

Devon Prison Cluster
**Buddy Support
Worker Induction
Programme**

Prisoners assisting other prisoners



**Cleaning and infection
prevention & control**

Adapted from Care Standard 15

To complete this module...

you will need to show that you understand the outcomes listed below. Please use this booklet as a guide but don't copy directly from this. When writing your answers in your workbook, please try to give your own examples.

Outcomes

- Able to explain the main ways that an infection can get into a body.
- Able to explain how own health or hygiene might pose a risk to the individuals you support.
- Able to list common types of personal protective clothing, equipment, procedures and how and when to use them.
- Able to explain the principles of the safe handling of infected or soiled linen and clinical waste.

In addition to those outcomes listed above you will also be observed in the workplace and will need to demonstrate the below outcomes:

- Show that you have effective hand hygiene.
- Show that they you personal protective clothing and equipment correctly.
- Show that they can use the correct cleaning equipment and materials, in accordance with the Prisons policies and procedures.
- When undertaking cleaning tasks, you are able to identify risks and hazards and work safely.

The aim of this guidance is to ensure that safe and uniform standards of cleanliness are maintained in all areas of the cell, to minimise the risk of infection.

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Introduction

- The essence of good cleaning is not only that things look clean but that they are “technically clean to safeguard yourself and others from infection”.
- The Health and Safety at Work (1974) and control of substances Hazardous to health (COSHH) Regulations (2002) require the maintenance of good standards and safe working practices.
- Infection prevention and control means, doing everything possible to prevent infection from developing and spreading to others.
- You can improve infection prevention and control by learning the good practices set out in this workbook and guidance and using them in the role of Buddy Support Worker.
- The guidance in this workbook is for knowledge purposes. You must work within the policies and procedures of the Prison and the standards expected of you. The policies and procedures within the Prison will take precedence over the contents of this manual.

Good practice measures for infection prevention and control

A prison setting contains a diverse population of micro-organisms (bacteria, viruses and fungi).

- The cell area can become contaminated with blood, other body fluids, secretions and excretions. It is important to prevent any potential contamination or infection spreading.
- The environment can spread infection; the risk will be increased if the environment has dust, dirt or liquid spills.
- To keep these risks low, the environment should be clean, dry, well lit and well ventilated.
- The ‘environment’ includes:
 - Any general horizontal surfaces in the cell (both low and high level)**
 - Any frequently touched surfaces**
 - Beds, trolleys, tables and chairs**
 - Toilets**
 - Sink**
 - Cell Floor**
 - Doors, door handles**
 - Other paint work and surroundings, e.g. skirting, walls, partitions**
 - Light fittings and light switches**

An infection occurs when micro-organisms enter the body and attack or cause damage. These micro-organisms can come from a variety of sources.

The chain of infection

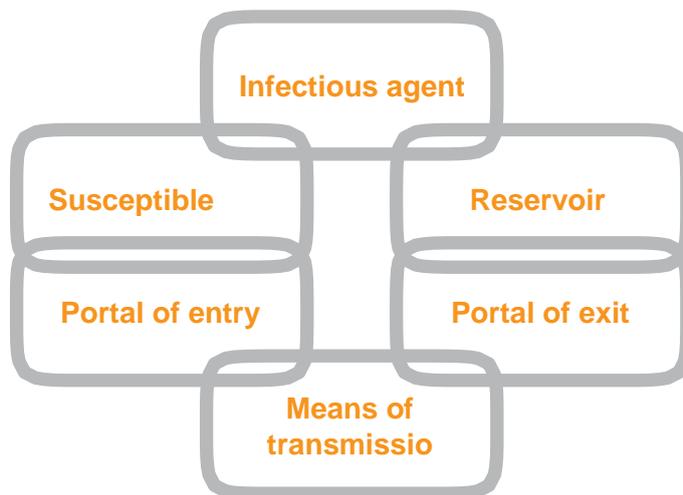
The spread of micro-organisms from their source to a host is referred to as the “chain of infection” which is made up of six links. Each link represents one of the six elements required to spread infection. The links are listed below:

- Infection Source** The infectious micro-organisms, e.g. Norovirus, Clostridium difficile, MRSA
- Exit** Where the infection comes from, e.g. people, contaminated equipment or surfaces.
- Route** The way in which micro-organisms leave the body, e.g. coughing, sneezing, diarrhoea, blood.
- Entry** The way in which micro-organisms travel, e.g. on hands, airborne, insects.
- Host** The way in which micro-organisms enter the body, e.g. through the mouth, nose, urinary tract, wounds, mucous membranes.
- Host** A person’s susceptibility to infection is determined by their age, well-being, level of immunity and any medical interventions.

Breaking the chain of infection

The aim of infection prevention and control is to break one or more links in the chain, which will interrupt the development of an infection. This can be achieved by applying “standard precautions” at all times.

The chain of infection



Some examples of how to break the chain

Chain link	What this means	Examples of how to break
Infectious agent	Bacteria, viruses, fungi,	Early detection of micro-organisms
Reservoirs	People, equipment, water	Cleaning, disinfection/ hygiene
Portals of exit	Excretions, secretions, droplets, skin	Protective clothing/ infection control
Means of transmission	Direct contact/ airborne/ food	Hand hygiene
Portal of entry	Broken skin, mucous membrane, gastrointestinal, respiratory,	Standard precautions – infection control
Susceptible host	People	Standard precautions – hand hygiene

Standard precautions

There are control measures known as standard precautions. These underpin routine safe practice and break the chain of infection which in turn protects the client you are working with and yourself.

There is often no way of knowing who or what is infected, so by applying standards precautions at all times, best practice becomes second nature and risks of infection are minimised.

Safe working practices take the guesswork out of protecting yourself and others as you provide support.

It is impossible to tell who has or is carrying an infection. Since all clients and equipment is a potential infection risk it is essential that you apply safe systems of work at every opportunity.

Standard Precautions:

- Hand hygiene
- Personal protective equipment
- Waste management
- Laundry
- Cleaning and disinfection of equipment

Hand hygiene

Hand washing is the single most important way to prevent the spread of infection. Hands may look clean, but micro-organisms are always present, some harmful, some not. Removal of micro-organisms is the most important factor in preventing them from being transferred to others. For best practice and to facilitate food hand hygiene, you should ensure that you are “Bare Below the Elbows” if you have long sleeves these should be rolled/pushed up to the elbows.

When to wash your hands:

- When your hands look dirty
- Before you start work and at the end of the day
- Before putting on and after removal of disposable gloves
- Before getting food
- After contact with any bodily fluid
- After contact with the clients cell
- After handling used laundry
- After you have been to the toilet
- After you have been on a break

Liquid soap or hand rub

For routine hand washing refer to the poster in your pack – put it somewhere near a sink so it can remind you what you should be doing. The use of liquid soap and warm water is best practice and should take 15–30 seconds. When using hand rub you should still do it using the same technique shown in the poster until the solution dries. If you are supporting someone who has diarrhoea/sickness (*Clostridium difficile*) you must wash your hands as hand rub is not effective against some of these bacteria and viruses.

Good hand hygiene practice

- Cover wounds, cuts and grazes with a waterproof dressing to reduce the risk of acquiring an infection.
- Be “Bare Below the Elbows”
- To reduce micro-organisms on nails, keep them clean and short.
- Dry hands thoroughly – If possible use paper towels. The friction also helps to further reduce micro-organisms on the hands.
- Wet hands are more likely to transfer micro-organisms than dry hands.
- If you can use hand cream regularly as it prevents skin becoming dried and cracked. Dry and cracked skin creates an ideal environment for micro-organisms to breed.

How to hand wash

Rub hands palm to palm.

Rub palm to palm with fingers interlocked.

Rub back of each hand with palm of other hand – fingers interlocked. Rotational rubbing of left thumb clasped in right palm and vice versa.

Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa.

Personal protective equipment

Personal Protective Equipment (PPE) is used in addition to the clothes that you will be wearing in the role the Buddy Support Worker. These are important to protect both you and the people you are working with from the transmission of infection.

Gloves

You should wear disposable gloves – they must be worn as single-use items. You should put them on before you go into an individual's cell and then remove them as soon as you come out.

- Before putting on and after removing gloves, hands must be washed or hand rub applied.
- Do not wash gloved hands, washing gloves rather than changing them is not safe practice.
- Do not apply hand rub to gloves as this may affect the quality of the gloves.
- Gloves should not be kept in pockets as they can become contaminated.

Aprons

A single-use disposable apron should be worn whenever there is a risk of exposure to infection, blood, body fluids or other source of contamination soiling. It must be put on before you go into an individual's cell and removed as soon as you come out.

Disposal of PPE

You must refer to the guidelines and procedures within the Prison. **Remember: always wash hands or apply hand rub after disposing of personal protective equipment.**

Blood and body fluid spillages

Spillages must be disinfected promptly and the affected area must be cleaned to reduce the spread of infection – you must do this in accordance with Prisons procedures using the equipment that you are advised to by the Prison.

Tips to remember:

- You must use a disposable apron and gloves
- You must try to ventilate the area – open the window where possible.
- Cover the spill with paper towels.
- Pour the solution on top of the paper towels – according to the required contact time (on container).
- Clear away paper towels, dispose of as infectious/clinical waste, and follow the prisons procedure for this.
- With a disposable cloth, wash the area using detergent given to you by the prison and warm water if appropriate, then dry with paper towels.
- Dispose of cloth and paper towels as advised by the prison.
- Remove personal protective equipment and dispose of, as clinical waste.
- Wash your hands thoroughly to prevent the transmission of infection.
- These are just guidelines – if you are told to do any of the above differently by the prison you must follow what you are told to do within the prison.

Waste Management

It is important that waste is disposed of correctly – waste is potentially hazardous and if not disposed of correctly it can result in injury or infection. You must dispose of waste in accordance with the prisons procedures.

Laundry

Linen (sheets, bedding and towels) and clothes can become soiled with body fluids containing micro-organisms.

You should use a disposable apron and gloves when handling used linen/clothing for example changing a bed.

Cleaning and disinfection of equipment

Cleaning and disinfection is known as **decontamination**.

The different levels of decontamination:

1. Cleaning

Means you are physically removing soil, e.g. filth and grime, along with most pathogens – you would do this by using detergents (enzymatic and soap) and friction. This is the first level of decontamination and may be all that is required for certain items.

Warm soapy water should be used for the cleaning of any equipment that has been used in contact with intact skin examples include, walking frame, one handed tray (*intact skin can be defined as skin in which there are no breaks, grazes, cuts, etc.).

2. Disinfection

This is a process which reduces the number of viable micro-organisms but is not necessarily effective against bacterial spores or some viruses. Disinfection can be achieved through the use of heat or chemicals.

Cleaning should always be undertaken to remove dirt and visible soiling before equipment is disinfected, this ensures that disinfection is effective.

3. Sterilization

Means the complete destruction of all micro-organisms.

Sterilization is a specialist means of decontamination of equipment and any item requiring sterilization must be dealt with by the appropriate personnel such as health care or sterile services department within the prison.

Equipment for cleaning

- Equipment used for cleaning the environment needs to be clean, fit for purpose and in a good state of repair.
- Different areas should have different equipment, and this should be colour coded so that it is easy to see which equipment should be used.

The National Colour Coding Scheme

Red High risk areas such as
toilet **Blue** General areas
Green Kitchens
Yellow Clinical
areas

- Cleaning equipment should be stored in a designated area away from potential sources of contamination.
- Materials and equipment used to clean high risk areas (toilets) should be stored separately from those used for general areas.
- Mops and buckets should be kept clean and dry and mops should be stored head up and buckets inverted.
- Mop head should be removable for frequent laundering or single use

Please make sure that you follow the prisons guidelines and procedures for cleaning and storing your equipment.

Cleaning procedure guidance

- Refer to manufacturers' cleaning instructions.
- Wear personal protective equipment, gloves, and aprons as appropriate.
- Wipe all surfaces including underneath, paying special attention to 'contact' points.
- Apply colour coding policy.
- Always comply with health and safety policies: COSHH (refer to data/assessment sheets);
Electrical equipment (switch off appliances and unplug)
Manual handling (lift in pairs, empty contents wherever possible).
- Always comply with infection control policies and procedures: Good personal hygiene
Safer disposal of clinical waste;
Adherence to standard infection control precautions;
Monitoring of cleaning standards and should be undertaken regularly and written records kept.

Important information

Health & Safety

Every Buddy Support Worker must accept responsibility for his personal safety. Failure to comply with instructions, with written procedures, or with your training will increase the risk of you causing an accident which harms yourself or someone else.

Control of Substances Hazardous to Health (COSHH)

Control of Substances Hazardous to Health (COSHH) risk assessments would have been completed by the prison so make sure that you follow their guidelines as they are a legal requirement.

Remember the following:

When you are doing a cleaning activity:

- Firstly, refer to your task sheet and identify the task to be performed.
- Identify the type of area in which cleaning is to be performed and select the correct colour-coded equipment for the task, by reference to the national colour-coding system.
- Prepare the cleaning equipment in strict accordance with the prison guidance.
- Only use a cleaning product provided by the prison that you have been approved to use.
- Make sure you wash your hands and put on your gloves and apron.
- Plan your work and where necessary temporarily move any items that might obstruct you to a new, safe location.
- Use hazard signs to warn other users of the area in which you are carrying out a cleaning task.
- After use, all equipment should be left clean, dry and tidy in a secure storage area, segregated according to colour-coding where appropriate.
- Dispose of your apron and gloves and WASH YOUR HANDS.

Quick overview of common bacteria and viruses

Viral gastroenteritis/Norovirus

Norovirus is the most common cause of viral gastroenteritis (stomach bug) in the UK. Many people refer to it as gastric flu or winter vomiting. It is a highly infectious virus spreading easily from person-to-person.

Viral gastroenteritis is present in an infected person's vomit and faeces. A person is infected after swallowing the virus, which usually happens by a hand to mouth action, for example when eating.

Viral gastroenteritis is spread by:

- Contaminated hands
- Contaminated surfaces and equipment
- Contaminated food- if the person making the food has it.

Helping to prevent the spread of viral gastroenteritis

- If you suspect an outbreak make sure you report it to your supervisor (Wing Officer, Health Care, Social Worker, OT, etc.) as soon as possible. They will then be able to follow the prison's policy and procedure to contain this as soon as possible.
- Make sure that you use disposable aprons and gloves, a new one for contact with each client.
- Effective hand hygiene is essential, liquid soap and paper towels are more effective than hand rub. Hand rub is only partially effective at killing viral gastroenteritis. Encourage your client to wash their hands.
- It is advised to not use the same cleaning equipment in different client's rooms, as this could spread infection.
- Make sure that you follow whatever procedure the prison puts in place to reduce the spread of this.

Clostridium difficile

Clostridium difficile is the leading cause of infectious diarrhoea. The bacteria can be found in our guts and when we are given antibiotics or other medication it can disturb the balance of bacteria in the gut and can multiply rapidly producing poisonous toxins that cause diarrhoea or inflammation of the bowel.

People most at risk are usually those over the age of 65 and who have had:

- recent hospital treatment,
- recent antibiotic treatment
- bowel interventions
- or who have immunity weakness

It is spread by:

- Contaminated hands.
- Contaminated surfaces and equipment- it can live on surfaces for months or even years.

If you suspect someone has this you must report it so they can be monitored by the appropriate professionals.

- Make sure that you use disposable aprons and gloves, a new one for contact with each client.
- Effective hand hygiene is essential – liquid soap and paper towels are more effective than hand rub. Hand rub does not kill spores.
- Encourage your client to wash their hands.
- Encourage drinking fluids to prevent dehydration.

This is guidance only – the prison's procedure will need to be followed even if different to this.

MRSA

MRSA stands for Meticillin Resistant Staphylococcus Aureus. It is a variety of common bacteria Staphylococcus aureus which live harmlessly on the skin and in the nose and throat of about one third of people. MRSA is resistant to some of the commonly used antibiotics.

MRSA prefers to live in the nose, armpit, groin and wounds of people. It can also be found in the environment in dust.

It is usually spread from person-to-person by direct skin contact or by contaminated equipment or surfaces. MRSA can be spread to the next person on hands that have not been washed thoroughly.

People can become infected with MRSA when the bacteria enter the body and causes infection. Signs of an infection include fever, redness, pain, feeling unwell and increased wound discharge.

If you spot this in a client report it as urgent medical advice should be sought.

References:

- The NHS Healthcare cleaning manual
- Devon County Council Preventing Infection workbook