

INFECTION PREVENTION AND CONTROL POLICY AND PROCEDURE

Infection Control Policy

Policy Number	CLP243
Version:	V2.1
Purpose:	The purpose of this policy is to minimise the risk of infection to patients, staff and visitors and to promote a strong infection prevention and control ethos throughout the organisation.
Consultation:	The Infection Control and Decontamination Committee
Approved by:	Quality and Governance, Infection Control Committee, Clinical Policy Group
Date approved:	02/11/2021
Author:	Louise Forrester - Lead Nurse for Infection Control for Mental Health and Learning Disability Nursing Projects
Date issued:	12/11/2021
Review date:	01/11/2024
Audience:	All Trust staff in Gloucestershire Health and Care NHS Foundation Trust
Dissemination:	This document will be made available via the Trust intranet. It will be highlighted in the Trust's new staff induction programme and in the annual infection control update session.
Impact Assessments:	This Policy has been subjected to an Equality Impact Assessment. This concluded that this policy will not create any adverse effect or discrimination on any individual or particular group and will not negatively impact upon the quality of services provided by the Trust.

Version History

Version	Date Issued	Reason for Change
V1	01/10/2019	Policy merged into joint policy for Gloucestershire Health and Care NHS Foundation Trust and Herefordshire Mental Health and Learning Disability Services
V1.1	08/06/2020	References to Herefordshire services removed
V1.2	30/06/2021	Extension to review date
V1.3	19/08/2021	Extension to review date
V2	12/11/2021	Policy review
V2.1	01/06/2023	Reference to National Infection Prevention and Control manual for England added under policies and guidelines

SUMMARY

All NHS Trusts are required to have effective systems in place, regarding the Prevention and Control of Infection, in order to minimise the risk of infection to patients, staff and visitors.

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ABBREVIATIONS

Abbreviation	Full Description
GHC	Gloucestershire Health and Care NHS Foundation Trust
DIPC	Director of Infection Prevention and Control
IP&CT	Infection Prevention and Control Team
CQC	Care Quality Commission
HCAI	Health Care Acquired Infection
ICS	Integrated Care System

1. INTRODUCTION

This policy sets out how the Trust aims to meet the above requirement.

2. PURPOSE

The purpose of this policy is to minimise the risk of infection to patients, staff and visitors, including Health Care Acquired Infections (HCAIs) and to promote a strong infection prevention and control ethos throughout the organisation. The policy also aims to promote ownership of infection prevention and control issues by all members of staff and incorporation of good infection prevention and control practice into all aspects of members of staffs work, be it clinical or non-clinical.

3. SCOPE

This policy applies to all Trust staff in Gloucestershire. Infection Control policies are posted

on the trust intranet site.

4. DUTIES

General Roles, Responsibilities and Accountability

Gloucestershire Health and Care NHS Foundation Trust aims to take all reasonable steps to ensure the safety and independence of its patients and service users to make their own decisions about their care and treatment.

In addition, **the Trust** will ensure that:

- All employees have access to up to date evidence based policy documents.
- Appropriate training and updates are provided.
- Access to appropriate equipment that complies with safety and maintenance requirements is provided.

Managers and Heads of Service will ensure that:

- All staff are aware of, and have access to policy documents.
- All staff access training and development as appropriate to individual employee needs.
- All staff participate in the appraisal process, including the review of competencies.

Employees (including bank, agency and locum staff) must ensure that they:

- Practice within their level of competency and within the scope of their professional bodies where appropriate.
- Read and adhere to GHC policy
- Identify any areas for skill update or training required.
- Participate in the appraisal process.
- Ensure that all care and consent comply with the Mental Capacity Act (2005).

Infection Prevention and Control Committee

- The Infection Prevention and Control Committee will regularly agree and review the work programme to ensure the Trusts issues are identified and priorities across the areas of:
 - Education
 - Audit
 - Surveillance
 - Outbreak management
 - General advice and support
 - Review of incidences of alert organisms
 - Review of Serious Untoward Incidences.

They will advise on National policies, procedures and guidelines. The committee also should provide the Trust with assurance that compliance with the Health and Social Care Act 2008 amended 2012, The NHS Litigation Authority (NHSLA) and Standards for Better Health are undertaken.

Gloucestershire ICS IPC Group

Attendance at Gloucestershire ICS IPC will be represented by the Trust Director of Infection Prevention and Control (DIPC) or deputy and/or Lead Nurse for Infection Prevention and

Control and GHC ICD (infectious communicable doctor).

5. POLICY DETAIL

Health Care Acquired Infections represent one of the greatest challenges in modern day health care.

There is a significant amount of national guidance now available to enable the Trust to ensure they have effective systems and processes in place. The most notable are:

- The Health and Social Care Act, 2008 (amended 2018),
- Code of Practice (2010) for the NHS on the prevention and control of health care associated infections and related guidance.
- Care Quality Commission compliance guidance (CQC 2010) Outcome 8: Cleanliness and Infection control.

Policies and Guidelines

Related policies and guidelines are available online through the Trust's intranet site:

- Management of Gastroenteritis Policy (CLP076)
- A–Z of Equipment Decontamination Policy (CLP077)
- Standard Precautions Safe Working Practices Policy (CLP084)
- Tuberculosis (TB) Policy (CLP084)
- Meticillin Resistant Staphylococcus Aureus (MRSA) Protocol (CPR094)
- Linen and Laundry Policy (CLP075)
- Isolation Policy (CLP073)
- Hand Decontamination Policy (CLP087)
- Management of the Patient with CLOSTRIDIODES Difficile (CLOSTRIDIUM DIFFICILE) Policy (CLP078)
- Management and Decontamination of Bodily Fluids / Waste Spillage Policy (CLP081)
- Care and Management of Central Venous Catheters for Adults Clinical Policy (CLP013)
- Sharps and Splashes Injuries Policy - Prevention and Management of Occupational Exposure to Blood Borne Viruses (CLP086)
- Management of Patients with a Viral Respiratory Illness Policy (CLP080)
- Personal Protective Equipment (PPE Policy) - Excluding Viral Haemorrhagic Fever (CLP083)
- Antimicrobial Stewardship Policy (CLP027)
- Clinical Uniform Policy (CLP010)
- Aseptic Non-Touch Technique (ANTT) Policy (CLP125)
- National Infection Prevention and Control manual for England.

Patients remain under the care of their GPs for provision of physical healthcare including immunisations. Seasonal flu and COVID-19 vaccines are offered to at risk groups who are unable to access primary care whilst an in-patient.

The information available to service users and the public about the organisations general processes and arrangements for preventing and controlling health care acquired infections is provided in a number of formats:

- Patient / Public information leaflets

- Posters with contact numbers
- The intranet and web sites
- Publicly displayed and accessible cleaning schedules
- Handouts with contact details for the Infection Prevention and Control Teams which are provided at new starter induction sessions.

The Trust ensures that appropriate information accompanies patients transferred in and out of the trust to facilitate prevention and control of infections within and outside of the trust.

Infection Control Assurance Framework

An annual work plan is set for infection prevention and control. The Infection Prevention and Control Committee oversees the implementation of the work plan and this is reported annually to the Trust main Board in the form of the Annual Infection Prevention and Control Report.

The minutes of the infection control committee are reviewed by the Quality Assurance Group after each meeting.

Through these mechanisms the Trust has an assurance framework for healthcare acquired infections.

This provides assurance for statutory compliance statements to its regulatory bodies.

6. PROCESS FOR MONITORING COMPLIANCE

Are the systems or processes in this document monitored in line with national, regional, trust or local requirements?	YES
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Monitoring Requirements and Methodology	Frequency	Further Actions
<p>To ensure compliance of this policy an audit of the implementation of this document will be undertaken annually, commissioned by the Director of Nursing Therapies and Quality. This will involve auditing in-patient wards. The audit criteria will include assessing compliance against the following standards:</p> <ul style="list-style-type: none"> • Infection Control Policy compliance • Cleanliness of environments • Compliance with the infection control assurance framework • Information available to the public about the organisations general processes and arrangements for preventing and controlling healthcare acquired infections. <p>It is expected that all wards audited will comply with this guidance however in times of unprecedented demand, areas will be prioritised depending on risk.</p>	Annually	The results of the audit will be presented to the Trust Board who will be responsible for the development and monitoring of any identified actions within the scope of the audit.

7. INCIDENT AND NEAR MISS REPORTING AND SPECIFIC DUTY OF CANDOUR REQUIREMENTS

To support monitoring and learning from harm, staff should utilise the Trust’s Incident Reporting System, DATIX. For further guidance, staff and managers should reference the [Incident Reporting Policy](#). For moderate and severe harm incidents specific Duty of Candour

requirements must be considered and guidance for staff can be found in the [Duty of Candour Policy](#) and Intranet resources.

8. TRAINING

Training and information for staff will be given initially on induction to the Trust. Line Managers should ensure all appropriate staff members are aware of the local implementation of the policy.

9. CONTACT DETAILS FOR INFECTION AND PREVENTION CONTROL TEAM

Team Office Telephone Number: 0300 421 8508

Infection Control Team Email Address: InfectionControl@ghc.nhs.uk

10. REFERENCES

Department of Health (2008) Board to ward: How to embed a culture of HCAI prevention in acute trusts.

Department of Health (2008) Clean-safe care team; - Director of Infection Prevention and Control Role Profile Document. London.

Department of Health (2007) Essence of Care-care environment benchmark, Department of Health

Department of Health (2010) The Health and Social Care Act 2008: code of practice for health and adult social care on the prevention and control of infections and related guidance.

epic3: National Evidence-Based Guidelines for Preventing Healthcare-Associated Infections in NHS Hospitals in England. H.P. Loveday et al (2014)

The National Institute for Health and Care Excellence (NICE). (2003) Infection Prevention and Control

National Patient Safety Agency (2003) Clean your hands campaign

Nursing and Midwifery Council (2015) The Code: Standards of Conduct, performance and ethics for nurses, midwives and nursing associates. London NMC

World Health Organization (2009) Clean Care is Safer Care Campaign.
www.who.int/gpsc/5may/en/

National Infection Prevention and Control manual for England. [NHS England » National infection prevention and control](#)