

WILLEN HOSPICE & WILLEN HOSPICE VENTURES

HS012 Infection Control Policy



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HS012 Infection Control Policy

For the purposes of this document the term 'the Hospice' relates to Willen Hospice and Willen Hospice Ventures and the tem 'staff' relates to employees and volunteers.

Policy Statement

Appropriate infection control measures are in place, which minimise the risk of patients, staff and visitors acquiring a health care associated infection.

This is achieved through the hospice maintaining and developing formal links with Milton Keynes Hospital (MKGH). This ensures the provision of infection control guidance in a formalised manner. This is put into practice by formal links with the Infection Control Team (ICT) at MKGH.

The links are made through the hospice infection control Link Nurse (ICLN).

Responsibility/Accountability

Ultimate Responsibility The Registered Manager - to ensure implementation of the policy and to conduct regular review of the policy and procedure.

First Line Responsibility In Patient Unit Nurse Manager - to form a formal link with the Infection Control Nurse Specialist at MKGH in order to access expert advice and guidance. To inform the Registered Manager of any changes in practice/legislation

All Heads of Department - to ensure that the policy and procedures are implemented and adhered to. To report any concerns to their Line Manager.

Scope of the Policy

The infection control policy covers the policies that need to be in place to minimise the risk of patients, staff and visitors acquiring a health care associated infection.

This is achieved through:

- The maintenance and development of formal links with MKGH
- The appointment of a registered nurse with designated responsibilities for infection control which is included in the job description and a time commitment is identified
- Relevant training and access to advice on infection control
- The involvement of the infection control team in service developments
- The maintenance of up to date infection control policies and procedures
- The hospice uses the infection control policies and procedures from MKGH which are adapted for local use. These policies and procedures are evidence based and reflect relevant legislation and guidance from the relevant colleges.

The policy includes:

- universal infection control precautions
 - hand hygiene
 - prevention of occupational exposure to blood borne viruses (BBV's) and post exposure prophylaxis
 - safe handling and disposal of clinical waste
 - housekeeping and cleaning regimes for all patient areas
 - occupational health policies for the prevention and management of communicable infections in health care workers, including those infected with blood borne viruses
 - major outbreaks of communicable diseases
 - isolation of patients
 - antimicrobial prescribing
 - control of MRSA, VRE and other microbial resistant micro-organisms
 - control of tuberculosis, including multi-drug resistant tuberculosis
 - collection, packaging, handling and delivery of laboratory specimens
 - handling of medical devices in procedures carried out on know/suspect CJD patient and on patients in risk categories for CJD as defined in the ACDP/SEAC guidance
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- The relevant approved up to date policies and procedures are available within the departments

Monitoring and Reviewing the Policy

- Policy review 3 yearly or when legislation requires, whichever is sooner
- Annual report to the Council of Management
- Quarterly report to Risk Management/Clinical Governance, whichever is appropriate.

Compliance with Statutory Regulations

- National Care Standards Commission Core Standard Infection Control (C25), Hospice Standard Infection Control (H6)

Related Hospice Policies and Procedures

- HS001 Health and Safety General Policy
- HS023 Management of Waste Policy and Procedures
- HS004a Infection Control Procedures
- HS008 Needle Stick Procedure