

Infection Prevention and Control Policy

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Specific staff groups to whom this policy directly applies.	All staff
Other staff, partners and stakeholders who may need to be familiar with the policy	Patients and other stake holders

Policy Version No:	V3.0
Author Name:	Wendy Briggs
Author's Job Title:	Infection Prevention and Control Specialist Lead
Dept / Service:	Infection Prevention control
Current Service Lead / Reviewer	Wendy Briggs
Ratified by:	<input checked="" type="checkbox"/> Clinical Cabinet <input type="checkbox"/> Senior Management Team <input type="checkbox"/> Joint Consultation and Negotiating Committee <input type="checkbox"/> Other (Please specify): Click here to enter text.
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Disseminated to/via:	Website, clinical cabinet, IPC links

5 key points about this policy:

- This is our overarching IPC policy containing Bristol Community Health's statements around protecting staff and patients from preventable infection
- Infection Prevention and Control Guidance can be found as appendices in the other IPC policies, covering specific aspects of IPC and specific infections, which should be read as subsections of this overarching policy
- Bristol Community Health acknowledges its duty to protect patients, staff, carers and visitors from the risk of avoidable healthcare associated infection.

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

- All staff are responsible for prevention and control of infection
- BCH have 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.

POLICY AUTHOR TO COMPLETE	
This policy is:	<input type="checkbox"/> a new policy <input checked="" type="checkbox"/> based on a previous version of the same policy <input type="checkbox"/> based on or developed from another document, for example an external or partners' policy (Please provide details): Click here to enter text.
Policy valid for:	<input type="checkbox"/> 1 year <input checked="" type="checkbox"/> 2 years <input type="checkbox"/> 3 years
Who has been consulted?	DIPC/Clinical Cabinet
Please list any linked policies or other associated documents?	All other IPC Policies
If an equality impact assessment was required, has it been completed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not required (See EIA policy on staff website)
If legal advice was required, has it been sought?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not required
Is this policy compliant with CQC standards? (See CQC on staff website)	<input type="checkbox"/> Yes <input type="checkbox"/> No
What are the training implications?	none
What are the financial implications?	On-going need for adequate resources to ensure implementation of adequate IPC programme
What is the implementation, dissemination and communications plan for:	Staff: Website/comms (<input type="checkbox"/> Tick if N/A)
	Patients: Website (<input type="checkbox"/> Tick if N/A)
	The Public: Website (<input type="checkbox"/> Tick if N/A)
Will implementation be monitored? (If yes, please briefly describe the monitoring plan)	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes Click here to enter text.

What are the key words when searching for this policy on the website?	Infection/ Prevention/ Control IPC/ Infection control/
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FOR REVIEWED POLICIES ONLY	
What are the main changes to the policy?	Click here to enter text.

DOCUMENT HISTORY				
Version	Date	Reviewer Name & Role	Consultation	Comments / Summary of Changes
V1.0	Sept 2014	Wendy Briggs	QUAG; Infection Prevention and Control Group; Clinical Cabinet	Policy published
V2.0	March 2015	Wendy Briggs		Update
V3.0	March 2017	Wendy Briggs		2 year review



Infection Prevention Control Policy

March 2017

Wendy Briggs

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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.

Other, specific elements of IPC are covered in additional policies which, while being stand-alone documents, should always be read in conjunction with this overarching policy.

These are:

- BCH Aseptic Non-Touch Technique Policy
- BCH Clostridium difficile Management Policy
- BCH Decontamination Policy
- BCH Environmental Cleaning policy
- BCH Hand Hygiene policy
- BCH MRSA Policy for Community Settings
- BCH Outbreaks of Communicable Infection Policy
- BCH The Prevention of Occupational Exposure to Blood-borne Viruses (Including the Safe Handling and Disposal of Sharps) Policy
- BCH Specimen Collection, Handling and Transport Policy
- BCH Standard Precautions Policy
- BCH Policy and Safe System of work for the Transportation of Sharps and sharp Containers Transported in Staff Vehicles
- BCH TSE, CJD, and VJD policy
- BCH Waste Management Policy
- BCH Toy Decontamination Policy

All of which are available on the BCH Website.

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.

We work with and communicate effectively with other relevant organisations to prevent the spread of infection.

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 (HCAs) 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. We know that many healthcare associated infections arise in non-hospital settings (National Audit Office 2009). The Chief Medical Officers most recent report (DH 2013) acknowledges that more care being delivered in community settings, has implications for the transmission and management of infectious diseases, and that infection control in the home is a priority for patients with long-term conditions.

A significant issue, with ever increasing impact and importance is the proportion of pathogens which are resistant to first-line antimicrobial treatments (DH 2013).

Ways in which organisations reduce the risk of transmission of healthcare associate infection include:

- Appropriate design, construction and maintenance of healthcare facilities
- Attention to hand hygiene
- Use of proper no-touch or aseptic techniques
- Antimicrobial stewardship

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 (Via the Quality Assurance and Governance Group)

- 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 healthcare 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 healthcare associated infections in the organisation, and releases it publicly;
- Support HR in ensuring staff have access to suitable occupational health services, which protect staff and patients from preventable infection;
- Challenge injudicious use of antimicrobials.

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; This includes informing Public Health England and or the local authority about relevant infections and working with them to prevent/limit outbreaks.
- 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
- Reviewing evidence and;
- 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 network;
- Provide Infection Prevention and Control Training to staff;
- Participate in surveillance and undertake investigation and root cause analysis on specific HCAs, as agreed with commissioners and as mandated, locally and nationally;
- Provide information to commissioners and performance managers on HCAs as required;
- Share any outcomes and learning from investigations of HCAs and Infection Control Incidents;
- Develop and facilitate infection prevention and control audit;
- Audit implementation of infection control policies;
- Share any outcomes and learning from investigations of HCAs 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.

6.5 The Decontamination Lead will

- 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.

6.6 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.

6.7 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 HCAs 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 HCAs and incidents;
- Challenge poor infection prevention and control practice in the workplace;
- Ask for advice from the IPC team if needed.

7 References

- NAO (June 2009) “Reducing Healthcare Associated Infections in Hospitals in England.”
- DH (Chief Medical officer) (Dec 2003) “Winning Ways, Working Together to Reduce Healthcare Associated Infection in England”.
- DH (2008) “Clean, safe care: Reducing infections and saving lives”.
- DH (2010) “Health and Social Care Act (2008) Code of Practice on the Prevention and Control of Infections and Related Guidance.” Available at http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_110288
- DH (2013) “Chief Medical officers Report 2011”
- NICE (March 2012) Clinical Guideline 139 “Prevention and Control of Healthcare-Associated Infections in Primary and Community Care”. Available at <http://publications.nice.org.uk/infection-cg139>

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