


Infection prevention and control

Best practice advice for nurseries and childcare settings



The background of the entire page is a solid teal color. Scattered across this background are several handprints in three colors: red, yellow, and blue. The handprints are of various sizes and orientations, some appearing as if they are reaching towards the center. A central white box with rounded corners contains text.

Infection prevention and control is everyone's responsibility. This publication has been developed by the Public Health Agency (PHA) to provide nurseries and other childcare settings with infection prevention and control best practice advice.

It will provide staff with simple, practical advice on the day-to-day implementation of good infection prevention and control practices, as well as specific actions to take in the event of outbreaks of infection.

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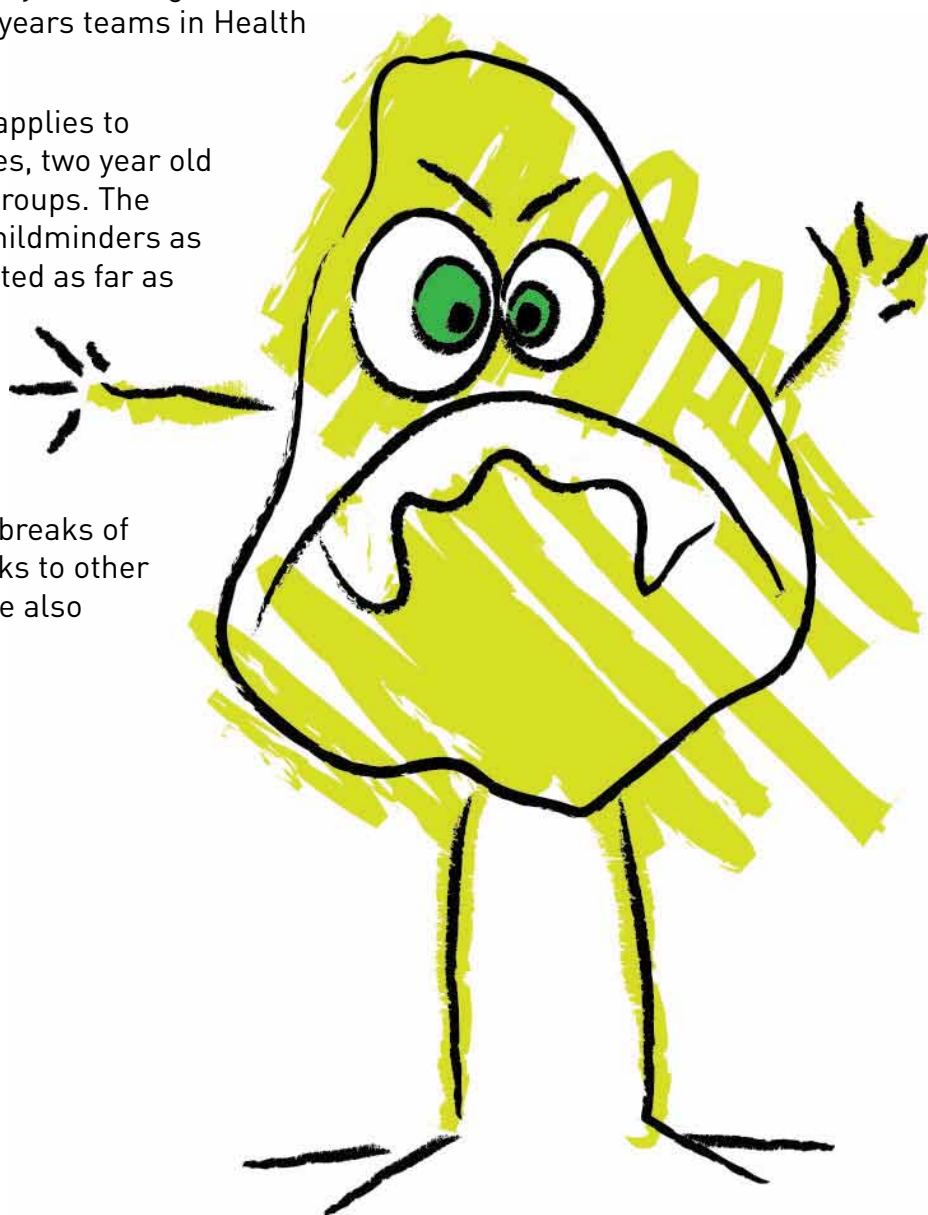
Foreword

It is important that basic infection prevention and control principles are embedded at an early age and simple procedures such as good hand hygiene should be encouraged with children in nurseries and childcare settings.

Outbreaks of infection have occurred in childcare settings and very often when this happens, they attract a high level of publicity. This is a practical guide to preventing and controlling infection, aimed at everyone caring for children and currently registered by early years teams in Health and Social Care Trusts (HSCTs).

The advice within this document applies to playgroups, day nurseries, crèches, two year old programmes and out-of-school groups. The advice is also recommended to childminders as best practice that should be adopted as far as reasonably possible.

General guidance on the day-to-day implementation of good infection prevention and control practices, and specific actions to take in the event of outbreaks of infection, are included. Useful links to other advice and further information are also provided.



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- members of the working group who represented early years teams in HSCTs in Northern Ireland;
- members of the working group who represented environmental health departments from local councils in Northern Ireland;
- health protection staff within the PHA.

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Introduction

Infections can spread easily in childcare settings where large numbers of children, who are vulnerable to infection because their immunity may not be fully developed, come into close contact.

Infection prevention and control in nurseries and childcare settings is a matter of great importance to:

- parents – who want to be assured that the care their children are receiving is provided in a clean, safe environment;
- staff looking after children – who may themselves be exposed to greater risk of infection;
- childcare providers – who have legal responsibilities to ensure the health and safety of their staff and the children for whom they provide childcare services.

Infection prevention and control is everyone's responsibility and we all have an important role to play. Although infections can spread easily in childcare settings, the good news is that controlling the risk of infection is relatively straightforward and simple measures, such as regular hand washing, can usually reduce the risks.

The Control of Substances Hazardous to Health (COSHH) Regulations (NI) 2003

provide a framework of actions designed to control the risk from a range of hazardous substances including biological agents associated with infection. You are therefore legally required to assess risks and implement control measures. This document can be used by you in your risk assessment to determine if the controls you already have in place are adequate. Guidance on COSHH can be obtained from the Health and Safety Executive website at: www.hse.gov.uk/coshh/index.htm or from the environmental health department of your local council.

Remember:

Infections are only one of the hazards that children and staff may be exposed to within childcare settings. For advice on other health and safety hazards and food safety issues, you should contact the environmental health department of your local council.

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Childcare premises are required to register with the environmental health department of their local council at least 28 days before opening and keep them informed of any changes.

Regulation (EC) No. 852/2004 states that the following people are not permitted to handle food or enter any food-handling area in any capacity if there is any likelihood of direct or indirect contamination:

- anyone who suffers from or carries a disease likely to be transmitted through food;
- anyone afflicted with, for example, infected wounds, skin infections, sores or diarrhoea.

Any person so affected and employed in a food business, and who is likely to come into contact with food, is to immediately report the illness or symptoms, and if possible their causes, to the food business operator.

The premises

The layout, design, construction and size of the premises must permit adequate maintenance, cleaning and working spaces.

- The building should be totally pest proof.
- Suitably located wash hand basins should be provided in all areas and supplied with running warm and cold water, soap and disposable hand drying towels.
- There should be suitable lighting and ventilation.
- Facilities should be provided for the storage of cleaning equipment and chemicals.
- Suitable arrangements should be in place for the storage and disposal of waste.
- External waste storage areas should be kept clean and tidy and all waste receptacles should have a tight fitting lid.
- Surfaces should be kept dry and spills should be cleaned up immediately when they occur using appropriate cleaning materials.



Training

It is important that all members of staff have a clear understanding of their role in preventing the spread of infection. Staff should receive appropriate training and supervision. They should be familiar with the policies and procedures that are in place to prevent and control infection in childcare settings. It is important that they receive training on this document and it is recommended that a record of such training is kept.

Glossary of terms

Antibiotic:	A medicine or chemical that can destroy harmful bacteria in the body or limit their growth.
Cleaning:	The removal of dirt from the environment and equipment.
Contamination:	The presence of microorganisms or foreign matter, such as chemical, physical or allergenic materials, on a surface or in a fluid or material.
Decontamination:	The removal of microorganisms or foreign matter (or both) from contaminated materials or living tissue, rendering it safe.
Detergent:	A substance intended to assist cleaning by removing dirt and grease, but which does not reduce microorganisms to a safe level.
Disinfection:	A process that reduces microorganisms to a safe level.
Hypochlorite:	An oxyacid of chlorine (HClO) containing monovalent chlorine, which acts as an oxidising or reducing agent.
Immunisation:	A safe way of protecting people from infectious diseases and the complications that might occur following some infectious diseases.
Immunity:	The resistance of a host to a specific infectious agent.
Medication:	A drug or other substance that is used as a medicine.
Microorganism:	A microscopic entity capable of replication. It includes bacteria, viruses and the microscopic forms of algae, fungi, mould and protozoa.
Germ:	A microorganism capable of producing disease.
Pest proof:	Ensuring that premises are protected against the entry of unwanted pests such as rodents.
Vaccine:	A preparation using a non-infectious element or relative of a particular virus or bacteria, and administered with the intention of halting the progress of an infection, or completely preventing it.

General principles of infection prevention and control

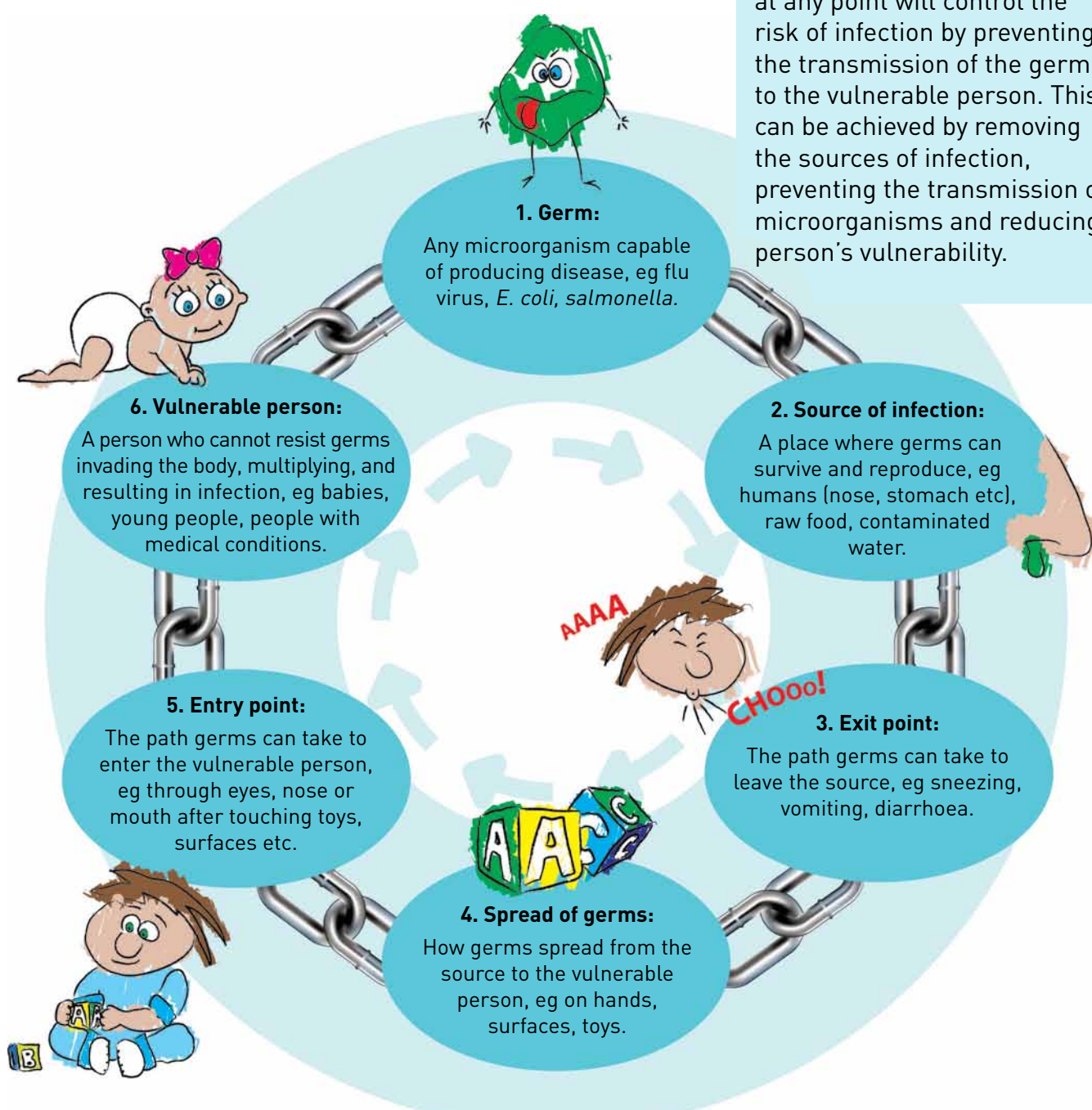
The cause of infection

Infections are caused by microorganisms, including bacteria, fungi and viruses. There are many types of microorganisms. They are found everywhere and most are harmless. However, certain microorganisms, called germs, can cause harm in those vulnerable to infection. Children and those who care for them may be exposed to these harmful microorganisms within childcare settings.

The chain of infection

The process of infection can be represented as a chain, along which microorganisms are transmitted from a source to a vulnerable person.

Breaking a link in this chain at any point will control the risk of infection by preventing the transmission of the germ to the vulnerable person. This can be achieved by removing the sources of infection, preventing the transmission of microorganisms and reducing a person's vulnerability.



Sources of infection

The human body may act as a source of infection. The skin, blood and body fluids may play a key role in the spread of infection. People suffering from certain infections should, therefore, be excluded from the childcare setting (please see sections on 'Exclusion of staff' and 'Exclusion of children').

The environment includes both the physical structure of the premises (internal and external) and the equipment provided for use. The environment must be maintained in a clean condition and all equipment used in it must be capable of being effectively cleaned and, where necessary, disinfected (please see section on 'Decontamination').

Contaminated food and water can be a source of infection in childcare settings. High standards of food hygiene are essential (please see section on 'Food hygiene').

Animals, including pets, can carry microorganisms that cause disease (please see section on 'Pets and farm visits').

Preventing the transmission of microorganisms

For infection to occur, microorganisms have to get from the source to the vulnerable person. However, microorganisms cannot move on their own; they require a vehicle to transfer from the source to the person. The most common vehicles are our hands. Coughs and sneezes are a delivery vehicle for respiratory infections. It is important, therefore, that we take appropriate precautions to prevent the transmission of microorganisms and hand hygiene is the most effective means of preventing the spread of infections (please see section on 'Hand hygiene').

Reducing a person's vulnerability

Once microorganisms have reached a person, they must be able to enter the body to cause infection. The skin and the linings of the mouth, throat, gut and airways all provide a barrier to infection. It is important, therefore, to cover all cuts and abrasions with a waterproof dressing. If a microorganism does manage to cross the barrier, the next line of defence is the immune system. The outward signs and symptoms of disease, such as fevers or rashes, are a result of this contest. Immunisation is a safe and effective way of reducing the vulnerability of people to infection (please see section on 'Immunisation').

Hand hygiene

The importance of correct hand washing must be taught and reinforced to all staff and children. Suitable and sufficient hand washing facilities should be provided for effective hand hygiene. There should be designated wash hand basins, which should not be used for any other purpose such as food preparation or cleaning of equipment.

Children need to be encouraged to wash their hands, especially before eating and after visiting the toilet. Sinks, soap dispensers and paper towel dispensers should be placed at a suitable height for children. Children will require supervision, appropriate to their stage of development, to ensure good practice.

Hands should be washed using warm water and liquid soap, and dried using a disposable paper towel. Disposable paper towels should be stored in a dispenser to avoid contamination. Cloth and cotton towels should not be used as they allow the spread of microorganisms. Liquid soap should be used rather than bar soap as bar soaps are likely to become contaminated and harbour microorganisms.

Fingernails, in between fingers, thumbs and wrists are the most frequently missed areas of the hand. The seven steps of correct hand washing are illustrated in the diagram on page 13. It is recommended that a copy of this seven step technique is displayed at wash hand basins.

To facilitate effective hand hygiene while working in childcare settings, staff should do the following:

- Wear sleeves above the elbow. If wearing long sleeves, these should be rolled up to the elbows.
- Remove any hand or wrist jewellery with the exception of one plain band.
- Keep nails short and clean. False nails and nail varnish should not be worn.
- Do not use nail brushes. If you must use a bowl of water to wash children's hands, you should put fresh water in the bowl for each child.
- Keep cuts and abrasions covered with a waterproof dressing.



When should hands be washed?

- After arriving at work.
- Whenever they are visibly dirty.
- After using the toilet.
- Before preparing, serving and eating food.
- After touching any potentially contaminated surfaces.
- After sneezing or blowing your nose.
- After handling pets.
- Before and after messy play.
- After handling soiled clothing.
- After dealing with waste.
- After handling any body fluids.
- Before and after nappy changing.
- At the end of the working day.
- After removing personal protective equipment.
- At any other appropriate times throughout the day.

How should hands be washed?

- Wet hands under warm running water.
- Apply liquid soap.
- Rub hands following the seven step technique as illustrated in the diagram.
- Rinse hands thoroughly under warm running water, ensuring all soap is removed.
- Dry hands thoroughly using a disposable paper towel.
- Use paper towel to turn off the taps if the taps are not elbow operated.
- Dispose of paper towel into a foot operated pedal bin to prevent recontamination of hands from touching the lid.

Remember:

Hand washing is the single most important measure for preventing the transmission of infection.

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Children should be encouraged to learn the basic principles of good hygiene. One of the most important principles is hand washing and it should be adequately supervised by staff.

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Effective hand drying is just as important as washing because wet hands and surfaces transfer microorganisms more easily than dry ones.

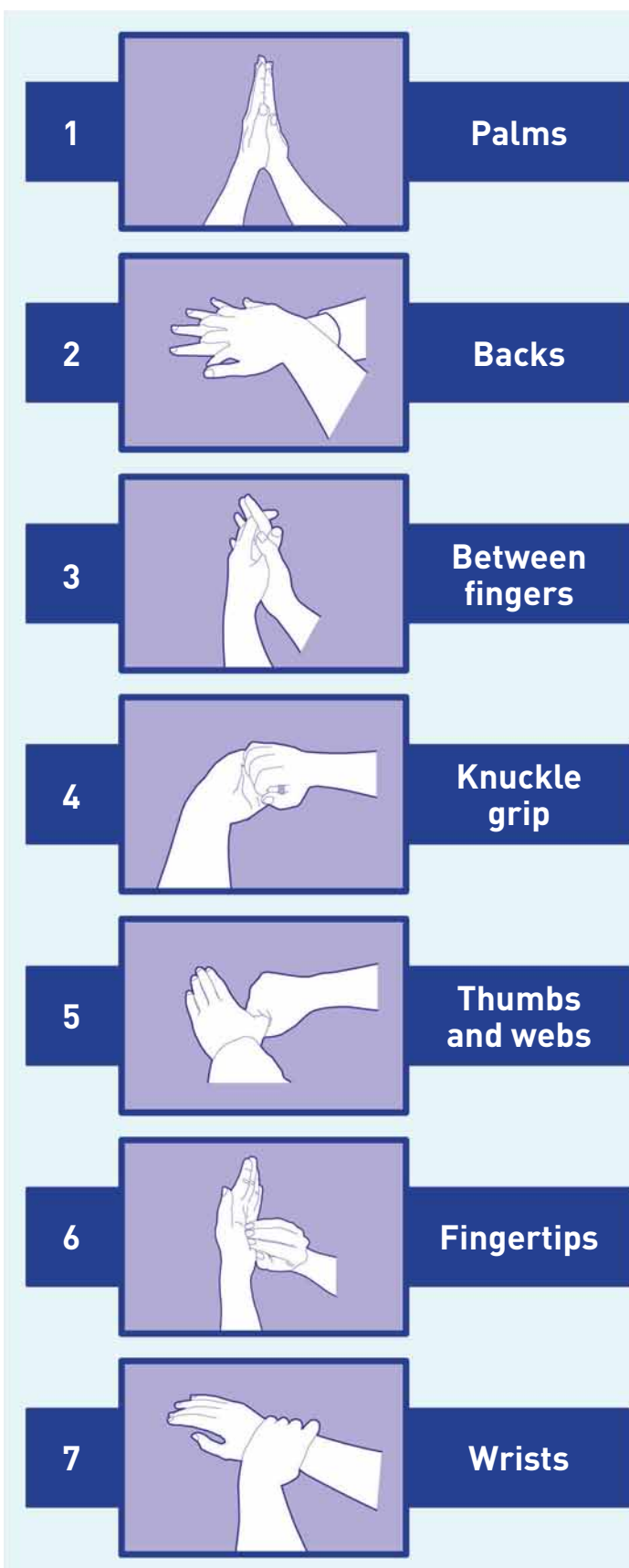
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Staff should look after their hands. Individual hand moisturisers may be used on a personal basis.

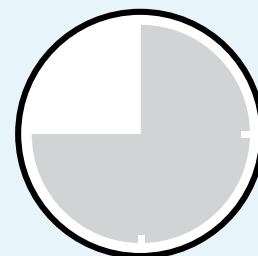
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Wash hand basins should be used for hand washing only. No plug should be present and elbow operated taps are preferable.

Hand hygiene



45 seconds



How should hands be washed?

- Wet hands under warm running water.
- Apply liquid soap.
- Rub hands following the seven step technique as illustrated in the diagram.
- Rinse hands thoroughly under warm running water, ensuring all soap is removed.
- Dry hands thoroughly using a disposable paper towel.
- Use paper towel to turn off taps if taps are not elbow operated.
- Dispose of paper towel into a foot operated pedal bin to prevent recontamination of hands from touching the lid.

Exclusion of staff

Staff with infections can place children at risk, therefore staff suffering from particular conditions must be excluded from their work.

Staff who present with vomiting and/or diarrhoea should be excluded until they are free from symptoms for a period of 48 hours, with at least one formed motion during this time.

Staff with infected wounds or skin infections on exposed parts of their body should be similarly excluded until the lesions have healed or they have been advised by their GP that it is safe for them to return to work.

Staff with minor respiratory conditions, where there is potential to spread infections such as colds, must exercise good respiratory cough etiquette including good hand hygiene. Staff with influenza, however, should be excluded from work until their symptoms have resolved.

Remember:

All staff who present with vomiting and/or diarrhoea must inform their supervisor or manager immediately so they can be excluded.

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All childcare settings should have a staff exclusion policy in place and all staff should be aware of its existence and comply with it.

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Further information on respiratory hygiene/cough etiquette is available at:

www.cdc.gov/flu/professionals/infectioncontrol/resphygiene.htm



Exclusion of children

Infections are common among children, and childcare settings often present ideal situations for infections to spread. It is important that an exclusion policy is in place.

- Children who are ill should not attend childcare. If a child becomes ill while in childcare, a parent/guardian should be contacted and asked to take the child home as soon as possible. The child should be isolated from other children and closely monitored by a member of staff until they are collected by a parent/guardian.
- Children with diarrhoea and/or vomiting illnesses should not be present in childcare settings. Concerned parents/guardians should contact their GP for advice regarding the child's illness and, if possible, submit a faecal/vomit sample for testing. The exclusion period should last until the child has been free of symptoms of diarrhoea and/or vomiting for at least 48 hours, and has had at least one normal motion.
- The childcare setting operator/manager should inform the PHA if a child has been excluded from the nursery due to an infection.
- Parents/guardians should be advised if there are known cases of infection within the childcare setting. Confidentiality of cases should be maintained at all times. It is particularly important that the parents of children whose immunity may be impaired due to illness or treatment (eg leukaemia, HIV, those on steroid therapy) are provided with this information.
- It is also important that mothers and staff who are pregnant are made aware of the following infections: chickenpox, measles, rubella and slapped cheek syndrome (Fifth disease). They should consult with their GP if they have any concerns.
- It is good practice that if a child requires antibiotics, they should be excluded from the childcare setting until they have completed at least 48 hours of the treatment. It may take the child much longer to recover from some infections and feel well enough to attend childcare. Other infections are subject to specific exclusion advice.

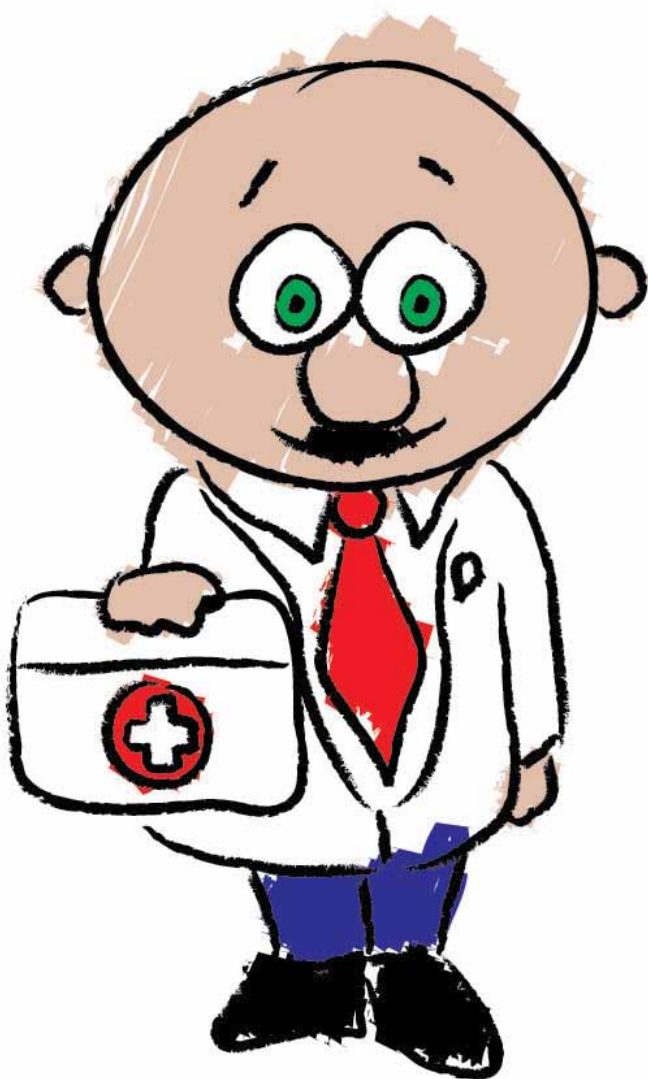
Remember:

All parents/guardians should be made aware of the exclusion policy in the childcare setting. It is the responsibility of the childcare staff to implement it.

Immunisation

Immunity is the ability of the body to protect itself from infectious disease. Vaccines give long-term protection from a variety of infectious diseases. Immunisation or vaccination is a safe way of protecting people from infectious diseases and the complications that might occur following some infectious diseases.

It is good practice to ensure that all children are up-to-date with the recommended vaccinations. Please see the PHA website www.publichealth.hscni.net to access the routine childhood immunisation schedule. Advise parents to contact their GP regarding any missed immunisations.



Remember:

Some infectious diseases, eg chickenpox, measles, rubella and slapped cheek syndrome (Fifth disease), may pose a risk to pregnant women, who are not immune to these infections. Women, including childcare staff, who may be at risk and are exposed to or develop these diseases during pregnancy should seek advice from their GP, midwife or obstetrician urgently.

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Staff working in a childcare setting should ensure they are up-to-date with their recommended immunisations. Please note that two doses of MMR vaccine are required to achieve protection against measles, mumps and rubella.

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Further information on immunisation is available from the following websites:

www.publichealth.hscni.net

www.nhs.uk/Planners/vaccinations/Pages/Landing.aspx

www.dh.gov.uk/en/Publichealth/Immunisation/Greenbook/index.htm

Decontamination

A clean environment is essential in preventing the spread of infection. It is important that the environment is well maintained and any damaged surfaces are replaced.

Detergent and warm water are adequate for most cleaning. A detergent is a chemical that breaks down dirt and grease and facilitates cleaning. However, occasionally disinfection is also required.

Disinfection is the process of reducing microorganisms to a safe level. Disinfectant chemicals or steam may be used for this purpose. To be effective, surfaces that are to be disinfected must be thoroughly cleaned first. Disinfectants must be applied for the correct period of time (contact time) and at the correct strength (concentration). Check the label for the manufacturer's instructions. It is recommended that childcare settings use a hypochlorite (bleach) solution and dilute as per the manufacturer's instructions.

Keeping it clean

- Carpeted areas and mats are not recommended but, where present, should be regularly vacuumed and periodically steam cleaned.
- High chairs and other furniture should be maintained in a clean condition.
- To prevent cross-contamination, use separate cleaning equipment for all areas, eg play areas, toilets, kitchens. A standard colour coding system is a useful way of achieving this.
- In the event of children vomiting or having diarrhoea, it is important to clean and disinfect the affected area. Cloths used for cleaning may become vehicles for contamination and should be disposable. They should be discarded after use.
- If non-disposable cloths are used, these should be machine washed on a hot cycle at the end of each day.
- Mop heads should be detachable and machine washable and they should be replaced regularly. They should also be stored inverted to allow for drying. Mop buckets should be cleaned following use, then dried and stored upside down in a designated area.

Remember:

All childcare settings should have a written cleaning schedule, detailing what has to be cleaned, when it has to be cleaned, how it has to be cleaned and who is responsible for cleaning.

Floors, where young children crawl and play, may present a higher risk of infection and will require more regular cleaning.

Practice a 'clean as you go' policy at all times, ie clean up spillages etc immediately as they occur.

Frequently touched surfaces, eg toilet handles, door handles, light switches and taps, may require more regular cleaning or disinfection.

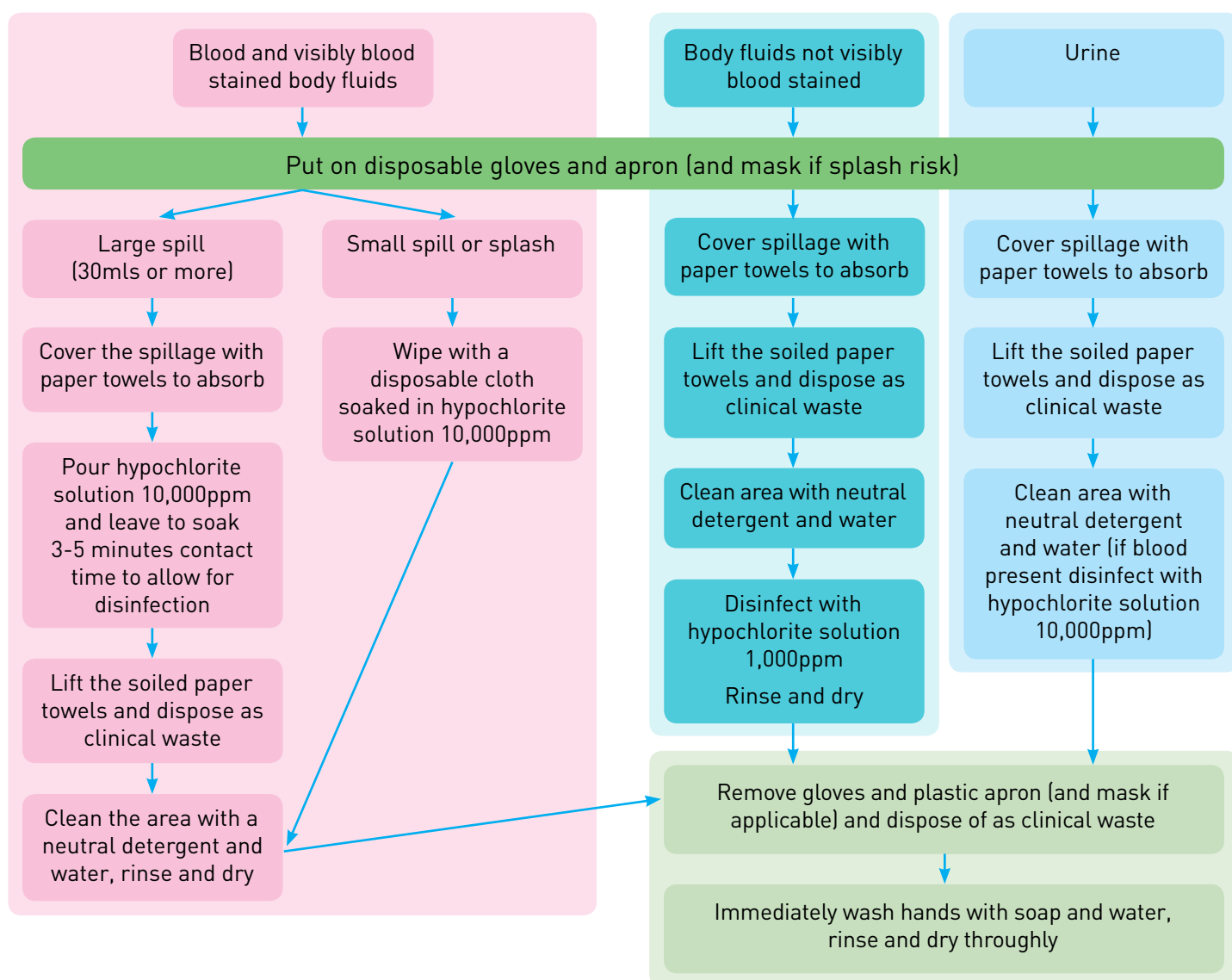
Cleaning of blood and other body fluids

Blood and other body fluid spillages (eg vomit and faeces) may pose a risk of infection to children and staff and, therefore, must be cleaned up immediately. Spillage kits are advised for use when required. These kits can be purchased or made up. The following flowchart outlines what actions should be taken:

Remember:

Spillage kits should contain plastic bags, disposable gloves and aprons, disposable cloths, paper towels and a hypochlorite disinfectant.

It is recommended that all childcare settings have a disinfection policy in place for cleaning up blood and body fluids.



Toys and play equipment

Toys are very important for the social and educational development of a child. However, they can become contaminated with microorganisms from unwashed hands and body fluids. Safety should be one of the main considerations when choosing toys and play equipment for childcare settings.

Do



Ensure that all toys and play equipment in the childcare setting can be easily cleaned/decontaminated.

Have a clear cleaning schedule in place explaining when and how toys and play equipment should be cleaned, what cleaning products are required and who is responsible for cleaning.

Refer to the manufacturer's instructions when cleaning toys and play equipment.

Check toys regularly for damage and discard them if required.

Hard/plastic toys should be cleaned and disinfected. They should be thoroughly rinsed and dried.

Wash soft toys in a washing machine at the highest possible temperature, as per the manufacturer's instructions.

Store all toys in a closed cupboard or in clean washable containers.

Toys that are visibly soiled should be removed from the play area and cleaned and disinfected immediately as per the manufacturer's instructions.

Water play pools should be emptied after every use, cleaned with warm soapy water, disinfected and thoroughly dried.

Sand pits should be covered when not in use, cleaned regularly and the sand replaced as necessary (at least every three months). Sand that spills onto the floor should be discarded and sand should be sieved regularly.

Ensure hands are washed and skin lesions are covered before and after using play dough/Plasticine. Ideally, play dough should be prepared and discarded on the day of use.

Don't



Put toys back into storage if they are visibly dirty.

Keep toys with sharp edges or rough surfaces that are difficult to clean.

Remember:

It is important that hands are washed with soap and water after any outdoor activity.

Hands should be washed with soap and water before and after playing with sand, water and play dough.

Children should not take toys into the toilet area.

Follow the manufacturer's instructions when washing toys.

Discourage children from putting shared toys into their mouths – wash hands correctly after touching any contaminated toys.

A written record of cleaning toys should be kept on display. This should include the date, toy cleaned and signature of the person who cleaned the toy.

Children's personal items

Children's personal items should not be shared with other children. All personal items should be stored in an appropriate container displaying the child's name.

Toothbrushes and dental hygiene

- It is important to encourage children to brush their teeth but staff must be aware that a toothbrush could transmit infection.
- Each child should have their own toothbrush and children should not be allowed to share or borrow toothbrushes.
- Appropriate amounts of toothpaste should be dispensed onto a clean surface, eg paper towel or plate, before being collected on the toothbrush. There should be sufficient space between the toothpaste to allow collection without cross-contamination.
- Children should not be permitted to eat or lick toothpaste from the tube.
- After use, toothbrushes should be thoroughly rinsed. Allow them to air-dry, storing them in an upright position with sufficient space between them to avoid cross-contamination with other toothbrushes.
- Toothbrush holders should be cleaned regularly and toothbrushes should be replaced every three to four months, or sooner if bristles appear worn or splayed.
- Ensure toothbrushes and toothpaste are stored where they are protected from contamination, ie not in the toilet area.

Remember:

The appropriate amounts of fluoride toothpaste are:

- children aged under three years should use no more than a smear of toothpaste containing no less than 1,000 parts per million fluoride;
- children aged three years and over should use no more than a pea-sized amount of toothpaste containing no less than 1,000 parts per million fluoride.

Encourage children to brush each surface of every tooth.

Encourage children to spit out toothpaste residue after brushing and discourage them from swallowing toothpaste.



Dummies

- Dummies/teething rings should be clearly labelled for each child.
- Sharing of dummies/teething rings should not be allowed as this could transmit infection.
- If a dummy/teething ring falls on the floor, it should be washed and disinfected before the child puts it back in their mouth.
- Dummies/teething rings should be stored in a clean dry container when not being used. The container should be clearly labelled with the child's name.



Medication

- Parents/guardians who leave medication into the childcare setting should be asked to leave the complete packaging with clear instructions.
- Medication to be taken by a child must be clearly labelled with the child's name, the dosage to be taken and the time it is to be taken.
- Medications should never be shared with other children.
- Children should only be given medication that has been prescribed by a doctor. Non-prescribed medication should only be given with parental/guardian consent.

Toilets, potties and nappy changing

Toilets

Children will only develop good hygiene practices when using the toilet if they are provided with the appropriate advice and adequate facilities.

- Toilet areas should be kept clean at all times as they are likely to be contaminated with microorganisms. Toilet areas should be checked regularly throughout the day and cleaned and disinfected as required (this includes door handles, taps and flush handles).
- Young children should be supervised when using the toilet and washing their hands.
- Child-size toilets should be available for young children and all toilets should be fitted with a toilet seat and lid to minimise aerosol spread of contents when flushing.
- There should be adequate supplies of toilet tissue in all toilets.
- Wash hand basins should be at a suitable height for children.

Potties

Potties should be kept in the toilet area and should not be allowed in the play area.

- After use, the contents of the potty should be emptied down the toilet (turn head away when emptying potty contents). The toilet lid should be closed before flushing to minimise aerosol spread of contents.
- After emptying, potties should be washed, disinfected and dried thoroughly with disposable towels/roll. Hands should then be washed with soap and water.
- Potties should be stored separately upside down and not stacked inside one another.
- Potties should not be washed in wash hand basins.
- Potties that are cracked or damaged should be disposed of as they cannot be cleaned effectively.
- Individual children's potties eliminate the risk of spreading infection to other children and should be considered.
- Children should be discouraged from playing with toys in the toilet or potty area. If toys are used in this area during potty training, they must be cleaned and disinfected after use.

Remember:

Children should be supervised to ensure that they wash their hands after using the toilet or a potty.

Hand washing facilities should be available in the immediate nappy changing area.

Wearing gloves is not a substitute for hand hygiene and hands should be washed immediately after gloves have been removed.

Parents/guardians should be informed if a nappy rash appears.

Individual creams and lotions should be labelled with the child's name and never be shared with other babies/children.

Nappies

All childcare settings that accept children who are still in nappies must have appropriate designated facilities for nappy changing. These facilities must be separate to food preparation and serving areas and children's play areas.

- It is recommended that a new disposable apron and pair of gloves are worn for each nappy change.
- Put on gloves and an apron immediately before the task and remove them as soon as the task is complete.
- Always wash hands before and after using gloves.
- Changing mats should have a sealed plastic covering and be frequently checked for cracks or tears. If cracks or tears are found, the mat should be discarded.
- The mat should be cleaned, disinfected and dried thoroughly after each nappy change.
- Disposable towels/roll should be placed on top of the changing mat for added protection. These disposable towels/roll must be discarded after each nappy change.
- Clean nappies should be stored in a clean dry place.
- Soiled nappies should be placed in a 'nappy sack' or plastic bag before being placed in the bin. Bins need to be foot-pedal operated, regularly emptied and placed in an appropriate waste collection area.
- Each child should have their own creams and lotions. These can be supplied by the parent/guardian and should be clearly labelled with the child's name. When applying creams for rashes, a gloved hand or spatula should be used.
- Staff should ensure they have all the equipment they need and access to fresh water before each nappy change.
- Children or babies should never be left alone on a nappy changing table/bench.



Laundry and children's clothing

Laundry

Linen and clothing can be a potential source of infection.

- Laundry should be done in a separate designated area.
- Washing machines should not be located in food preparation areas or children's play areas.
- There should be enough space to keep clean and dirty linen separate.
- There should be adequate drying facilities – a tumble dryer is preferable.
- Sheets used for sleeping mats or cots should be dedicated to an individual child for one week and laundered when required.
- If linen is soiled/infected, it should be placed directly into the washing machine. The laundry operator should wear gloves and a disposable apron and wash their hands properly at appropriate times throughout the course of a shift. If possible, a dedicated wash hand basin should be provided within the laundry.
- Laundering clothes at the highest possible temperature (as per the manufacturer's instructions), tumble drying and ironing is recommended. The heat involved in all of these processes will help kill any microorganisms that may be present.

Remember:

Do not rinse, soak or wash soiled children's clothing.

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All childcare settings should have a laundry policy in place.

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Laundry equipment should be regularly serviced and records of this servicing should be kept.

Children's personal clothing

- When handling soiled children's clothing, staff should always wear gloves and a disposable apron.
- Soiled items should be placed into a clear plastic bag and sealed. Bags should be stored in a safe place, away from food preparation and eating areas and children's play areas.
- Explain to parents that washing the clothes in childcare settings can expose children and staff to microorganisms, which can cause infection. Advise parents that while receiving soiled clothes is unpleasant, this policy protects the health of both children and staff.

Food hygiene

Food hygiene is essential to prevent the spread of gastrointestinal infections. For information on any food safety issues, contact the environmental health department of your local council.

Formula milk

Before you prepare a feed, you should clean worktops and wash your hands. You should clean and sterilise bottles and teats before you use them. Follow the manufacturer's instructions on how to do this. For more information on sterilising bottles, see the PHA's bottlefeeding leaflet at: www.publichealth.hscni.net/publications/bottlefeeding-0

Ideally, you should make up formula milk freshly for each feed. If there is any made-up formula milk left after a feed, throw it away.

When preparing a feed, boil fresh tap water and let it cool. Always put the boiled water in the bottle before adding the powder. Cool the formula quickly to feeding temperature by holding the bottle under cold running water (with the cap on).



Remember:

Any disinfectant or sanitiser used within the kitchen environment must meet the official standards of BS EN1276: 1997 or BS EN13697: 2001.

People employed specifically for the preparation and cooking of food should not be involved in cleaning duties in the nappy changing and toilet areas.

For more information on good food hygiene and keeping food safe, refer to: www.food.gov.uk/goodbusiness

General information on food hygiene is available at: www.food.gov.uk/

Baby food

If you are using bought baby food, follow the manufacturer's instructions on preparation, storage and serving. If you make your own baby food (or a parent/carer brings home-made baby food), it is very important to cook, cool, store, defrost and reheat it safely.

Pets and farm visits

While children can get much pleasure and educational benefit from pets, these animals can be a potential source of infection. It is important, therefore, that appropriate hygiene practices are followed.

- Give someone responsibility to look after pets.
- If any pets appear unwell, do not allow children to play with them and seek veterinary advice.
- Maintain pets' living areas in a clean condition.
- Wash your hands after contact with pets.
- Always supervise children when they are with pets.
- Ensure children are aware that pets can carry microorganisms and that they should always wash their hands after any contact with them.
- Discourage children from kissing pets and allowing pets to lick their face.
- Keep pets out of the kitchen and away from all surfaces where food is prepared or consumed.
- Animal food must not be stored with food intended for human consumption.

Visits involving animals

Visits to farms and zoos are both educational and enjoyable for children, but it should be remembered that animals carry many different infectious diseases, some of which can be passed to humans. It is essential, therefore, that hygiene precautions, ie hand hygiene, are taken during and after such visits. It is advised that prior to any visit, a risk assessment of the premises should be undertaken.



Remember:

Touching or feeding farm animals can be a source of life-threatening infection, particularly in young children. The only way to eliminate this risk entirely is for children to avoid contact with animals and their faeces. It is the carer's choice whether the child is allowed to touch or feed the animals.

Carers should supervise the washing of children's hands immediately after leaving the animal contact area, before eating or drinking on the farm, and after removing footwear.

Sanitising hand gels do not provide adequate protection alone. They are not a substitute for thorough hand washing with soap and water.

This advice is also relevant in situations where animals are taken into nurseries and childcare settings.

Further information on pets and farm visits is available from the following websites:

www.hse.gov.uk
www.hseni.gov.uk
www.safefood.eu

The Health and Safety Executive (HSE) information sheet *Preventing or controlling ill health from animal contact at visitor attractions* is also available at: www.hseni.gov.uk/news.htm?id=8897&preventing-or-controlling-ill-health-from-animal-contact-at-visitor-attractions

Outbreaks of infection

An outbreak is defined as ***“having two or more children or staff with an infection, caused by the same microorganism, at the same time in the same place”***.

However, a single case of a serious disease may also require an outbreak response, eg *E. coli* O157, diphtheria or measles.

If you suspect there is an outbreak of infection, you should contact the health protection duty room at the PHA.

Remember:

If more than one child or staff member experiences symptoms of diarrhoea and/or vomiting, and there is a possibility that the illness is food-related, your local environmental health officer will be informed by the health protection duty room at the PHA.

Health protection duty room

Public Health Agency
4th Floor, 12–22 Linenhall Street, Belfast BT2 8BS

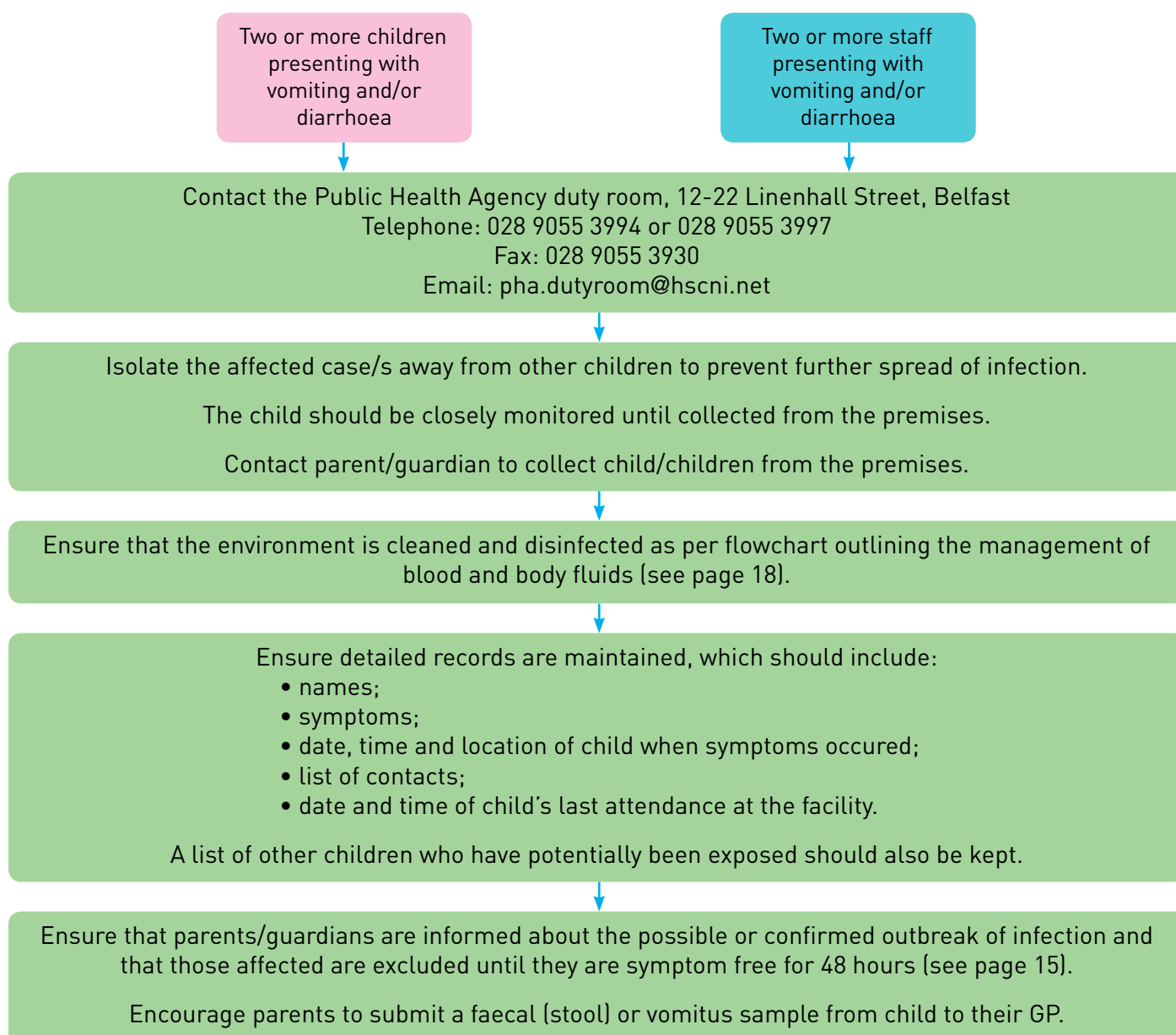
Open 9am–5pm Monday to Friday
Tel: 028 9055 3994 or 028 9055 3997
Fax: 028 9055 3930
E-mail: pha.dutyroom@hscni.net

Out of hours (evenings, weekends and bank holidays):
contact Belfast Ambulance Control on 028 9040 4045
and ask them to page the first on-call public health doctor.

Examples of when this would be appropriate are:

- a sudden increase in the number of absent children or staff with symptoms of diarrhoea and/or vomiting;
- more than one parent advising the childcare setting that their child has symptoms of diarrhoea and/or vomiting;
- more than one member of staff advising the childcare setting that they have symptoms of diarrhoea and/or vomiting;
- more than one child or staff member exhibiting similar symptoms of an undiagnosed rash;
- more than one child or staff member exhibiting similar symptoms of any other kind.

The following flowchart outlines the actions to be taken if an outbreak of infection is suspected or confirmed:



Bibliography

Western Health and Social Care Trust. Infection control guidelines for child care settings. Available at: www.westerntrust.hscni.net/pdf/Infection_Control_Guidelines_for_Child_Care_Settings.pdf Accessed 14 October 2010.

Health and Safety Executive. Control of Substances Hazardous to Health (COSHH). Available at: www.hse.gov.uk/coshh/index.htm Accessed 18 October 2010.

Food Standards Agency. Regulation (EC) 852/2004 on the hygiene of foodstuffs. Available at: www.food.gov.uk/foodindustry/regulation/europeleg/eufoodhygieneleg/ Accessed 18 October 2010.

Department of Health, Social Services and Public Safety. The Northern Ireland Regional Infection Prevention and Control Manual. October 2008. Available at: www.infectioncontrolmanual.co.ni Accessed 8 October 2010.

Health Protection Agency. Guidance on infection control in schools and other childcare settings. April 2010. Available at: www.hpa.org.uk/web/HPAwebFile/HPAweb_C/1194947358374 Accessed 8 October 2010.

Centers for Disease Control and Prevention. Respiratory hygiene/cough etiquette in healthcare settings. 1 August 2009. Available at: www.cdc.gov/flu/professionals/infectioncontrol/resphgiene.htm Accessed 27 October 2010.

Food Standards Agency. Safer food, better business. Available at: www.food.gov.uk/ Accessed 1 November 2010.

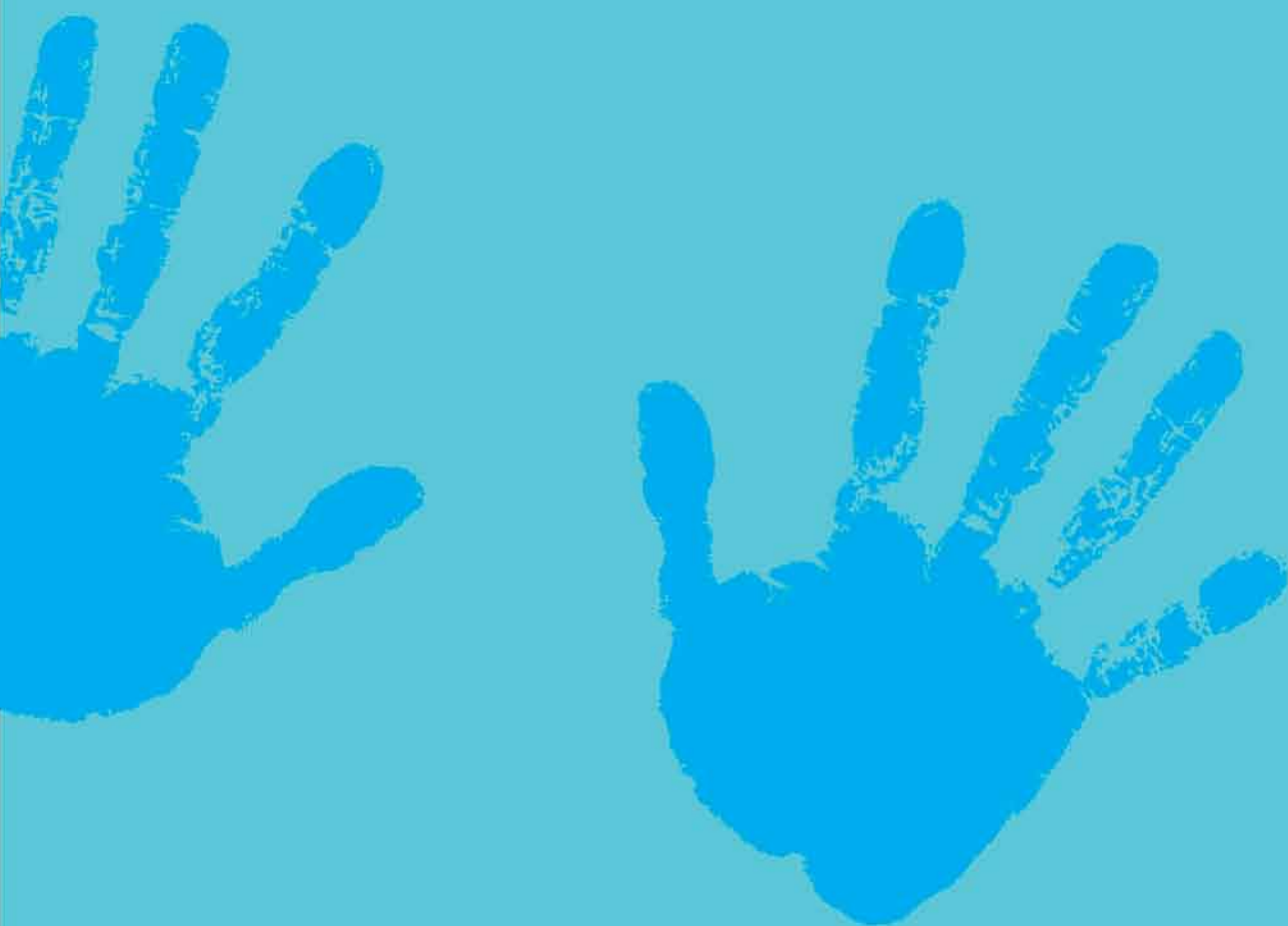
Public Health Agency. Bottlefeeding. February 2011. Available at: www.publichealth.hscni.net/publications/bottlefeeding-0 Accessed 26 November 2010.

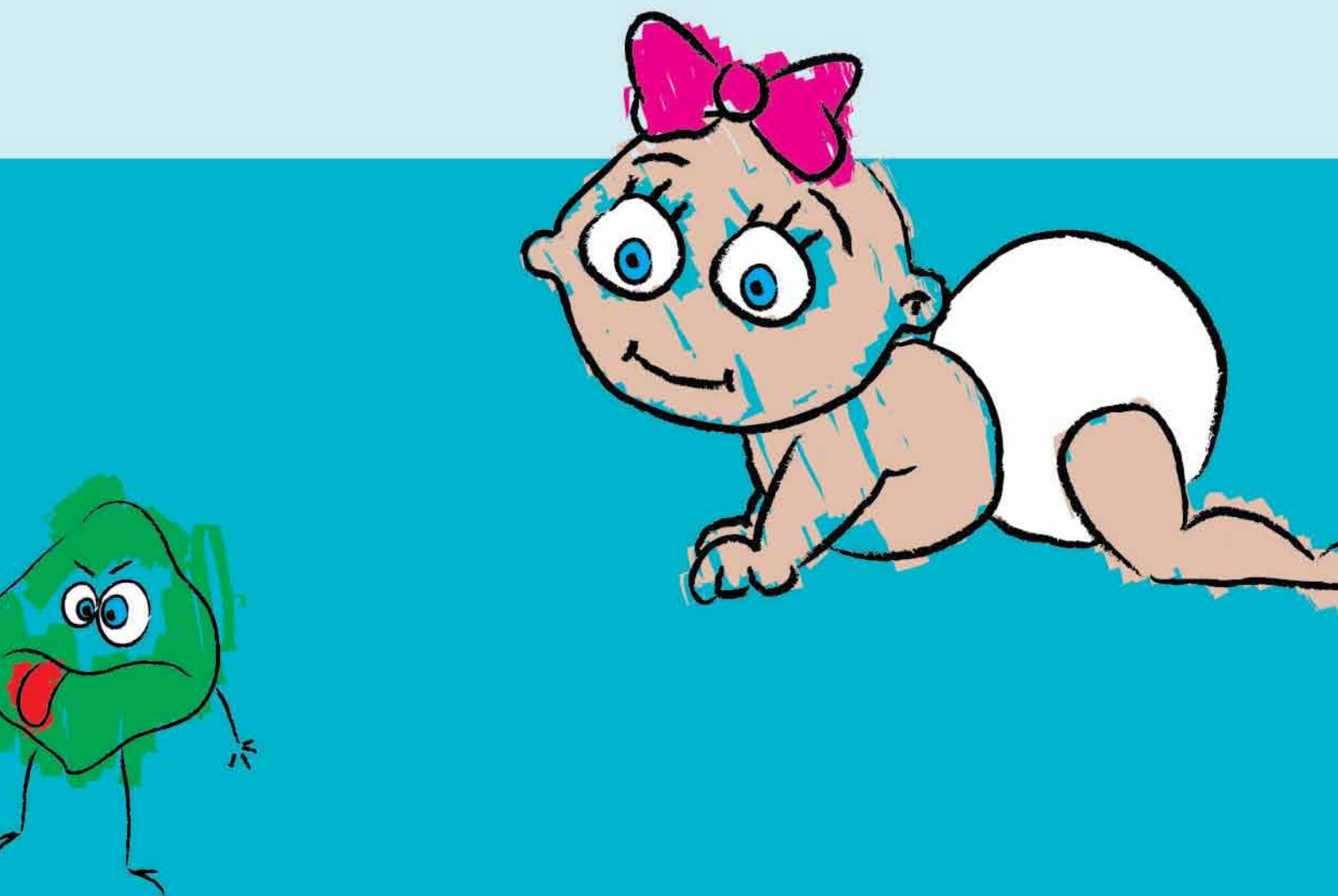
Health and Safety Executive. Preventing or controlling ill health from animal contact at visitor attractions. March 2011. Available at: www.hse.gov.uk/pubns/ais23.pdf Accessed 3 December 2010.



Contact details for Health and Social Care (HSC) early years teams

HSCT	Early years contact	
Belfast HSCT	Hilary Walker Fairview 1 Mater Hospital Site 47/51 Crumlin Road Belfast BT14 6AB	Tel: 028 9080 3606 Email: hilary.walker@belfasttrust.hscni.net
Northern HSCT	Kate Kelly Alder House Antrim Area Hospital Site Bush Road Antrim BT41 2QB	Tel: 028 9442 4600 Email: kate.kelly@northerntrust.hscni.net
South Eastern HSCT	Philip Friel Bangor Admin Building Newtownards Road Bangor BT20 4LB	Tel: 028 9146 8521 Email: philip.friel@setrust.hscni.net
Southern HSCT	Ciaran Eastwood Southern Health and Social Care Trust 2 Old Lurgan Road Portadown County Armagh BT62 5SG	Tel: 028 3833 3747 Email: ciaran.eastwood@southerntrust.hscni.net
Western HSCT	Pat Armstrong Western Health and Social Care Trust Riverview House Abercorn Road Londonderry BT48 6SB	Tel: 028 7127 2112 Email: pat.armstrong@westerntrust.hscni.net





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