

# INFECTION PREVENTION AND CONTROL POLICY

<b>Version:</b>	1.4
<b>Responsible Committee:</b>	CLT
<b>Date approved:</b>	25/10/2016 Amended 15/11/16 – changes to meeting structure. GM
<b>Review Lead:</b>	Gill Manojlovic
<b>Date issued:</b>	04/11/2016
<b>Next review to be complete by:</b>	January 2019
<b>Target audience:</b>	Calderdale MBC employees, agency staff and volunteers including special schools. Plus Calderdale Health and Social Care providers adopting this policy.

## Contents

## Page

1.	<b>Introduction</b>	3
2	<b>Scope</b>	3
3.	<b>Accountability &amp; Responsibility</b> 1.1 Infection Prevention & Control Team 1.2 Registered Providers	3
4.	<b>Key Contacts</b>	5
5.	<b>Key meetings</b>	5
6.	<b>IPC policies and guidelines</b>	7
7.	<b>Associated policies</b>	8
8.	<b>Monitoring and review</b>	8
9.	<b>Equality Impact Assessment</b>	9
10.	<b>References</b>	9
	<b>Appendix A – Governance structure</b>	10
	<b>Appendix B - List of guidelines and relevance to areas of the organisation.</b>	11

## **1. INTRODUCTION**

Infection prevention and control is part of everyday working life, as infections can affect service users colleagues and visitors to services. In addition, all registered providers of health and social care are required to have systems and processes in place for Infection Prevention and Control<sup>1</sup>.

This policy outlines the Infection Prevention and Control (IPC) arrangements for Calderdale MBC, and identifies associated policies and guidelines required to support a healthy workforce and clean safe care.

## **2. SCOPE**

This policy applies to all employees, agency workers and volunteers regardless of where they work. The guidelines outlined in Appendix B are to be followed where they are relevant to the nature of the work undertaken. See section 6 for further information.

## **3. ACCOUNTABILITY AND RESPONSIBILITY**

IPC governance structure is included in Appendix A.

### **3.1 Chief Executive**

- Overall responsibility for ensuring there are effective Infection Prevention and Control arrangements within Calderdale CMBC

### **3.2 Director of Public Health**

- Overall responsibility for Public Health in Calderdale.
- Ensure IPC specialised advice is available to all local commissioners
- Maintain an overview of IPC locally including outbreaks and incidents and their management locally.
- Gain assurance that all NHS and Calderdale CMBC commissioners include infection control in contracts.
- Active leadership of health protection committees / networks.

### **3.3 Service managers**

- Ensure appropriate risk assessments are completed for their service.
- Responsible for effective implementation of IPC policy and relevant guidelines within their areas of responsibility
- Ensure that, where appropriate, supplies of equipment to support Standard Infection Control Precautions are available e.g. Gloves, aprons, soap, alcohol hand rub etc.

### **3.4 Health and Social Care service managers:**

- Responsible for effective implementation of IPC policy and relevant guidelines within their areas of responsibility and compliance is audited.

- Receive and analyse all risk incidents relating to IPC and ensure actions arising are delivered.
- Ensure that staff involved in direct care receive adequate, appropriate training in IPC including Standard Infection Control Precautions.

### **3.5 Staff:**

- Ensure that they understand and comply with this policy and relevant guidelines and document rationales when there is deviation.
- Where applicable and in line with service training matrix attend infection prevention and control training and participate in a hand hygiene practical session
- Report hazardous practices, incidents and near misses to their line manager as soon as they are identified and complete incident reports in line with Health and Safety/incident policy.

### **3.6 Infection Prevention and Control Team:**

- Advise service managers and staff and other Calderdale Health and Social Care providers on matters relating to Infection Control Precautions.
- Lead the response to outbreaks of infection as required by the Director of Public Health
- Submit reports as required through the governance structure
- Raise concerns formally with commissioners and CQC when providers have inadequate infection control systems in place or fail to address incidents/outbreaks appropriately or fail to respond to PHE or IPC advice.
- Develop protocols for the identification and management of outbreaks including support materials.
- Facilitate the audit of Standard Infection Control Precautions in provider services<sup>1</sup>.
- Facilitate the inclusion of Standard Infection Control Precautions within Infection Prevention and Control Induction and Mandatory training sessions.
- Deliver an IPC service to the Calderdale Clinical Commissioning Group (CCG) in line with the Memorandum of Understanding (MOU)
- Ensure the Infection Prevention and Control policy and guidelines are reviewed as plan or as required in response to new evidence.
- Ensure the Infection Prevention and Control policy and guidelines are available on the intranet and internet.
- 

#### **3.6.1 Infection Prevention and Control service to the CCG.**

The Memorandum of Understanding (MOU) between the CCG and CMBC provides the following support to the CCG from the IPC team.

- Maintain an overview of Infection Prevention & Control locally and monitor the incidence of healthcare associated infections against nationally set targets.
- Provide expert infection prevention advice to ensure contract and service specifications meet Infection Prevention standards including compliance with the Health and Social Care Act 2008 – Code of Practice (2015)

- Provide advice to the CCG and clinical community (e.g. GPs) on IPC issues
- Review assurances from CCG commissioned services and raise concerns with commissioners when providers have inadequate infection control systems in place
- Carry out investigations as required by Department of Health for MRSA bacteraemia and Clostridium Difficile cases.
- Attend key assurance and development meetings e.g. CHPAG and the Health Economy IPC meeting.
- Maintain an overview of local incidents and obtain assurances from commissioned services that outbreak/ incident reviews have taken place and lessons identified implemented.
- Provide specialist advice to the CCG in conjunction with Public Health England, e.g. regarding commissioning of a comprehensive Tuberculosis service.

#### **4. KEY CONTACTS**

For general enquiries and advice contact the Calderdale MBC Infection Prevention & Control Team

Telephone: 01422 266163

Fax (safe haven): 01422 392081

Email IPC@calderdale.gov.uk

Website for many resources <http://infectioncontrol.calderdale.gov.uk/>

To report outbreaks or to report a notifiable infection of Public Health significance contact Public Health England in addition to notifying the Infection Prevention and Control Team

Telephone: 0113 3860300 (within office hours)

0114 3049843 (out of hours)

To discuss exclusion from work due to infection contact Occupational Health

To discuss risk assessment or report an incident contact the Health and Safety team

#### **5. KEY MEETINGS**

##### **5.1 CALDERDALE HEALTH PROTECTION ASSURANCE GROUP (CHPAG)**

###### **5.1.1 Function of the CHPAG**

The aim of the Calderdale Health Protection Assurance Group is to provide assurance to the Director of Public Health in Calderdale about the adequacy of prevention, surveillance, planning and response with regard to health

protection issues. Issues that are within scope of the group, but are not restricted to:

- Infectious disease (including blood born viruses and tuberculosis)
- Healthcare acquired infections including hospital acquired infections
- Environmental hazards
- Immunisation programmes
- Sexually transmitted infections including HIV
- National screening programmes
- Health service and public health response to emergency planning issues including CBRN and Pandemics

This will be achieved through the following functions:

- Development of a health protection dashboard pulling together data from a variety of sources including Public Health England, NHS Trusts, NHS England and Environmental Health in order to assess performance
- Monitor plans relevant to the health protection agenda
- Coordinate work concerning health protection issues to inform future updates of the JSNA
- Promote evidence based practice in all areas of health protection practice and be assured that current advice is followed
- Identify and review health protection incident response arrangements
- Encourage learning from incidents and near misses has been established into future working practices
- Review poor performance in health protection programme areas and expect recovery plans to be in place
- Raise health protection concerns with the relevant commissioners and/or providers
- Escalate concerns through the Director of Public Health to the Health and Wellbeing Board and/or to the Chief Executive of Calderdale Metropolitan Borough Council or regional level of Public Health England as appropriate

The CHPAG reports to the Health and Wellbeing Board.

### **5.1.2 Members**

Director of Public Health (chair)  
Consultant in Public Health (Deputy chair)  
Head of Infection Prevention and Control, CMBC  
Emergency Planning Manager, KBC  
Principal Officer Environmental Health, CMBC  
Head of Quality, Calderdale Clinical Commissioning Group  
Quality Manager, Calderdale Clinical Commissioning Group  
Head of Primary Care, Calderdale Clinical Commissioning Group  
Consultant in Communicable Disease Control, Public Health England  
Immunisation and Screening Coordinator, NHS England

## **5.2. CALDERDALE AND GREATER HUDDERSFIELD HEALTH ECONOMY INFECTION PREVENTION AND CONTROL GROUP**

### **5.2.1 Function of the HCAI group**

The group meets at least 4 times a year. Its functions are to:

- Share incidence and analysis of relevant HCAI data e.g. MRSA, Cdiff; MSSA and E.Coli with member organisations.
- Develop health economy wide strategies & monitor implementation.
- Ensure Post Infection Review (PIR)/ Root Cause Analysis (RCA) are undertaken promptly and constructively challenged; learning is shared and actions completed.
- Explore opportunities to influence practice in relation to antimicrobial resistance and promote antimicrobial stewardship.
- Feedback progress against HCAI improvement and PIR action plans at each meeting.
- Identify and discuss risks to be alerted to CHPAG
- Identify opportunities to learn from elsewhere and ensure acted on as appropriate.
- Identify areas for further specific investigation e.g. ecoli bacteraemia.

The group reports to the Calderdale Health Protection Assurance Group and the Calderdale CCG Quality Committee.

### **5.2.2 Members**

Head of Infection Prevention and Control, CMBC (chair)  
Head of Health Protection, Kirklees MBC  
Infection Prevention and Control representation from Calderdale and Huddersfield NHS Foundation Trust, South West Yorkshire Partnership Foundation Trust, Locala, and Local Care Direct  
Public Health England representatives  
Consultant Microbiologist, CHFT  
Calderdale CCG and Greater Huddersfield CCG representatives from Quality team and medicines management

## **6. IPC policies and guidelines**

Standard Infection Prevention and Control Precautions are principles that are to be followed by all staff to prevent cross infection to themselves and between service users. These are available online as 'bite size' guidelines:

Hand hygiene, personal protective equipment, sharps safety, spillage management

In line with the requirements of the Health and Social Care Act 2008 (version 2015) additional guidelines are included which are relevant to provider services and may be

relevant to other services where service users are visited at home, assisted or transported. The full list of IPC guidelines can be seen in Appendix B

## **7. ASSOCIATED POLICIES**

There are a number of Calderdale MBC policies to be referred to in conjunction with the IPC policy and the 'bite size' guidelines

### **7.1 Council policies – available via the intranet.**

- Incident management including pandemic
- Council procedure for the management of exposure to blood borne viruses
- Health and Safety policies
- Uniform and dress code
- Immunisation of service users

### **7.2 External policies for reference**

- Calderdale and Huddersfield NHS Foundation Trust – Prevention and Management of Clinical Sharps Injuries and Exposure to Blood and High Risk Body Fluids. The Trust manages incidents of exposure to blood borne viruses for the Council. See the Council procedure for details.
- Community Antibiotic Formulary - Calderdale, Kirklees and Wakefield.  
<http://www.swyapc.org/primary-care-antibiotics/>

## **8. MONITORING OF INFECTION PREVENTION AND CONTROL POLICY**

Monitoring of this policy will be through review of training data, incident reporting and complaints. Monitoring of adherence to specific sections of the guidelines will be achieved within provider services by a programme of audit and will include as a minimum: standard precautions (hand hygiene, personal protective equipment, sharps management, work wear and catheter care where applicable).

The policy and guidance documents will be reviewed in line with council processes and the policy will be ratified through Corporate Leadership Team.



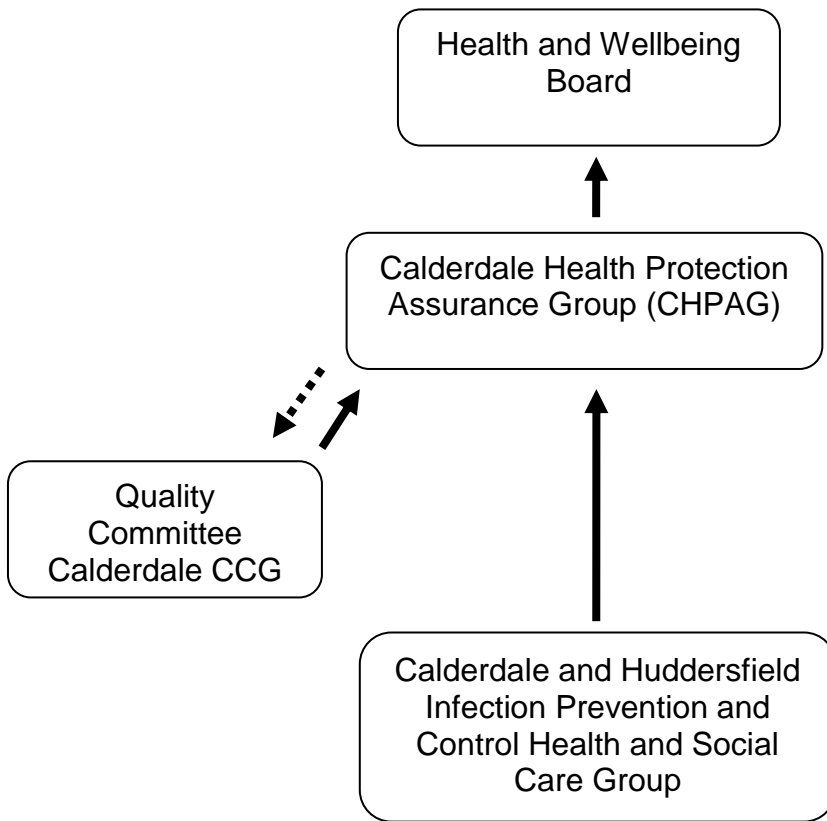
## 9. EQUALITY IMPACT ASSESSMENT

The policy has been assessed as not having an effect on eliminating unlawful discrimination, victimisation and harassment, advancing equality of opportunity or fostering good community relations. The assessment has been submitted and a full equality impact assessment is not required.

## 10. REFERENCES

1. Department of Health (2015) **The Health and Social Care Act (2008) Code of Practice on the prevention and control of infections and related guidance**. DH: London
2. National Institute for Health and Clinical Excellence (2012). **Infection: prevention and control of healthcare-associated Infections in primary and community care**. <http://www.nice.org.uk/cg139>
3. Calderdale CCG / Calderdale CMBC (2015) **Public Health MOU** at [S:\02 - CMBC\01 -Filing\CCG\MOU review 2015\MOU draft August 2015.doc](#)

## Appendix A: IPC Governance Structure



Minutes received ← .....  
Reports to ← ———

## Appendix B

Guidance and UI		Replacing CMBC policy no.	Associated CMBC documents	Date of issue	Date of review
Principles of IPC including risk assessment		NA CH-03r	Health and safety policies		
Hand hygiene		REG 08a	Health and safety policies		
Personal protective equipment		REG 08a	Health and safety policies		
Sharps safety and injury management		REG 08a	Procedure for protection of workers against blood borne viral infections Health and safety policies		
Housekeeping including spillages, laundry, cleaning, waste		CH REG 08a - 03t CH-03i	Health and safety policies		
Aseptic non-touch technique		-			
Outbreak management		CH-03h CH-03n	Incident management		
Decontamination of medical devices/care equipment		CH-03k CH 03j			
Specimen management		CH 03q			
Control of outbreaks and infections associated with alert organisms	MRSA <b>IPCN1-16</b>	CH-03d			
	Clostridium difficile <b>IPCN2-16</b>				
	Multi resistant organisms				
	Scabies <b>IPCN5-16</b>				
	Viral gastroenteritis <b>IPCN6-16</b>				
Use and care of invasive devices Catheter management Enteral feeding		CH-03s			
Dissemination of information		CH-03v			

Isolation	CH-03d			
Uniform and dress code				
Immunisation of service users	CH-03Y			