

A large, solid green decorative wave shape starts from the left edge of the slide, curves upwards to a peak, and then curves downwards towards the bottom right corner, creating a dynamic background element.

The Code of Practice

Introduction to compliance criteria

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Nursing Officer – Communicable Diseases

Health and Social Care Act 2008

- Established the Care Quality Commission and laid the framework for its powers and responsibilities
- CQC is the new regulator of healthcare and adult social care in England
- From 1 April 2010, NHS bodies were registered against a full set of sixteen registration requirements
- On 1 October 2010, providers of adult social care and independent healthcare will be registered against the same sixteen registration requirements
- One of the sixteen registration requirements covers “**Cleanliness and infection control**”

The Regulations - containing **sixteen** registration requirements

STATUTORY INSTRUMENTS

2010 No. 781

**NATIONAL HEALTH SERVICE, ENGLAND
SOCIAL CARE, ENGLAND
PUBLIC HEALTH, ENGLAND**

The Health and Social Care Act 2008 (Regulated Activities)
Regulations 2010

Made - - - -

15th March 2010

Coming into force - -

1st April 2010

The Regulations -

registration requirement for 'Cleanliness and infection control' (1)

Cleanliness and infection control

12.—(1) The registered person must, so far as reasonably practicable, ensure that—

- (a) service users;
- (b) persons employed for the purpose of the carrying on of the regulated activity; and
- (c) others who may be at risk of exposure to a health care associated infection arising from
the carrying on of the regulated activity,

are protected against identifiable risks of acquiring such an infection by the means specified in paragraph (2).

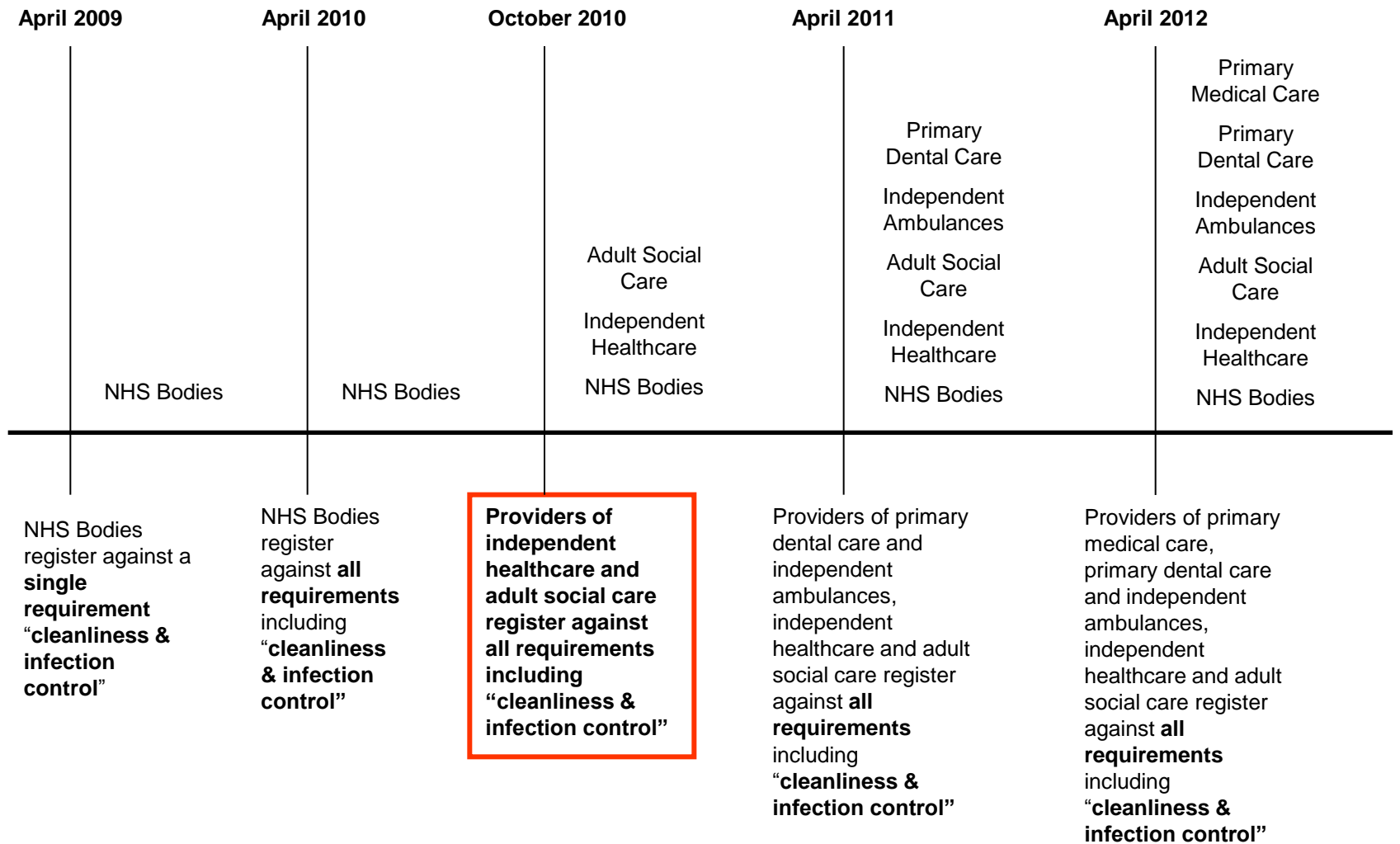
The Regulations -

registration requirement for 'Cleanliness and infection control' (2)

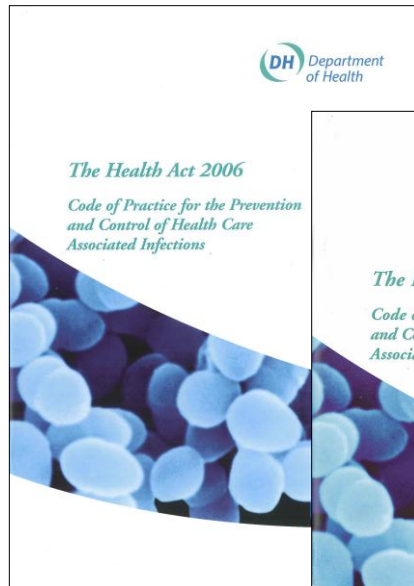
(2) The means referred to in paragraph (1) are—

- (a) 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;
- (b) where applicable, the provision of appropriate treatment for those who are affected by a health care associated infection; and
- (c) the maintenance of appropriate standards of cleanliness and hygiene in relation to—
 - (i) premises occupied for the purpose of carrying on the regulated activity,
 - (ii) equipment and reusable medical devices used for the purpose of carrying on the regulated activity, and
 - (iii) materials to be used in the treatment of service users where such materials are at risk of being contaminated with a health care associated infection.

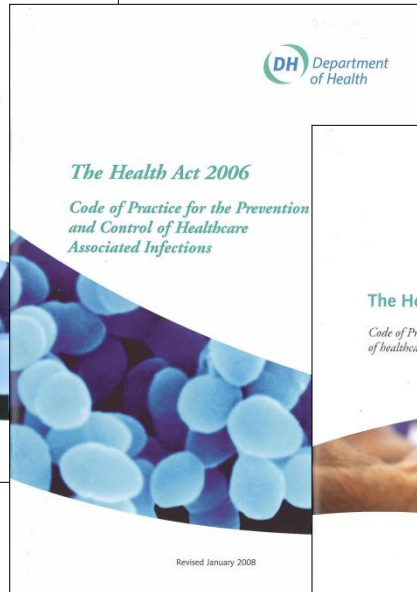
The Code of Practice - changing registration requirements



The Code of Practice - a brief history and next steps



OCT 2006



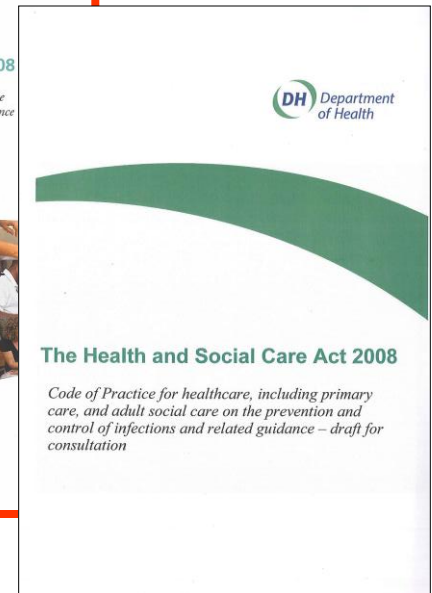
JAN 2008



APR 2009



APR & OCT 2010



APR 2011 & APR 2012

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Part 2: The Code of Practice - one page of ten compliance criteria

Compliance criterion	What the registered provider will need to demonstrate
1	Systems to manage and monitor the prevention and control of infection. These systems use risk assessments and consider how susceptible service users are and any risks that their environment and other users may pose to them.
2	Provide and maintain a clean and appropriate environment in managed premises that facilitates the prevention and control of infections.
3	Provide suitable accurate information on infections to service users and their visitors.
4	Provide suitable accurate information on infections to any person concerned with providing further support or nursing/medical care in a timely fashion.
5	Ensure that people who have or develop an infection are identified promptly and receive the appropriate treatment and care to reduce the risk of passing on the infection to other people.
6	Ensure that all staff and those employed to provide care in all settings are fully involved in the process of preventing and controlling infection.
7	Provide or secure adequate isolation facilities.
8	Secure adequate access to laboratory support as appropriate.
9	Have and adhere to policies, designed for the individual's care and provider organisations, that will help to prevent and control infections.
10	Ensure, so far as is reasonably practicable, that care workers are free of and are protected from exposure to infections that can be caught at work and that all staff are suitably educated in the prevention and control of infection associated with the provision of health and social care.

Code of Practice

- The Code of Practice is the single table of ten compliance criteria set out in Part 2 of the Code of Practice and related guidance
- The CQC will take account of these criteria when assessing providers against the registration requirement on **cleanliness and infection control**
- Failure to meet elements of the Code of Practice will not necessarily mean that the registration requirement has not been met, but it will be considered by CQC in assessing whether the registration requirement has been achieved
- If the registration requirement is not met CQC has a range of enforcement powers that it can consider using

The Code of Practice - what's does the law say?

- The law says that the Code must be *taken into account* by the CQC when it makes decisions about registration.
- Registered providers do not by law have to comply with the Code.
- A registered provider may be able to demonstrate that it meets the registration requirement regulation on **cleanliness and infection control** in a different way (equivalent or better) from that described in the Code document

The Code of Practice - Guidance Table 1 proportionality

Table 1 – The application of the Code of Practice to regulated activities

This table provides a guide as to which criteria may apply to each regulated activity. This is a matter for local determination.

		Regulated activities														
		Personal care	Accommodation for persons who require nursing or personal care	Accommodation for persons who require treatment for substance misuse	Accommodation and nursing or personal care in the further education sector	Treatment of disease, disorder or injury	Assessment or medical treatment for persons detained under the Mental Health Act 1983	Surgical procedures	Diagnostic and screening procedures	Management and supply of blood and blood-derived products	Transport services, triage and medical advice provided remotely etc.-	Maternity and midwifery services	Termination of pregnancies	Services in slimming clinics	Nursing care	Family planning services
Compliance criterion	1	Systems to manage and monitor the prevention and control of infection. These systems use risk assessments and consider how susceptible service users are and any risks that their environment and other users may pose to them	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	2	Provide and maintain a clean and appropriate environment in managed premises that facilitates the prevention and control of infections		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	3	Provide suitable accurate information on infections to service users and their visitors	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	4	Provide suitable accurate information on infections to any person concerned with providing further support or nursing/medical care in a timely fashion	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	5	Ensure that people who have or develop an infection are identified promptly and receive the appropriate treatment and care to reduce the risk of passing on the infection to other people		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	6	Ensure that all staff and those employed to provide care in all settings are fully involved in the process of preventing and controlling infection	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	7	Provide or secure adequate isolation facilities		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	8	Secure adequate access to laboratory support as appropriate			✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	9	Have and adhere to policies, designed for the individual's care and provider organisations, that will help to prevent and control infections	5	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	10	Ensure, so far as is reasonably practicable, that care workers are free of and are protected from exposure to infections that can be caught at work and that all staff are suitably educated in the prevention and control of infection associated with the provision of health and social care	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

- Applies to transport and triage services delivered at site

5 See Table 3

The Code of Practice - Guidance Table 2

potential sources of advice

Table 2 – A guide to potential sources of professional infection prevention and control advice⁵

		Regulated activities															
		Personal care	Accommodation for persons who require nursing or personal care	Accommodation for persons who require treatment for substance misuse	Accommodation and nursing or personal care in the further education sector	Treatment of disease, disorder or injury	Assessment or medical treatment for persons detained under the Mental Health Act 1983	Surgical procedures	Diagnostic and screening procedures	Management and supply of blood and blood-derived products	Transport services, triage and medical advice provided remotely etc.	Maternity and midwifery services	Termination of pregnancies	Services in slimming clinics	Nursing care	Family planning services	
Professional group	Director of Infection Prevention and Control/Infection Prevention and Control Lead		✓			✓	✓	✓			●	✓	✓			✓	
	Infection control nurse/infection control practitioner					✓	✓	✓			●	✓					
	Consultant microbiologist					✓	✓	✓	✓	✓	✓	✓	✓				
	Designated site lead for infection (may not always be a healthcare worker)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	
	Access to consultant in communicable disease control/ local Health Protection Agency		✓	✓	✓	✓	✓	✓	✓	✓			✓			✓	
	Fully constituted infection control teams and infection control committee					✓	✓	✓			●	✓					
	Primary care trust infection control support	✓	✓	✓									✓		✓	✓	
	Primary healthcare teams	✓	✓	✓	✓									✓	✓	✓	
	Occupational health services (consult when risk of transmission from care workers to service user or vice versa)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

● Relevant to ambulance trusts

† Providers of domiciliary care would need to have a designated lead

⁵ Where no specialist occupational health service advice exists, advice may be sought from service user's general practitioner.

The Code of Practice - Appendix A

worked examples - proportionality

- Gives *examples* of how a proportionate approach could apply to different types of adult social care
- Registered providers and Infection Prevention and Control (IPC) Leads should carry out risk assessment to decide which parts of criteria apply to their service
- Registered managers and IPC leads will need to ensure they provide evidence to support their decision.

Criterion 1 - Systems to manage and monitor the prevention and control of infection.

- In a small service providing personal care or accommodation with personal care someone with appropriate knowledge and skills will become the IPC Lead and take responsibility for infection prevention and control. This could be the registered provider, registered manager or another member of staff.
- The annual statement will not need to be as detailed as one prepared for a health setting. The IPC Lead will ensure their annual statement provides a short review of:
 - any outbreaks of infection;
 - action taken following an outbreak of infection or recommendations from an audit;
 - audits undertaken;
 - risk assessments undertaken for prevention and control of infection;
 - training received by staff; and
 - review and update of policies, procedures

Criterion 2 – Provide and maintain a clean and appropriate environment in managed premises that facilitates the prevention and control of infections

In a service where people are generally well and supported to develop independent living skills:

- detailed cleaning schedules would not be necessary. Cleaning responsibilities and routines should form part of the individual plan of care;
- it is unlikely that the policy on the environment will need to cover all the points set out in the main guidance;
- domiciliary care services that provide support in people's own homes will not be expected to comply with this criterion.

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 a room should be a single bedroom with en-suite facilities.

Criterion 8 – Secure adequate access to laboratory support as appropriate

This 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

(a) **Standard infection prevention and control precautions**

All staff should have training on hand hygiene and when and how personal protective equipment should be used. Where nursing care is provided, policies should also be in place for the safe handling and disposal of sharps.

(b) **Aseptic technique**

This policy will *usually* only be needed by services that are registered to provide nursing care.

Criterion 9 - Have and adhere to policies, designed for the individual's care and provider organisations, that will help to prevent and control infections

(m) **Mandatory reporting to the HPA**

This does not apply to care homes.

(x) **Uniform and dress code**

Staff would not be expected to wear uniforms in a service where the aim is to provide personalised care in a domestic setting. Work wear should be easily washable and aprons and gloves should be available for staff if they carry out personal care tasks

Definitions & bibliography

- **Definitions** – developed to foster a common understanding
- **Bibliography** - represents current guidance, best practice and legislation

Thank you
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