

**INFECTION PREVENTION & CONTROL
ROLES & RESPONSIBILITIES POLICY**

21.08.2012

Version 3.1

Table of Contents

1.	Introduction	3
2.	Purpose of Policy	3
3.	Scope	3
4.	Definitions & Glossary	3
5.	Ownership and Responsibilities	3
6.	Dissemination and Implementation	7
7.	Monitoring compliance and effectiveness	7
8.	Updating and Review	7
9.	Equality and Diversity	7
10.	Appendix 1 – Governance Information	8
11.	Appendix 2 – Initial Equality Impact Assessment Screening Form	10
12.	Appendix 3 – Infection Prevention & Control Reporting Structure	12
13.	Appendix 4 – Infection Prevention & Control Structure	13

1. Introduction

- 1.1 Under the Health and Social Care Act 2011, the Code of Practice health and adult social care on the prevention and control of infections and related guidance requires all Trusts to have clear arrangements for the effective prevention, detection and control of healthcare associated infection, including the procedures to be taken in the event of an outbreak of infection. Previous arrangements outlined in a series of national guidance documents and reports (DH, 2002; DH, 2003; DH, 2004a; DH, 2005; DH, 2006) have formed the basis for 'the Code' and are also reflected in this policy document.

2. Purpose of this Policy

- 2.1 This policy will ensure that:

- Responsibility for infection prevention and control is embedded at all levels of the organisation
- Effective arrangements are in place for the provision of a full infection prevention and control service including policy production, surveillance, education and training, and audit led by an Infection Prevention & Control Team. (IPAC)
- Infection prevention and control advice is provided by a suitably qualified and resourced team, which includes an Infection Prevention & Control Doctor and Infection Prevention & Control Nurse, with administrative and information technology support.
- The Infection Prevention & Control Team is supported by an adequately resourced and staffed microbiology laboratory capable of promptly processing and reporting results on specimens sent for investigation.
- A multi-professional Hospital Infection Prevention & Control Committee is in place to advise and support the ICT.
- All healthcare personnel working within the scope of this policy are aware of the rationale and responsibility to maintain high standards of infection prevention and control at all times.

3. Scope

- 3.1 This policy applies to all healthcare personnel within The Royal Cornwall Hospitals Trust. It also applies to private contractors working on Trust premises, locum, agency staff and volunteers.

4. Definitions / Glossary

- **Infection Prevention and Control:** processes to prevent and reduce to an acceptable minimum the risk of the acquisition of an infection amongst patients, health care workers and any others in the health care setting
- **DIPC:** Director of Infection Prevention & Control
- **Infection:** when organisms in or on the body have started to multiply and/or invade a part of the body where they are not normally found. The body develops a reaction leading to disease or illness.
- **Surveillance:** the discovery, monitoring and recording of infection

5. Ownership and Responsibilities

5.1 *Chief Executive*

The Chief Executive (CEO) is ultimately responsible for ensuring that there are effective arrangements in place for infection prevention and control and that appropriate resources are made available to manage the risks of infection. The CEO will designate the prevention and control of healthcare associated infection as a core part of the organisations clinical governance.

5.2 Trust Board

The Trust Board are responsible for:

- Identifying a board level lead for infection prevention & control.
- Ensuring that the role and functions of the Director/s of Infection Prevention and Control (DIPC) are satisfactorily fulfilled by appropriate and competent persons as defined by DH, (2004b)
- Approving the infection control annual programme and receiving the DIPC's annual report.
- Ensuring that appropriate systems are in place for reviewing reports and statistics on the incidence of alert organisms (e.g. MRSA, *Clostridium difficile*) and conditions, outbreaks and Serious Untoward Incidents
- Ensuring that clinical responsibility for infection prevention and control is effectively devolved to:
 - All professional clinical groups in the Trust
 - Divisions, Clinical specialties and, where appropriate, support directorates and other similar units.

5.3 Director of Infection Prevention and Control (DIPC)

The DIPC will:

- Oversee local control of infection prevention and control policies and their implementation.
- Be responsible for the Infection Prevention and Control Team.
- Report directly to the Chief Executive and the Board and not through any other officer.
- Challenge inappropriate clinical hygiene practice as well as antibiotic prescribing decisions.
- Assess the impact of all existing and new policies and plans on infection and make recommendations for change.
- Be an integral member of the organisation's clinical governance and patient safety teams and structures
- Produce an annual report on the state of healthcare associated infection in the organisation(s) for which he/she is responsible and release it publicly.

5.4 Infection Prevention and Control Doctor (IPCD):

The IPCD is responsible for working with the DIPC and supporting them by providing guidance and advice on matters relating to clinically relevant microbiological issues e.g. clinical infection prevention and control activity, antibiotic prescribing, laboratory issues, surveillance and epidemiology. The IPCD liaises with the DIPC on key operational issues as necessary.

The IPCD will attend Hospital Infection Prevention & Control Committee meetings and the Infection Prevention & Control Steering Group meetings.

The IPCD will advise and support Laboratory Manager/Pathology Manager/Trust Medical Director in regards to infection prevention and control issues.

5.5 Infection Prevention and Control Team

The Infection Prevention and Control Team is multi-disciplinary and will include:

- Consultant Nurse Infection Prevention and Control Nurse/Joint DIPC
- Infection Prevention and Control Doctor
- Medical Microbiologists
- Infection Prevention and Control Specialist Nurses

- Infection Prevention and Control Nurses
- Surgical Site Infection Surveillance Nurse
- Audit and Surveillance Co-ordinator
- Audit and Surveillance Support Worker
- Administrative Secretarial Support

The IPAC team is responsible for:

- Ensuring advice on infection prevention and control is available on a 24-hour basis.
- Formulating an annual infection prevention and control programme in full consultation with the Hospital Infection Prevention & Control Committee (HICC), health professionals and senior managers. The programme will include surveillance of infection and audit of the implementation of and compliance with selected policies.
- In liaison with other relevant staff preparing, reviewing and updating evidence based policies and guidelines in line with relevant Department of Health notifications and/or national guidelines, when available and applicable.
- Distribute policies to relevant areas and initiate their implementation by means of support, advice and education.
- Ensure that compliance with Infection Prevention and Control policies are monitored by the Infection Prevention and Control Team, Divisional Leads, designated Managers as appropriate.
- Identify, control and investigate outbreaks in collaboration with the Consultant for Communicable Disease Control and outbreak control group as appropriate.
- Ensuring the provision of appropriate education to all grades of staff working within the scope of this policy in line with the current RCHT education strategy
- Participate in the planning and upgrading of hospital facilities.
- Provide an ongoing training programme encompassing all healthcare workers within the Trust
- Provide specialist advice to key committees, groups, departments or individual staff members in relation to Infection Prevention and Control practice.
- Carry out alert organism surveillance, liaising with medical and nursing staff as appropriate.
- Inform the Chief Executive, DIPC and HICC of any serious problems or issues relating to Infection Prevention and Control.
- Ensure liaison with the Occupational Health Department with regard to staff health and transmission of infectious disease.

5.3 Role of the Divisional Management Teams

Each Divisional management team will:

- Identify an Infection Prevention and Control Lead from within the Divisional Management Team who will be responsible for attending the Hospital Infection Prevention and Control Committee.
- Ensure that infection prevention and control is included in the personal development plan for the designated infection control lead.
- Identify medical and non-medical staff champions for infection prevention and control.
- Ensure that Infection prevention and control is a standing agenda item for Divisional Board/Governance meetings and, that as a minimum, the following are included:
 - Review of infection prevention and control key performance indicators (KPI's)
 - Outbreak reports/action plans
 - Infection Prevention and Control environmental audits where any element of the audit is less than 85%

- Ensure Divisional representation at the Hospital Infection Prevention and Control Committee meetings and Infection Prevention and Infection Control Steering Group meetings
- Ensure that every ward/clinical department has a designated infection control link nurse (or other registered practitioner).

5.3 Role of the Infection Prevention and Control Steering Group

The IPAC Steering Group is responsible for the implementation and monitoring of this policy.

5.4 Role of the Hospital Infection Prevention and Control Committee

Responsibilities of the HICC include:

- Advising and supporting the IPAC team;
- Drawing to the attention of the Chief Executive, either through the DIPC or, if necessary, directly, any serious problems or hazards relating to infection prevention and control;
- Considering reports on infections and infection prevention and control problems;
- Discussing and endorsing a plan for the management of outbreaks in the Trust and monitoring its implementation;
- Discussion and endorsement of a plan for the Trust's response to major outbreaks in the community – the Major Incident (outbreak) Plan – and monitoring of its implementation;
- Collaborating with the IPAC team to develop the annual infection prevention and control programme, monitor its progress, assist in its effective implementation and review the annual report;
- Providing advice regarding the most effective use of resources available for implementation of the programme and for contingency requirements
- Advising on and approving all infection prevention and control policies before their submission to the Executive team for approval, and review of their implementation;
- Promoting and facilitating the education of all grades of staff in infection control procedures

5.5 Role of individual staff members

- All employees will be personally accountable for their action and are responsible for ensuring that they comply with Infection Prevention and Control policies.
- Employees must understand their legal duty to take reasonable care of their health, safety and security and that of other persons who may be affected by their actions and for reporting untoward incidents and areas of concern.
- Healthcare workers are responsible for identifying infectious conditions and circumstances that may lead to outbreaks of infection that require specific controls to protect themselves, their patients or others.
- They are responsible for notifying the Infection Prevention and Control Team of such circumstances and it is the responsibility of healthcare workers to ensure that they utilise safe working practices as outlined in Infection Prevention and Control policies.
- Any breach in Infection Prevention and Control Policies or Practice will place staff, patients and visitors at risk and subsequently the completion of a clinical incident form will be required.

5.6 The role of the Infection Prevention and Control Link Practitioner is:

- To act as a resource in their clinical area, and to liaise with the Infection Prevention and Control (IPAC) Nurses.
- To help create and maintain an environment which will ensure the safety of patient/clients, their relatives and other health care workers using evidence based infection prevention and control knowledge to reduce the risk of infection.
- To act as a role model for colleagues.

5.7 Responsibilities to the Public

One of the key aims of the RCHT Strategy is the promise to maintain a clean and safe environment which includes having staff who understand the need for effective hand hygiene throughout their working day.

Other responsibilities to the public include:

- Provision of appropriate patient information leaflets regarding alert organisms
- Communication of current hospital rates of infection via relevant annual reporting procedures and local notice boards

- Disseminating information regarding any measures to control the spread of infection, including outbreaks, by appropriate signage at key entry points to the hospital and individual clinical areas or by verbal guidance from staff
- Appropriate use of the media/internet to deliver general or more urgent information relevant to the control of infection throughout the Trust
- Promoting a culture which encourages the public to challenge staff who are failing to wash their hands
- Providing positive infection prevention and control information to the public where appropriate e.g. via hand hygiene awareness days and infection control seminars and via a dedicated webpage.

The RCHT requests that the public too play their role in minimising the risk of infection by helping to keep the hospital environment clean.

6. Dissemination and Implementation

This policy will be implemented via the following routes:

- The policy will be included in the Trust's Document Library
- The policy will be circulated to all Link Practitioners and Matrons

7. Monitoring compliance and effectiveness

Element to be monitored	Compliance with roles & responsibilities
Lead	DIPC/ Consultant Nurse Infection Prevention & Control
Tool	CQC Outcome 8 assessment, minutes and reports for meetings
Change in practice and lessons to be shared	Required changes to practice will be identified and actioned immediately where necessary. The appropriate manager will be identified to take each change forward where appropriate. Lessons will be shared with all the relevant stakeholders.

8. Updating and Review

This policy will be reviewed within 3 years.

9. Equality and Diversity

9.1. Equality Impact Assessment

- This document complies with the Royal Cornwall Hospitals NHS Trust service Equality and Diversity statement.
- The Initial Equality Impact Assessment Screening Form is at Appendix 2.

NB: References and Associated Trust Documents

Up-to-date references, including details of supporting or associated Trust or Cornwall Health Community documents, must be listed in the Governance Information table at Appendix 1.

Appendix 1. Governance Information

Document Title	Infection Prevention & Control Roles & Responsibilities		
Date Issued/Approved:	August 2012		
Date Valid From:	August 2012		
Date Valid To:	August 2015		
Directorate / Department responsible (author/owner):	Executive Director of Nursing, Midwifery & Allied Health Professionals/ RCHT Venous Access Group		
Contact details:	Louise Dickinson 01872 25 4969		
Brief summary of contents	This document provides guidance on the roles and responsibilities of all staff working within The Royal Cornwall NHS Trust in relation the prevention and control of Infection.		
Suggested Keywords:			
Target Audience	RCHT ✓	PCT	CFT
Executive Director responsible for Policy:	Executive Director of Nursing, Midwifery & Allied Health Professionals		
Date revised:	July 2012		
This document replaces (exact title of previous version):	Infection Prevention & Control Roles & Responsibilities v1		
Approval route (names of committees)/consultation:	Hospital Infection Prevention and Control Committee		
Divisional Manager confirming approval processes	Louise Dickinson		
Name and Post Title of additional signatories	Not Required		
Signature of Executive Director giving approval			
Publication Location (refer to Policy on Policies – Approvals and Ratification):	Internet & Intranet	✓	Intranet Only
Document Library Folder/Sub Folder	Clinical/Infection Prevention & Control		
Links to key external standards	CQC Outcome 8 - Essential Standards of Quality of Safety		
Related Documents:	DH (2002) <i>Getting ahead of the curve</i> . A strategy for combating infectious diseases (including other aspects of health protection). London: DH.		

	<p>DH (2003) <i>Winning ways. Working together to reduce Healthcare Associated Infection in England.</i> Report from the Chief Medical officer. London: DH.</p> <p>DH (2004b). <i>Competencies for Directors of Infection Prevention and Control.</i> London: DH.</p> <p>DH (2005). <i>Saving lives: a delivery programme for reducing healthcare associated infection (HCAI) including MRSA.</i> London: DH.</p> <p>DH (2006) <i>Going Further Faster: Implementing the Saving Lives Programme.</i> London: DH.</p> <p>DH (2008). <i>Director of Infection Prevention and Control Role Profile.</i> London: DH</p> <p>DH (2011) <i>The Health and Social Care Act Code of Practice for health and adult social care on the prevention and control of infections and related guidance.</i> London: DH</p> <p>NICE (2012) <i>Infection: Prevention and Control of healthcare associated infections in primary and community care.</i> http://guidance.nice.org.uk/CG139</p>
Training Need Identified?	No

Version Control Table

Date	Version No	Summary of Changes	Changes Made by (Name and Job Title)
21.08.2012	3.1	Reformatted to comply with new policy template & review	Louise Dickinson Consultant Nurse

All or part of this document can be released under the Freedom of Information Act 2000

This document is to be retained for 10 years from the date of expiry.

This document is only valid on the day of printing

Controlled Document

This document has been created following the Royal Cornwall Hospitals NHS Trust Policy on Document Production. It should not be altered in any way without the express permission of the author or their Line Manager

Appendix 2 - Initial Equality Impact Assessment Screening Form

Name of service, strategy, policy or project (hereafter referred to as <i>policy</i>) to be assessed: Infection Prevention & Control Roles & Responsibilities	
Directorate and service area: Infection Prevention and Control	Is this a new or existing Procedure? Existing
Name of individual completing assessment: Louise Dickinson	Telephone: 01872254969
1. Policy Aim*	
2. Policy Objectives*	Under the Health and Social Care Act 2008, the Code of Practice health and adult social care on the prevention and control of infections and related guidance requires all Trusts to have clear arrangements for the effective prevention, detection and control of healthcare associated infection, including the procedures to be taken in the event of an outbreak of infection. Previous arrangements outlined in a series of national guidance documents and reports (DH, 2002; DH, 2003; DH, 2004a; DH, 2005; DH, 2006) have formed the basis for 'the Code' and are also reflected in this policy document.
3. Policy – intended Outcomes*	Responsibility for infection prevention and control is embedded at all levels of the organisation
4. How will you measure the outcome?	Mandatory reporting, monthly through KPI scores. Annual Infection Prevention & Control Audits. Attendance at meetings.
5. Who is intended to benefit from the Policy?	All staff and patients.
6a. Is consultation required with the workforce, equality groups, local interest groups etc. around this policy?	Yes
b. If yes, have these groups been consulted?	Yes
c. Please list any groups who have been consulted about this procedure.	Hospital Infection Prevention and Control Committee

*Please see Glossary

The Impact

Equality Group	Positive Impact	Negative Impact	No Impact	Reasons for decision
Age			✓	
Disability			✓	
Religion or belief			✓	
Gender			✓	
Transgender			✓	
Pregnancy/ Maternity			✓	
Race			✓	
Sexual Orientation			✓	
Marriage / Civil Partnership			✓	

Please sign and date this form.

Keep one copy and send a copy to Matron, Equality, Diversity and Human Rights,
c/o Royal Cornwall Hospitals NHS Trust, Human Resources Department, Chyvean
House, Penventinnie Lane, Truro, Cornwall, TR1 3LJ

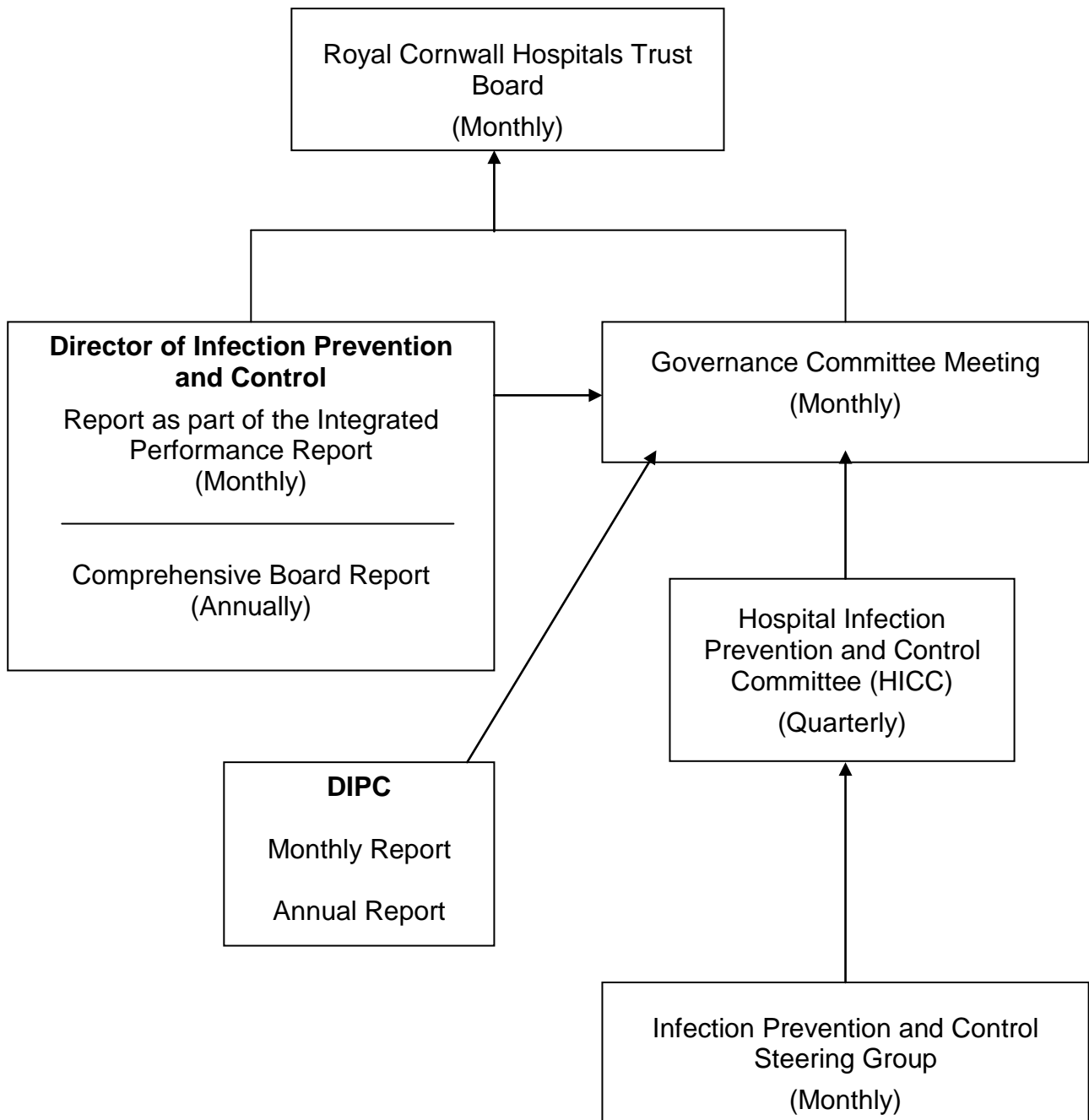
A summary of the results will be published on the Trust's web site.

Signed

Date 21st August 2012

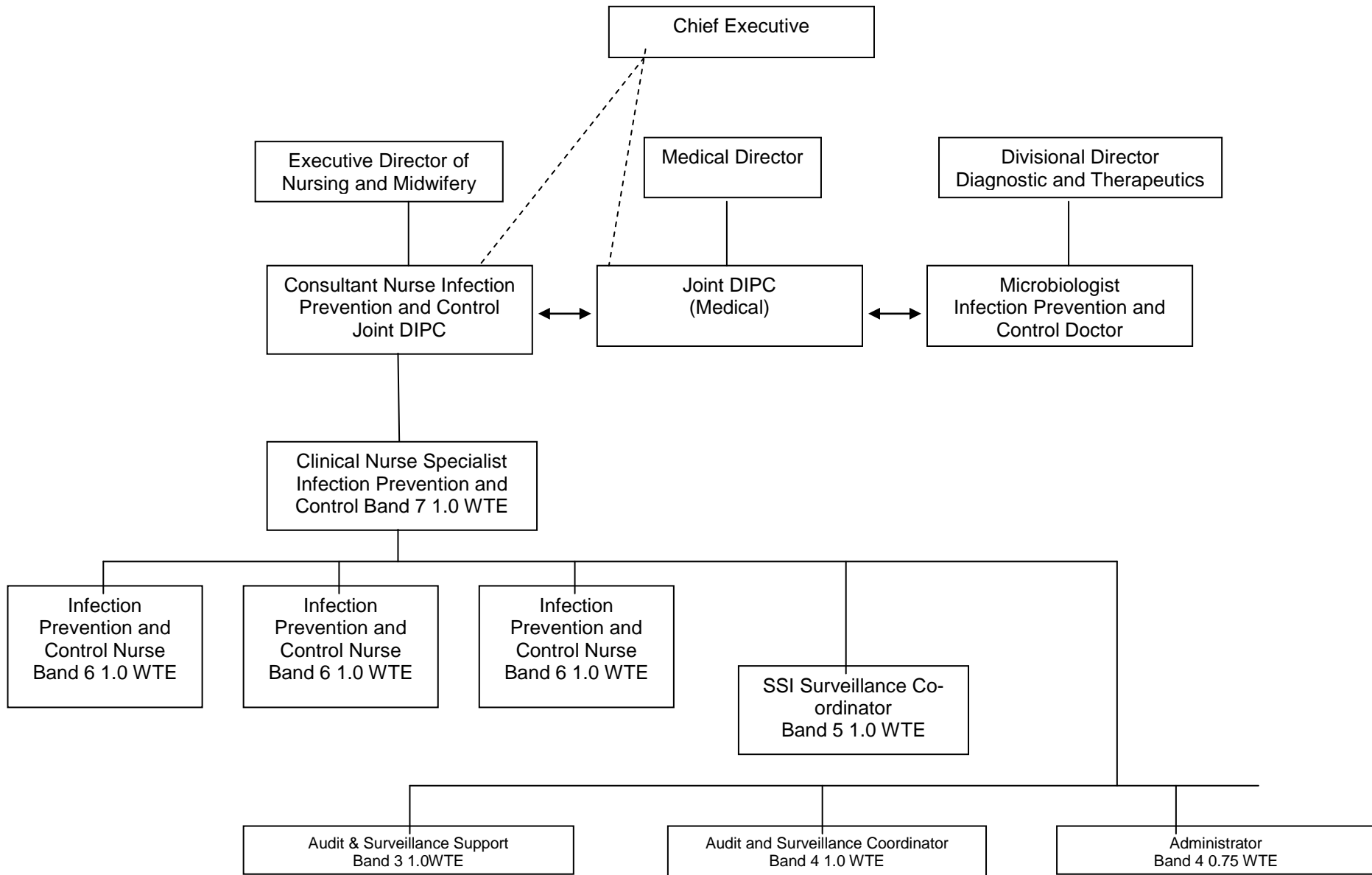
Appendix 3 – Reporting Structure

Royal Cornwall Hospitals NHS Trust Infection Prevention and Control Reporting Structure



Appendix 4

Royal Cornwall Hospitals NHS Trust Infection Prevention and Control Structure



safer **better**
good value
care

Royal Cornwall Hospitals



NHS Trust
