Quality Assurance Framework:
Infection Prevention and Control of WSCC registered services.

Rachel Loveday Health Protection Lead – April 2016

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<tr>
<th>Version</th>
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<tr>
<td>Draft V1</td>
<td>Dr Nike Arrowobusoye (Public Health)</td>
<td>25/3/2016</td>
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<tr>
<td>Draft V2</td>
<td>Steve Roberts; Barry Poland; Greg Slay (Adults’ Services); David Ramsbottom (Health and Safety)</td>
<td>6/4/2016</td>
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<td>Draft V3</td>
<td>Georgie Cane (Human Resources)</td>
<td>15/6/2016</td>
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<td>Approved</td>
<td>Care Wellbeing and Education - Senior Leadership Team</td>
<td>11/7/2016</td>
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Background

The Health and Social Care Act 2008 and its associated “Code of Practice for health and adult social care on the prevention and control of infections and related guidance” (H&SCA 2008) sets out criteria by which registered providers are to ensure that people are cared for in a clean environment, where the risk of healthcare associated infections (HCAI) is kept as low as possible. Failure to observe the Act may result in enforcement action being taken by the Care Quality Commission (CQC).

National policy decisions including organisational targets to reduce meticillin resistant staphylococcus aureus (MRSA) and clostridium difficile infection (CDI) have been successful in lowering the incidence of these infections by more than 70% over the last five years. However there are still large numbers of people annually impacted by potentially preventable infections, and it remains of paramount importance to treat and care for people in a safe environment and protect them from avoidable harm. Certain groups of people are particularly at risk of developing infections; these include the elderly, those who have recently had surgery, and people with serious underlying diseases. Infections may result in a greater likelihood of complications and mortality, preventing avoidable infections is a key requirement of high quality care.

Context

West Sussex County Council as a provider has 7 services required to register with a total of 132 beds.

Risk

Including but not limited to:

- To people in our care from avoidable infections and loss of customer and public confidence.
- Corporately as a registered provider should we fail this standard and subsequent enforcement action is taken.
- Loss of capacity due to outbreaks of infection.
Proposal
For West Sussex County Council as a registered provider, the current infection control practices and policies have been mapped against the 10 compliance criteria in the Code of Practice. The Care Wellbeing and Education Senior Leadership Team are asked to consider giving their support to this quality assurance framework, to provide internal assurance against these important criteria.

Review
This guidance will be kept under review by the County Council’s Health Protection Assurance Group, convened within the Care Wellbeing and Education directorate.
**Criterion 1: systems to manage and monitor the prevention and control of infection. These systems use risk assessment and consider the susceptibility of service users and any risk their environment and other users may pose to them.**

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| Someone with the appropriate knowledge and skills will become the named lead in infection prevention control (and cleanliness) for each registered provider. | • Recommission the champions programme.  
• All adult services registered providers must have a named infection prevention control lead who is the registered manager or deputy- who has completed the champions training day and attends the champion’s forums updates.  
• A continuation of the support currently provided to the training agenda from Learning and Development. | Rachel Loveday  
July 2016  
December  
Registered Manager  
Louise Holden-  
Ongoing |
| Policies, procedures, and guidance are required.                          | Please see criterion 9 and 10                                                                        |                                                 |
| Staff should be trained on infection prevention and control.             | • Staff should be trained as part of their induction programme.  
• Staff should receive annual training.  
• Records of the training should be kept.                                  | Registered Manager                               |
| Assurance is in place to ensure that key policies and practices are being implemented, | • Infection Prevention and Control is a standing agenda item on the registered providers Team       | Registered Managers.                            |
| Updated and adhered to appropriately. | Meetings.  
- Infection Prevention and Control is a standing agenda item on the Team managers meeting.  
- Infection Prevention and Control is a standing agenda item at the Health Protection Group.  
- A water safety group should be established/standing agenda item on existing group. | August 2016.  
Steve Roberts  
July 2016  
Jane Colliss  
July 2016  
David Ramsbottom  
August 2016 |
| A record of names should be kept on who can provide advice and guidance. | A record of the contact details of Public Health England –GPs and other health professionals that can provide advice and support should be readily available. | Steve Roberts  
July 2016/  
Registered Managers |
| Each registered provider should provide an annual statement for anyone that wishes to see it, including residents and regulatory authorities. | The infection Prevention and control lead of each registered provider will provide a brief annual statement for their facility including the following information  
- known outbreaks of infection  
- Audits undertaken and subsequent actions.  
- actions taken following outbreaks of infection  
- Education and training received by staff.  
### Criterion 2: Provide and maintain a clean and appropriate environment in managed premises that facilitate the prevention and control of infections.

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| Cleaning responsibilities and routines should be clearly outlined.        | • There should be written cleaning schedules which describe individual responsibilities for cleaning; including all areas i.e. resident rooms, communal areas, toilets, bathrooms sluices, etc.  
  • These schedules should include, frequencies, what products to be used, what equipment is to be used, colour coding. | Registered Managers August 2016                                                                                                                                   |
| (care homes aim to provide a place where people feel at home and arrangements to keep the environment clean must take this into account) |                                                                                                                                                                                                               | Registered Managers August 2016                                                                                                                                   |
| Staff should carry out ongoing assessment of the standards of cleanliness. | • Regular auditing of the cleanliness should take place and if standards fall below what is acceptable - what actions are to be taken should be clearly discussed and documented. | Registered managers July 2016                                                                                                                                     |
| A decontamination policy should include all areas of the environment, fixtures and fitting and medical devices. | • The policy should be commissioned in conjunction with the infection prevention and control policy.                                                                                                         | Rachel Loveday /Greg Slay July 2016. (this has gone into the service spec-infection control champions- that will be going out for procurement). |
Criterion 3: Ensure appropriate antimicrobial use to optimise patient outcomes and to reduce the risk of adverse events and antimicrobial resistance. (Access to microbiology services and responsibility for stewardship activities rests with the service user’s General Practitioner)

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<td>Providers should keep accurate records of antimicrobial prescriptions including allergies, dose, duration and reason for treatment.</td>
<td>6 monthly Audit of inpatient records to assure compliance.</td>
<td>Registered managers October 2016</td>
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Criterion 4: Provide suitable accurate information on infections to service users, their visitors and any person concerned with providing further support or nursing/medical care in a timely fashion.
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| Information for services users and visitors. | Services to include in the information given to service users.  
- General principles on the prevention of infection, which takes into account the communication needs of the service user.  
- The importance of compliance by visitors with hand hygiene.  
- Reporting concerns relating to hygiene and cleanliness.  
- Explanations that visiting services users may be restricted if there is an outbreak of infection. | Steve Roberts/Barry Poland Dec 2016. |
| The registered provider will need to ensure that information is shared with other providers. When the service user  
- Moves to or from another health or adult social care setting or the service user’s home.  
- Is admitted to hospital  
- Is transported in an ambulance.  
- Attends for treatment or support in another health or adult social care setting. | Services to include this information on a transfer/discharge form.  
- 6 monthly audit of transfer discharge forms. | Registered managers Dec 2016 |
| Staff will need to know-  
- How and under what circumstance information about a service user’s infectious status is shared both routinely and in an emergency; and  
- How they ensure that the information they share follows the laws that relate the safe handling of information. | Awaiting information from Barry Poland if this covered in mandatory and induction training. |
**Criterion 5:** Ensure prompt identification of people who have or are at risk of developing an infection so that they receive timely and appropriate treatment to reduce the risk of transmitting infection to other people.

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<td>In adult social care services, General Practitioners will provide the necessary initial advice when a service user develops an infection. The General Practitioner may then wish to draw in local professional expertise.</td>
<td>Advice about infection control and advice about outbreaks should sought from the local Health Protection Unit, at Public Health England. All staff should be aware of this and their contact details easily accessible.</td>
<td>Steve Roberts July 2016/ Registered Managers</td>
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Criterion 6: Systems to ensure that all care workers (including contractors and volunteers) are aware of and discharge their responsibilities in the process of preventing and controlling infection.

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| The registered provider should, so far as is reasonably practicable, ensure that its staff, contractors and others involved in the provision of care co-operate with it, and each other so far as is necessary to enable the registered provider to meet its obligations under the code. | - Infection prevention and control should be included in job descriptions and included in induction programme and staff updates of all employees (including volunteers).  
- Contractors working in service user areas would need to be aware of any of any issues with regards to infection prevention and control and obtain ‘permission to work’. | Registered Manager  
Registered managers ongoing. |
Criterion 7: Provide or secure adequate isolation facilities.

Care homes do not need to have dedicated isolation facilities.

If isolation is needed, a resident’s own room can be used. Ideally the room should be a single bedroom with en-suite facilities.

Criterion 8: Secure adequate access to laboratory support as appropriate.

This criterion does not apply to adult social care services.

The General Practitioner will take responsibility for sending off any necessary samples to the laboratory.
**Criterion 9: Have and adhere to policies, designed for the individual’s care and provider organisations that will help to prevent and control infections.**

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| The following guidance is most relevant to adult social care services.    | • Bespoke infection prevention and control guidance is required and should be commissioned to comply with this criterion/this should comply with national Clinical Guideline (2012) Infection: prevention and control of healthcare-associated infections in primary and community care. National Institute for Health and Care Excellence.  
• (this has gone into the service spec-infection control champions- that will be going out for procurement)                                                                                           | Rachel Loveday/ Greg Slay. July 2016.                                                                 |
- Dissemination of information.
- Uniform and dress code.
- Immunisation of service users.
- Environmental cleaning guidelines.
Criterion 10: Providers have a system in place to manage the occupational health needs and obligations of staff in relation to infection.

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<td>A registered provider should ensure that all staff complete a confidential health assessment after a conditional offer of employment and give information about residence overseas, previous and current illness, and immunisation against relevant infections.</td>
<td>HR and Occupational Health policies should be reviewed to be compliant with the guidance</td>
<td>David Ramsbottom July 2017</td>
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| A registered provider should ensure policies for screening staff include:  
  - Health screening for communicable diseases.  
  - How exposure to infections will be managed.  
  - Risk assessment of the need for immunisations, including influenza vaccination, Hep B.  
  - The responsibility of staff to report episodes of illness; and  
  - The circumstances under which staff may need to be excluded from work. | HR and Occupational Health policies should be reviewed to be compliant with the guidance. | David Ramsbottom July 2017 |