

# CLINICAL POLICY

## Infection Control Policy

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Policy Number	CLP243
Version:	V3
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:	Louise Forrester Infection Prevention and Control lead for Mental Health and LD, Marion Johnson Infection Prevention and Control Lead
Approved by:	Clinical Policy Group
Date approved:	16/04/2025
Author / Reviewer:	Reviewed by: Louise Forrester
Date issued:	06/05/2025
Review date:	01/05/2028
Audience:	All Trust staff in Gloucestershire Health and Care NHS Foundation Trust
Dissemination:	The policy will be published on the GHC intranet, and its update will be listed on the Clinical Policy update bulletin
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
V3	06/05/2025	Reference to IP&C membership of ICS IPC group Updated References

## SUMMARY

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

## TABLE OF CONTENTS

	Section	Page
1	<a href="#">Introduction</a>	2
2	<a href="#">Purpose</a>	2
3	<a href="#">Scope</a>	2-3
4	<a href="#">Duties</a>	3-4
5	<a href="#">Policy Detail</a>	4-5
6	<a href="#">Process for Monitoring Compliance</a>	5
7	<a href="#">Incident, Near Miss Reporting and Duty of Candour</a>	5-6
8	<a href="#">Training</a>	6
9	<a href="#">Contact Details for IP&amp;C Team</a>	6
10	<a href="#">References</a>	6

## ABBREVIATIONS

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

### 1. INTRODUCTION

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

### 2. PURPOSE

The purpose of this policy is to promote effective Infection Prevention and Control practises to minimise the risk of infection to patients, staff and visitors.

### 3. SCOPE

This policy applies to all Gloucestershire Health and Care staff. Infection Control policies are

available 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 agree and review the Infection Prevention and Control work programme:
- The Infection Prevention and Control Team responsibilities include
  - Education
  - Audit
  - Surveillance of alert organisms
  - Outbreak management and support
  - General Infection Prevention and Control advice and support for Clinical Teams as required
  - Review of incidences related to Infection Prevention and Control noncompliance, or Health care acquired infections
  - Review of Serious Untoward Incidences.

The committee will provide the Trust with assurance that compliance with the Health and Social Care Act 2008 amended 2012 is met.

##### **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 Consultant Medical Microbiologist.

## 5. POLICY DETAIL

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

There is a significant amount of national guidance available to enable the Trust to ensure they have effective systems and processes in place.

- 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.
- [Infection prevention and control - Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk).
- National Infection Prevention and Control Manual for England [NHS England » National infection prevention and control](#).
- [National infection prevention and control board assurance framework \(BAF\) \(england.nhs.uk\)](https://www.england.nhs.uk).
- [epic3: National Evidence-Based Guidelines for Preventing Healthcare-Associated Infections in NHS Hospitals in England](#).

### Policies and Guidelines

Related Trust 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 (NHS England)
- Tuberculosis (TB) Community Policy (CLP074)
- 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)
- Uniform and Workwear for Clinical Teams Policy (CLP010)
- Aseptic Non-Touch Technique (ANTT) Policy (CLP125)
- Dental Decontamination Policy (CLP141)

Seasonal influenza, COVID-19 and other specific vaccines are offered to at risk groups who are unable to access primary care whilst an in-patient. This is coordinated by the vaccination and immunisation team.

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
- The Trust ensures appropriate Infection Prevention and Control information accompanies patients transferred or discharged. The IP&C team work closely with SPCA and patient flow teams to assess infection risks if indicated prior to admission.

## Infection Control Assurance Framework

The Infection prevention and control committee oversees the National infection prevention and control board assurance framework issued by NHS England which enables an evidence-based approach to maintain the safety of patients, services users, staff and others.

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

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
Annual IPC Audits are undertaken in areas identified by the IPC team, additional assurance is obtained by the following: <ul style="list-style-type: none"><li>• Infection Control Policy compliance</li><li>• Facilities environmental audits</li><li>• Compliance with the infection control assurance framework</li><li>• Public information about the organisations general processes and arrangements for preventing and controlling healthcare acquired infections.</li></ul>	Annually  Quarterly – Review workplan	

## 7. INCIDENT AND NEAR MIS REPORTING AND REGULATION 20 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, or deaths, related to patient safety incidents, Regulation 20 Duty of Candour must be considered and guidance for staff can be found in the [Duty of Candour Policy](#) and Intranet resources. Professional Duty of Candour and the overarching principle of 'being open' should apply to all incidents.

## 8. TRAINING

Infection Prevention and control is part of mandatory training requirements, clinical staff are

required to ensure they complete annual IP&C e-learning and non-clinical staff 3 yearly.

## 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](mailto:InfectionControl@ghc.nhs.uk)

## 10. REFERENCES

*epic3: National Evidence-Based Guidelines for Preventing Healthcare-Associated Infections in NHS Hospitals in England (2014)* H.P. Lovedaya et al. *Journal of Hospital Infection* 86S1 S1–S70 [epic3: National Evidence-Based Guidelines for Preventing Healthcare-Associated Infections in NHS Hospitals in England](#) Last accessed 20/03/2025

NHS England <https://www.england.nhs.uk/long-read/national-standards-of-healthcare-cleanliness-2025/>

[The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates - The Nursing and Midwifery Council](#)

World Health Organization (2009) *Clean Care is Safer Care Campaign*. [www.who.int/gpsc/5may/en/](http://www.who.int/gpsc/5may/en/) Last accessed 30/04/2024

*National Infection Prevention and Control manual for England*. [NHS England » National infection prevention and control](#) Last accessed 30/04/2024