# Infection Prevention and Control Policy

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<th>Title of Document</th>
<th>Infection Prevention and Control Policy</th>
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<tr>
<td>Author’s Name</td>
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<td>Infection Prevention and Control Specialist Practitioner</td>
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<p>|         |         | <em>Infection Prevention and Control Links</em>         |</p>
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<th>Question</th>
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<td>Has a equality impact assessment been compiled?</td>
<td>No</td>
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<tr>
<td>Has legal advice been sought</td>
<td>No</td>
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<td>Has the policy been assessed for its impact on Human rights?</td>
<td>No</td>
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<td>Have training issues been considered?</td>
<td>Yes</td>
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<td>Have any financial issues been considered?</td>
<td>Yes</td>
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<td>Will implementation be monitored?</td>
<td>Yes</td>
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<td>Is there a cascade mechanism in place to communicate the policy?</td>
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<td>- with staff</td>
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<td>Are there linked policies / procedures?</td>
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<td>All policies in The Infection Prevention and Control Framework</td>
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<tr>
<td>Has a review date been set?</td>
<td>Oct 2014</td>
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<tr>
<td>Is this policy compliant with CQC Essential Standards for Patient Safety and Quality?</td>
<td>Yes</td>
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Infection Prevention and Control Policy

8th August 2012

Wendy Briggs
Infection Prevention and Control Specialist Practitioner
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Helping you to live life well
1 Purpose

Criteria 9 of the Health and Social Care Act (2008) Code of Practice for NHS on the Prevention and Control of Healthcare Associated Infections and Related Guidance states that registered providers must “have and adhere to policies ... that will help to prevent and control infections”.

Additionally, The Health and Safety at Work Act 1974 gives a statutory duty to help prevent illness and injuries at work by ensuring infection control policies and guidelines are available.

This policy forms part of Bristol Community Health’s commitment to reducing the risk to patients from healthcare associated infections. Along with its sub-sections, it outlines the ways in which Bristol Community Health will minimise preventable Healthcare Associated Infections (HCAIs), thereby, complying with our legal and professional obligations to provide safe care for patients, and a safe working environment for our staff.

2 Scope

This Infection Prevention and Control Policy and its sub-sections apply to all Bristol Community Health staff, students, contractors, volunteers and any others providing services on behalf of the organisation.

3 Policy Statement

Bristol Community Health acknowledges its duty to protect patients, staff, carers and visitors from the risk of avoidable healthcare associated infection.

We are committed to ensuring that safe working practices are utilised by those providing healthcare services to our patients.

We have in place suitable systems, processes, and robust control of infection policies and a nominated Executive Director Lead for Infection Control & Prevention. These enable us to comply with the requirements of the Health and Social care Act (2008) Code of Practice for NHS on the Prevention and Control of Healthcare Associated Infections and Related Guidance.

4 Implementation and Audit

There is an Infection Prevention Control audit programme in place. All of the Infection Prevention and Control policies are subject to audit to ensure implementation and compliance.

5 Background

Healthcare associated infections (HCAIs) cause a range of symptoms from minor discomfort to serious disability and in some cases death. It is estimated that 300,000 healthcare associated infections occur annually, costing over one billion pounds. Many healthcare associated infections arise in non-hospital settings (National Audit Office 2009).

From April 2009, the Health and Social Care Act 2008 providers of NHS services are legally obliged to register with the Care Quality Commission under the Health
and Social Care Act 2008. All organisations registered with the CQC must demonstrate that they protect patients, workers and others who may be at risk of acquiring an HCAI. The CQC must use the Code of Practice for NHS on the Prevention and Control of Healthcare Associated Infections and Related Guidance to judge compliance on prevention of infection. Consequently, registered providers must either follow the code, or be able to demonstrate that they have something as good, or better in place.

6 Responsibilities

6.1 Bristol Community Health Board

- Will support the control and reduction of HCAIs from board level downwards, prioritising the management of risk to patients and ensuring that the safety of patient’s is not compromised by the pursuit of other strategic objectives;
- Receives and require the necessary information to remain assured that there is an appropriate Infection Prevention and Control Programme in place;
- Ensures that there are effective management systems for the prevention and control of HCAIs, informed by risk assessments and analysis of infection incidents.
- Scrutinises, challenges and recommends any improvements for the infection, prevention and control arrangements where necessary;
- Ensures healthcare workers, as far as is practicable, are free of and protected from exposure to communicable diseases infections during the course of their work;
- Ensures appropriate resources are available to support infection prevention and control;
- Ensures that there are appropriate systems in place for the surveillance of communicable disease and infections and that these meet local, regional and national needs;
- Ensures and is assured that the organisation has in place policies and guidelines for the prevention, control and management of infection across the organisation;
- Ratifies new, and revised, Infection Prevention and Control Policies;
- Ensures that the organisation provides and maintains a clean and appropriate environment.

6.2 The Director of Infection Prevention and Control (DIPC)

- Reports to the Chief Executive on matters concerning infection prevention and control within Bristol Community Health;
- Is responsible for overseeing the work plan for the Infection, Prevention and Control Team;
- Oversees local control of infection prevention and control policies and their implementation;
- Is a full member of the Infection Prevention and Control Group;
- Oversees the production of an annual report on the state of HCAI in the organisation, and releases it publicly;
- Ensures staff have access to occupational health services;

6.3 The Infection Prevention and Control Group

- Sets objectives that meet the needs of the organisation and ensures patient safety;
- Ensures that there is a programme of audit to demonstrate that key policies and practices are implemented appropriately;
- Ensures that there is an infection prevention and control work plan for the organisation, which reflects the requirements of the 2008 Health and Social Care Act;
- Identifies priorities for action;
- Supports the Infection Prevention and Control Team;
- Works with stakeholders to improve surveillance of, and strengthen prevention and control of infection strategies;
- Involves members of the public and service users in the development of IPC strategies;
- Communicates information relating to communicable disease to stakeholders;
- Ensures all staff, contractors and others whose normal duties are directly, or indirectly concerned with patient care, receives suitable and sufficient information on, and training and supervision in, the measures required to prevent and control risks of infection.

6.4 The Infection Prevention and Control Specialist Practitioners

- Review and improve infection prevention and control arrangements where necessary;
- Ensure that the organisation is kept up to date on national guidelines, evidence and policy around infection prevention and control and disseminate these, updating organisational guidelines/policies as appropriate and overseeing any required changes in practice;
- Maintain and oversee the work of the organisation’s Infection Prevention and Control Link Practitioners;
- Provide Infection Prevention and Control Training to staff;
- Participate in surveillance and undertake investigation and route cause analysis on specific HCAIs, as agreed with commissioners and as mandated, locally and nationally;
• Provide information to commissioners and performance managers on HCAIs as required;
• Develop and facilitate infection prevention and control audit;
• Audit implementation of infection control policies;
• Share any outcomes and learning from investigations of HCAIs and Infection Control Incidents;
• Gain the co-operation of, and work with staff, contractors and others involved in the provision of healthcare to prevent and control infections;
• Advise staff and the organisation on infection prevention and control;
• Visit bases and link with estates and facilities managers to advise on improvements required for effective infection prevention and control;
• Lead and advise on decontamination locally;
• Support the organisation’s business continuity plans, i.e. to support the Civil Contingencies Act and Swine Flu requirements;

6.5 **All Managers will:**

• Ensure all staff receive training and updates in infection prevention and control, at the intervals stated by the Director of Infection Prevention and Control and as required to support the Training Strategy;
• Facilitate infection prevention and control audit, including on-going hand hygiene audits;
• Prioritise infection prevention and control in team meetings and briefings;
• Support the infection prevention and control link practitioner network, ensuring that the infection prevention and control link practitioners have protected time to fulfil their role;
• Ensure that staff have the appropriate competencies required to prevent Infection Prevention and Control in their areas of work.

6.6 **All Staff**

• Are responsible for preventing and controlling infection;

And must

• Adhere to all Bristol Community Health Infection Prevention and Control policies and guidelines and to the NICE guidelines on Infection Prevention and Control;
• Risk-assess highlight and address issues, which may lead to the transmission of HCAI;
• Support the introduction of measures to reduce the risk of transmission of HCAI;
• Identify and manage HCAIs promptly and appropriately to reduce the risk of infection;
• Co-operate with other staff and agencies to promote infection prevention and control;
• Access training on IPC at the appropriate intervals
• Access training in aseptic non-touch technique if they undertake invasive procedures;
• Undertake all procedures correctly, every time, for every patient;
• Adhere to standard (universal) infection control precautions, including the appropriate use of personal protective equipment at all times;
• Participate in infection prevention and control audit;
• Participate in investigations of HCAIs and incidents;
• Challenge poor infection prevention and control practice in the workplace;
• Ask for advice from the IPC team if needed;

7 References


Winning Ways Working together to reduce Healthcare Associated Infection in England. (Chief Medical officer) (DoH) Dec 2003

Clean, safe care: Reducing infections and saving lives (DoH) 2008

Health and Social Care Act (2008)


NICE clinical guideline 139 Prevention and control of healthcare-associated infections in primary and community care Issued: March 2012

http://publications.nice.org.uk/infection-cg139

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August 2012