INFECTION PREVENTION AND CONTROL FRAMEWORK

ROLES AND RESPONSIBILITIES

MARCH 2006

1. CONTEXT

Success in prevention and control of infection and communicable diseases will depend on:

- creating a managed environment that minimises the risk of infection to patients, staff and the public; and
- compliance with relevant national standards, national guidance and local guidance

This will best be achieved through:

- personal accountability and responsibility for prevention and control of infection throughout the organisation. “Infection control is everyone’s business”
- clear reporting lines (who needs to know what; who has authority to make changes; and who monitors and acts on key information)
- clear and integrated working practices across the Trust
- clear management processes and structures which deliver best possible practice
- all staff being aware, skilled and consistent in application of national and local protocols and guidance

It will need to be underpinned by co-ordinated prevention and control of infection arrangements across the Trust. This should include:

- leadership and co-ordination in order to develop and implement Trust-wide infection control programmes with clearly defined objectives and outcomes that can be, and are, measured.
- clear mechanisms for access to specialist infection control advice and support
- the provision of education and training programmes in infection prevention and control
- resources and management decisions that meet the needs of the service, and which recognise the benefits to patients, staff and the public, and to the effective and efficient running of the Trust

For prevention and control of infection and communicable disease to work effectively, critical activities have to be embedded in everyday practice. There must be a culture of: “infection control is everyone’s business” and integration of best practice into: “that’s how we do things here”.

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Each individual healthcare practitioner has a professional responsibility for safe practice including the prevention and control of infection.

2. INTRODUCTION

This Framework for Infection Prevention and Control is designed to build upon the systems and structures that already exist and to provide improved clarity regarding accountability and responsibilities and also to provide a coherent focus for improvement.

It provides for the establishment of the role of Director, Infection Prevention and Control, and clearly delineated relationships and communications between the Trust Board, Chief Executive and the:

- Director, Infection Prevention and Control
- Management Executive and Service Directors
- Control of Infection Committee
- Risk Management Operational Group
- Health Care Governance Committee

Healthcare Associated Infections – A Strategy for Hospitals in Wales articulates clearly the way forward for infection prevention and control in Wales and the Trust’s Infection Control and Prevention Strategy and Action Plan takes these requirements and translates them into local action.

The Trust’s Infection Control and Prevention Strategy provides the following strategic objectives:

- All staff will understand the impact of infection control practice to enable them to discharge their personal responsibilities to patients, other staff, visitors and themselves
- Patients will be treated in physical environments that minimise the risk of infection
- Infection control programmes must be supported by adequately resourced specialist infection control staff with sufficient skill mix to meet the needs of the Trust’s Infection Control Plan
- The Trust will adopt comprehensive surveillance and audit programmes to monitor and direct their infection control programmes. Programmes will be based upon local need as directed by the Trust Infection Control Plan and Programme but will adopt national programmes as they are developed and agreed by the NHS Wales Management Board
- Reduction in infection rates will form part of the Trust programmes and strategies. This will be embedded within overall Trust management schemes and will have links to clinical governance, risk management, performance management and the “Balanced Scorecard”
• The Trust will develop systems to ensure effective recording, analysis, sharing and access to their own data, and access to information sources appropriate to their needs for managing infection in the Trust.

It then details how these objectives will be achieved:

• National standards that are up to date and evidence based will be adopted by to ensure consistent and effective infection control practice across the Trust and Wales
• Infection control will be embedded as a core item of the management agenda and accountabilities of all staff and managers (as appropriate to their function)
• Specialist (all Wales) epidemiological support will be available to Trust infection control teams as required, to support their infection control programmes
• Effective training schemes will be available to meet the needs of all staff. The schemes will cover undergraduate, pre-registration, in service (NHS and non NHS), post registration (both generalist and specialist) staff and include continuing professional development

This Framework takes these key elements from the Strategy and uses them as Programmes and focuses on six main areas:

• Standards
• Infrastructure and Organisation
• Training and Education
• Surveillance and Audit
• Interventions and the development of Performance Indicators
• Communication

The performance criteria for each programme will be determined by the Infection Control Committee. A Task and Finish Group comprising of individuals with specific knowledge and skills will develop the programme plans setting out specific objectives for Directorates, who, through their own Directorate Infection Prevention and Control Lead will be expected to develop and manage the local response via a Directorate Infection Prevention and Control Plan. This will then be used as part of the Performance Management Framework for both Directorates and individual Directors and other senior managers. This can be seen graphically in the attached diagram.

3. **ROLES AND RESPONSIBILITIES**

   i) **Non Executive Director**

   The Trust Board will nominate a Non Executive Director as Infection Control and Prevention Champion. Details regarding the roles and specific responsibilities is awaited from the Welsh Assembly Government.
ii) **Director, Infection Prevention and Control (DIPC)**

The DIPC is designated as having overall responsibility for management processes and risk assessment relating to infection control. The Medical Director will have joint responsibility in medical devices decontamination, medical devices management, and cleaning services (the issue of antibiotic resistant infections and antimicrobial prescribing). The DIPC will be responsible for receiving and ensuring the circulation of relevant advice on these matters and working with WAG and other agencies on improving practice.

It is expected that this senior post will report directly to the Chief Executive and the Board, will Chair the Trust’s Infection Control Committee and will be an integral member of the Health Care Governance Committee and the Risk Management Operational Committee. The DIPC will be responsible for:

- co-ordination of prevention and control of infection throughout the Trust
- delivery of the Board approved Infection Control Action Plan in conjunction with the Control of Infection Committee and Infection Control Team
- clear mechanisms for access to specialist infection control advice and support
- assessing the impact of all existing and new policies and plans on HAI, and making recommendations for change
- challenging non-compliance with local and national protocols and guidance relating to prevention and control of infection, decontamination, antimicrobial prescribing and cleaning
- the production of an annual report on the state of healthcare acquired infection, decontamination and cleaning in the Trust and releasing it publicly

iii) **The Control of Infection Committee (CIC)**

This Committee will effectively form the management team for infection prevention and control and will oversee the development and implementation of Programme Plans and Directorate Infection Prevention and Control Plans. The Committee will:

- Report to the Chief Executive and Management Executive through the DIPC who will also Chair the Committee
- Develop Trust wide policies and procedures related to infection prevention and control and identify, and promote the use of, best practice throughout the Trust
- Provide guidance, advice and support on the implementation of policies and the development and delivery of Programme Plans and Directorate Infection Prevention and Control Plans
• Receive reports of Programme and Directorate Plan progress from Programme and Directorate Leads, including alert organisms and inoculation incidents
• Review outbreaks of infection and advise on how outbreaks might be prevented
• Monitor and advise on specific areas of hygiene and infection control, catering, HSDU, ventilation and water services, occupational health, operating theatres and endoscopy

Membership of the Control of Infection Committee

The following will be members of the CIC:

• Director, Infection Prevention and Control, Chair
• Infection Control Team (including Infection Control Doctor with dedicated infection control sessions, Consultant Microbiologists and Infection Control Nurses)
• Lead Public Health Nurse
• Medical Director
• Consultant in Communicable Disease Control
• Directorate Infection Prevention and Control Leads

iv) Directorate/Site Infection Prevention and Control Leads (IPCLs)
Each of the 10 clinical Directorates, via their respective Directors, and the Princess of Wales and Neath/Port Talbot sites, via their respective General Managers, are required to appoint a Lead for Infection Prevention and Control who has the responsibility for ensuring that the infection control agenda is prioritised and managed effectively at an operational level. This person will be a member of the Control of Infection Committee and will be the operational link between the CIPC and the Directorate. The Directorate Infection Prevention and Control Lead will be responsible for:

• Developing, implementing and managing the Directorate Infection Prevention and Control Plan in line with Programme requirements
• Reporting progress against Plan targets to the DIPC via the Control of Infection Committee and at Directorate Quarterly Performance Reviews
• Ensuring Directorate compliance with national and local standards and guidelines for infection prevention and control
• Ensuring that best practice is identified and implemented/communicated as appropriate

v) Infection Control Team (ICT)
The Trust Infection Control Team will act as the “specialists’ specialist”, advising practitioners in all areas across the Trust
regarding the surveillance, prevention and control of infection within their individual locations, Directorates, Departments or Teams. They will not be expected to carry the burden of infection prevention and control management for individual sites and Directorates but to contribute in specialist areas to the local management of infection prevention and control. The Team’s contribution will be assessed by the Director, Infection Prevention and Control via an annual Infection Control Team Report, which will detail the activities of the Team and the contribution made to Programme and Directorate Plans.

The Infection Control Team will consist of:

- **Infection Control Doctor**, who will:
  - have dedicated time set aside for this role
  - act as the primary source of clinical advice for practitioners on infection prevention and control matters
  - act as the lead for the Infection Control Team, reporting directly to the Director, Infection Prevention and Control in relation to ICT activities
  - be a member of the Prescribing Strategy Group

- **Infection Control Nurses** (one of whom will be designated the Senior Infection Control Nurse) – who will:
  - have daily contact with wards or other health care premises
  - visit each facility at least weekly
  - provide advice to ward and departmental nursing staff on the nursing care of patients who are at risk of, or who have, infection
  - support Public Health procedures.
  - be responsible for a systematic competency programme in infection control for all health care workers at their place of work (including medical, agency and bank staff)
  - undertake systematic hand washing audits, including audits involving night and weekend health care workers, and provide an on-call service to advise on infection control matters on a 24-hour basis
  - write an annual Report on Infection Control Team activity

4. **NEXT STEPS**

- Adopt Infection Prevention and Control Framework
- Establish a Director, Infection Prevention and Control role
- Establish a Task and Finish Group.
- Implement Infection Prevention and Control planning process