



71-75 Shelton Street, London, WC2H 9JQ | [www.generalpracticesolutions.net](http://www.generalpracticesolutions.net)  
020 8865 1942 | [enquiries@generalpracticesolutions.net](mailto:enquiries@generalpracticesolutions.net)

## INFECTION CONTROL POLICY

### INTRODUCTION

This document sets out the policy on infection control and should be used with reference to the principles outlined in the Infection Control (Biological Substances) Protocol and the Infection Control Inspection Checklist.

The 'National Standards of Healthcare Cleanliness 2021' apply to all healthcare environments and replace the 'National Specifications for cleanliness in the NHS' 2007 (and amendments) published by the National Patient Safety Agency.

### POLICY STATEMENT

GPS is committed to the control of infection within client provider buildings and in relation to the clinical procedures carried out within it. It is expected that client providers will maintain the premises, equipment, drugs and procedures to the standards detailed within the Infection Control Inspection Checklist and will provide facilities and the financial resources to ensure that all reasonable steps are taken to reduce or remove all infection risk.

Wherever possible or practicable, client providers will seek to use washable or disposable materials for items such as soft furnishings and consumables, e.g. seating materials, wall coverings including paint, bedding, couch rolls, modesty sheets, bed curtains, floor coverings, towels etc., and ensure that these are laundered, cleaned or changed frequently to minimise risk of infection.

GPS and its client providers will use the Infection Control Checklist as the basis for managing infection control and ensure that training is given to all workers and higher training for workers responsible for the Annual Audit so that they have the necessary degree of competence to carry it out.

### CQC REQUIREMENTS FOR INFECTION CONTROL

Regulation 15 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 requires that healthcare premises are clean, secure, suitable, and used properly and that a provider maintains standards of hygiene appropriate to the purposes for which they are being used.

Further, the code of practice for preventing and controlling infections, and related guidance, states NHS bodies and independent providers of healthcare and adult social care in England

must adequately resource local provision of cleaning services. Client providers should also have a strategic cleaning plan and clear cleaning schedules and frequencies so that service users, workers, and the public know what they can expect.

**An effective healthcare cleaning service should:**

- Be service user and customer focused.
- Provide clarity for all personnel responsible for ensuring the healthcare environment is clean and safe enhance quality assurance systems.
- Address governance and risk assessment.
- Be consistent with IPC standards and requirements.
- Meet the requirements of CQC Outcome Standard Regulation 15 key criteria (1 and 2) in the Health and Social Care Act Code of Practice 2015 in terms of legal responsibilities for a cleaning lead, personal responsibilities, the need for audit, governance, and reporting.
- Set clear outcome statements that can be used as benchmarks and output indicators.
- Have clear objectives that provide a foundation for service improvements.
- Be flexible to meet the needs of specific healthcare environments circumstances, and priorities.
- Have well documented cleanliness policies and procedures.
- Provide for a culture of continuous improvement.
- Be flexible, to meet the ongoing needs of operational service delivery.

Responsibility for the Management of Infection Risk is usually a senior nurse.

The responsibility for controlling infection and cross-contamination ultimately rests with all workers however specific tasks are usually aligned to individual leads and this will be provided to GPS workers at the time of assignment with a new client provider.

**GPS workers will be informed of the following:**

- The clinician with overall responsibility.
- The non-clinician responsible for leading on Infection Control
- The staff member responsible for training and the annual audit of Infection Control.
- The lead cleaner responsible for Infection Control is.
- The staff member responsible for the maintenance of personal protective equipment (PPE) and the provision of personal cleaning supplies within clinical areas.
- The staff member responsible for the maintenance of the provision of personal cleaning supplies within non-clinical areas.
- The staff member responsible for the maintenance of sterile equipment and supplies, and for ensuring that all items remain “in date”

**The following general precautions will apply:**

- A daily, weekly, monthly, and six-monthly cleaning specification will apply and will be followed by the cleaning staff.

- Infection Control training will take place for all workers on an annual basis and will include training on hand decontamination, handwashing procedures, sterilisation procedures, the use of Personal Protective Equipment (PPE) and the safe use and disposal of sharps. See also: Handwashing Techniques.
- Infection Control Training will take place for all new GPS workers.
- Client providers will ensure posters are displayed at each designated hand basin and also in public toilets and washing facilities (eg Baby-changing room etc).
- The client provider will ensure that all workers have access to sufficient and appropriate supplies of materials for hand decontamination, PPE and sharps containers.
- A random and unannounced Infection Control Inspection by the client provider, using the Checklist, will take place on at least a quarterly basis and the findings will be reported.
- Client providers will also seek to educate patients and carers regarding effective hand decontamination and handwashing techniques opportunistically. Hand gel or foam will be made available for patients and visitors throughout the premises and at strategic locations.

**GPS workers involved in clinical tasks will always be `bare below the elbow`. NICE guidance advises that bare below the elbow should mean:**

- Not wearing false nails or nail polish
- Not wearing a wristwatch or stoned rings
- Wearing short-sleeved garments or being able to roll or push up sleeves.

### **NATIONAL STANDARDS OF HEALTHCARE CLEANLINESS 2021**

The National Standards of Healthcare Cleanliness provide a common understanding of what it means to be a clean healthcare setting and give healthcare organisations in England a framework for detailing the required cleaning services and how 'technical' cleanliness and the efficacy of the cleaning process should be assessed.

The standards do not state precisely how cleaning services should be provided, e.g. by direct employment or contracting out, but client providers are accountable for the effectiveness of cleaning services.

**The standards provide advice and guidance on:**

- What cleaning is required.
- How client providers can demonstrate their cleaning services meet these standards.

These recommendations are based on sound evidence and accepted good practice relating to using equipment and avoiding the transfer of healthcare-associated infections in the UK.

The standards will support:

- The basis for developing specifications for service-level agreements or local procedures.
- A benchmark against which to compare services.
- Establishing the optimum levels of resource to deliver safe cleaning standards.
- Part of an ongoing performance management process.
- A framework for auditing and monitoring.
- As a tool for improving patient and visitor satisfaction.

For more detailed information on cleaning, disinfection & contamination protocols under this Standard, please refer to the 'Cleaning and Decontamination of Surfaces Protocol'.

### **CORONAVIRUS UPDATES FROM 2022**

Updated IPC advice published on 17 January 2022 says that 'an FFP3 respirator (or equivalent), must be worn by workers when caring for service users with a suspected or confirmed infection spread by the airborne route (during the infectious period).

Where a risk assessment indicates it, RPE should be available to all relevant workers. The risk assessment should include evaluation of the ventilation in the area, operational capacity, and prevalence of infection/new SARS-CoV-2 variants of concern in the local area. The hierarchy of controls can be used to inform the risk assessment. Workers should be provided with training on correct use.

GPS will undertake the necessary risk assessments and arranged for workers to have been fit tested before ordering the equipment. It is a legal requirement on employers that all tight fitting RPE, such as, FFP3 masks must be fit tested on all health and care workers who may be required to wear one to ensure an adequate seal/fit according to the manufacturer's guidance.

**The updated (form January 2022) guidance can be found here:**

<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control>

### **CORONAVIRUS UPDATES FROM 2020**

Public Health England have reviewed the UK's infection control recommendations for COVID-19. Having assessed the available evidence and feedback received, they have updated sections to improve the guidance and made recommendations that will help prevent the spread of infection. The main changes to the guidance are:

- To clearly explain the PPE required for different common clinical scenarios, 3 new tables have been added – one for hospitals, one for primary care, outpatient and community and social care, and one for ambulance, paramedics, and pharmacy workers.

- An additional, fourth table describes when to use PPE for all service user encounters (not just patients with suspected or confirmed COVID-19) at a time when there is sustained community transmission of COVID-19, as is currently occurring in the UK, and the likelihood of any service user having coronavirus infection is raised.
- The guidance explains that in some circumstances PPE can be worn for an entire session (such as a ward round) and does not need to be changed between each patient.
- Service user contact is now defined as being within 2 metres (rather than within 1 metre) of a service user, which is more precautionary and is consistent with the distancing recommendations used elsewhere.
- Hand-washing advice has been updated to include washing of forearms, when forearms have been exposed or may have been exposed to respiratory droplets or other body fluids.
- FFP2 and N95 respirators may be used for some aerosol-generating procedures if FFP3 respirators are not available. FFP3 respirators offer a slightly higher level of protection than FFP2 respirators.
- Advice on re-usable PPE components, including the need to refer to manufacturer's guidance on decontamination.
- Recommendations about the use of facemasks by service users.
- General formatting improvements to make it easier to access different sections of the guidance recommendation on the use of disposable fluid repellent coveralls as an alternative to long sleeved fluid repellent gowns for aerosol generating procedures or when working in higher risk acute areas. Workers need to be trained in the safe removal of coveralls [10 April 2020]
- Recommendations from Environmental sub-group of SAGE, supported by the Healthcare Onset Covid19 Infection (HOCl) Working Group [18 May 2020] on:
  - More frequent cleaning of environmental surfaces, personal and communal electronic devices.
  - Improved social distancing by health care workers (HCWs) in the healthcare setting.
  - Use of paper towels to dry hands in all clinical areas.
  - Local consideration to any enhancements that could be made to improve ventilation in healthcare premises.

PPE recommendations have been implemented, the PHE recommendations from the UK government and NHS can be found here:

<https://www.gov.uk/government/news/new-personal-protective-equipment-ppe-guidance-for-nhs-teams>

<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control>

## RESOURCES

**Standard infection control precautions: national hand hygiene and personal protective equipment policy (NHS England and NHS Improvement)**

<https://www.england.nhs.uk/publication/standard-infection-control-precautions-national-hand-hygiene-and-personal-protective-equipment-policy/>

**Guidance on Infection Control July 2015 (Dept of Health)**

<http://www.hse.gov.uk/legionnaires>

**Care Quality Commission**

<http://www.cqc.org.uk/content/guidance-providers>

<http://www.cqc.org.uk/guidance-providers/gps/nigels-surgery-full-list-tips-mythbusters-latest-update>

**Essential practice for infection prevention and control - Guidance for nursing staff, Royal College of Nursing 2012**

<https://www.infectionpreventioncontrol.co.uk/>

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