Policy Group: Clinical
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Approved by: Environment, Security & IPC Group

Infection Prevention and Control Policy

Contents

TARGET AUDIENCE (including temporary staff)	
People who need to know this document in detail	Infection Prevention and Control team.
People who need to have a broad understanding of this document	Executive Team, Environment, Security & IPC Group members
People who need to know that this document exists	All Healthcare professionals working within the organisation, including medical staff, nurses, allied health professionals and students.

1. **Policy Summary / Statement**
   This is an overarching policy to outline strategic arrangements for the Infection Prevention and Control of infection within St Andrew's Healthcare. This policy applies to all St Andrew's Healthcare employees; it extends to volunteers, bureau, agency and temporary staff.

   This policy aims to ensure that the charity continues to maintain effective arrangements for Infection Prevention and Control, recognising the role of the Environment, Security & IPC Group and the Infection Control Champions across the charity, with good management and organisational processes which are crucial to make sure that high standards of infection prevention including cleanliness are set up, maintained and monitored with evidence of audit to ensure the environments and staffs clinical practices minimises the risk of any harm to our patients of acquiring a healthcare associated infection (HCAI). Failure by any member of staff to comply with this policy or any of its associated procedures may result in disciplinary action.

   This policy confirms the charity's commitment to the prevention and control of infection. This is to be achieved through implementation of policies/procedures with the promotion of training and education, and a robust audit programme supporting and monitoring, and thus providing the charity with quality & compliance assurance reports for board inclusion.

   All registered providers must have adequate systems for infection prevention and control, including cleanliness, to be compliant with The Health and Social Care Act 2008 Code of Practice on the Prevention and Control of Infections and related guidance (updated 2015). The code contains statutory guidance about compliance with the registration requirement relating to infection prevention regulation 12 (2) (h) and 21 (b) of the Health & Social Care Act 2008. Regulation 15 is also relevant.

   St Andrew's Healthcare is committed to the principles within the NHSE document Confronting antimicrobial resistance 2024 to 2029

2. **Links to Procedures**
   The Charity has adopted the NHSE IPC manual, NHS England » National infection prevention and control manual (NIPCM) for England which incorporates Chapter 1: standard infection control precautions (SICPs), Chapter 2: transmission based precautions (TBPs), Addendum on high consequence infectious diseases (HCID) and Appendices.

   The charity will continue to adopt further chapters in the manual as they are published. Currently, the Charity will continue to follow the additional procedures as below.

   Other linked procedures:
   Aseptic Procedure
   HCAI Risk Assessment
   MRSA Procedure
   Outbreak Procedure
   Tuberculosis (TB) Procedure
   Clostridium Difficile Procedure
   Blood Borne Virus (BBVs) Contamination Risk
   Dental Decontamination & Sterilisation Procedure

Infection Prevention and Control in the Built Environment procedure
Mattress Procedure

Policies and Procedures are available via A-Z:
Policies - Policies - A-Z (sharepoint.com)

Should you have any questions, please contact the infection control team via email on infectioncontrol@stah.org

3. **Scope**
This policy applies to all staff, contractors and visitors (professional and social) to the Charity, including Adult Care Services.

4. **Background**
The Care Quality Commission (CQC) is responsible for monitoring and judging compliance with the registration requirements set out in the above Health & Social Care Act 2008 (2022) regulations.

UK Health Security Agency (UKHSA) is responsible for protecting public health against infectious diseases and environmental hazards, we have a mandatory requirement to report reportable infections and outbreaks of infection to UKSHA.

Good management and organisational processes are crucial to make sure that high standards of IPC (including cleanliness) are developed and maintained.

The law states that the code is to be taken into account by the CQC when it makes decisions about registration against the IPC (including cleanliness) requirements. The regulations also state that registered providers must have regard to the code when deciding how they will comply with registration requirements. So, by following the code, registered providers will be able to show that they meet the relevant requirements set out in the regulations.

Commissioning organisations may also wish to assure themselves that the services that they commission are meeting expected requirements, and this may involve contract monitoring of the service that the Charity provides.

STAH need to have adequate systems for infection prevention (including cleanliness) as stated in the Code if they are to comply with the law, but because of the wide range of services provided by all registered providers, the Code will be applied in a proportionate way.

The CQC may use its enforcement powers or take other action where it decides that a registered provider is not meeting its legal obligations as set out in the regulations. It will reach this decision by looking at whether a registered provider is doing what is set out in the Code. If a registered provider is not following the Code, then the CQC will want to consider whether that is because it is not appropriate to the type of service being provided. If it is appropriate, the CQC will want to consider whether a registered provider is still protecting people from the risk of infection in another, equally effective way.

CQC have the power to bring a prosecution against the provider who fails to meet regulation 12 (2) (h), where this failure leads to avoidable harm, or the significant risk of such harm.

5. Definitions

Term	Definition
Communicable diseases	Communicable diseases, also known as infectious diseases or transmissible diseases, are illnesses that result from the infection, presence and growth of pathogenic (capable of causing disease) biologic agents in an individual human or other animal host.
Prophylactic medication	Medication, including vaccines used to prevent illness.

6. Key Requirements

- To support compliance with Health and Social Care Act 2008: code of practice on the prevention and control of infections and related guidance - GOV.UK

- To provide strategic arrangements for the Infection Prevention and Control of infection within St Andrew's Healthcare.

7. Roles and Responsibilities

Board of Directors

The Board, through the Executive, are ultimately accountable for the design and delivery of all policies and procedures.

Chief Executive Officer

The Chief Executive maintains overall responsibility for ensuring safe practices for patients and staff, which are delivered in part by the development and implementation of, and maintenance and monitoring of compliance to, related policies of the Charity.

Director of Infection Prevention and Control (DIPC)

- Provide oversight and assess assurance on IPC (including cleanliness), the built environment and antimicrobial stewardship to the Board. Where significant risks are identified the DIPC should advise the board on how to mitigate these. They should report directly to the board but are not required to be a board member
- Accountable for leading the organisation's IPC (including cleanliness) team strategy and improvement plan
- Oversee infection prevention and control policies and work with IPC leads to promote a systemwide approach
- Chair the Environment, Security & IPC Group and antimicrobial stewardship Group
- Have the authority to challenge inappropriate practice and inappropriate antimicrobial prescribing decisions
- Have the authority to set and challenge standards of cleanliness
- Assess the impact of all existing and new policies on infections and make recommendations for change
- Be an integral member of the organisation's clinical governance, patient safety teams, relevant structures
- Produce an annual report for IPC

Head of Infection Prevention and Control (HIPC)

- Responsible for developing policies and procedures.
- Provides expert advice, training and monitoring the compliance of the policy. Responsible for producing quarterly reports for the Quality Committee.
- Lead the production of an Annual Report with regard to compliance with good practice on infection prevention & control.
- Provides advice regarding infection prevention and control aspects of new builds/refurbishments.
- Supports local investigation and management of incidents relating to infectious diseases and alert organisms to enable clinical teams to prevent further incidence through learning and service improvement.

Environment, Security & IPC Group

Endorses the Charity's annual infection prevention & control programme, together with all infection control policies, procedures and guidelines. The group representative takes responsibility and makes decisions with support from the Head of Infection Prevention Control on behalf of their service.

Infection Prevention and Control Champion

Acts as a link between their clinical area and the Infection Prevention and Control team. Their role is to increase awareness of infection control issues on their wards and motivate staff to improve practices. Supporting the completion of clinical audits and campaigns on their wards to enable their Ward Manager and the Infection Prevention and Control team to monitor and advise on any further training requirements. They also provide information to assist in the early detection of outbreaks of infection.

The General Practitioner (GP), Responsible Clinician (RC), Associate Director of Physical Healthcare, Advanced Nurse Practitioner, Physical Healthcare Nurses, Nurses & all Medics.

Responsible for the diagnosis and treatment of infectious diseases as they occur for the patients in their care. There is also an ethical responsibility to consider the implications of such a diagnosis for others. To inform and liaise with the Head of Infection Prevention and Control Lead is imperative in ensuring specific infectious disease control measures are put into place.

Pharmacy

Responsibility for ensuring that medicines are managed safely and correctly in accordance with their role, responsibilities legislation, professional standards and in accordance with policy and procedures

Registered Manager for ACS

The Registered Manager is responsible for ensuring the effective implementation, monitoring and compliance of this Infection Prevention and Control (IPC) Policy within the service. They must ensure that all staff, including agency and temporary workers, are aware of and adhere to IPC procedures and receive appropriate training in line with current guidance. The Registered Manager will oversee local infection prevention practices, including cleanliness standards, hand hygiene, use of personal protective equipment (PPE), and safe management of outbreaks. They are responsible for ensuring that regular audits are completed, actions are taken to address any identified risks, and learning is embedded into practice. The Registered Manager must also ensure appropriate reporting of incidents, including notifiable infections, and liaise with external professionals and agencies such as UK Health

Security Agency and the Care Quality Commission where required. Overall, they are accountable for maintaining a safe environment that minimises the risk of infection to residents, staff and visitors.

Occupational Health Provider

- Responsible for ensuring an adequate immunisation programme for all Healthcare Workers is in place and that the appropriate vaccinations are given in a timely manner.
- To advise recruitment on the appropriate fitness of the individual for the role to be undertaken.
- To provide prophylactic medication, treatment or vaccination programme in the event of exposure to communicable diseases.
- To advise Healthcare Workers and Managers on individuals return to work after a period of sickness to ensure the safety of others is not compromised.
- Occupational Health provider to inform the Infection Control Lead of any concerns or practices which may have further implications for patients or staff. Staff with infections or who are at risk of infection through exposure or inoculation injury, will be managed in accordance with occupational health and safety procedures related to the prevention of transmission of infection.

UK Health Security Agency (UKHSA) – External Body

UKHSA is an executive agency incorporated in the Department Health and has been appointed to provide advice in collaboration with the Consultant in Communicable Disease Control, on communicable disease and infection control within the community.

The Consultant in Communicable Disease Control (CCDC) – Non Charity Employee

The Consultant in Communicable Disease Control (CCDC) is employed by UKHSA and has the executive responsibility for the control of infectious disease within the community.
The Consultant in Communicable Disease Control also advises during outbreak of infection and has statutory duties and powers relating to communicable disease control.

Environmental Health Practitioners – Non Charity Employees

Environmental Health Practitioners work for local authorities as environmental health officers (EHO's) who advise on the management of food safety, including on hygiene and kitchen design, pest control and waste disposal. Their duties include the inspection of food premises as well as enforcing the provisions of UK laws and EU food hygiene legislation applied throughout the UK. The EHO's also investigate complaints about food and collaborate with the CCDC in the investigation of outbreaks, particularly of food or water-borne illnesses.

Staff

Responsible for following the policy and associated procedures.

8. **Monitoring and Oversight**

The responsibility of ensuring all the criteria from the Health & Social Care Act 2008 (updated 2022) are met lies with the Chief Executive Officer, Director of Infection Prevention and Control, Clinical Directors, Operational Leads, Clinical Leads, Associate Directors of Nursing, Quality Matrons, Ward Managers/Team Leaders and Deputies, The Environment, Security & IPC Group, Infection Control Lead.

The progress of Infection Prevention and Control is monitored through the Environment, Security & IPC Group, which is chaired by the Executive Director of Quality and Nursing, who undertakes the DIPC role and is accountable to the Chief Executive and Board of Directors.

The Environment, Security & IPC Group are responsible for monitoring progress against KPIs and escalating risks as required.

The Environment, Security & IPC Group meets monthly. Minutes of the meeting are circulated, and key KPIs are reported to the Board of Directors.

The group reports to the Integrated Quality and Performance Assurance group via the Quality Assurance Group.

A programme of audits agreed by the Environment, Security & IPC Group, under the direction of the HIPC will be carried out to establish the effectiveness, implementation of, and the extent of compliance with this policy and its associated procedures to provide independent assurance that an appropriate and effective system of managing infection control is in place. This includes clinical dashboards and key performance indicators and audits.

This policy is also accounted for within the Charity's Risk Management Framework, incorporating appropriate controls and mitigations, and as such, there will be periodic reviews over the accuracy and effectiveness of any policy/procedure related controls. For further information, go to the Risk Management Hub page.

9. **Diversity and Inclusion**
St Andrew's Healthcare is committed to *Inclusive Healthcare*. This means providing patient outcomes and employment opportunities that embrace diversity and promote equality of opportunity, and not tolerating discrimination for any reason

Our goal is to ensure that *Inclusive Healthcare* is reinforced by our values, and is embedded in our day-to-day working practices. All of our policies and procedures are analysed in line with these principles to ensure fairness and consistency for all those who use them. If you have any questions on inclusion and diversity, please email the inclusion team at DiversityAndInclusion@stah.org.

10. **Training**
There is a programme of ongoing education to support The Standard Infection Control Precaution Practices across the charity, enabling staff to be competent and confident in their responsibilities in the process of preventing and controlling infection. Attendance/completion is reported and monitored.
    - Infection prevention & control is covered in induction for all new staff. Non-clinical will complete elearning for Health IPC Module 1. Clinical staff have elearning for Health IPC Module 2.
    - Mandatory annual e-learning for Health modules for all staff members, clinical and non-clinical.
    - Informal education sessions available as requested.
    - Training identified following audit.
    - Training days for IPC Champions.
    - IPC Champion bi-monthly meetings educational focussed.

11. **References to Legislation and Best Practice**

Raising standards of infection prevention and control in the NHS (2018). http://researchbriefings.files.parliament.uk/documents/CDP-2018-0116/CDP-2018-0116.pdf

Antimicrobial Resistance (2017) www.parliament.uk https://researchbriefings.parliament.uk/ResearchBriefing/Summary/CBP-8141

National Institute for Health and Care Excellence (2014) Healthcare-associated infections: prevention and control in primary and community care NICE Quality Standard (CG139), QS61, QS49. Overview | Healthcare-associated infections: prevention and control in primary and community care | Guidance | NICE

Department of Health (2022) The Health & Social Care Act 2008. *Code of Practice* on the Prevention and Control of Infections and Related Guidance. London. Health and Social Care Act 2008: code of practice on the prevention and control of infections and related guidance - GOV.UK

World Health Organisation
Infection prevention and control GLOBAL

Department of Health (2013) DH Health building notes
https://www.gov.uk/government/collections/health-building-notes-core-elements

National Evidence-Based Guidelines for Preventing Healthcare-Associated Infections in NHS Hospitals in England epic3 (2014) Journal of Hospital Infection
epic3: National Evidence-Based Guidelines for Preventing Healthcare-Associated Infections in NHS Hospitals in England

Infection Prevention Society (IPS) http://www.ips.uk.net/

NHS England NHS England » National infection prevention and control manual (NIPCM) for England

Department of Health (2013) Health Building Note 00-09 Infection Control in the Built Environment Health Building Note 00-09: Infection control in the built environment

UK 5-year action plan for antimicrobial resistance 2024 to 2029 - GOV.UK

12. **Exception Process**

Please refer to the exception process Policy and Procedure Exception Application Link

13. **Key changes**

Version Number	Date	Revisions from previous issue
8	October 2019	Updated to new template. Replaces IC 01 v5
8.1	May 2020	Update to email contact details for infection control. updated references from Chief Nurse to Head of Physical Healthcare
8.2	June 2020	Updated review date and authorising ref
8.3	Sept 2022	Full review and updated in line with current guidance. Updated to new policy template.
8.4	Nov 2024	Added a new statement within the monitoring section to highlight this policy has an associated risk as recorded within the risk register
9.0	May 2026	Reviewed and updated to reflect internal and external changes

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