

Hygiene



**ASSIGN
BUSTER**

In order to minimise the risk of transmitting infection, sensible good hygiene practices should be followed at all times, as standard practice. GOOD

HYGIENE PRACTICES Good hygiene practices should include the following: 1.

All schools should have clean toilet facilities, with an adequate supply of toilet paper. 2. Good handwashing facilities must be available for both staff and children. 3. Infected dressings or other contaminated materials, should be discarded into a bin or containers filled with a suitable plastic bag liner (YELLOW).

The plastic bag must be securely sealed or tied prior to disposal. In the case of nappies they should first be wrapped in an ECO LINER prior to going in the bag. 4. Razors, toothbrushes or other implements which could become

contaminated with blood must not be shared. FIRST AID CARE The following safe practices should be followed by the person rendering first aid care. 1.

Cover any minor cuts or abrasions on hands and arms with waterproof dressings. 2.

Wash hands thoroughly, using hot running water and soap, after rendering first aid care. 3. Hands should be dried properly, using disposable paper hand towels or hot air hand driers. 4. Minor wounds should be cleaned using clean water and disposable paper towels or tissues. The wound should be dried again using disposable paper towels or tissues.

A first aid plaster or dressing (which is individually wrapped) can be applied if desired. 5. As soon as possible seek medical advice. USE OF GLOVES The use

of gloves for self protection depends on the type and degree of risk that a person may face.

Gloves provide a barrier for the user. However, they are not an alternative to good handwashing practices. There is only likely to be a risk of contacting an infection, if there are open cuts, fresh abrasions or dermatitis (eczema) on the hands, as intact skin provides a barrier to protect against infection. In general, the risk of contracting a blood-borne disease such as human immunodeficiency virus HIV or hepatitis B, from superficial skin contamination by infected blood is extremely small. The most likely risk is that of contracting infection acquired from handling faeces or vomit, which can contaminate the hands, and can be transferred to the mouth either directly or via food. Common examples are dysentery and gastroenteritis, particularly when cleaning up diarrhoea or vomit from a person suffering from the infection.

Gloves are not an alternative to good handwashing practices. Where gloves are used hands must be thoroughly washed following the removal of gloves. HANDWASHING Good handwashing is considered the single most important measure in preventing the spread of infection. Good handwashing facilities must be available for both staff and children. Hot and cold running water with either bar soap or liquid soap must be available for handwashing. Adequate hand drying facilities must be available, this should be either disposable paper hand towels or hot air dryers.

The use of communal cloth towels for hand drying has been associated with the spread of infection and must be discouraged. Younger children should be supervised and helped to wash their hands after using the toilet and before eating meals and snacks. DEALING WITH SPLASHES OF BLOOD FROM ONE CHILD TO ANOTHER 1. Splashes of blood on the skin should be washed off

immediately, with soap and water. Disposable paper towels or tissues should be used.

2. Splashes of blood into the eyes or mouth should be washed out immediately with copious amounts of water. Infected dressings or other materials should be discarded into a bin or container fitted with a suitable plastic bag liner. DEALING WITH NOSE BLEEDS AND CUTS If possible it is advisable to wear disposable gloves when dealing with someone who has a nose bleed or a cut.

The gloves do not need to be sterile, but should be strong enough not to split in normal use. Disposable gloves, once used, should be discarded into a bin which is fitted with a suitable plastic liner. After removing the gloves, hands must be washed using soap and water. DEALING WITH BLOOD OR BLOOD STAINED SPILLS Disposable gloves and plastic apron should be worn.

Spillages of blood should be cleaned up as quickly as possible using either: 1.

Sodium hypochlorite solution (household bleach) freshly diluted 1: 10 in cold water. This solution should be poured over the spill and covered with paper towels. If practical it should be left for 30 minutes before being cleaned up using disposable paper towels. 2. The spillage should be completely covered with sodium hypochlorite granules e. g.

Titan Sanitiser sprinkled over the spillage. It should be left for 3 minutes before being cleaned up using disposable paper towels. The area should then be washed using hot water and general purpose detergent. Paper towels and materials used should be placed in a plastic bag which should be securely sealed before being disposed of with normal school refuse.

N. B. Household bleach or Titan Sanitizer can corrode metal and damage fabrics if used for too long or in the wrong concentration, and must never be used on skin. It must be kept locked away from children. CLEANING UP DIARRHOEA OR VOMIT Wearing ordinary rubber household gloves will give ample protection when used for cleaning up diarrhoea or vomit. Diarrhoea or vomit can be cleaned using disposable paper towels and disposed of into a waste bin fitted with a plastic liner. The area should be decontaminated using either household beach or Titan Sanitizer as described under blood or blood stained spills. GENERAL HYGIENE 1.

Normal cleaning methods should be used. No special disinfectants are necessary for toilets etc. 2.

Use rubber household gloves. 3. Use separate cloths for kitchen, bathroom and for toilet use. 4. Crockery and cutlery can be cleaned either in a dishwasher or by hand using hot water and general purpose detergent.

-----GOOD HYGIENE PRACTICES