

Infection Prevention and Control Policy

1.0 Introduction

- 1.1 Infection Control is a key part of an effective risk management and is intended to prevent the risk of infection or spread of infection amongst employees and customers.
- 1.2 The Wrekin Housing Group (the 'Group') is committed to the provision of a healthy environment for all service users, employees, visitors, volunteers, contractors and all others involved in the organisation's activities.
- 1.3 All care and support employees must adhere to infection, prevention and control procedures when engaging in direct personal care; or operating in the workplace; or in specialist housing environments such as residential, nursing, extra care, retirement living and supported housing schemes; or when visiting tenants in their own homes.
- 1.4 The Group will adhere to infection control legislation and guidance in the following areas:
- 1.4.1 The Health and Safety at Work Act 1974 and the Public Health Infectious Diseases Regulation 1988, which places a duty on the Group to prevent the spread of infection;
 - 1.4.2 The Reporting of Incidents, Diseases and Dangerous Occurrences Regulation 2013, which places a duty on The Group to report outbreaks of certain diseases and accidents such as needle stick accidents;
 - 1.4.3 The Controls of Substances Hazardous to Health Regulations 2002 (as amended) (COSHH), which places a duty on The Group to ensure that potentially infectious materials within the organisation are identified as hazards and safety systems of work are in place;
 - 1.4.4 The Environmental Protection Act 1990, which makes it the responsibility of The Group to dispose of clinical waste safely;
 - 1.4.5 The Food Safety Act 1990 and Food Hygiene (England) Regulations 2006 (Amended) 2012, which ensures that food prepared in customers homes is prepared, cooked, stored and presented to the standards set out in the Act;
 - 1.4.6 The Health and Social Care Act (2008) sets out essential standards of quality and safety, which relate to the effective operation of systems designed to assess the risk of, and to prevent, detect and control the spread of a health care associated infection. Consideration needs to be given to the range of types of environments where infection can occur, and to the systems in place to support the prevention and control of infection;
 - 1.4.7 As a Registered Provider with the Care Quality Commission (CQC) we must comply with the regulations and consider the Code of Practice for the Prevention and Control of Infections in the delivery of Services;

1.4.8 Public Health England COVID-19: for information relating to infection prevention and control we will refer to the current government advice.

2.0 Policy Scope

2.1 This policy applies to all premises of the Group, all staff employed by the Group and all other persons engaged in business on behalf of the Group.

3.0 Policy statement

3.1 The aim of the Infection, Prevention and Control Policy is:

- To ensure that the Group provides a safe environment and systems of work which minimise the risk of infection to service users, employees and visitors;
- To ensure policies and guidance for the prevention and control of infection are in place across the Group;
- To keep up to date with relevant legislation and government guidance on infection, prevention and control arrangements;
- To ensure that all employees who work in a care and support setting receive and put into practice the relevant training in the basic hygiene principles and the management of infection control;
- To regularly review and audit the infection, prevention and control practices;
- To ensure that appropriate resources are made available;
- To ensure good communications across the Group of infection and prevention control.

4.0 Standard Infection Prevention and Control Precautions

4.1 It is not always possible to identify how infections will spread, precautions to prevent the spread of infection must therefore be followed at all times. Standard precautions consist of:

- Effective Hand Hygiene
- Respiratory Hygiene
- Use of Personal Protective Equipment (PPE)
- COVID-19 and Staff Management
- Safe Use and Disposal of Sharps
- Effective Cleaning and Management of Waste
- Body Fluid Disposal and Treatment of Spillages
- Management of laundry
- Outbreaks and Communicable Infection
- Vaccinations
- Food Safety
- Uniforms and Work Wear
- IPC Considerations Specific to Care Homes

5.0 Roles and Responsibilities

5.1 **The Group Board** - The Board has overall accountability for ensuring that the organisation maintains safe, adequate and appropriate controls and procedures

to minimise the risks of infection to staff, service users and others, when visiting the organisation's premises.

5.2 Managers - All Managers are expected to provide leadership, supervision and be accountable for implementing safe systems of work relating to infection, prevention and control and ensuring that procedures are followed. The primary aim is to provide a safe environment for all service users, staff and visitors. Manager's responsibilities are:

- Reporting, responding to and escalating to Senior Managers and Health Protection Units of any occurrence of notifiable diseases or outbreaks of infection;
- Undertaking training, appropriate qualifications and gaining a clear in-depth understanding of infection, prevention control procedures and applying learning;
- To manage employees in line with this policy and procedure, ensuring employees complete induction and on-going training;
- To regularly, monitor, audit and quality assure safe systems of work and practice;
- Receive and respond to national and local policy directives and best practice consistency across the Group;
- Ensuring formal risk assessments are undertaken and recorded including the monitoring of all control measures;
- Investigate, document and report all accidents, incidents and risk in accordance with the organisations procedures and recommended means of preventing reoccurrence.

5.3 All Employees working within a Care and Support setting are responsible for:

- Ensuring they have received appropriate Infection, Prevention and Control training in the last 12 months;
- Never knowingly place a service user, member of staff or visitor at risk from an infection;
- Working to the infection control procedures outlined in the Groups policy and procedures;
- Challenging poor infection control practice and seeking support from Managers;
- Reporting any adverse incidents or symptoms of illness, in accordance with the Group's policy.

6.0 Implementation

6.1 Infection, prevention and control training is mandatory for all care and support staff on commencement of their employment. For those employees whose job role requires more intensive training, additional training will be provided which is specific to the job role. Training and Development team is responsible to ensure that employees are compliant in meeting their training requirements.

7.0 Monitoring

- 7.1 The progress of infection, prevention and control is monitored through the Group's Care and Support dashboard and reported to the Audit and Assurance Committee and Group Board.
- 7.2 In premises where the Group delivers regulated activity, an Annual audit will be carried out by the Group's Health and Safety team. Quarterly audits will be carried out by Care Managers establish the effectiveness, implementation of, and the extent of compliance with this policy and its associated procedures to provide assurance that an effective system of managing infection control is in place.
- 7.3 An annual infection prevention and control statement will be written by the Registered Manager and disseminated across all Care and Support settings where regulated care activity is delivered by the Group.

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| The Wrekin Housing Group | Infection, Prevention and Control Policy Number 2023/012 |
| Policy Author | Paula Reynolds Head of Retirement Living |
| Direct Lead | David Wells Executive Director of Operational Services |
| Version | V5.1: April 2023 |
| Target audience | All Care and Support Employees |
| Consultation | Senior Manager Group (to be distributed to any policy user within their team) |
| Date of Equality Impact Assessment | No individuals or groups of people are disadvantaged by the adoption of this policy |
| Date of Data Privacy Impact Assessment | No DPIA is required. |
| Approving Body | Executive Management Group |
| Date of final approval | April 2023 |
| Implementation date | April 2023 |
| Reporting | Executive Management Group |
| Review date | October 2025 |
| Expiry date | April 2026 |
| Review cycle | Three-year review cycle |
| Policy category | Care and Support |
| Associated policies and procedures | Health and Safety Policy Food Safety Policy Procedures: - <ul style="list-style-type: none"> • Effective hand hygiene • Respiratory and Cough hygiene • Safe Management of Care Equipment • Safe use and disposal of sharps • Effective cleaning and management of waste • Body fluid disposal and treatment of spillages • Management of Laundry • Outbreaks of Communicable Infection • Immunisation of Employees |
| Policy location | Intranet Workplace |

Summary of changes table

| Revision history | | | |
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| Author | Summary of changes | Version | Authorised by & date |
| Paula Reynolds, Claire Skelton, Libby O'Neill | In line with policy review cycle. | V5.1: April 2023 – Includes EMG recommendations | Executive Management Group – 6 th April 2023 |