



Florence

Infection Prevention and Control Policy and Procedures (Northern Ireland)

Policy Lead	Mayvelyn Talag Registered Manager NI
Authors	Florence Governance Team
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Table of Contents

[1. Introduction](#)

[2. Policy Statement](#)

[3. Scope](#)

[4. Definitions, Roles and Responsibilities](#)

[5. Procedures](#)

[5.1 Standard Infection Control Precautions\(SICPs\)](#)

[5.2 Transmission Based Precautions \(TBP'S\)](#)

[5.3 Hand Hygiene](#)

[5.4 Personal Protective Equipment \(PPE\)](#)

[5.5 Professional Standards Of Dress](#)

[6. Outbreak Incidents \(Including COVID-19 which is defined as an exceptional episode\)](#)

[7. Training and Education](#)

[8. Monitoring and Compliance](#)

[9. Version History/Review of Changes](#)

[Things you should do:](#)



1. Introduction

Infection control is a key element in the delivery of effective, safe care.

Infectious diseases can be transmitted when there are inadequate processes in place. Transmission of infectious diseases can cause an increase in morbidity and mortality, prolonged hospital stays and an increase in admissions to care services.

In order to protect service users and staff from the spread of such infections, and in order to maintain their health and well-being, this organisation is committed to ensuring the highest possible standards of infection control are practised as a key priority.

The transmission of infection can be reduced through compliance with Standard Infection Control Precautions (SCIPs) which consist of 8 key elements: these include:

- Correct hand hygiene
- Safe cleaning and decontamination
- Safe handling and disposal of waste and linen
- Sharps safety
- Correct use of personal protective equipment
- Safe handling of blood and body fluids
- Good respiratory hygiene.
- Regional Infection Prevention and Control Manual for Northern Ireland

The Head of Nursing and Governance for Florence is the lead for Infection Prevention and Control for the organisation.

2. Policy Statement

This policy is to outline key points and responsibilities regarding infection prevention and control. This policy should be used alongside the associated Infection Control policies and procedures of the service that the care professional is working in. These local policies will provide further guidance for the care professional and support the implementation of this policy.

Legislation applicable to this policy includes:



- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (Northern Ireland) 1997
- The Public Health (Control of Diseases) Act 1984
- The Public Health (Infectious Diseases) Regulations 1988
- The Health and Safety at Work (Northern Ireland) Order 1978
- Control of Substances Hazardous to Health (COSHH) 2002
- The Food Safety (Northern Ireland) Order 1991
- The Health Protection (Notification) Regulations 2010
- The National Infection Prevention & Control Manual.

It is also in alignment with the Public Health Agency's Northern Ireland Regional Infection Prevention & Control Manual.

3. Scope

This policy applies to all employees at Florence.. In the unlikely event that the client does not have such a policy in place, care professionals should adhere to the advice and guidelines contained within this policy

4. Definitions, Roles and Responsibilities

CEO (Chief Executive Officer) The CEO is ultimately responsible for the overall management and direction of the company. The CEO has the ultimate responsibility for setting the tone and culture for the organisation, ensuring that all employees understand the policy's importance, and overseeing its implementation.

Central Team - All direct employees of Florence that are not care professionals working through the Florence platform

Care Professionals - Anyone on the Florence platform that carries out work on behalf of Florence in other organisations, for example registered nurses and care assistants.

Client - an organisation or service that utilises Florence's services, for example, a care home, a hospital or domiciliary care provider.



Employees – everyone employed by Florence directly and indirectly, including care professionals using the platform and the central team.

Governance Lead is responsible for ensuring that all incidents relating to infection prevention and control are recorded and acted upon accordingly; Monitoring infection trends and escalating themes / trends identified to the Head of Nursing and Governance and the Registered Manager for Northern Ireland.

Head of Nursing and Governance – is responsible for:

- Ensuring that training is available to all care professionals on Infection prevention and Control Ensuring that all incidents relating to infection prevention and control are recorded and acted upon accordingly
- Monitoring infection trends and escalating themes / trends

Infection Control – The term infection control is used throughout the healthcare sector and is an integral part of the industry. It relates to the control of infectious diseases in the healthcare setting.

Infection Prevention – The term infection prevention relates to practices designed to stop infections from being introduced into an environment.

Regulation and Quality Improvement Authority (RQIA) – is the independent body responsible for monitoring and inspecting the availability and quality of health and social care services in Northern Ireland, and encouraging improvements in the quality of those services.

Registered Manager is responsible for:

- ensuring that this policy meets the needs of regulators in Northern Ireland.
- working with the Head of Nursing and Governance to address concerns and incidents relating to Infection Prevention and Control in their area of regulated activity
- ensuring all notifications related to serious incidents are submitted to the RQIA as applicable



Service User - a person who uses health and/or social care services. Sometimes known as a "patient", "client" or "person in care".

5. Procedures

5.1 Standard Infection Control Precautions(SICPs)

SICPs must be used by all staff, in all care settings, at all times, for all service users whether infection is known to be present or not. This is to ensure the safety of those being cared for, staff and visitors in the care environment.

SICPs are the basic infection prevention and control measures necessary to reduce the risk of transmission of infectious agents from both recognised and unrecognised sources of infection.

Sources of (potential) infection include blood and other body fluids secretions or excretions (excluding sweat), non-intact skin or mucous membranes and any equipment or items in the care environment that could have become contaminated.

The application of SICPs during care delivery is determined by an assessment of risk to and from individuals and includes the task, level of interaction and/or the anticipated level of exposure to blood and/or other body fluids.

To be effective in protecting against infection risks, SICPs must be used continuously by all staff. SICPs implementation monitoring must also be ongoing to ensure compliance with safe practices and to demonstrate ongoing commitment to service user, staff and visitor safety.

5.2 Transmission Based Precautions (TBP'S)

Additional TBPs are required to be used by care professionals when caring for service users with a known or suspected infection or colonisation.

Clinical judgement and decisions should be made by care professionals on the necessary precautions. This must be based on the:

- Suspected or known infectious agent
- Severity of the illness caused
- Transmission route of the infectious agent



- Care setting and procedures undertaken

TBPs are categorised by the route of transmission of infectious agents and can be transmitted by more than one route including:

- **airborne** – coughing, sneezing, breathing or
 - **airborne infection** – small dry and wet particles that stay in the air for long periods of time allowing airborne contamination even after the departure of the host. Particle size < 5 µm.
 - **droplet infection** – small and usually wet particles that stay in the air for a short period of time. Contamination usually occurs in the presence of the host. Particle size > 5 µm.
- **direct physical contact** – touching an infected individual, including sexual contact
- **indirect physical contact** – usually by touching a contaminated surface.
- **Faecal-oral transmission** – usually from unwashed hands, contaminated food or water sources due to lack of sanitation and hygiene.

5.3 Hand Hygiene

Hand hygiene is considered to be one of the most important aspects of infection prevention and control in reducing the transmission of infectious agents. Care Professionals working on the Florence Platform must familiarise themselves with the Local Infection Prevention and Control policy of the service within which they are working.

The World Health Organisation (WHO) 5 moments for Hand Hygiene must be adhered to, these are:

- 1. Before touching a service user;
- 2. Before clean/aseptic procedures.
- 3. After body fluid exposure risk;
- 4. After touching a service user; and
- 5. After touching a service user's immediate surroundings.

Before performing Hand Hygiene:



- Expose forearms (bare below the elbows);
- Remove all hand/wrist jewellery (a single, plain metal finger ring is permitted but should be removed (or moved up) during hand hygiene);
- Ensure finger nails are clean, short and that artificial nails or nail products are not worn; and
- Cover all cuts or abrasions with a waterproof dressing.

5.4 Personal Protective Equipment (PPE)

Before undertaking any procedure, care professionals should assess any likely exposure and ensure PPE is worn that provides adequate protection against the risks associated with the procedure or task being undertaken.

All PPE should be:

- Located close to the point of use;
- Stored to prevent contamination in a clean/dry area until required for use.
- Single-use only items unless specified by the manufacturer;
- Changed immediately after each service user and/or following completion of a procedure or task using correct donning and doffing procedures
- Disposed of after use into the correct waste stream i.e. healthcare waste or domestic waste.
- Worn when exposure to blood and/or other body fluids is anticipated/likely;
- Changed if a perforation or puncture is suspected;
- Appropriate for use, fit for purpose and well-fitting.

Gloves must be:

- Worn when exposure to blood and/or other body fluids is anticipated/likely;
- Changed immediately after each service user and/or following completion of a procedure or task;
- Changed if a perforation or puncture is suspected;
- Appropriate for use, fit for purpose and well-fitting.

Aprons must be:

- Worn to protect uniform or clothes when contamination is anticipated/likely e.g. when in direct care contact with a service user



- Changed between service user and/or following completion of a procedure or task.

5.5 Professional Standards Of Dress

Uniform is usually required when working in the clinical environment. Where a uniform is required, the following should be observed:

- Agreed workwear, where supplied by an individual should be in line with this code at all times. For care professionals who are provided with a uniform by Florence, they should wear it in accordance with this policy and FNI24 Professional Standards of Dress Policy and Procedures.
- The standard clinical uniform worn is tunic and trousers.
- All care professionals are required to comply with the Hygiene Code, which is statutory guidance and requires the arms of individuals having clinical contact to be 'bare below the elbow'. In order to facilitate hand washing, watches should not be worn and all jewellery other than a plain (non-stoned) band, must be removed.
- Stud earrings only are permitted in the clinical environment. Large earrings will pose a personal safety hazard to individuals and should not be worn.
- When reporting for duty, care professionals must wear a clean uniform which is smart in appearance. Uniforms should be changed after every shift for cross infection purposes and immediately if visibly stained where possible. Uniforms should be replaced as soon as it becomes worn, damaged, discoloured or soiled or when a more suitable size is required.
- It is recognised that occasionally uniform may not be appropriate. The local policy of that service should be followed in these circumstances.
- In the interests of a professional image, if there are no changing facilities provided by the client, care must be taken to cover the uniform whilst travelling to and from the place of work, and the care professional must go straight home at the end of their assignment. Uniforms should never be worn when shopping or undertaking domestic duties other than those required at work. .
- In outbreak situations, uniform must not be worn to or from work. Uniforms should be changed after the shift and transported in a red alginate bag where possible for ongoing laundering at as high a temperature as the material will allow or greater than 60 degrees.



- In the clinical environment, hair should be tied back or plainly clipped and should not come into contact with clothing.
- Nails should be short and clean. False nails and nail varnish are prohibited in the clinical environment.
- In the clinical environment; shoes should be appropriate for the uniform with a closed toe and no more than a small heel. Florence acknowledges that where a risk assessment identifies the need for safety footwear e.g. in a kitchen, that safety footwear should be worn by the individual.

6. Outbreak Incidents (Including COVID-19 which is defined as an exceptional episode)

An outbreak of infection is defined in the 'The Northern Ireland Regional Infection Prevention and Control Manual' as:

An incident in which two/more people experiencing a similar illness are linked in time or place.

- A greater than expected incidence of infection compared to the usual background rate for the particular location
- A single case for certain rare diseases
- A suspected, anticipated or actual event involving microbial or chemical contamination of food / water

Common outbreaks include:

- Gastroenteritis (usually viral caused by Norovirus)
- Clostridium difficile infection (CDI)
- Methicillin resistant Staphylococcus aureus (MRSA)
- Multi-resistant gram negative bacilli
- Influenza / other respiratory illnesses
- Scabies

When a client declares an outbreak of any infectious nature, Florence will work with the client to ensure that there are clear risk assessments and protocols in



place to reduce the risk of further transmission between services. These may include:

- Gathering information about the other organisations or services where the care professionals working on the Florence Platform have been working previously
- Ensuring all care professionals working on the Florence Platform have access to the client's Infection Prevention Policies and equipment
- Ensuring all care professionals working on the Florence Platform have a robust and comprehensive induction and hand over at the start of their shift.

Where clients are experiencing an outbreak of any Healthcare Associated infection (HAI); The Account Manager must ensure this is noted on the service profile on the Platform to alert care professionals to the presence of an outbreak in the service. In order to mitigate the risk of cross infection; care professionals will be discouraged from working between services that have been identified as having an outbreak.

- Where a service is identified as having an outbreak, this will be displayed on their Florence profile, this will include the advice to care professionals on the platform that they should avoid working between services in this instance. Block booking of care professionals should be encouraged in these circumstances in order to promote good infection prevention practice.
- All Clients will be advised at the outset that care professionals work as part of the Florence Platform and may also work with other organisations. This should be considered when filling shifts with temporary workers in the event of an infection outbreak within the service.
- Following declaration of an outbreak, the Account Manager will monitor the status every 7 days and once the outbreak is declared to be over, the alert will be removed from the service profile on the Florence Platform.
- The presence of an alert on the Florence Platform will automatically generate an alert (via SMS) to any care professionals working on the Platform, who are rostered to work within that service. This has the purpose of advising them that there is an infection alert within that service.



- The Florence platform operates a screening system for all services and care professionals working within the platform.

7. Training and Education

- Care Professionals working on the Florence Platform must maintain competence, skills and knowledge in infection prevention and control.
- Care Professionals working on the Florence Platform are required to complete an annual Infection Prevention Training programme to remain compliant with the organisation's requirements for practice.
- Care Professionals working on the Florence Platform are required to complete the Florence Academy COVID-19 training which is CPD accredited.
- Statutory and Mandatory training is monitored through the Florence Platform. Care Professionals are advised 4 weeks prior to the expiry of their training records that they must repeat the training in order to retain access to the platform.
- Care Professionals working on the Florence Platform who are not compliant with their statutory and mandatory training requirements will not be able to gain access to the Florence Platform.

8. Monitoring and Compliance

The policy will be reviewed every 3 years or earlier if there are any changes in the legislation, registration requirements or Company policy.

9. Version History/Review of Changes

Date	Reviewed changes
02/09/24	Registered manager name change





1. Appendix 1 – Policy Summary

Things you should know:

- Infection prevention and control is a key element in the delivery of effective, safe care and Florence is committed to containing, reducing and preventing Healthcare Associated Infections across its workforce and those that work on the Florence Platform.
- Care Professionals working on the Florence Platform must maintain competence, skills and knowledge in infection prevention and control.
- The transmission of infection can be reduced through compliance with Standard Infection Control Precautions (SCIPs) which consist of 8 key elements: these include: Correct hand hygiene, Safe cleaning and decontamination, Safe handling and disposal of waste and linen, Sharps safety, Correct use of personal protective equipment, Safe handling of blood and body fluids and Good respiratory hygiene.

Things you should do:

- This policy should be used alongside the associated Infection Control policies and procedures of the services that the care professional is working in. These local policies will provide further guidance for the care professionals and support the implementation of this policy.
- Before undertaking any procedure, staff should assess any likely exposure and ensure PPE is worn that provides adequate protection against the risks associated with the procedure or task being undertaken.
- Care Professionals working on the Florence Platform are required to complete an annual Infection Prevention Training programme to remain compliant with the organisational requirements for safe Infection Prevention and Control practice.
- In outbreak situations, uniforms must not be worn to or from work. Uniforms should be changed after the shift and transported in a red alginate bag



where possible for ongoing laundering at as high a temperature as the material will allow or greater than 60 degrees.

