

NHS Professionals

POL6 Infection Control Policy

Content	Page Number
Introduction	2
Scope of policy	2
Organisational structure and framework	3
Corporate Responsibilities	3
Partnership with NHS Trusts	4
Flexible Worker Responsibilities	4
Standard infection control precautions	6
Gastrointestinal infections/ viral gastroenteritis	7
Generic outbreak management	10
Reportable/ notifiable disease	11
References	13
Useful websites	13
Version control information	14

Introduction

NHS Professionals works in partnership with NHS Trusts to provide high quality flexible staff to acute, mental health and primary care organisations across England. As an accountable organisation there is a requirement for NHS Professionals to have a policy that outlines the strategic arrangements for their flexible workers for the prevention and control of infection which will support the policies in each client Trust.

It is the responsibility of **all** health care staff/workers to minimise the potential risk of patients acquiring a healthcare associated infection in any care setting. It is estimated that 300,000 patients a year in England acquire a healthcare associated infection (HCAI) as a result of care within the NHS. The prevalence of healthcare-associated infections in hospitals in England in 2011 was 6.4%. The most common types of healthcare-associated infection are respiratory infections (including pneumonia and infections of the lower respiratory tract) (22.8%), urinary tract infections (17.2%) and surgical site infections (15.7%). Each one of these infections means additional use of NHS resources, greater patient discomfort and a decrease in patient safety. (NICE 2014)

Saving Lives: reducing infection, delivering clean and safe care (DH 2007) to provide tools and resources for Trusts to support them in embedding effective prevention and control of HCAI into everyday practice. This guidance was taken a step further with The Health & Social Care Act 2008, Code of practice the prevention and control of infections and related guidance which was updated in 2015. (DH 2015)

The NHS Outcomes Framework for 2015/16 (DH 2015) highlights the reduction of healthcare associated infections as a priority as part of plans to reduce the incidence of avoidable harm.

All the above documents inform and assist NHS Professionals in embedding good infection prevention and control practices for flexible workers in partnership with client Trusts. Standard infection control principles to be followed by all NHS Professionals flexible workers are specified in NHS Professionals CG1 Standard Infection Control Precautions.

Patients deserve to be treated in a safe clean environment and have the highest standards of care every time they receive treatment to minimise their risk of acquiring a health care associated infection and NHS Professionals is committed to comply with all national guidance and policy to in order to achieve this.

Scope

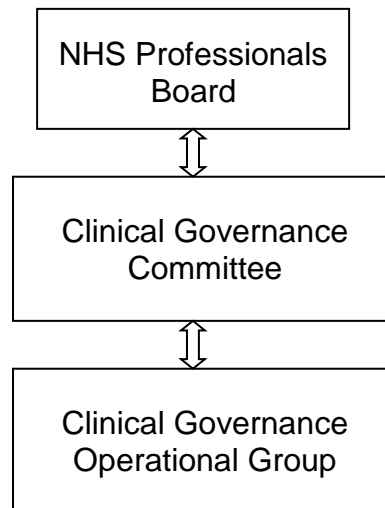
This policy applies to all NHS Professionals corporate staff and to all flexible workers working for NHS Professionals in any acute Hospital Trust, Community or Mental Health Trust.

It is intended to be used alongside, and not replace, local NHS Trust policies.

This policy is supported by NHS Professionals CG1 Standard Infection Control Precautions.

Organisational Structure and Framework

Corporate responsibilities



1. The Chief Executive is responsible for ensuring that effective infection control arrangements are in place within the organisation and that these are subject to annual review.
2. The Director of Clinical Governance and Operations for NHS Professionals is the lead for infection control within the organisation, responsible for the overall infection prevention and control programme and reports directly to the Chief Executive.
3. The key senior management forum for infection prevention and control is the Clinical Governance Committee. This committee meets quarterly and membership includes Non-Executive Directors and the Director of Clinical Governance and Operations. The operational aspects of infection prevention and control for NHS Professionals are the responsibility of the Clinical Governance Operations Group which meets monthly.
4. The Head of Operations in the Service Centre is responsible for managing key infection control prevention and control issues on a day to day basis, supported by the Senior Nurse/ Head of Governance.
5. The Clinical Governance Annual Report will include any NHS Professionals infection prevention and control issues.
6. This evidence-based infection control policy and associated guidelines will be available for all staff. They will be reviewed as new legislation or evidence of best practice is published, but not less than triennially.

7. The policy and guidelines will be approved and ratified by the Clinical Governance Committee.
8. NHS Professionals will have guidance from a senior infection control advisor and/or client Trust infection control teams.
9. NHS Professionals will have standard procedures to follow in the event that a client Trust has an outbreak of an infectious disease. For any outbreaks of an infectious disease not included within this policy, NHS Professionals will follow local Trust policies and Standard Infection Control Principles.
10. Identified risks regarding infection prevention and control will be documented on the NHS Professionals risk register and the information used to inform future policy developments.
11. NHS Professionals will ensure training on infection control is provided on induction and as part of annual mandatory training for flexible workers.
12. Any NHS Professionals flexible workers that are identified to undertake assignments in exposure prone areas will be cleared for work by the NHS Professionals Occupational Health department in line with national policies.
13. NHS Professionals will supply each bank only flexible worker with an agreed number of uniforms and inform staff they must wear a clean uniform for each assignment.
14. All NHS Professionals corporate staff visiting Trust premises will adhere to this policy and utilise standard infection control principles as detailed in NHS Professionals CG1 Standard Infection Control Precautions.

Partnership with Trusts

15. Communication regarding infection control issues between the Trust and NHS Professionals must be established to support patient safety at all times.
16. Any working restrictions applied to Trust staff will be applied equally to NHS Professionals staff and vice-versa.
17. Where an outbreak of an infectious disease requires screening or follow-up care, for example where Tuberculosis is identified, this will be provided by the Trust and communicated to NHS Professionals Flexible Worker Human Resources team.
18. NHS Professionals will work in partnership with Trusts to ensure that flexible workers are orientated to clinical areas, including standards set for infection prevention and control.

Flexible worker responsibilities

19. Every NHS Professionals flexible worker has a responsibility to deliver healthcare to his/her patients in the safest and most effective way possible.

20. Every NHS Professionals flexible worker has a responsibility to make themselves aware of the contents of this policy and associated guidelines and to comply with local Infection Prevention and Control guidelines in each Trust where they work assignments.
21. Every NHS Professionals flexible worker has a responsibility to bring to the attention of the Client Relations Team any problems in complying with the procedures outlined in this policy.
22. Every NHS Professionals flexible worker has a responsibility to inform NHS Professionals of any changes to their personal circumstances.

Standard Infection Control Precautions

Standard Infection Control Precautions (previously known as Universal Precautions) represent the standard of care and precautions that should be routinely used with all patients in order to minimise exposure to and transmission of potential micro-organisms from both recognised and unrecognised sources.

The key to using these precautions is risk assessment to establish the possible exposure to blood and body fluids, including substances likely to cause harm and the application of standard infection control precautions at all times.

The key points of the standard precautions are: -

- Use effective hand hygiene
- Treat all blood and body fluids as infected
- Use appropriate personal protective equipment (PPE) when dealing with blood and body fluids, including substances hazardous to health
- Use and dispose of sharps safely
- Manage equipment used in the delivery of care appropriately in order to limit the risk of contamination with microorganisms.
- Adhere to local Environmental Hygiene Policy, including prompt management of blood and body fluid spillages
- Dispose of clinical waste correctly and safely
- Manage linen used during the delivery of care appropriately to limit the risk of contamination with microorganisms

The Infection Control Team of all client Trusts should advise NHS Professionals of any additional actions/precautions required in specific cases to ensure staff and patient safety.

For further information please see NHS Professionals CG1 Standard Infection Control Precautions

Standard Operational Procedure in the event of a reported outbreak of:

Gastrointestinal infections/ viral gastroenteritis

Gastrointestinal infections/viral gastroenteritis have many causes and have a variety of presenting symptoms i.e. diarrhoea, vomiting, nausea, abdominal pain, pyrexia and headache. One or more of these symptoms may be present, but those most likely to contribute to cross-infection are vomiting and diarrhoea.

Flexible workers

1. All NHS Professionals flexible workers must be familiar with and comply with local Trust infection control policies.
2. All NHS Professionals flexible workers must follow standard infection control precautions as detailed in NHS Professionals CG1 Standard Infection Control Precautions.
3. All NHS Professionals flexible workers must wear a clean uniform for each assignment.
4. NHS Professionals flexible workers are under no obligation to accept assignments.
5. Where a flexible worker has accepted an assignment on a ward which has or subsequently has an outbreak of diarrhoea and/or vomiting, they will be informed by the Service Centre.
6. Flexible workers must have the patients care, wellbeing and safety as their first concern in accordance with NHS Professionals Code of Behaviour and professional codes of Conduct where applicable.
7. Where a flexible worker has worked an assignment on a ward which has an outbreak of diarrhoea and/or vomiting, they should be offered further assignments, as available during the outbreak, in the same area to minimise movement of staff.
8. Where a flexible worker has worked an assignment on a ward which has an outbreak of diarrhoea and/or vomiting, and no further assignments are available in that area, they can undertake an assignment on a ward which does not have an outbreak **48 hours after** completing their assignment providing they remain symptom-free. The only exception to this is where the Trust Infection Control team confirms that local policy is different.
9. Where a flexible worker does develop symptoms of diarrhoea and/or vomiting they must not undertake any further assignments until they have been symptom-free for **at least 48 hours**.
10. Where a flexible worker has any concerns or issues regarding infection control which cannot be resolved locally, they should contact the Client Relations Team or Service Centre.

NHS Professionals Corporate staff (including corporate flexible workers)

1. NHS Professional staff will ensure communication of an outbreak of an infectious disease to all staff involved in placing flexible workers into assignments by recording details of the outbreak of infectious disease on the ward notes on the Staffbank database and via an email to all placement officers.
2. Flexible workers who have worked on an infected ward must not work on any other “clean” ward for 48 hours
3. NHS Professionals staff will attempt to place flexible workers who could work in an affected area for several shifts in order to minimise movement of staff between affected and unaffected areas.

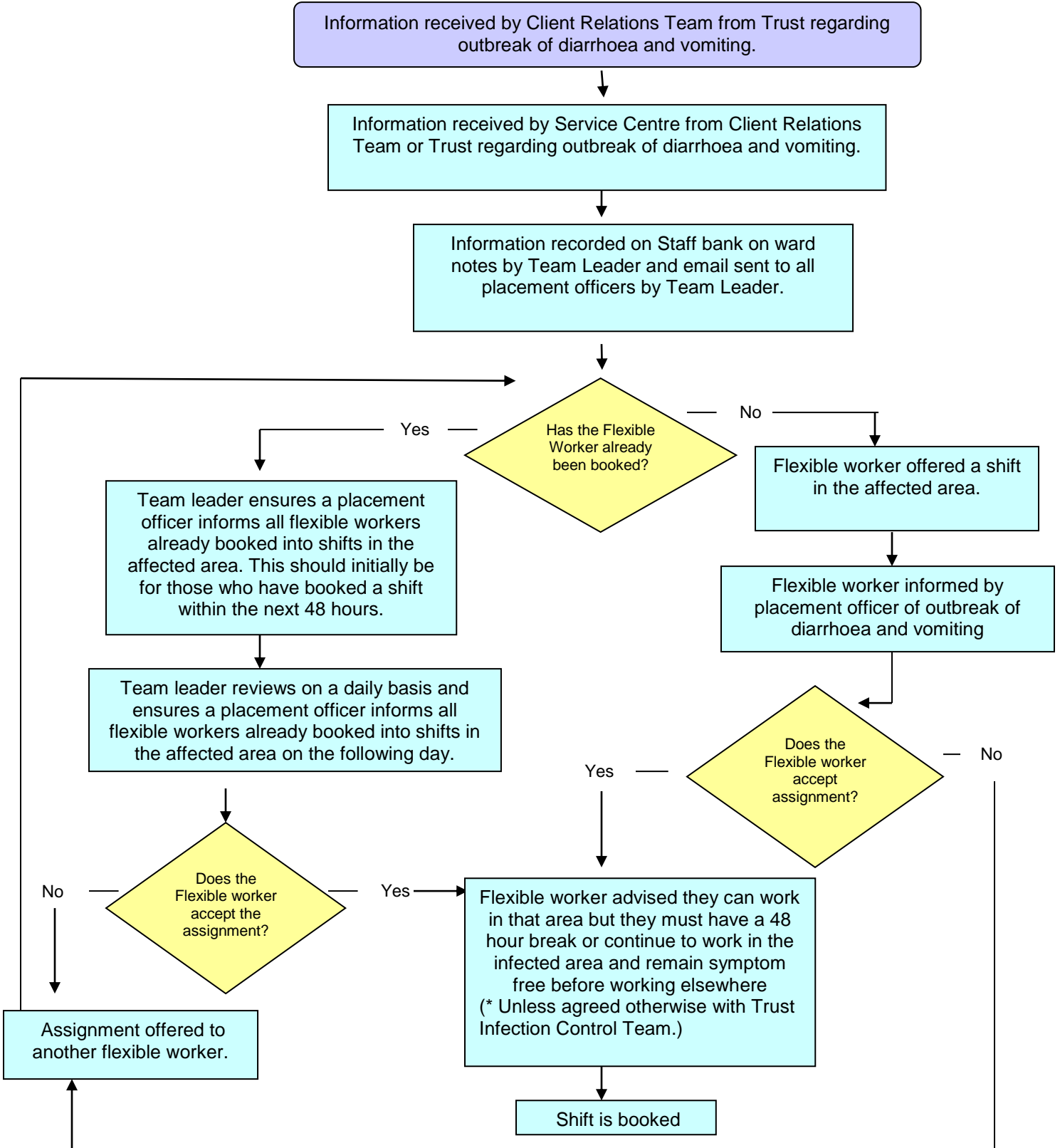
Client Trusts

1. The Trust will inform NHS Professionals of any outbreaks of infectious diseases in a timely manner through formal channels of communication e.g. from the infection control team to the Client Relations Team or Service Centre
2. Any working restrictions applied to Trust staff should be applied equally to NHS Professionals flexible workers and vice-versa.
3. The Trust will provide a daily update to NHS Professionals regarding any infected areas

Key Points – for safe patient management

- All patients should be regarded as infectious until a microbiological cause has been excluded. Standard infection control precautions should be applied to all patients whether considered potentially infectious or not
- Symptomatic staff must not work.
- Ensure compliance with local hand decontamination policy
- Ensure compliance with the use of PPE
- The Infection Control Team of client Trusts should advise NHS Professionals of any additional actions/precautions required in specific cases to ensure staff and patient safety.

NHS Professionals Outbreak Management – Gastrointestinal infections/viral gastroenteritis



If a flexible worker has symptoms of diarrhoea and/or vomiting they must not work until symptom-free for at least 48 hours.

Standard Operational Procedure in the event of a reported outbreak of:

Generic Infection

This standard operational procedure provides guidance for the management of an outbreak, for example Clostridium difficile, MRSA, or other pathogen as declared by a Trust.

Flexible workers

1. All NHS Professionals flexible workers must be familiar with and comply with local Trust infection control policies.
2. All NHS Professionals flexible workers must follow standard infection control practices as detailed in NHS Professionals CG1 P Standard Infection Control Precautions
3. All NHS Professionals flexible workers must wear a clean uniform for each assignment.
4. NHS Professionals flexible workers are under no obligation to accept assignments.
5. Flexible workers must have the patients care, wellbeing and safety as their first concern in accordance with NHS Professionals Code of Behaviour and professional codes of Conduct where applicable.
6. Where a flexible worker has worked an assignment on a ward which has an outbreak and is **'closed'** they should be offered further assignments, as available during the outbreak, in the same area to minimise movement of staff.
7. Where a flexible worker has worked an assignment on a ward which has an outbreak and no further assignments are available in that area, they **can** undertake an assignment elsewhere if the ward has not been closed by the Trusts Infection Control Centre.
8. Where a flexible worker has any concerns or issues regarding infection control, which cannot be resolved locally, they should contact the Client Relations Team or Service Centre.

NHS Professionals Corporate Staff

1. Where the Trust's Infection Control Committee or Director of Infection Prevention and Control has declared an outbreak, NHS Professional staff will ensure communication of the outbreak to all staff involved in placing flexible workers into assignments by recording details of the outbreak of infectious disease on the ward notes on the Staffbank database and sending an email to all placement officers.
2. NHS Professionals staff will attempt to place flexible workers who could work in an affected area for several assignments. This will help minimise movement of staff between affected and unaffected areas.
3. NHS Professionals will be advised by client NHS Trust Infection Control Teams of any additional actions required in specific cases to ensure patient safety.

Client Trusts

1. The Trust will inform NHS Professionals of any outbreaks declared by the Trust's Infection Control Committee of infectious diseases in a timely manner through formal channels of communication e.g. from the infection control team to the Client Relations Team or Contact Centre

2. Any working restrictions applied to Trust staff should be applied equally to NHS Professionals staff and vice-versa.

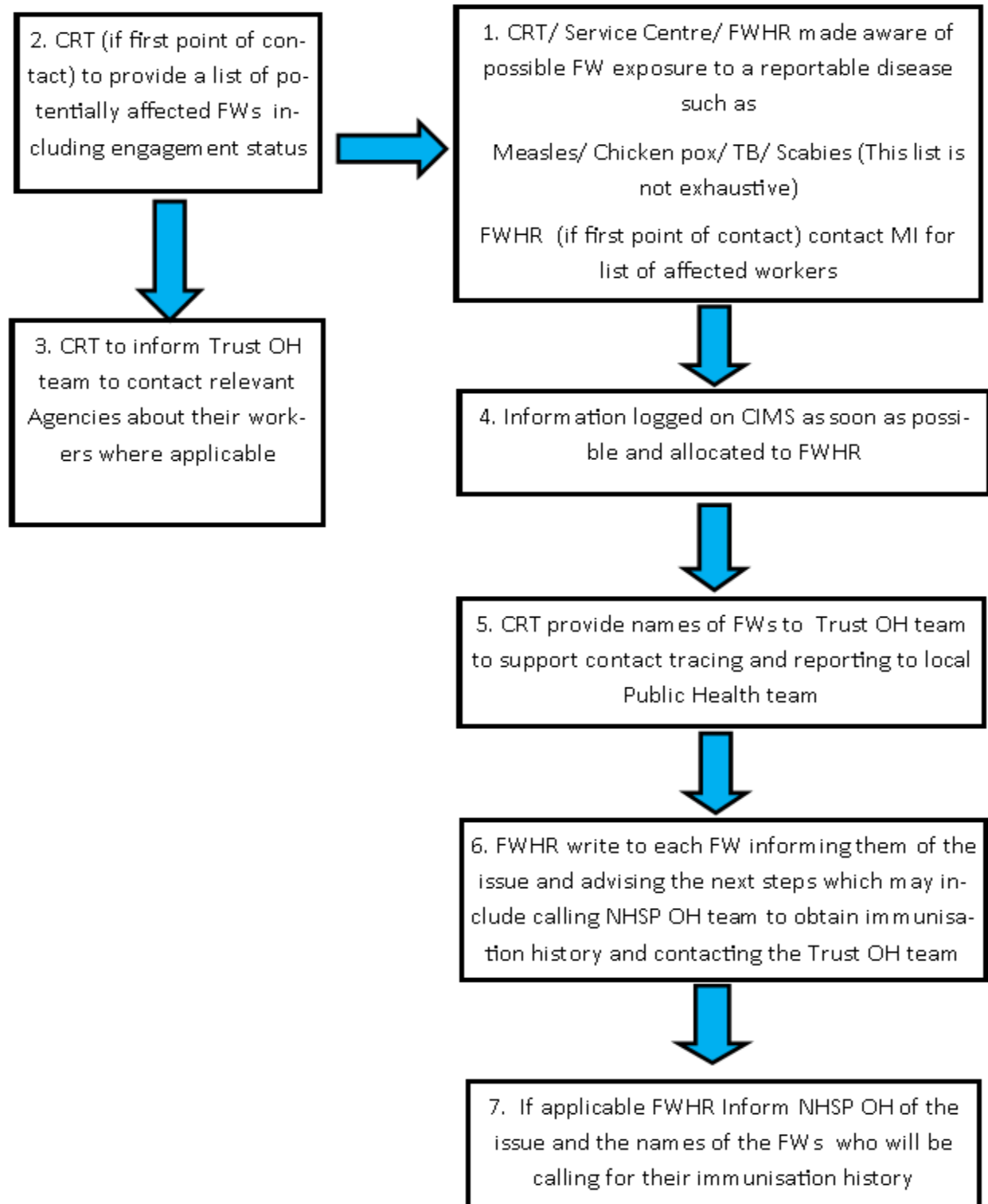
Standard Operational Procedure in the event of a reported outbreak of:

A Reportable/ Notifiable Disease

Where an outbreak of a notifiable disease requires contact tracing, screening or follow-up care, for example where tuberculosis is identified, this will be provided by the Trust as part of their contractual health and safety responsibilities and communicated to NHS Professionals Flexible Worker Human Resources Department.

The Infection Control Team of client Trusts should advise NHS Professionals Flexible Worker Human Resources department of any additional actions/precautions required in specific cases to ensure staff and patient safety. Flexible Worker Human Resources will take advice from the Clinical Governance/ OH Team and refer the flexible worker to the external occupational health provider as required.

Process for Managing Contact Tracing in Cases of FW Exposure to Reportable Diseases



References

- DH 2007 Saving Lives: reducing infection, delivering clean and safe care
http://webarchive.nationalarchives.gov.uk/+www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_078134
Accessed 21 May 2018
- DH (2015) Health & Social Care Act 2008 Code of practice on the prevention and control of infections and related guidance.
<https://www.gov.uk/government/publications/the-health-and-social-care-act-2008-code-of-practice-on-the-prevention-and-control-of-infections-and-related-guidance>
Accessed 21 May 2018
- DH 2015 NHS Outcomes Framework 2015/16
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/417894/At_a_glance_acc.pdf
Accessed 21 May 2018
- Nice (2014) Infection Prevention and Control Quality Standard QS61
Available at <https://www.nice.org.uk/guidance/qs61/chapter/introduction>
Accessed 21 May 2018
- NHS Professionals CG1 Standard Infection Control Precautions
- NHS Professionals Code of Behaviour for Flexible Workers
- NMC (2015) The Code: Professional standards of practice and behaviour for nurses and midwives. Available at: <http://www.nmc-uk.org/code>

Useful Websites

- epic3: National Evidence-Based Guidelines for Preventing Healthcare-Associated Infections in NHS Hospitals in England http://www.his.org.uk/files/3113/8693/4808/epic3_National_Evidence-Based_Guidelines_for_Preventing_HCAI_in_NHSE.pdf
- NICE Quality Standard Infection Prevention and Control
<https://www.nice.org.uk/Guidance/QS61>
- NHS Healthcare environment and patient safety <http://www.npsa.nhs.uk/cleaning>
- National Public Health Service for Wales Model Policies (2009) Available at:
<http://www.wales.nhs.uk/sites3/page.cfm?orgId=379&pid=38960>
- RCN Infection prevention and control <https://www.rcn.org.uk/library/subject-guides/infection-prevention-and-control-subject-guide>

VERSION HISTORY – POL 6

Version	Date	Status	Author
1	June 2007	Approved by NHSP Board	Cathy Winn, Head of Clinical Governance Karen Barraclough, Nurse Facilitator Lone Sarosi, Independent Nurse Consultant, Infection Control
2	November 2010	Reviewed and updated	Fleur Booty, Independent Nurse Consultant, Infection Control. Karen Barraclough, Senior Nurse
3	March 2013	Reviewed and updated	Sue Chapman, Independent Nurse Consultant, Chapman Medical Services Karen Barraclough Senior Nurse/ Head of Governance
4	March 2016	Reviewed and updated	Jane Hewitt, Nurse Lead Karen Barraclough, Senior Nurse/ Head of Governance
5	May 2018	Additional information added to support management of notifiable diseases	Karen Barraclough, Chief Nurse/ Head of Governance
	May 2020	Next review date	