


HOLY CROSS HOSPITAL

Policy Title	Infection Prevention and Control Policy
Policy Group	Clinical
Policy Owner	Director of Nursing Services
Issue Date:	September 2020
Review Period:	2 years
Next Review Due	September 2022
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Cross References:	<ul style="list-style-type: none"> • Infection Prevention Manual • COSHH Policy • Waste disposal policy • PPE Policy – Maintenance • Operational standards document • Clinical manual • Catering policy • Water safety • Transfer of an infected patient
References:	<ul style="list-style-type: none"> • The Health and Social Act 2008 Code of Practice of the prevention and control of infection and related guidance (added 2 October 2015) • National Evidence-Based Guidelines for Preventing Healthcare-Associated Infections in NHS Hospitals in England. <i>Journal of Hospital Infection</i> (2014) • Lessons in Implementing Infection Prevention. <i>Journal of Infection Prevention</i> (March 2015) • Infection Prevention and Control within Health and Social Care, <i>Royal College of Nursing April (2015)</i> • UK Governments 5 Year Antimicrobial Resistance (AMR) Strategy 2013–2018 Annual progress report and implementation plan 29014 (added 11 December 2014) • NICE Quality Standard 6: Infection Prevention and Control is available here (added 30 April 2014) • Infection Prevention and Control Commissioning Toolkit. <i>Royal College of Nursing April (2016)</i>
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Policy Accepted by MT	2 nd September 2020
Sign off by CEO	

1. INTRODUCTION

Good infection prevention is essential to ensure that people who use the hospital services receive safe and effective care. Effective prevention and control of infection must be part of everyday practice and be applied consistently by everyone.

Good management and organisational processes are crucial to make sure that high standards of infection prevention are developed and maintained.

2. POLICY STATEMENT

Infection prevention and control is promoted at Holy Cross Hospital by implementation of informed practice, effective communication and education. The Hospital Management Team views it as a high priority and ensures adequate, effective resources are available.

Standards, guidelines and protocols are in place and audited regularly as appropriate. Training and feedback following audits is provided for all staff.

The Director of Nursing Services is designated as Infection Control Lead and will co-ordinate the activities of the Infection Prevention and Control Link Team comprised of representatives from all areas in the hospital.

This policy is designed for the individual's care and the hospital that will help to prevent and control infections. Its aim is to exemplify what the hospital need to do in order to comply with the Care Quality Commission (CQC) and the Code of Practice regulations.

3. INFECTION PREVENTION AND CONTROL MANUAL

The infection prevention and control manual sets out guidelines and protocols to minimise the risk of cross infection and reduce the prevalence of healthcare associated infections (HCAIs) at Holy Cross Hospital.

The manual focuses on key areas in the prevention and control of infection including standard precautions, guidance on management of specific conditions, outbreak control and audit.

4. RESPONSIBILITIES

4.1. Infection Prevention and Control Lead

- Monitor incidence and prevalence of infection within the hospital including rates, types, sites and treatment
- Auditing of effectiveness of guidelines and protocols and making recommendations with the aim of minimising risk of infection within the hospital
- Provision of training to all staff initially on induction and on an annual basis thereafter
- Assessment of practicability of procedures for supporting staff compliance
- Product evaluation
- Liaison with the Consultant Microbiologist on infection prevention and control issues
- Co-ordinate activities of link team
- With the support of the link team review new legislation, guidance, research and identified risks
- Dissemination of information to staff, patients, visitors, volunteers and visiting contractors

- Provide information on infection rates
- Prepare an annual report on infection prevention and control for review by Clinical Governance Group and presentation to Management Team, Medical Advisory Committee and Advisory Committee

4.2. Infection Prevention and Control Link Team

- Involvement in research into best practice and development of local guidelines and protocols
- Ensure guidelines and protocols are followed providing on the spot advice as necessary
- Product evaluation
- Hand hygiene initiatives
- Hospital and equipment cleanliness
- Involvement in audit and implementation of recommendations
- Attending annual IPC conference and sharing with staff
- Involvement in staff training and mentoring

4.3. Senior Nursing Staff

- Ensure adequate clinical equipment is available for individual patients
- Ensure good practice is implemented and maintained
- Day to day monitoring of staff adherence to policy and compliance with best practice guidelines
- Identification of staff training needs and consequent feedback to IPC Lead
- Liaison between clinical staff and the IC Link Team to foster strong dialogue and effective dissemination of information

4.4. General Manager

- Lead the whole support team in providing and maintaining a clean and appropriate environment in the hospital that facilitates the prevention and control of infections
- Participation in bimonthly infection prevention and control team meeting and contribute towards the best practice
- Involvement in audit and implementation of recommendations
- Integrating infection prevention and control practice into health and safety regulations
- Ensure annual Patient Led Assessment of the Care Environment (PLACE) audit is conducted effectively, implementing action plan based on recommendations

5 Outbreak Management and Control

If an outbreak is suspected within the hospital, the Infection Prevention and Control Lead, Hospital Management Team, Medical Staff and the Consultant Microbiologist must be immediately informed. Chief Executive will inform the Care Quality Commission. Decisions as to what action is to be taken rests with the Infection Control Team in consultation with the Microbiologist. The urgency of the situation depends on the virulence of the organism and the vulnerability of the patients affected.

6. Pandemic management and control

If a global pandemic is declared, Chief Executive will appoint a person from the management team to take the lead in managing the whole situation by working closely with Public Health England and local health authorities to provide latest guidance to staff, patients and visitors.

7. Equality and Diversity

This policy has been checked for overt or implied discrimination within the scope of the Hospital's policies on equality and diversity and none was found.