

Infection Prevention and Control Role and Responsibilities Policy V2.0

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Purpose: To ensure that responsibility for infection prevention and control is embedded at all levels of the organisation.

Target audience: Trust staff.

Document author and role: Rashima Hamdan, Senior IPAC Specialist Practitioner.

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Cornwall Partnership NHS Foundation Trust

Royal Cornwall Hospitals NHS Trust

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RCHT General manager confirming approval processes: Joanne Taylor, Deputy DIPC.

RCHT Governance lead confirming approval process: Joanne Taylor, Deputy DIPC.

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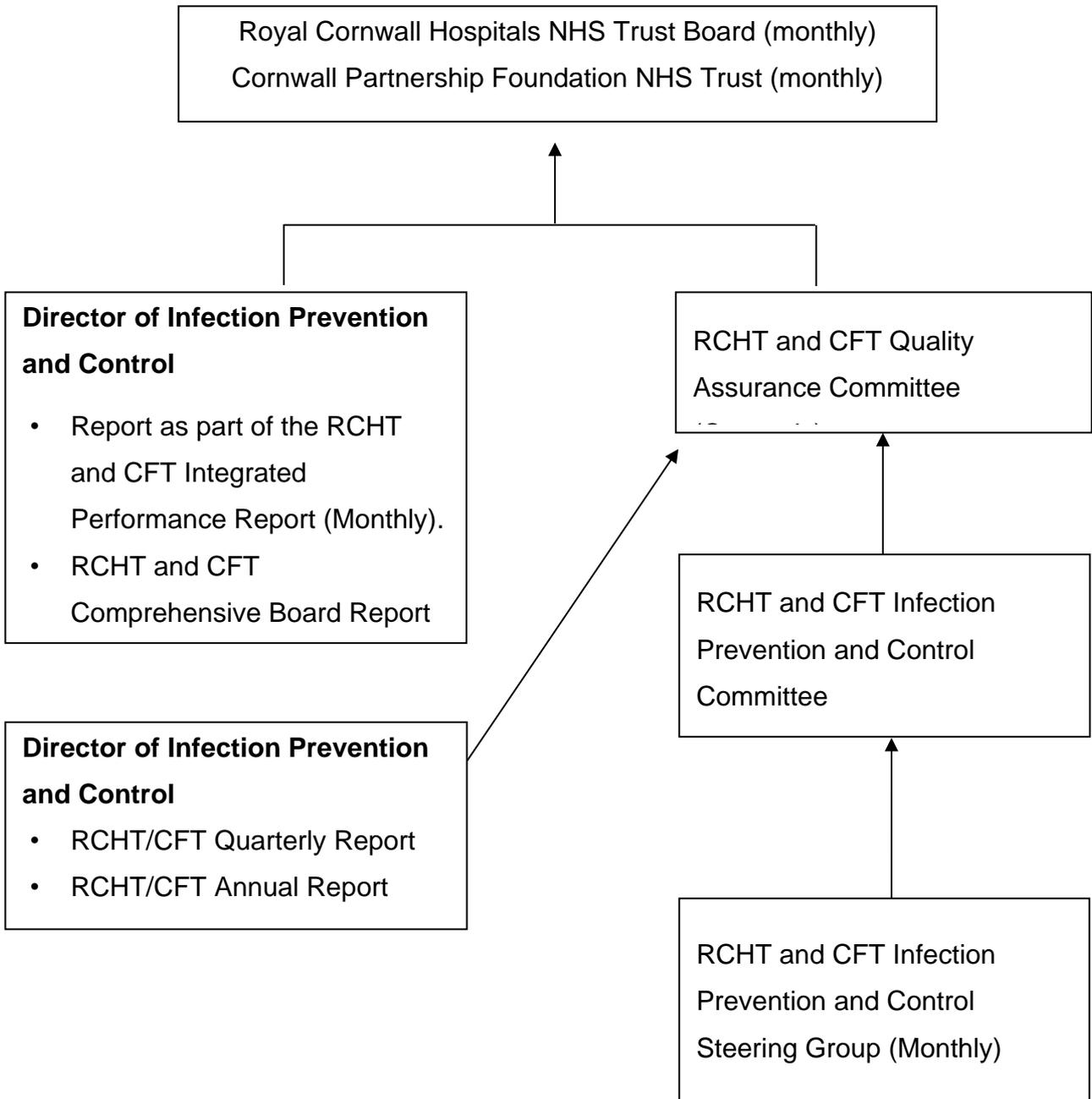
Version control

Version	Date	Author and/or reviewer	Section	Changes (key points)
V1.0	01/07/2021	Joanne Taylor, Consultant Nurse/Deputy DIPC	Full review.	Formatted to current joint template.
V2.0	10/01/2024	Rashima Hamdan, Senior IPAC Specialist Practitioner	Full review.	Formatted to current joint template. Added role of Estates and Facilities from Phil Bond.

This document replaces: Infection Prevention and Control Roles and Responsibilities Policy V1.0.

Summary

Infection Prevention and Control Reporting Structure



Contents

Contents	5
1. Introduction.....	7
2. Scope	7
3. Definitions and glossary	7
4. Ownership and responsibilities.....	8
4.1. Role of the Chief Executive	8
4.2. Role of the Trust Board	8
4.3. Director of Infection Prevention and Control (DIPC).....	8
4.4. Infection Prevention and Control Doctor (IPCD).....	9
4.5. Infection Prevention and Control Team	9
4.6. The IPAC team is responsible for:.....	10
4.7. Care Group Leaders RCHT/Area Director CFT.....	11
4.8. Infection Prevention and Control Steering Group	12
4.9. Infection Prevention and Control Committee	12
4.10. Role of Estates and Facilities	13
4.11. Individual Staff Members.....	13
4.12. Infection Prevention and Control Link Practitioner	14
4.13. Responsibilities to the Public.....	14
5. Standards and practice.....	15
6. Related legislation, national and local guidance.....	15
7. Training requirements.....	15
8. Implementation.....	16
9. Document Monitoring arrangements.	16
10. Updating and review	16
11. Equality and diversity	17

12.	Appendix 1: Equality Impact assessment Form.....	18
13.	Appendix 2: Infection Prevention and Control Structure	20

Data Protection Act 2018 (UK General Data Protection Regulation Legislation)

The Trusts have a duty under the Data Protection Act 2018 and UK General Data Protection Regulations 2016/679 to ensure that there is a valid legal basis to process personal and sensitive data. The legal basis for processing must be identified and documented before the processing begins. In many cases we may need consent; this must be explicit, informed, and documented. We cannot rely on opt out; it must be opted in.

Data Protection Act 2018 and UK General Data Protection Regulations 2016/679 is applicable to all staff; this includes those working as contractors and providers of services.

For more information about your obligations under the Data Protection Act 2018 and UK General Data Protection Regulations 2016/679, contact the Information Governance team.

- Cornwall Partnership NHS Foundation Trust: Email cpn-tr.infogov@nhs.net
- Royal Cornwall Hospitals NHS Trust: Email rch-tr.infogov@nhs.net

1. Introduction

- 1.1. 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 (Department of Health 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.
- 1.2. This version supersedes any previous versions of this document.

2. Scope

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

3. Definitions and glossary

- 3.1. **Infection Prevention and Control:** Processes to prevent and reduce to an acceptable minimum the risk of the acquisition of an infection amongst patients, healthcare workers and any others in the healthcare setting.
- 3.2. **DIPC:** Director of Infection Prevention and Control.
- 3.3. **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.

4. Ownership and responsibilities

4.1. Role of the Chief Executive

The Chief Executive Officer (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 organisation's clinical governance.

4.2. Role of the Trust Board

The Trust Board are responsible for:

- Identifying a board level lead for infection prevention and 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.
 - Clinical specialties and directorates and, where appropriate, support directorates and other similar units.

4.3. 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.

4.4. Infection Prevention and Control Doctor (IPCD)

The IPCD will:

- Work with the DIPC and support 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.
- Attend the Infection Prevention and Control Committee meetings and the Infection Prevention and Control Steering Group meetings.
- Advise and support Laboratory Manager/Pathology Manager/Trust Medical Director regarding infection prevention and control issues.

4.5. Infection Prevention and Control Team

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

- Consultant Nurse Infection Prevention and Deputy DIPC.
- Infection Prevention and Control Doctor.
- Medical Microbiologists.
- Infection Prevention and Control Lead Nurse.
- Infection Prevention and Control Specialist Nurses and Practitioners.

- Audit and Surveillance Support worker.
- IPAC Administration Lead.
- IPAC Administrator.

4.6. The IPAC team is responsible for:

- Ensuring advice on infection prevention and control is available on a 24-hour basis. The team is contactable on office hours (08:00 to 16:00) Monday through Sunday, and for out of hours, the clinical site team and on- call microbiologists shall provide IPAC advice.
- Formulating an annual infection prevention and control programme in full consultation with the Infection Prevention and Control Committee (IPCC), 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.
- Distributing policies to relevant areas and initiating their implementation by means of support, advice, and education.
- Ensuring that compliance with Infection Prevention and Control policies are monitored by the Infection Prevention and Control Team, Care Group Leads, designated Managers as appropriate.
- Identifying, controlling, and investigating 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
- Participating in the planning and upgrading of hospital facilities.
- Providing an on-going training programme encompassing all healthcare workers within the Trust.
- Providing specialist advice to key committees, groups, departments, or individual staff members in relation to Infection Prevention and Control practice.

- Carrying out alert organism surveillance, liaising with medical and nursing staff as appropriate.
- Informing the Chief Executive, DIPC and IPCC of any serious problems or issues relating to Infection Prevention and Control.
- Ensuring liaison with the Occupational Health Department regarding staff health and transmission of infectious disease.
- Reviewing the patients in side rooms, if they still require isolation or if can be stepped down. Ensuring the side room log is up to date.
- Investigating Infection Prevention and Control incidents.

4.7. Care Group Leaders RCHT/Area Director CFT

Each Care Group Leaders/Area Director will:

- Identify an Infection Prevention and Control Lead from within the Care Group Leadership/locality who will be responsible for attending the 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 staff champions for infection prevention and control.
- Ensure that Infection control is a standing agenda item for Board 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 audits where any element of the audit is less than 85%.
- Ensure representation at the Infection Prevention and Control Committee meetings and Infection Prevention and Control Steering Group meetings.
- Ensure that every ward/clinical department has a designated infection control link practitioner.
- Ensure that Patient Safety Reviews (PSRs) of healthcare associated infections are discussed at the relevant Governance meetings and the minutes of these forwarded to the DIPC's.

4.8. Infection Prevention and Control Steering Group

The Infection Prevention and Control Steering Group will:

- Develop new strategies to address Infection Prevention and Control issues within the acute setting and the wider health community.
- Review Infection Control Audit Data and monitor actions.
- Develop and review Policies and make minor alterations as appropriate and present to Infection Prevention and Control Committee.
- Facilitate the implementation of ratified policies.
- Monitor progress on actions identified at the RCA Group Meetings.
- Agree, amend, and monitor the progress of Healthcare Associated Infection Action Plans.
- Raise issues of concerns to the Executive Management Team via the Director of Infection Prevention and Control.

4.9. Infection Prevention and Control Committee

Responsibilities of the IPAC Committee 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.
- 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 including this one) 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.

4.10. Role of Estates and Facilities

Estates and Facilities is responsible for:

- Managing all aspects of the estate in line with IPAC regulations and guidance including, but not limited to Water Safety in line with HTM04-01, L8 ACOP and associated regulations and Ventilation Safety in line with HTM03 and waste management.
- Supporting the delivery of a compliant environment working closely with IPAC on the delivery of planned and reactive maintenance.

4.11. 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.

4.12. Infection Prevention and Control Link Practitioner

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 and Practitioners.
- 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.

4.13. 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/social media 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 also play their role in minimising the risk of infection by helping to keep the hospital environment clean.

5. Standards and practice

As outlined in Section 4 Ownership and Responsibilities.

6. Related legislation, national and local guidance

- DH (2003) Winning ways. Working together to reduce Healthcare Associated Infection in England. Report from the Chief Medical Officer. London: DH.
- DH (2004) Competencies for Directors of Infection Prevention and Control. London: DH.
- DH (2008) Director of Infection Prevention and Control profile. London: DH.
- DH (2011) 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. London: DH.
- NICE (2012) Infection: Prevention and Control of healthcare associated infections in primary and community care <http://guidance.nice.org.uk/CG139>
- NICE (2014) Prevention and Control of Healthcare associated infections – quality improvement guide <http://www.nice.org.uk/guidance/ph36/resources/guidance-prevention-and-control-of-healthcareassociated-infections-pdf>

Links to key external standards:

- CQC regulation 12.

7. Training requirements

No training requirements.

8. Implementation

- This policy will be implemented via Care Groups and localities from feedback via the IPAC Committee and IPAC Steering Group.
- This policy will be included in the Trust's document library and circulated to all IPAC link practitioners and Matrons.

9. Document Monitoring arrangements.

Information category	Detail of process and methodology for monitoring compliance
Element to be monitored	Compliance with roles and responsibility.
Lead	Deputy Infection Prevention and Control lead (DIPC).
Tool	Attendance at meetings. Minutes of Care Group and Area Meeting. Recorded on an Excel spreadsheet or Word document.
Frequency	Quarterly.
Reporting arrangements	Quarterly.
Acting on recommendations and lead(s)	Care Group Triumvirate and IPAC team.
Change in practice and lessons to be shared	To be included in the quarterly report to the Quality Assurance Committee (QAC).

10. Updating and review

This Policy will be reviewed within 3 years.

11. Equality and diversity

This document complies with the Cornwall Partnership NHS Foundation Trust and Royal Cornwall Hospitals NHS Trust equality and diversity statements. The statements can be found in the [RCHT Equality Diversity And Inclusion Policy](#) and [CFT Equality, Diversity and Inclusion Statement](#).

The initial equality impact assessment screening form is at appendix 1.

12. Appendix 1: Equality Impact assessment Form

Title of policy or document for assessment: Infection Prevention and Control Roles and Responsibilities Policy V2.0.

Document library section: Clinical / Infection Prevention and Control.

Is this a new or existing document? Existing.

Date of assessment: 10 January 2024.

Person responsible for the assessment: Rashima Hamdan, Senior IPAC Specialist Practitioner.

What is the main purpose of the document?

To ensure that responsibility for infection prevention and control is embedded at all levels of the organisation.

Who is affected by the document?

Staff Patients Visitors Carers Other All

The document aims to improve access, experience and outcomes for all groups protected by the Equality Act 2010.

Concerns

Are there concerns that the procedural document could have a differential impact on the following areas?

If a negative impact has been identified, please complete a full EIA by contacting the Equality, Diversity, and Inclusion Team. For RCHT please contact rcht.inclusion@nhs.net and for CFT please contact cft.inclusion@nhs.net

Concern area	Response	If yes, what existing evidence (either presumed or otherwise) do you have for this?
Age	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Disability	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Sex	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Gender reassignment	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Pregnancy and maternity	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Race	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Religion and belief	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Sexual orientation	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Marriage and civil partnership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Groups at risk of stigma or social exclusion such as offenders or homeless people	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Human rights	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Are there any associated objectives of the document? If yes, what existing evidence (either presumed or otherwise) do you have for this?

No.

Signature of person completing the equality impact assessment:

Name: Rashima Hamdan, Senior IPAC Specialist Practitioner.

Date: 10 January 2024.

13. Appendix 2: Infection Prevention and Control Structure

