

Culford School

Infection Control Policy

Reviewed: Emily Fergus-Hillman June 2026

Next review June 2027

V2.0

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Introduction

The spread of infection is controlled by ensuring high standards of hygiene particularly hand washing, maintaining a clean environment and routine immunisation. People are one of the main sources of infection. Standard Principles help protect from acquiring or passing on infection whether or not a risk is known.

Standard Principles

Hand Washing

Hand-washing is the most effective means of reducing the spread of infections. Its purpose is to remove or destroy any micro-organisms which may be on the hands. Micro-organisms that cause diseases are usually removed easily with thorough hand washing.

- Rub hands together with water and liquid soap, covering the hands with lather for at least 15 seconds. Rinse hands with warm water to remove the lather and then dry thoroughly with a paper towel. Cover all cuts and abrasions with a waterproof dressing.

- Always wash hands after using the toilet, before eating or handling food and after handling animals. Cover all cuts and abrasions with a water proof dressing.

Coughing & Sneezing

Children and adults should be encouraged to cover their mouth and nose with a tissue. Wash hands after disposing of the tissue.

General Cleaning

Under normal circumstances the school's cleaners use a variety of domestic and industrial cleaning agents. These are detergent and alcohol-based products, with COSSH records kept by the Head cleaner. All toilets and kitchen areas are cleaned daily throughout the school, and in boarding houses to a house schedule prepared by the matron. Routine cleaning will be stepped up immediately when there is an outbreak.

Outbreaks

An outbreak is defined as 2 or more persons with the same disease or symptoms at the same time, or a greater than expected rate of infection compared to the normal.

For COVID 19 cases and outbreaks follow the latest UK Health Security Agency advice for schools and residential settings

Who to inform:

- Local Health Protection unit
- Environmental health
- UKHSA (public health)
- SMO

In times of a virus outbreak:

- Nursing staff will inform the School Compliance Officer, Bursar, Head and School Medical Officer

- Nursing staff will inform the Head Cleaner and bleach based products (0.1% solution of chlorine releasing agent) will then be used to clean the bathrooms, toilets, and high touch areas. Cleaning schedules will be reviewed and increased as advised by UKHSA
- Individual schools will be informed of any outbreak and the need for good hand washing can be publicly reiterated
- Nursing staff arrange with IT Services for the promotion of good hand hygiene advice to be displayed on the flat screens around school along with any other appropriate public health messages
- Cleaners will be given appropriate PPE to wear whilst completing her duties
- Nursing staff will wear appropriate disposable PPE (mask, gloves, apron, visors, gown while in the San
- The San will be screened off and visitors prohibited

Further guidelines specific to the Health Centre are laid out in the 'Health Centre Infection Control Policy'

In the event of a significant outbreak:

- UKHSA (Public Health) will be informed by the nursing sister or the S.M.O
- The Head, S.M.O and UKHSA will draft an appropriate letter for parents.
- The Head and UKHSA will arrange appropriate communications with the media.
- The Head will communicate advice from UKHSA (Public Health) to all staff.
- UKHSA (Public Health) will advise on cancellation of sporting fixtures/events with other schools.
- Consider sending home boarders who are not fully vaccinated and /or are immuno-suppressed
- Administrative support will be required to support nursing staff if whole school vaccine programme is advised by UKHSA as consent from parents may be required at short notice to vaccinate pupils.
- Emergency beds may be required in Eastfields, staffed by bank nurses.
- Whole school review of cleaning schedules and increase in cleaning as advised by UKHSA
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Personal Protective Equipment (PPE)

- Gloves: Unpowdered, (single use, disposable) low protein latex gloves are preferable (providing no latex allergies)
- Aprons: single use disposable aprons, to protect clothing if likelihood of splashes with body fluids.
- Masks: can be used when clearing up vomit, use when dealing with suspected flu and COVID 19 cases.
- Visors – to protect eyes from infection
- Gowns – single use clothing protection

Further guidelines specific to the Health Centre are laid out in the 'Health Centre Infection Control Policy'.

Diarrhoea & Vomiting Outbreaks

Commonly caused by a virus called norovirus. This virus can cause widespread infection via the aerosol spread of vomit and by poor hand hygiene (faecal/oral route).

Recommendations

The above actions should be carried out:

- Any person with the symptoms to remain absent from school until 48 hours (for the norovirus) after the last symptoms.
- Any contaminated carpets should be steam cleaned.
- Nursing staff will inform the School Medical Officer, Deputy Head, Head and if deemed appropriate by the S.M.O, UKHSA (Public health) will be informed.

Influenza Outbreaks

Most common during the winter months it is spread by coughing, sneezing and contamination of surfaces and objects from hand contact.

- Encourage good hand washing
- Encourage coughing and sneezing into tissues and ensure easy access to rubbish bins.
- Use cleaning agent 0.1% solution of chlorine to clean all communal areas, particular attention should be given to toilet facilities, flush handles, basins taps and door handles.
- Nursing staff will inform the School Medical Officer, Deputy Head, Head and if deemed appropriate by the S.M.O, UKHSA (Public health) will be informed.

Meningitis

Incidents are almost always isolated. In cases of suspected or confirmed meningitis the Nursing Sister will inform the School Medical Officer and Head immediately. The School Medical Officer will inform UKHSA (Public Health). The Head, S.M.O and UKHSA (Public Health) will together draft an appropriate letter to parents. UKHSA (Public Health) will advise or manage media communications.

Infection Control and First Aid

Standard Principles:

- It is usually not possible to know who is and who is not infected with a transmissible disease or infection such as a blood borne virus, Therefore all body fluids should be regarded as a potential source of infection.
- Thorough hand washing is one of the most effective ways of preventing person to person transmission. Intact skin is an effective barrier; broken skin must be covered with a plaster.
- If possible first aiders should wash their hands before and after attending to a casualty.
- Disposable plastic gloves are present in all first aid kits located around the school site.
- In the event of an emergency where mouth to mouth resuscitation is necessary ideally a protective mask should be used and is available in all first aid kits. However if a mask is not immediately available resuscitation should not be delayed as the likelihood of transmission during this procedure is negligible and the potential benefits outweigh the risk.

Cleaning of Bodily Fluids

This should be carried out without delay by a cleaner or the first available member of staff. If there is a delay cross infection is more likely.

Bio-hazard kits for cleaning up body fluids should be used. These are kept in the following sites around the school:

Fieldgate Office, Boarding Houses, Prep School Office, Main School Reception, Ashby Dinning Hall, Health Centre, Skinner, Hastings, Library, William Miller, Pringle, Sports Centre

- Personal protective equipment should be used when contact with body fluids is anticipated e.g. disposable gloves, disposable aprons, including when there is the risk of splashing and contamination of clothing.
- Masks can be used when clearing up vomit to reduce the risk of airborne transmission.
- Bio-hazard kits contain granules which solidify liquids
- Paper towels should be used to mop up and then discarded in a clinical waste bag, never use mops for cleaning up blood or body fluids
- The area should be cleaned with hot water and detergent to reduce the corrosive effect of the disinfectant.
- Then clean the area with a product that combines a detergent and disinfectant, which is effective against viruses and bacteria e.g. sodium hypochlorite 1% solution (bleach).
- If carpets or upholstery become soiled, they should have most of the body fluid mopped up with paper towels and then be cleaned with a steam cleaner.
- Splashes of body fluids into eyes, mouth and nose should be rinsed out with copious amounts of water or saline. This should be reported to the line manager and should be logged as an accident
- Laundry - soiled linen should be washed separately at the hottest wash fabric will tolerate. It should be placed inside a red plastic bag inside the normal laundry bag in order to alert laundry workers that they are receiving soiled laundry and can use appropriate PPE.

Sharps Injuries and Bites

Sharps include needles, razor blades, broken glass or other items that cause laceration or puncture,

- If the skin is broken encourage bleeding from the wound and wash thoroughly with running water and soap.

- Cover wound with a dressing.

Significant Exposure:

If the injury is a result of a needle stick injury/or exposure to high risk body fluids.

- Encourage bleeding and wash thoroughly for 5 minutes under running cold water.
- Cover wound with a dressing
- Report incident to line manager, the incident should be reported as an accident on Smartlog.
- The injured person should be sent to a GP/A&E for a risk assessment.

Disposal of Sharps and Clinical Waste

Yellow clinical waste bags are present in all first aid kits located around the school site. Clinical waste should be placed in clinical waste bag. This should be securely sealed, clearly labelled and taken as soon as possible to the Health Centre where it will be stored in a locked clinical waste bin until collection by the clinical waste contractors employed by the school.

Culford Nursery and the Sports Centre also have yellow bins (usually to dispose of Nappies)

All sharps must be disposed of in a yellow sharps bin. When the bin is full to the indicator line it should be sealed and the lid re-checked to ensure that it is securely fastened before it is collected by the clinical waste contractor.

Animals in School

Where applicable each School/department must have a risk assessment document in place with consideration to infection control.

Visits to Farms

Risk assessment must be carried out by the member of staff responsible for the trip with consideration to infection control.

Regular hand washing before and after touching animals must be managed with staff and children.

Immunisations

Immunisations should be encouraged as they provide collective protection in communities. On admission to the school pupils/parents must complete a medical form including a full vaccine history. Prior to admission new pupils are encouraged to complete the UK childhood vaccination schedule. Boarders that are registered with the school GP and have not completed the UK childhood vaccination schedule will be offered those particular immunisations in adherence with the schedule.

Staff Immunisation and Health Screening

Staff should consider protecting themselves by being fully up to date with Department of Health recommended routine vaccines.

Staff Pregnancy

Line managers are responsible for carrying out a risk assessment for individuals concerned at the earliest possible time.

UK Health Security Agency

Infection	Public health exclusion period	When to contact your local health protection team
Athlete's foot	No exclusion required	You do not need to contact your health protection team
Chickenpox	Infected people should stay away from the setting until 5 days after the rash first appears	Only contact your local health protection team if scarlet fever and chickenpox are circulating at your setting at the same time within the same group
Chlamydia	No exclusion required	You do not need to contact your health protection team
Cold sores	No exclusion required	You do not need to contact your health protection team
Conjunctivitis (pink eye)	No exclusion required	You do not need to contact your health protection team
COVID-19	Infected people should stay away from the setting if they have more than mild symptoms, for example, a high temperature	Only contact your local health protection team if there's an unusually high number of absences, or if someone is admitted to hospital because of COVID-19
Cryptosporidiosis	Infected people should stay away from the setting until 2 days after diarrhoea and vomiting has stopped	Only contact your local health protection team if there are 2 or more cases at your setting with similar symptoms who are linked
Diarrhoea and vomiting	Infected people should stay away from the setting until 2 days after diarrhoea and vomiting has stopped	Only contact your local health protection team if you need further specialist advice
Diphtheria	Infected people should stay away from the setting until it's been confirmed safe to return by their healthcare professional	Contact your local health protection team
E. coli (STEC)	Infected people should stay away from the setting for 2 days, children under 6 should stay away until it's been confirmed safe to return by their healthcare professional	Contact your local health protection team

Infection	Public health exclusion period	When to contact your local health protection team
Flu (influenza)	Infected people should stay away from the setting until they are better and no longer have a temperature	Only contact your local health protection team if there is increasing absence or serious illness
Food poisoning	Infected people should stay away until 2 days after diarrhoea and vomiting has stopped	Only contact your local health protection team if there are 2 or more people at your setting with similar symptoms who are linked
Genital herpes	No exclusion required	You do not need to contact your health protection team
Genital warts and human papillomavirus (HPV)	No exclusion required	You do not need to contact your health protection team
Giardiasis	Infected people should stay away from the setting until 2 days after their diarrhoea has stopped.	Only contact your local health protection team if there are 2 or more infected people at your setting who are linked
Glandular fever	No exclusion required	You do not need to contact your health protection team
Gonorrhoea	No exclusion required	You do not need to contact your health protection team
Group A strep (GAS) and invasive group A strep (iGAS)	Infected people should stay away from the setting until 24 hours after they started antibiotics treatment	Only contact your local health protection team if anyone has invasive group A strep
Hand, foot and mouth disease	No exclusion required	You do not need to contact your health protection team
Head lice (nits)	No exclusion required	You do not need to contact your health protection team
Hepatitis A	Infected people should stay away from the setting until 7 days after their symptoms started	Only contact your local health protection team if there are 2 or more infected people at your setting who are linked
Hepatitis B	No exclusion required	You do not need to contact your health protection team
Hepatitis C	No exclusion required	You do not need to contact your health protection team
HIV	No exclusion required	You do not need to contact your health protection team

Infection	Public health exclusion period	When to contact your local health protection team
Impetigo	Infected people should stay away from the setting until all blisters have formed scabs or 2 days after starting antibiotics	You do not need to contact your health protection team
Measles	Infected people should stay away from the setting until 4 days after their rash started	Contact your local health protection team
Meningitis and meningococcal meningitis	Infected people should stay away from the setting until they do not have symptoms	Contact your local health protection team
MRSA	No exclusion required	You do not need to contact your health protection team
Mpox	Infected people should stay away from the setting until their healthcare professional confirms its safe for them to return	Contact your local health protection team
Mumps	Infected people should stay away from the setting until 5 days after onset of swelling	Only contact your local health protection team if there's an outbreak at your setting
Norovirus	Infected people should stay away from the setting until 2 days after their diarrhoea and vomiting has stopped	Only contact your local health protection team if you need further specialist advice
PVL-SA	Infected people should stay away from the setting if they have any wounds that cannot be covered with a plaster or bandage	Only contact your local health protection team if there are 2 or more cases at your setting
Respiratory infections	Infected people should stay away from the setting if they have more than mild symptoms, for example, a high temperature	Only contact your local health protection team if there's an unusually high number of absences due to respiratory infections or there's a serious case at your setting
Respiratory syncytial virus (RSV)	Infected people should stay away from the setting if they have more than mild symptoms, for example, a high temperature	Only contact your local health protection team if there's an unusually high number of absences or there's a serious case at your setting
Ringworm	Infected people should stay away from the setting until they have started treatment	You do not need to contact your health protection team

Infection	Public health exclusion period	When to contact your local health protection team
Rotavirus	Infected people should stay away from the setting until 2 days after diarrhoea and vomiting has stopped	You do not need to contact your health protection team
Rubella	Infected people should stay away from the setting until 5 days after their rash started	You do not need to contact your health protection team
Scabies	Infected people who are aged 5 and under, or cannot follow the guidance, should stay away from setting until 24 hours after their first treatment	Only contact your local health protection team if there are 2 or more people at your setting with scabies who are linked
Scarlet fever	Infected people should stay away from the setting until 24 hours after they started antibiotics treatment	Only contact your local health protection team if scarlet fever, chickenpox, or flu are circulating at your setting within the same group at the same time who are linked
Shingles	Infected people should stay away from the setting if their spots cannot be covered or have not formed scabs	You do not need to contact your health protection team
Slapped cheek	No exclusion required	You do not need to contact your health protection team
Threadworms	No exclusion required	You do not need to contact your health protection team
Tuberculosis (TB)	Infected people with active TB should stay away from the setting until 2 weeks after they started antibiotics treatment	Contact your local health protection team if anyone at your setting has TB or suspected TB
Typhoid fever and paratyphoid fever	Infected people should stay away from the setting until 2 days after diarrhoea and vomiting has stopped	Contact your local health protection team
Whooping cough (pertussis)	Infected people should stay away from the setting until they have taken antibiotics for 2 days, or for 21 days from onset of symptoms if no antibiotics	Only contact your local health protection team if there are more than 2 cases at your setting who are linked