Clean and disinfect any surfaces where spills occurred using a disinfectant (following manufacturer's instructions) that will kill both bacteria and viruses
- To clean up the spillage, cover it with clean, dry, paper towels and gently pour effective disinfectant over the towels. If possible, leave for 30 minutes, then wipe again with more clean, dry, paper towels.
- Any mops used should be cleaned in a cleaning equipment sink, rinsed with disinfectant solution and dried.

### **Prevention of infection – Dealing with “sharps”**

- After a penetrative injury by a sharp object (e.g. a knife, needle etc) the “sharp” may be contaminated with bodily fluid and must be disposed of.

In the event of coming into contact with a discarded needle or syringe whilst cleaning or collecting litter.

- The main hazards from cuts and piercing injuries are HBV – Hepatitis B Virus, HCV – Hepatitis C Virus, HIV – Human Immunodeficiency Virus and Tetanus. The likelihood of HIV infection is remote.
- When collecting litter, litter picks should be used wherever and whenever practicable. Any sharps found are to be placed directly and very carefully into an approved sharps' container which is available in the Bursar's office
- No attempt should ever be made to bend, break, cut or otherwise tamper with sharps.
- Sharps' containers should not be handled or transported any more than is absolutely necessary. They should be secured whilst being transported to avoid damage to the container and subsequent spillage.
- Arrangements are made to ensure that sealed sharps containers are disposed of in a safe manner, by arrangement with an authorised waste disposal contractor. The Health & Safety Officer is responsible for this.
- The Headmaster should be notified of all circumstances where any sharps are disposed of. Accidents should always be recorded in the Accident Book.

### **In the event of injury caused by *potentially contaminated* needles or sharps':**

- encourage bleeding;
- wash the site of the puncture/injury with running water;
- immediately visit a GP or the local hospital Casualty Department and inform them of the circumstances of the incident. Advice should then be given on any further treatment that may be necessary.
- Appropriate health surveillance will be provided to any staff who have been potentially exposed to dangerous viruses, eg penetration of the skin by an object suspected to be contaminated.

## Female Staff – Pregnancy

- In general, if a pregnant woman develops a rash or is in direct contact with someone with a potentially infectious rash, it should be investigated by a doctor. The greatest risk to pregnant women from such infections comes from their own child/children rather than the workplace.
- Specifically, medical advice should be sought if a pregnant woman comes into contact with chicken pox (if she has not had the infection), German measles (Rubella), slapped cheek (Parvovirus B19) or measles.

## Vulnerable children

Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include: those being treated for leukaemia or other cancers, those on high doses of steroids by mouth and those with conditions that reduce immunity. Staff will normally have been made aware of any children in School with these conditions. These children will be particularly vulnerable to chicken pox or measles and if a vulnerable child is exposed to either, the parent/guardian will be informed and the parent/guardian will be advised to consult their own doctor/consultant.

# COVID-19 Outbreak Control Plan for Schools

## What happens if someone becomes unwell with COVID-19 symptoms at an educational setting?

If anyone (child or staff member) in an education or childcare setting becomes unwell with a **new, continuous cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell (anosmia)**, they **must** be sent home and advised to follow the COVID-19: guidance for households with possible coronavirus infection guidance.

### Steps to take immediately in the setting

In an emergency, call 999 if they are seriously ill or injured or their life is at risk. Do not visit the GP, pharmacy, urgent care centre or a hospital.

**If a child is awaiting to be picked up from School**, they should be moved, if possible, to a room where they can be isolated behind a closed door, depending on the age of the child and with appropriate adult supervision if required. Ideally, a window should be opened for ventilation. If it is not possible to isolate them, move them to an area which is at least 2 metres away from other people.

**If they need to go to the bathroom while waiting to be collected**, they should use a separate bathroom if possible. The bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else.

**When to use PPE:** PPE should be worn by staff caring for the child while they await collection if direct personal care is needed and a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs).

**What the staff member should do:** If a member of staff has helped someone with symptoms they do not need to go home unless they develop symptoms themselves. They should wash their hands thoroughly for 20 seconds after any contact with someone who is unwell. Cleaning the affected area with normal household disinfectant after someone with symptoms has left will reduce the risk of passing the infection on to other people.

**Self isolation:** Parent/carer will need to be informed that the child will have to self-isolate for 7 days and the other household members will need to isolate for 10 days. This therefore means any siblings will also need to isolate.

For further details on protective measures Schools should be taking please refer to Coronavirus (COVID-19): implementing protective measures in education and childcare settings (updated 1<sup>st</sup> June 2020)

### **Arranging for a test**

All staff and students who are attending an education or childcare setting will have access to a test if they display symptoms of coronavirus, and are encouraged to get tested in this scenario.

**Parent/carer** should arrange for the child (to have a test to see if they have COVID-19. They can do this by visiting NHS.UK to arrange or contact NHS 119 via telephone if they do not have internet access.

**Essential workers and other eligible groups** are able to register and book a test for themselves and/ or their household member(s) if they have coronavirus-like symptoms. There are three ways to get a test via the self-referral portal: 1) Book an appointment at a regional testing site 2) Book an appointment at a mobile testing unit 3) Request a home delivery test. The self-referral portal can be accessed here <https://www.gov.uk/apply-coronavirus-test>

**Education settings as employers** can also book tests through the employer referral portal [portalservicedesk@dhsc.gov.uk](mailto:portalservicedesk@dhsc.gov.uk). This service allows employers to refer essential workers who are self-isolating either because they or member(s) of their household have coronavirus symptoms, for testing.

## **COVID-19 Outbreak Control Plan for Schools**

### **What happens if there is a confirmed case of COVID-19?**

#### **Key actions**

Schools need to notify the Local Health Protection Team (HPT) of **any confirmed COVID cases** (in staff or students) reported to them. HPT *should* be notified separately through Track and Trace of any staff or student who is tested and confirmed to have COVID-19, but schools are asked to notify directly to ensure cases are not missed.

On notification of a confirmed case, the HPT will contact the case or parent/guardian to obtain further information and undertake a risk assessment. This will consider:

- Whether the case was in school 48 hours prior to symptoms (or test result if asymptomatic) or within 10 days after onset of symptoms

- Whether the case had contact with any other individuals and the nature of this contact (i.e. does the contact meet the criteria for direct / proximity / travel contact)

HPT will provide the following isolation advice:

- They should not attend school until 10 days after date of onset (or date of test if asymptomatic) AND have not had temperature for 48 hours
- They can attend school if they still have a cough but no temperature if it is more than 10 days since the date of onset or date of test (as a cough can persist for some weeks after)

HPT will advise the case that we will be contacting the school to obtain further information (if not already done so, we will encourage case to notify school themselves)

School will be contacted by HPT to confirm the nature of the case's contact with others and possible exposure

If the case has not been in school 48 hours prior to symptoms (or test result) or within 10 days after, no further action will be recommended by HPT

HPT will work with school to identify which students and staff meet definition of direct / proximity / travel contacts during the infectious period of case.

Where the child, young person or staff member tests positive, the rest of their class or group (bubble) within their childcare or education setting should be sent home and advised to self-isolate for 10 days. The other household members of that wider class or group (bubble) do not need to self-isolate unless the child, young person or staff member they live with in that group subsequently develops symptoms.

HPT will provide the headteacher with suggested letter to send to identified contacts advising 10-day isolation, although household contacts of contacts will not need to self-isolate.

HPT will also discuss how school are implementing social distancing and infection, prevention and control (IPC) measures, and provide advice as required

Cleaning an area with normal household disinfectant after someone with suspected coronavirus (COVID-19) has left will reduce the risk of passing the infection on to other people. You can find further information on guidance on cleaning in non-healthcare settings

## **COVID-19 Outbreak Control Plan for Schools**

### **Confidentiality**

Health protection teams are duty bound to manage personal case details in strict confidence. Information given to schools from the team for distribution during an outbreak will never name cases or give out any personal details. Organisations where cases are identified are also bound to manage personal case details in strict confidence.

### **What happens in the event of an COVID-19 outbreak?**

An outbreak is defined as:

- Two or more confirmed cases of COVID-19 among students or staff in the school within 10 days or
- An overall increase in sickness absence reporting where parents report illness with suspected COVID-19 (but where no tests have been done or results are available)

**Key actions**

The school need to notify their local health protection team (HPT) of **any confirmed COVID cases** (in staff or students) reported to them

When notified of a possible outbreak, the HPT will obtain further information from the school to inform a risk assessment (this may involve asking the school to complete a data return)

This will include details of the setup of the school, total number of staff and students confirmed or symptomatic, vulnerability of student population, potential number of contacts and current social distancing and IPC measures.

Once an outbreak has been declared, the local system (for example directors of public health and local authority public health teams) should be informed as per local protocols (Public Health England Health Protection Team), and where necessary (for example complex situations, with large numbers of cases) an outbreak control team (OCT) should be considered. BMBC will support with planning for local outbreaks in schools (e.g. defining monitoring arrangements, potential scenarios and planning the required responses HPT will undertake a risk assessment to consider the severity and spread of outbreak, current control measures and the wider context (including communications from the school, anxiety level amongst students, staff and families, media interest etc.)

HPT will inform the local authority (pending local discussions) and jointly consider need for Outbreak Control Team (OCT)

HPT (or OCT) will help school to identify contacts who need to isolate (any symptomatic contacts will be encouraged to access testing)

HPT will advise the school on when they should contact HPT or Local Authority if they have any further cases or outbreak develops any concerning features such as a death in a student or staff member.

**Contact details**

Local Health Protection Team (Public Health England)- 0113 3860 300

Department of Education's helpline for schools - 0800 046 8687 - should respond to all queries from schools (particularly in relation to published guidance)

Barnsley Council Public Health Nursing Single Point of Access (SPA) on 01226 774411 or the School Public Health Nursing Service link worker.

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