Title of Policy:	**Infection Control**
Section:	**Health and Safety**

Purpose

To provide advice and guidance for all employees of Carers Choices so that they may be alert to the causes of infectious diseases and understand how the risks to their health and their Client's health may be reduced.

The purpose of this policy is to:

- Prevent avoidable infections – Infection Prevention and Control (IPC) measures provide evidence-based practices to stop the spread of Health Care Associated Infections (HCAIs), which can cause serious harm or even death.

- Protect people who use our services, as well as staff, visitors and contractors. This policy assists in the safeguarding of vulnerable individuals receiving care and the healthcare workers providing it.

- Ensure quality and safety – without effective IPC, safe and high-quality healthcare cannot be achieved in any setting.

- Policies and best practices set clear standards for hygiene, isolation, decontamination and antimicrobial stewardship across all settings where care and support are provided.

- Legal and regulatory compliance – this ensures Carers Choices meets national and international standards, such as NHS England guidance and WHO recommendations.

- To promote accountability – this policy defines roles and responsibilities for staff, managers and practitioners, ensuring everyone contributes to infection control.

- Support emergency preparedness. They guide healthcare facilities in managing outbreaks, pandemics and other emergency situations.

Statement

Carers Choices is committed to providing safe, high-quality care by minimising the risk of infection to our Client, staff, visitors and contractors. We recognise that effective infection prevention and control is fundamental to Client safety and essential for maintaining public trust in our services. This policy sets out our standards and responsibilities to ensure that all staff adhere to evidence-based practices, including hand hygiene, use of personal protective equipment, safe waste management and environmental cleaning. We will provide ongoing training, monitoring and support to ensure compliance and we will respond promptly to any infection risks or outbreaks. By embedding IPC principles into everyday practice, we aim to protect the health of those in our care and contribute to the wider effort to reduce healthcare-associated infections.

Infection control is the discipline concerned with preventing the spread of infection within the workplace and protecting those working in close proximity to potential sources of infectious substances. All employees, (including office workers) may be at risk of infection or of spreading infection, especially if their role brings them into contact with infected persons or with blood or bodily fluids like urine, faeces, vomit or sputum. Such substances may contain micro-organisms such as bacteria and viruses which can be spread if staff do not take adequate precautions.

These biological agents can be:

- airborne
- carried by animals
- carried by other humans

- present in manufacturing processes
- present in water systems

Also at risk of spreading infection are those involved in food preparation and handling. It is therefore important that strict hygiene precautions are observed.

Our rules on controlling the risks of infectious diseases must always be followed. However, there may be times when it is more important than ever that they are strictly followed, for example, during the outbreak of a disease such as Coronavirus (COVID 19). The aim of this policy is to ensure, so far as is reasonably practicable, the health, safety and welfare of our employees and to outline arrangements we have in place for them and any others affected by our work activities, (for example our Clients) that will reduce the risk of ill health arising from exposure to biological agents. We will take into account recognised principles of good practice and comply with all relevant legislation, including the:

- Health and Safety at Work etc. Act 1974
- Management of Health and Safety at Work Regulations 1999
- Control of Substances Hazardous to Health (COSHH) Regulations 2002 (as amended)

Note: environmental legislation is also applicable to clinical waste. This is specified in the separate Clinical Waste policy.

GDPR

In all instances, Carers Choices will observe the strict requirements of the General Data Protection Regulations (GDPR) so as to ensure the safety and integrity of information which is considered to be sensitive and entirely confidential.

Procedure and Guidance

In order to restrict and reduce the risk of infection in the workplace, Carers Choices will:

- Have systems in place that assess the risk of and prevent, detect and control the risk of infection
- Designate a lead for infection prevention and control. This will usually be the Registered Manager
- Report all instances of outbreaks to the local health protection team who have a team of IPC experts who will offer support and guidance during incidents of outbreaks
- Ensure sufficient resources are available to secure effective prevention and control of infection
- Ensure there is an Infection Prevention and Control folder available on site which is accessible to staff containing essential information, risk assessments and guidance for staff, team leaders and managers to follow in the event of an infection
- Ensure employees and other persons who directly or indirectly provide services to Clients are provided with suitable information, instruction, training and supervision in the precautions to follow
- Assign to a senior member of staff the responsibility for investigating and recording accidents, incidents and near misses relating to infection control and to ensure that reports are made as required
- Ensure that audits are carried out to ensure policies and procedures are being implemented
- Ensure that a suitable and sufficient up to date risk assessment is carried out with respect to prevention and control of infection
- Ensure that an appropriate standard of cleanliness and hygiene is maintained throughout Carers Choices' premises and that the premises are maintained in good physical repair and condition
- Ensure appropriate standards of cleanliness and hygiene are maintained in relation to equipment used by staff and Clients
- Ensure there is suitable and sufficient hand washing facilities and antimicrobial hand rubs available where appropriate
- Ensure there is an adequately stocked spillage kit in place and staff always use this when cleaning spillages from bodily fluids
- Ensure there are always adequate supplies of PPE available within the service

- Where there is an outbreak in place a donning and doffing station is available and that there are non-touch bins available in services
- Offensive waste must be placed in a yellow/black waste bag (also commonly referred to as a 'tiger bag') and then disposed of in the correct bin
- Where there may be an outbreak of COVID-19 or other highly contagious infection it is advised that staff dispose of offensive waste, used PPE or cleaning products in a yellow/black 'tiger' bag then placed in another bag before being disposed of in the outside bin.
- During outbreaks of infections increased hand washing is promoted
- Implement Deep Cleaning Checklists
- Where appropriate, ensure suitable information on infections is provided to visitors, including the importance of mask wearing and hand washing by visitors during serious pandemics, as well as facilitating meetings/visits remotely where possible
- Visitors must sign in upon arrival, so we are aware of who has visited Carers Choices
- Ensure information regarding infection is shared, with appropriate individuals
- Ensure individuals who develop an infection are identified promptly and organise/make arrangements in order that they receive the appropriate treatment and care
- Provide regular suitable training, including induction training to all staff on the prevention and control of infection
- Keep a record of all training and updates to staff
- Ensure prevention and control of infection responsibilities are outlined in job descriptions

In the most serious instances, such as a pandemic Carers Choices will apply the following infection outbreak procedure to control the risk of infectious diseases in the workplace:

- Appoint a pandemic coordinator to keep on top of official advice from the Government, CQC, Department of Health and Social Care, etc.
- Ensure that all employees are kept up to date with government guidance and are supported to follow any guidance published on self-isolation/quarantine,

including Carers Choices' response and what it is doing to protect people's health and reduce the risk of the infection spreading

- Stagger start and finish times so that fewer people are together at once, where this is feasible
- Cancel non-essential training sessions
- Deal with people we support/customers by phone and email
- Ensure that if face to face meetings must take place, that facilities are suitable to minimise the spread of infection e.g., allowing a distance of more than one metre between participants
- Consider whether certain employees may work from home
- Consider Red/Amber/Green (RAG) rating care services and restrict services to identified RED/critical support and look to reduce staff cross working
- Inform employees of the arrangements for obtaining vaccines or other necessary treatments to protect against or treat the effects of, exposure to biological agents, if the risk assessment shows there to be a risk of exposure. If such treatments are necessary, the costs will be met by Carers Choices
- Continue to communicate as the situation changes
- Complete regular staff welfare meetings where staff are able to raise concerns regarding transmission of infection and to respond appropriately in all cases, providing reassurances where possible and details of all preventative measures available
- Ensure staff and supervisors are aware of relevant policies regarding sickness reporting, payment of SSP, etc
- Maintain a high vigilance on staff morale and stress levels, providing advice, guidance and support where appropriate and available
- Have regard to working hours, including ensuring that unless opt-out arrangements are in place, staff comply with the Working Time Regulations around appropriate length of daily and weekly working hours and rest breaks.
- Encourage staff to report symptoms of infectious diseases
- Ensure staff who have infectious disease symptoms do not come to work and, in the case of diarrhoea and vomiting, they stay away for at least 48 hours after the symptoms have stopped
- Where required, ensure notifiable outbreaks are reported to the relevant authority e.g., HSE

- Co-operate with any investigation by a relevant authority and comply with any investigation findings
- Prioritise cleaning, paying particular attention to the cleaning and disinfecting of toilets, handles, support handrails, taps and wash basins
- Ensure staff pay strict attention to infection control procedures, in particular to the washing of hands and the wearing of protective clothing if required
- Provide and use antibacterial hand wash in all hand washing areas
- Inform visitors of the outbreak and discourage unnecessary visits

Assessment of Infection Risks in Client Homes

Carers Choices recognises that, in a domiciliary care setting, care is delivered within the Client's own home environment, over which Carers Choices does not have full control. As such, infection prevention and control must be based on a proportionate, risk-based approach, balancing respect for the Client's home, choices and independence with the need to protect their health, the health of staff and the wider community.

Carers Choices will ensure that suitable and sufficient infection control risk assessments are undertaken for each Client as part of the care planning and review process. Responsibility for ensuring that these assessments are completed and remain up to date rests with the Registered Manager, although this task may be delegated to suitably trained and competent members of the team. Risk assessments will take into account factors such as the Client's health status, known infections (e.g. active diarrhoea, MRSA, respiratory symptoms etc), living conditions, hygiene facilities, presence of pets, waste disposal arrangements and any environmental or behavioural risks which may impact infection control.

Frontline care staff have a day-to-day responsibility to remain vigilant to infection risks within the Client's home and to take appropriate action in line with their training and this policy. This includes dynamically assessing risks at each visit, identifying any changes in the environment or the Client's condition and implementing appropriate infection control measures such as the use of PPE, hand hygiene and safe handling of waste and equipment. Where concerns are identified, staff must report these

promptly to their line manager so that risk assessments can be reviewed and updated accordingly.

Carers Choices acknowledges that not all risks within a Client's home can be eliminated. Therefore, the focus will be on risk reduction and safe systems of work, developed in partnership with the Client (and others involved in their care where appropriate). Where necessary, guidance and support will be provided to Clients to promote good hygiene and infection control practices, while respecting their rights, preferences and capacity to make decisions.

Detailed infection control risk assessment records are maintained separately from this policy and are accessible to relevant staff. These documents form part of the wider system for preventing, detecting and controlling infection risks, in line with current regulatory expectations and best practice guidance.

Waste Disposal, Cleaning and Hygiene Practices

Carers Choices recognises that maintaining high standards of cleanliness and hygiene, alongside safe waste disposal, is essential in preventing and controlling infection in domiciliary care settings. As care is delivered within the Client's own home, practices must be adapted to the individual environment, taking into account that Carers Choices does not have full control over the premises while still ensuring that safe and effective infection control measures are consistently applied.

All staff are required to follow strict hygiene practices at all times, including effective hand hygiene before and after each episode of care, the appropriate use of personal protective equipment (PPE), antibacterial hand gel and the safe handling of equipment and materials. Any refusal to utilise PPE or other required hygiene practices by staff must be formally documented and subject to review by the Registered Manager.

Cleaning practices must be proportionate to the level of risk identified, with particular attention given to frequently touched surfaces, equipment used in care delivery and any areas where contamination may occur (for example, following personal care tasks or exposure to bodily fluids).

Waste generated during the provision of care must be handled and disposed of safely and appropriately. Staff must ensure that waste is segregated, stored and disposed of in line with current guidance and the Client's local arrangements. Where clinical or potentially infectious waste is generated, appropriate procedures must be followed to minimise the risk of cross-contamination. Staff should ensure that waste is securely contained and that disposal methods are agreed as part of the care planning process, recognising that disposal facilities will vary between households.

Frontline staff have a responsibility to assess and manage hygiene and cleanliness on a visit-by-visit basis, identifying any concerns such as poor hygiene standards, lack of facilities for handwashing or unsafe waste disposal practices. Where such issues are identified, staff must take reasonable steps to reduce immediate risk and report concerns to their line manager so that further action, including review of risk assessments or care plans, can be undertaken.

Carers Choices will support Clients, where appropriate, to maintain a hygienic environment by providing advice, guidance and reassurance, while respecting their independence, preferences and rights within their own home. Where risks cannot be fully controlled, staff will implement safe systems of work to minimise exposure and protect both the Client and themselves.

Detailed procedures and guidance relating to cleaning schedules, waste handling and hygiene practices are maintained separately from this policy and are accessible to staff as part of Carers Choices' wider infection prevention and control framework, in line with current legislation, best practice and regulatory expectations.

Transmission Risks and Prevention of Infection

Infection can spread in care environments through several recognised routes of transmission and understanding these pathways is essential to reducing risk and maintaining a safe environment for all individuals supported by Carers Choices. The main routes of transmission are contact, droplet and airborne, each requiring different but overlapping control measures to minimise the likelihood of spread.

Contact transmission occurs when infection is transferred through direct physical contact (e.g., person-to-person touch) or indirect contact via contaminated surfaces and equipment. Common examples include infections such as norovirus, MRSA (Methicillin-resistant Staphylococcus aureus) and certain skin or gastrointestinal infections. In care settings, frequently touched surfaces such as door handles, mobility aids, light switches and shared equipment can become vectors for transmission if not appropriately cleaned and disinfected.

Droplet transmission occurs when respiratory droplets carrying infectious agents are released into the air when an infected individual coughs, sneezes, talks or breathes heavily. These droplets typically travel short distances before settling. Infections such as influenza (flu) and COVID-19 are commonly spread in this way. Transmission risk is increased in close-contact situations, particularly where ventilation is poor or where infection prevention measures are not consistently followed.

Airborne transmission involves smaller particles (aerosols) that can remain suspended in the air for longer periods and travel further distances. This route is associated with infections such as tuberculosis (TB) and, in certain circumstances, COVID-19. Airborne risks are particularly relevant in enclosed or poorly ventilated environments and may require enhanced control measures such as improved ventilation, respiratory protection (where appropriate) and rapid isolation procedures.

To reduce the likelihood of transmission across all routes, staff are required to follow strict infection prevention and control measures. These include, but are not limited to, effective hand hygiene, appropriate use of personal protective equipment (PPE), regular cleaning and disinfection of environments and equipment, safe handling of laundry and waste and adherence to respiratory hygiene practices (such as cough etiquette and use of tissues). Staff must also ensure that ventilation is optimised wherever possible by opening windows or using mechanical ventilation systems where available.

Any issue, incident or condition that is suspected to increase the risk of infection transmission must be recorded promptly and reported to the Registered Manager. This includes outbreaks of illness, unusual clusters of symptoms, failures in cleaning or PPE processes or exposure to known infectious diseases. Early reporting enables

timely risk assessment, implementation of control measures and liaison with external health professionals where required.

This section should be read in conjunction with our procedures relating to waste disposal, hygiene standards and cleaning and decontamination processes, which set out the required methods for maintaining a safe and sanitary environment. These procedures are essential components of infection prevention and directly support the control of contact, droplet and airborne transmission risks.

Staff should also refer to national guidance, including:

- UK Health Security Agency (UKHSA) Infection Prevention and Control guidance:
- https://www.gov.uk/government/collections/infection-prevention-and-control
- NHS guidance on infections such as flu, COVID-19 and norovirus: https://www.nhs.uk/conditions/
- Tuberculosis (TB) public health guidance:
- https:// www.gov.uk/government/collections/tuberculosis-and-other-mycobacterial-diseases-diagnosis-screening-management-and-data

By consistently applying these principles and responding promptly to emerging risks, Carers Choices aims to minimise infection transmission and maintain a safe environment for all service users and staff.

Handling Suspected Infection

If any member of staff feels unwell and suspects that they may have become infected, then they must report the matter immediately to the Registered Manager who will determine, in conjunction with the employee whether they may continue to work as per normal or, as in most cases, must cease work immediately and self-isolate. Any return to work will be in accordance with general Government guidelines and medical advice.

All care staff will be advised of the situation regarding any Client who is suspected as having become infected or has tested positive and appropriate instructions, training

and PPE will be provided in order that the risks of cross-infection are minimised. In certain cases, care workers may alert the Registered Manger to situations where Clients may need to be admitted to hospital, in which case medical advice may be sought immediately.

Stocks of PPE will be audited on a weekly basis to ensure continuous availability for staff.

This policy will be reviewed at least annually or more frequently if significant changes occur.

Staff Immunisation and Vaccination

Carers Choices recognises that effective immunisation of staff is a key component of infection prevention and control within domiciliary care services. Staff working in people's homes may be exposed to infectious diseases through close personal care, contact with bodily fluids, respiratory secretions, contaminated environments and community transmission. A proportionate immunisation programme is therefore maintained to reduce the risk of staff acquiring or transmitting vaccine-preventable infections to Clients, colleagues and members of the public.

This policy is aligned with the requirements of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, in particular Regulation 12 (Safe Care and Treatment) and the associated Health and Social Care Act 2008: Code of Practice on the prevention and control of infections and related guidance, which expects providers to ensure that appropriate occupational health arrangements are in place, including staff access to immunisation where relevant to their role.

Core Staff Immunisation Programme

Carers Choices promotes and supports staff access to evidence-based immunisations relevant to healthcare and social care work. The following vaccinations are considered part of the recommended occupational health protection framework for staff engaged in domiciliary care, subject to national eligibility criteria and clinical advice:

- **MMR (Measles, Mumps, Rubella)** – recommended for staff without evidence of immunity, due to the risk of transmission in community settings and potential exposure during household visits
- **Hepatitis B** – recommended for staff who may be exposed to blood or bodily fluids during personal care or incidental exposure; includes vaccination and post-vaccination immunity testing where applicable
- **Varicella (Chickenpox)** – recommended for non-immune staff to reduce risk of transmission to vulnerable individuals, including older adults and immunocompromised Clients
- **Influenza (seasonal flu vaccine)** – strongly recommended annually for all frontline care staff due to high community prevalence and risk of severe outcomes in vulnerable populations
- **BCG (Tuberculosis)** – considered where occupational risk assessment indicates increased exposure risk (e.g., working with individuals from high TB prevalence regions or known exposure risk factors), in line with national eligibility guidance
- **COVID-19 vaccination** – supported in line with current UK health protection guidance and eligibility recommendations to reduce severe disease and transmission risk in care environments

Vaccination is not generally mandated as a condition of employment; however, Carers Choices strongly encourages uptake where clinically recommended, as part of its duty to reduce infection risk within domiciliary care settings.

Exemptions and Individual Risk Assessment

Where a staff member is unable or chooses not to receive a recommended vaccination, this will not automatically exclude them from employment or deployment. However, a documented individual risk assessment will be completed to evaluate any potential risks to Clients, colleagues and the staff member themselves.

Risk assessments will consider:

- Nature of care tasks undertaken (e.g., personal care, exposure to bodily fluids)

- Vulnerability of Clients supported (e.g., immunocompromised, elderly, long-term conditions)
- Local prevalence and outbreak status of relevant infections
- Availability and effectiveness of alternative control measures (e.g., PPE, enhanced hygiene, assignment adjustments)
- Occupational health advice where appropriate

Where necessary, proportionate control measures may be implemented, such as temporary adjustment of duties, additional PPE requirements, increased supervision or reassignment of specific visits where risk cannot be adequately mitigated.
Medical exemptions will be considered in line with clinical guidance and may require occupational health input or GP confirmation where appropriate.

Responsibilities and Monitoring

It is the responsibility of staff to ensure that they inform Carers Choices of their vaccination status where relevant to occupational risk and to provide evidence where requested. Carers Choices will support staff in accessing relevant vaccinations through NHS services, occupational health providers or GP arrangements where available.

Managers are responsible for ensuring that immunisation status is considered as part of recruitment, induction and ongoing risk management processes and that appropriate records are maintained securely in line with data protection requirements.

Alignment with Infection Prevention and Control Requirements

This policy operates alongside wider infection prevention and control measures, including hand hygiene, PPE use, cleaning protocols and safe handling of waste and laundry. Immunisation is considered one component of a broader system of controls designed to reduce infection risk in domiciliary care environments, rather than a standalone protective measure.

Where outbreaks, suspected exposure incidents or increased community transmission occur, Carers Choices may review risk assessments and temporarily adjust deployment arrangements in line with public health advice.

National Immunisation Guidance

This policy is informed by current UK guidance, including:

- UK Health Security Agency (UKHSA) immunisation guidance: https://www.gov.uk/government/collections/immunisation
- NHS vaccination advice: https://www.nhs.uk/conditions/vaccinations/
- Health and Social Care Act 2008 Code of Practice on infection prevention and control

Through this approach, Carers Choices aims to ensure a balanced, proportionate and evidence-based immunisation framework that protects both staff and Clients while supporting safe delivery of domiciliary care services.

CQC Registration and Inspection Compliance

Key Questions and Quality Statements applicable to this Policy	Care Quality Commission (Registration) Regulations 2009 applicable to this Policy
Safe • **Involving People to Manage Risks** • **Safe Environments**	

Legislative Compliance

Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 applicable to this Policy	Other legislation relevant to this Policy
Regulation 12: Safe care and treatment Regulation 15: Premises and equipment Regulation 17: Good governance	Health and Safety at Work etc. Act 1974 Management of Health and Safety at Work Regulations 1999 Control of Substances Hazardous to Health (COSHH) Regulations 2002 (as amended)

Policy Reviewed on Date of Implementation by the Following Company Officer:

Full name:

Paul Ramsden

Job Title:

CEO

Signature:

P. Ramsden

Appendix 1

Pandemic Recovery & Contingency Plan

Introduction

In addition to Carers Choices' business continuity and recovery planning policy, Carers Choices recognises the need to maintain a dedicated pandemic recovery plan and procedure. This is because general continuity recovery plans typically focus on short-term operational disruption, whereas a pandemic event—such as those caused by influenza strains, coronaviruses, respiratory syncytial viruses, or other emerging infectious diseases—may have prolonged and wide-ranging impacts lasting several months or longer.

This procedure sets out the contingency measures that Carers Choices will implement in the event of a pandemic outbreak affecting the UK or wider regions.

The aim of this procedure is to ensure that Carers Choices can continue to operate as effectively as possible during a pandemic while protecting the health, safety, and wellbeing of employees, service users, and other stakeholders, so far as is reasonably practicable.

Procedure

Management is responsible for ensuring that all employees are aware of Carers Choices' pandemic recovery plan policy and associated procedures. Employees are responsible for familiarising themselves with the content and seeking clarification from their departmental manager where required.

Carers Choices will establish a Pandemic Crisis Management Team. This team will include representatives from across Carers Choices, including both senior and middle management, as well as key operational roles where appropriate.

Members of the Pandemic Crisis Management Team will receive appropriate training in emergency response and pandemic management. In the event of a pandemic, the team will be responsible for providing leadership and making operational and business continuity decisions where normal management structures are disrupted or unavailable.

As a contingency measure, employees may be cross-trained in essential functions to ensure operational resilience and adequate staffing coverage across critical roles.
A pandemic communications strategy will be implemented to ensure employees receive timely, accurate, and consistent information regarding the evolving situation.

Communications will be issued via Carers Choices' intranet, email, and where feasible, through virtual or socially distanced team briefings. Employees will be informed of relevant public health guidance, including symptoms associated with the prevailing infectious disease, reporting procedures, and hygiene and infection prevention measures designed to reduce transmission risk.

Carers Choices' leave and absence policies, including sick leave and compassionate/bereavement arrangements, will be reviewed and adapted as necessary in response to the specific circumstances of the pandemic and evolving public health guidance.

Infection Prevention and Control Measures

Where required, employees may be instructed to follow enhanced infection prevention and control measures appropriate to the nature of the pandemic threat.

These may include guidance issued by relevant public health authorities and may involve, but are not limited to:

- Appropriate use of personal protective equipment (PPE) such as face coverings, gloves, aprons, or other protective barriers where risk assessment indicates necessity

- Minimising close physical contact with service users, colleagues, and others unless required for essential care or operational tasks
- Avoiding non-essential travel and external site visits
- Limiting or avoiding car-sharing arrangements between staff
- Replacing face-to-face meetings with remote or virtual alternatives where possible
- Implementing remote working arrangements for office and administrative staff where operationally feasible
- Enhanced cleaning, ventilation, and hygiene practices in the workplace

Appendix 2

Pandemic & Infectious Disease Operational Guidance (UKHSA-Aligned)

This section provides operational guidance for managing outbreaks of infectious diseases that may impact service delivery, including (but not limited to) pandemic influenza strains, COVID-19, respiratory syncytial virus (RSV), norovirus, and other emerging communicable diseases identified by UK Health Security Agency (UKHSA) or Department of Health and Social Care (DHSC).

This guidance supports continuity of care delivery while minimising transmission risk to people receiving care, staff, and wider stakeholders.

It is designed to be proportionate, scalable, and adaptable depending on the severity and nature of the outbreak.

1. General outbreak preparedness and response

Carers Choices will maintain an infectious disease preparedness framework aligned with UKHSA and NHS guidance.

In the event of a declared outbreak or elevated public health alert, Carers Choices will:

- Activate internal incident monitoring and escalation procedures
- Follow UKHSA and NHS England infection prevention and control (IPC) guidance
- Implement proportionate operational controls based on risk level
- Maintain service continuity wherever safely possible

A Pandemic and Infectious Disease Response Lead (or equivalent role within the Crisis Management Team) will coordinate organisational response measures.

2. Infection prevention and control (IPC)

All staff must follow current UKHSA infection prevention and control guidance relevant to the identified pathogen.

Measures may include:

- Appropriate use of PPE based on risk assessment and transmission route
- Enhanced hand hygiene and environmental cleaning procedures
- Respiratory hygiene measures (e.g., source control during respiratory outbreaks)
- Ventilation improvements where practicable
- Isolation or cohorting of service users where clinically appropriate
- Minimising unnecessary close contact during care delivery

PPE usage will be guided by current national clinical advice rather than emergency supply protocols, except in declared surge situations.

3. Risk-based protection of vulnerable individuals

Rather than formal “shielding groups,” Carers Choices will identify individuals at increased risk of severe illness from infectious disease, including:

- older adults
- individuals with chronic respiratory, cardiac, renal, neurological or immunosuppressive conditions
- pregnant individuals with additional clinical risk factors
- people with complex care needs or multi-morbidity

Risk mitigation measures will be proportionate and may include:

- adjusted visit schedules or clustering of care
- assignment of consistent staff where possible
- enhanced IPC precautions during periods of elevated community transmission
- coordination with healthcare partners to reduce unnecessary exposure

All decisions will be made in line with personalised care planning and informed consent principles.

4. Workforce protection and service continuity

To maintain safe staffing levels, Carers Choices may implement:

- cross-training of staff across essential roles
- cohorting of staff to reduce cross-exposure between teams
- remote working for administrative functions where possible
- remote handovers and virtual team coordination
- escalation to mutual aid arrangements with partner providers or local authority systems where required

Staff wellbeing and fatigue management will be prioritised during prolonged outbreaks.

5. Communications and reporting

A clear communications strategy will ensure staff receive timely updates via:

- email and internal systems
- virtual briefings
- updated operational guidance from UKHSA, NHS England, and DHSC

Staff must report suspected or confirmed infectious disease cases to management promptly.

Where required by regulation or commissioning arrangements, outbreak data may be reported to:

- UKHSA surveillance systems

- CQC reporting mechanisms (where applicable)
- local authority or integrated care system partners

6. Care delivery and service adaptation

During periods of elevated infection risk, care delivery may be adapted to:

- reduce non-essential visits while maintaining safe care standards
- consolidate care tasks to reduce multiple staff visits
- support remote monitoring or telecare where appropriate
- prioritise clinically essential interventions

Any changes to care delivery must be:

- risk assessed
- agreed with the person receiving care (or their representative where applicable)
- documented in care plans
- reviewed regularly

7. Hospital discharge and community transition

Where infectious disease risk is present, discharge planning will:

- follow standard NHS discharge-to-assess principles
- ensure timely discharge is not delayed unnecessarily due to testing unless clinically indicated
- include clear communication of infection status where relevant
- ensure appropriate IPC measures are in place in the community setting

Care providers will coordinate with hospital discharge teams, community health services, and local authority partners.

8. Continuous review

This guidance will be reviewed regularly to ensure alignment with:

- UKHSA infection prevention and control updates
- NHS England operational guidance
- emerging infectious disease threats

- lessons learned from previous outbreaks and system incidents