

## Management of Communicable Diseases Policy

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P025	Infection Control Lead	Quality & Safety Committee	3 Years

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## 1. Introduction

All AWP Infection Prevention and Control Policies are based on The Health and Social Care Act (2008) Code of Practice for the NHS on the Prevention and Control of Healthcare Associated Infections and related Guidance. In exceptional circumstances, where a complex situation arises that would not directly match this legislation, a risk management plan must be in place, taking into account the diversity and best interests of staff, service users and the public.

## 2. Purpose of this policy

The purpose of this policy is to provide staff with information for the appropriate care of patients with a communicable disease.

## 3. Definitions

Communicable diseases can be defined as illnesses caused by microorganisms and transmitted from an infected person or animal to another person or animal. Some diseases are passed on by direct or indirect contact with infected persons or with their excretions. Most diseases are spread through contact or close proximity because the causative bacteria or viruses are airborne; i.e. they can be expelled from the nose and mouth of the infected person and inhaled by anyone in the vicinity. Such diseases include: diphtheria, scarlet fever, measles, mumps, whooping cough, influenza, and smallpox. Some infectious diseases can be spread only indirectly, usually through contaminated food or water, e.g. typhoid, cholera, dysentery. Still other infections are introduced into the body by animal or insect carriers, e.g. rabies, malaria, encephalitis.

The human disease carriers, i.e. the healthy persons who may be immune to the organisms they harbour, are also a source of transmission. Control of communicable disease depends upon recognition of the many ways transmission takes place. It may include isolation of persons with certain diseases. Education is of great importance both in the matter of personal responsibility (disposal of secretions, preventing contact with the blood of others, proper handling and preparation of food, personal hygiene) and community responsibility (including safe water and food supply and waste disposal). Animal and insect carriers must be controlled, and the activities of human carriers must be limited.

## 4. Scope of this policy

This policy is for implementation within all wards/departments and health care settings within AWP.

The policy allows for local provision of additional information but no separate or additional policy for local areas is permitted or supported.

Information can also be supplied verbally - face to face. Please contact the local AWP Infection Control Nurse covering [Inpatient Wards](#) and [Community Teams](#).

## 5. Responsibilities

### 5.1 Executive Management

The Trust Board is ultimately responsible for fulfilling requirements relating to Infection Prevention and Control as set out in the Health & Social Care Act 2008. It vests in the Chief Executive responsibility for the fulfilment of these standards and criterion.

## 5.2 Chief Executive

Has overall responsibility for ensuring that requirements relating to infection prevention and control conform to current legislation and best practice and that effective measures are in place and are periodically reviewed.

## 5.3 Non-Executive Directors

Are to support and, where appropriate, challenge and support the Director of Nursing and Quality on issues or recommendations relating to Infection Prevention and Control management at Executive Board level.

## 5.4 Director of Nursing and Quality / Director of Infection Prevention and Control (DiPC)

Takes lead responsibility for the Management of Infection Prevention and Control within the Trust. This is to ensure the monitoring of and compliance with the Health and Social Care Act 2008 and subsequent guidance.

## 5.5 Associate Director of Nursing – Community

Manages the Infection Prevention and Control service within the Nursing and Quality Directorate Governance framework by:

- Ensuring systems are in place so that infection prevention and control risks are managed in a manner that minimises the risk to service users, staff, carers and the public.
- Development of an Annual Work Programme.
- Monitoring standards and information linked with the prevention and control of infection.
- Reporting performance levels for Infection Prevention and Control to the Director of Nursing and Quality through the Infection Prevention, Physical Healthcare and Medical Devices Groups and the Safety Management Group.
- Auditing compliance with legislation, policy and procedures; and reporting and following up recommendations.
- Continually improving performance through regular reviews of policy, procedures and working practices.

## 5.6 Modern Matrons, Team and Ward Manager

- Responsible for overseeing infection control matters and that best practice is adhered to in the areas they manage.
- To ensure that audit findings and action plans are responded to in a timely way.

## 5.7 Infection, Prevention and Control Nurse

- Responsible for giving day to day infection control advice trustwide
- Undertaking infection control audits trustwide
- Provides training on infection, prevention and control.
- Work in association with our Service Level Agreement Providers at Royal United Hospital Bath (RUH) for Infection Prevention and Control (IPC).
- Liaise directly with Public Health England, NHS England, our Commissioners and other stake holders regarding Infection Prevention and Control Matters.

## 5.8 Link Practitioners

- Link nurses act as a link between their own clinical area and the infection control team. Their role is to increase awareness of infection control issues in their ward / team and motivate staff to improve practice.
- They should participate in training provided by the IPC team to ensure their competence.

## 5.9 Employees

- It is the responsibility of each member of the Trust to implement this policy. The policy requires all employees to:
- Work within the provisions of the policy and associated procedures to ensure the provision of a safe and clean environment and reduction in HCAs.
- Report breaches of this policy to their line manager.
- Report all adverse events to their line manager and completing an Incident Report Form as appropriate in accordance with the [Incident Management Policy](#)

## 6. Monitoring & Audit

The Director of Infection, Prevention and Control is responsible for monitoring that the requirements of this policy have been met.

This policy will be reviewed after 3 years or earlier if indicated. Compliance with the policy will be monitored through a variety of different mechanisms, as follows:

- The Trust Board will make an annual declaration in respect of Infection Prevention and Control compliance as part of its Annual Statement.
- An Annual Assurance Report on Infection Prevention and Control will be provided to the designated Board Reporting Committee.

## 7. Training

The Trust's overarching policy for training is the [Learning and Development Policy](#) and this should be read in conjunction with this policy. Attached as appendices to that policy are the Trust's learning and development matrices. These matrices describe the minimum statutory, mandatory and required training for all staff groups in respect of infection prevention and control.

The Learning and Development Policy also describes the Trust's arrangements for training, in particular how there are processes in place to ensure staff receive the training they require and how non-attendance is followed up. These arrangements are further supported by management supervision and appraisal processes.

The Trust lead for Infection Prevention and Control has agreed the training standard with the Learning and Development Team and training standards have been informed by statutory requirements, professional standards and national best practice.

The Trust lead for Infection Prevention and Control participates in a programme of continuous professional development to ensure they remain up to date and keep abreast of developments in this field.

- They must comply with any safety policies or procedures put in place to protect their health.
- Employees must protect their own health and safety.
- Employees also have a duty to ensure that their actions do not harm the health and safety of others when managing outbreaks of communicable infections.

## 8. Links to Procedures

The following procedures documents relate to the management of specific communicable disease control. Use the links below to access the procedure according to the specific communicable disease information required:

- [Information to support Infection Control Care Planning](#)
- [Chickenpox and Shingles](#)
- [Clostridium Difficile](#)
- [Influenza A](#)
- [Major Outbreaks of Communicable Infection including Outbreak Plan](#)
- [Meticillin Resistant Staphylococcus Aureus \(M.R.S.A.\)](#)
- [Mumps](#)
- [Scabies and Infestations](#)
- [Transmissible Spongiform Encephalopathy \(TSE\) Creuzfeld-Jacob Disease \(CJD\) and variant CJD \(vCJD\)](#)
- [Tuberculosis](#)
- [Viral vomiting and/or diarrhoea and Noro Virus](#)

<b>Version History</b>				
<b>Version</b>	<b>Date</b>	<b>Revision description</b>	<b>Editor</b>	<b>Status</b>
1.0	05/01/2010	Approved by the Quality & Healthcare Committee	DJ	Approved
1.1	30/01/2013	Full review of policy	AJ/AS	Draft
2.0	17/06/2014	Approved by Quality and Standards Policy	SJ	Approved
2.1	01/12/2014	Amended and updated procedural links	Webmaster	Approved
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