

Infection Prevention and Control in General Practice

Tracy Dell & Stephanie Bouckley





A bit about me ...Tracy Dell



- Primary Care Manager
- Consultant/locum
- Trainer/mentor/appraiser
- Chartered Manager - CMI
- PMA (FPMA) & Members Council Chair
- Co-founder of Locum PM
- Calderdale Carers Project Trustee
- Veteran advocate



A bit about me

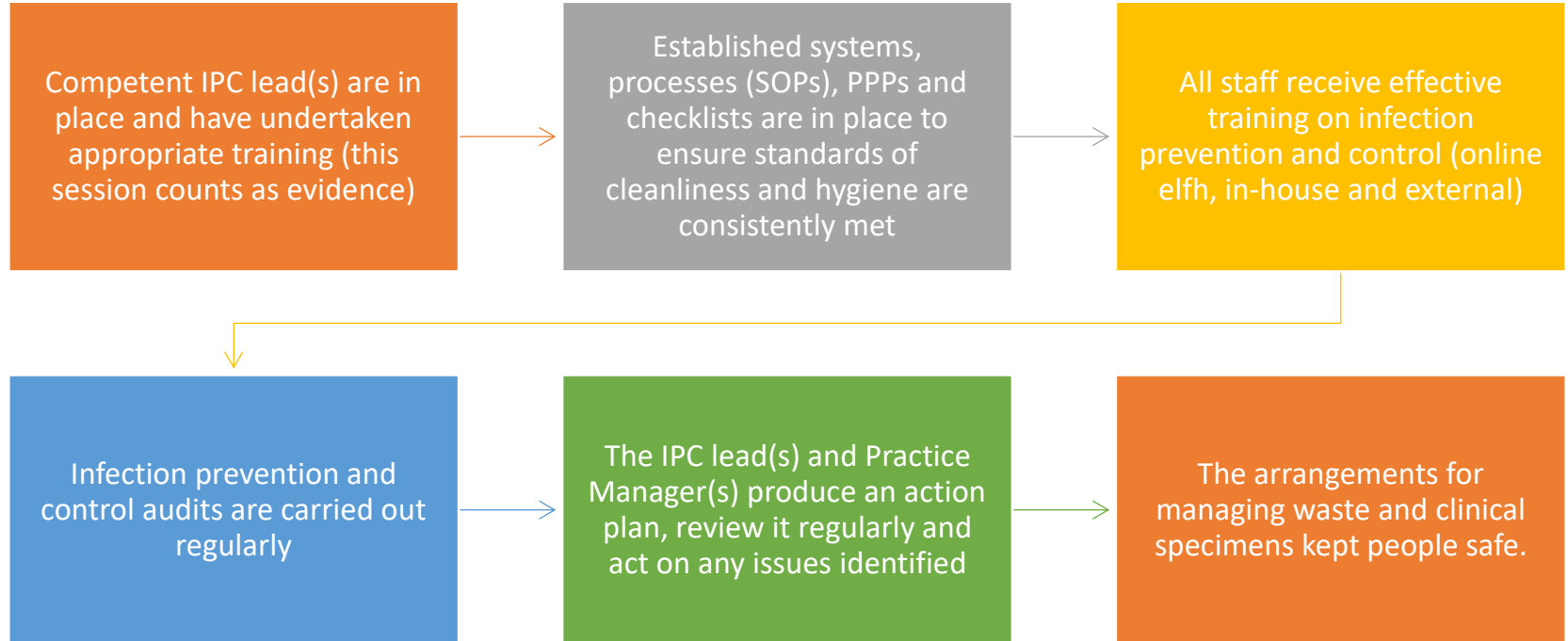
- Registered Nurse 38 years
- 19 years' experience in General Practice
- Senior Practice Nurse and IPC Lead
- IPC independent trainer
- Previous Modern Matron for Critical Care
- Previous Operating Theatre Manager (5 years)
- Member of Bazzmatazz dance troupe
- Member of Calderdale Council Choir
- Chocolatier.





CQC

CQC Evidence Requirements



CQC Evidence Requirements

- ✓ Policies, procedures and protocols – up to date and easily accessible?
- ✓ IPC lead(s) known to all?
- ✓ Appropriate training for IPC lead and staff in place?
- ✓ Training carried out by IPC lead such as hand hygiene?
- ✓ Standard Operating Procedures (SOPs) in place for IPC related areas e.g. sample handling, spills, fridge checks?
- ✓ Staff health assessed, immunisation records and Hep B status recorded?
- ✓ Checklists in place for cleaning etc.?
- ✓ Audits carried out regularly?
- ✓ Findings reported and actioned?

CQC Plan



-
- Be aware of the expected date of your inspection
 - Check the outstanding actions from your last report have been actioned and kept up to date
 - Check out the mythbusters
 - Document and evidence what you do: SOPs
 - It's ok to say you don't know or haven't done it but tell them you have a plan and a timescale
 - Make your everyday practice outstanding
 - Think like a CQC assessor
 - Don't be afraid – they are not out to get you!



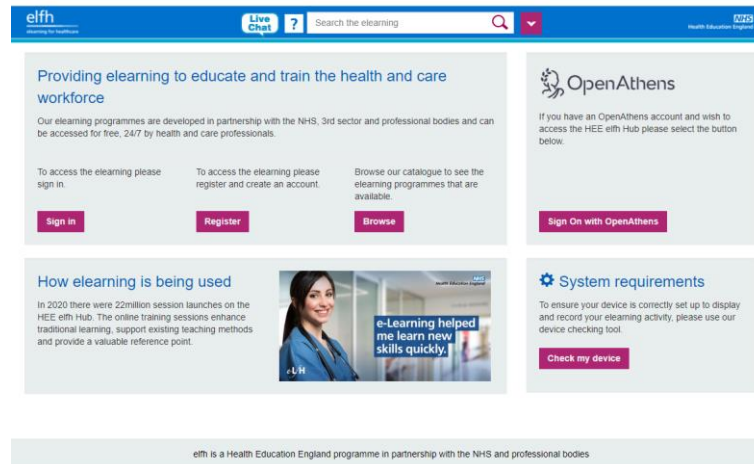
Staff Training

All staff must be trained in IPC. This can be accessed for free online via elfh: <https://portal.e-lfh.org.uk/> or via other online training software.

Regular updates and face to face sessions should be delivered by the IPC lead in areas such as:

- Cleaning (equipment and clinical fridges etc.)
- Hand hygiene
- Sample handling
- Sharps
- Waste.

elfh Portal



Key SOPs, Policies, Procedures and Protocols

- Clinical Waste Management
- Disposable (single-use) Instruments
- Privacy Curtains
- Carpets and Soft Furnishings
- Needle-stick Injury
- Safe Use and Disposal of Sharps
- Sample Handling
- Sterilisation and Decontamination
- Isolation of Patients
- Hand Hygiene
- Notifiable Diseases
- Toys in Waiting Area/Consulting Rooms
- PPE.

Generic Policies

There is no need to create all IPC SOPs, policies, procedures and protocols from scratch. Generic ones can be shared with practices, PCNs, found via Facebook Forums, primary care organisations like Practice Index (may have a fee) or free via the link below:

<https://www.infectionpreventioncontrol.co.uk/gp-practices/policies/>



Occupational Health

Occupational Health arrangements are in place providing services such as:

- Needlestick Injuries
- Employment pre-placement questionnaires
- Sickness case management
- Vaccination or immunisations
- Advice and guidance.

NHS England commissions these services. Most GP practices have access to support (varies regionally).

Your local LMC or ICB can direct you.





Staff Immunisation Status

- Some staff may need further vaccinations:
 - Bacillus Calmette–Guérin (BCG): if they have close contact with infectious tuberculosis (TB) patients.
 - Hepatitis B if they:
 - handle samples
 - have direct contact with patients' blood or blood-stained body fluids, such as from sharps
 - are at risk of being injured or bitten by patients.
 - Varicella (chickenpox); if they have direct patient contact and:
 - cannot give a definite history of chickenpox or shingles or
 - a blood test does not show they are immune.
 - The **annual influenza vaccine** should be offered to staff directly involved in patient care.
-

Waste Management

From 31 March 2025 (or 31 March 2027 for micro-firms), all workplaces* in England have a legal duty to present the following wastes separated in accordance with the arrangements with their waste collector:

- dry recyclable materials - plastic, metal, glass, paper and card
- food waste
- black bin waste (residual waste).

**Depending on the size 10 WTE+*



FOR A GREENER **NHS**

The NHS has set a target that healthcare providers should classify 60% of its waste as offensive waste by 2026.

Workplaces can decide on the size of containers and frequency of collections based on the volume of waste they produce.

Workplaces that generate garden waste have a legal duty to manage it in accordance with the waste hierarchy and arrange for it to be recycled or composted if it delivers the best environmental outcome.

<https://www.gov.uk/guidance/simpler-recycling-workplace-recycling-in-england>

WHICH BIN?

RECYCLING



NON-CONFIDENTIAL
PAPER, CARD, CANS,
BOTTLES ETC. FOR
RECYCLING.
ALSO CONSIDER
NON-KERBSIDE SCHEMES
LIKE TERRACYCLE &
REFACTORY
FOR E.G. BLISTER PACKS,
& NEEDLE CAPS

DOMESTIC



PAPER TOWELS,
PATHOLOGY BAG
STICKY STRIPS, PLASTIC
WRAPPERS (E.G. FROM
SWABS, SYRINGES,
DRESSINGS, COIL KITS)
& NEEDLE CAPS, BUT
ONLY WHERE NO
RECYCLING SCHEME
EXISTS (SEE LEFT)

OFFENSIVE



INFECTION NOT
SUSPECTED BUT
CONTENTS CONTAINS
BODY FLUIDS, E.G.
SANITARY PADS,
INCONTINENCE PADS,
SOILED COUCH ROLL,
NAPPIES, USED GLOVES

INFECTIOUS



WASTE FROM
PATIENTS WITH
KNOWN INFECTIONS
E.G. WOUND DRESSINGS,
INFECTED SWABS,
PPE USED FOR
INFECTED PATIENTS









SHARPS



SHARPS E.G.
NEEDLES, GLASS, &
SYRINGES.
CHECK CORRECT LID
COLOUR - VARIES
DEPENDING IF E.G.
ITEM CONTAMINATED
WITH MEDICATION





































Waste Management

Waste Type	Classification	Colour Coding	Description & Disposal Method
Infectious	Hazardous		Infectious waste which requires disposal by incineration.
Infectious	Hazardous		Infectious waste which may be treated to render safe prior to disposal or alternatively it can be incinerated.
Cytotoxic / Cytostatic	Hazardous		Waste consisting of, or contaminated with, cytotoxic and/or cytostatic products which requires disposal by incineration.
Offensive	Non-Hazardous		Non-infectious, offensive/hygiene waste which may be recycled, incinerated or deep landfilled.
Anatomical	Hazardous		Anatomical waste which requires disposal by incineration.
Medicinal	Non-Hazardous		Waste medicines, out of date medicines, denatured drugs, which requires disposal by incineration.
Dental	Hazardous		Dental amalgam & mercury including spent and out of date capsules, excess mixed amalgam & contents of amalgam separators which requires disposal by recovery or recycling.
Domestic	Non-Hazardous		This waste should not contain any infectious materials, sharps or medicinal products, and requires disposal by landfill.

DISPOSING OF CLINICAL AND NON-CLINICAL WASTE

 **Property Services**

General	Dry Mixed Recycling	Medicine / Chemical / Infectious Waste	Infectious Waste	Offensive Waste	Cytotoxic / Cytostatic Waste
					
YES PLEASE					
					
Non-recyclable materials	Food tins and drink cans	PPE contaminated with infectious / chemicals / medicine waste	Infectious PPE	Non-infectious PPE	PPE contaminated with cytotoxic / cytostatic waste
					
Small quantities of food waste	Mixed plastics	IV bags	Infectious dressings, plasters, bandages etc.	Nappy waste	Items contaminated with cytotoxic / cytostatic waste
					
Paper hand towels	Paper and card	Swabs contaminated with infectious / chemicals / medicine waste	Infectious swabs	Non-infectious dressings, plasters, bandages etc.	Dressings, plasters, contaminated with cytotoxic / cytostatic waste
NO THANKS					
					
Recycling waste	General	Paper hand towels	Paper hand towels	Paper hand towels	Paper hand towels
					
Clinical and sharps waste	Food	General and packaging	General and packaging	General and packaging	General and packaging
					
Liquids	Glass	Sharps	Medicines and sharps	Sharps	Sharps

[Guidance on the correct disposal of potentially hazardous clinical waste](#)

[GP Mythbuster 99 – includes healthcare waste](#)

The Perfect Bins!



FOR A GREENER **NHS**

IPC Lead(s)

The nominated lead should be trained in all aspects of IPC and be confident in the role. Ideally two leads should be appointed for contingency.

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Nominated Lead Responsibilities:

- *Raise awareness of the importance of IPC ensure all staff know who you are and about the role*
- *Lead on all aspects of IPC in the practice*
- *Ensures compliance*
- *Provide training, information, advice and support to colleagues.*
- *Competent to train hand hygiene, ANTT, waste management etc.*
- *Deliver and keep records of IPC training*
- *Oversee the appropriate supply of PPE, sharps containers and stock*
- *Conduct annual IPC audits /regular checks, producing an action plan then acting on or reporting issues as appropriate. Keep records*
- *Liaise with IPC leads at ICB, PCN and NHSE.*

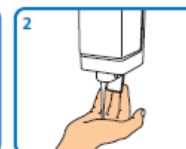


Hand-washing technique with soap and water

NHS



Wet hands with water



Apply enough soap to cover all hand surfaces



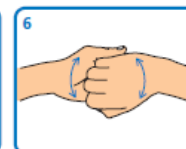
Rub hands palm to palm



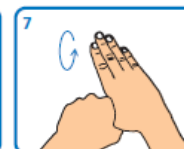
Rub back of each hand with palm of other hand with fingers interlaced



Rub palm to palm with fingers interlaced



Rub with back of fingers to opposing palms with fingers interlocked



Rub each thumb clasped in opposite hand using a rotational movement



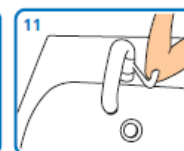
Rub tips of fingers in opposite palm in a circular motion



Rub each wrist with opposite hand



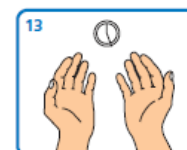
Rinse hands with water



Use elbow to turn off tap



Dry thoroughly with a single-use towel



Hand washing should take 15–30 seconds

deanyourhands[®]
campaign

NHS
National Patient
Safety Agency

Please use hand sanitiser



Apply product on
palm of hand



Rub into all areas
of hands



Continue to rub
until dry



Regular moisturizing with emollients or conditioning creams after handwashing, and throughout the day, is crucial to maintain skin integrity and prevent damage, which can lead to infection.



Practical Tips!

Wall mounted dispensers:

- ✓ Recommended for IPC
- ✓ Invert to expel air and are cheaper!
- ✓ One shot system – no waste
- ✓ Usually free from your medical supplier – just need to fit
- ✓ Dispensers have instructions on the front of them

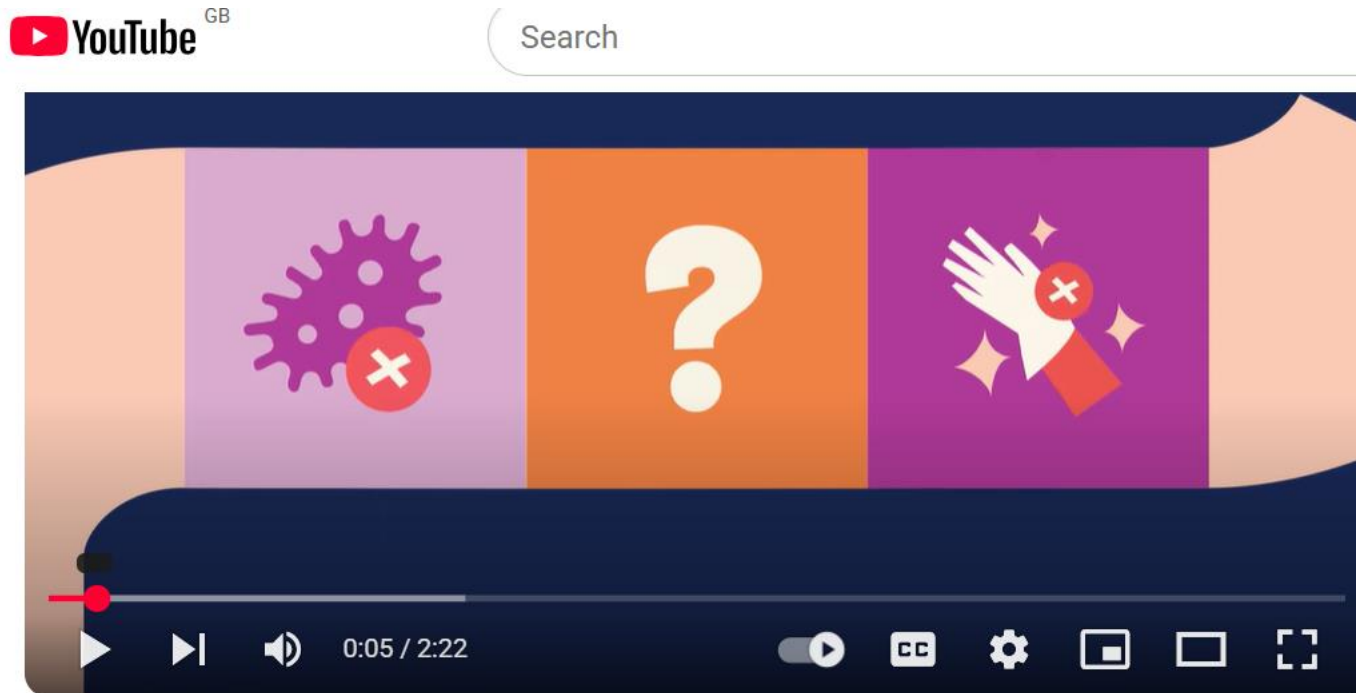
Small bottles of hand gels:

- X More expensive
- X More plastic waste
- X Table-top - harbour germs and do not expel the air
- X Multiple brands = multiple COSH sheets
- X More waste - user usually pumps too much out of them

Hand wash and hand gels should not be positioned next to each other.



It might be gloves ... but it's always hand hygiene!



It Might Be Gloves... But It's ALWAYS Hand Hygiene! 🧤 🧼 | World Hand Hygiene Day 2025

<https://youtu.be/8xnUk35MFdU?si=QAHgwomHHjNEdjrt>

Room Checks

XXX PRACTICE Room Equipment & Supplies Restock List

Please ensure that equipment is cleaned as required – please refer to the cleaning frequencies schedule for further information.

Room:

Items replaced/replenished:

Forms - pathology

- ☐ Haematology
- ☐ Microbiology
- ☐ Other

General

- ☐ Clock time/batteries
- ☐ Equipment checks (inc. batteries)
- ☐ Needle bins (full/dates)
- ☐ Clinical waste bins
- ☐ Couch curtains (date)
- ☐ Other:

Containers

- ☐ Urine (powder)
- ☐ Faeces
- ☐ Plain
- ☐ Blood
- ☐ Other

Stationery

- ☐ Paper in printer
- ☐ FP10s in printer
- ☐ Med 3
- ☐ Forms
- ☐ Other

Supplies

- ☐ Gloves
 - ☐ Small
 - ☐ Medium
 - ☐ Large
- ☐ Urine dipsticks
- ☐ Dressings
- ☐ Swabs
- ☐ Peak flow meter
 - ☐ Mouthpieces
- ☐ Pregnancy test kits
- ☐ Lubricating jelly
- ☐ Vaginal speculum
- ☐ Tongue depressors
- ☐ Other

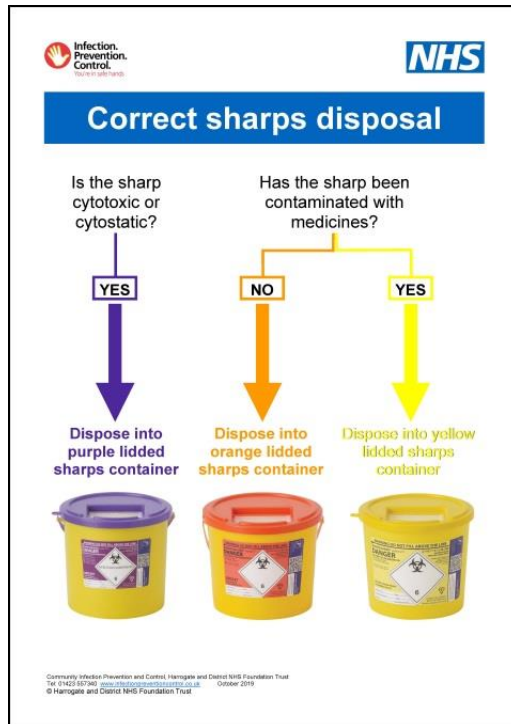
Hygiene

- ☐ Paper towels
- ☐ Soap
- ☐ Hand sanitizer
- ☐ Exam couch paper roll
- ☐ Tissues
- ☐ Other

General comments on restocking this room:

Staff member name:Signed:

Dated: / /



Sharps Containers

- Self explanatory
- How full can the box be?
- Who can open and close a sharps box?
- How long can you keep it for?
- What happens to sharps waste after closing the box?
- What happens to sharps waste after it leaves your site?

<https://www.cqc.org.uk/guidance-providers/gps/gp-mythbusters/gp-mythbuster-99-infection-prevention-control-general-practice>

Cleaning Schedules

- General/domestic cleaning schedules
- Clinical equipment
- Paper curtains change every 6/12 months* fabric curtains launder every month or as necessary.
- Use single use items wherever possible and affordable (e.g. tourniquets, kidney dishes, vomit bowls etc)
- Storage cupboards and boxes
- Trolleys housing clinical equipment
- Cleaning schedules / record sheets should be detailed in IPC documentation and included in the annual audit for review.

*CQC state: It is not mandatory to change or launder these curtains in general practice with any frequency:

<https://www.cqc.org.uk/guidance-providers/gps/gp-mythbusters/gp-mythbuster-6-guidance-about-privacy-curtains>



Fridge Cleaning

- clean fully quarterly and check stock rotation
- using water and detergent or antibacterial cleaning wipes
- check stock rotation every month (clean if necessary)
- domestic fridges in staff rooms and kitchens, clean out weekly. All food should be labelled and dated.
- checks and cleaning events should be clearly documented
- records of fridge cleaning should be included in the annual IPC audit and report.

CQC GP Mythbuster 17



Audit

- Audit annually
- Use a recognised Audit Tool to assess environment / building / clinical areas (carried out by IPC lead)
(CQC mythbuster 99 contains all links and signposts to relevant guidelines and an audit tool)
www.cqc.org.uk/node/3015
- Ensure all staff access IPC training at the appropriate level for their role
- Training to include hand hygiene, sharps safety, waste management, asepsis.
- Safe spill management, sharps injury protocol, incident reporting.
- IPC is everyone's responsibility. The IPC lead should ensure that effective training is organised, delivered, assessed and documented.
- Each annual audit should be accompanied by a report to be written by the IPC lead including details of the audit, training, incidents, actions and any actions for improvement.

Audit

Reviewed April 2022

XXX PRACTICE INFECTION CONTROL AUDIT AND INSPECTION CHECKLIST

Section 1

Date of Audit	
Name / <u>Designation of</u> Person Completing Audit	
Name / designation of <u>additional</u> person completing audit	
Name / designation of <u>additional</u> person completing audit	
Named person responsible for Infection Control within the Practice	
Practice Manager	
Infection Control Co-ordinator	
Number of waiting rooms / reception rooms	
Number of consulting rooms	
Number of treatment rooms	
Number of "Dirty" utility rooms	
Number of public toilets	
Number of staff toilets	
Other Areas	
Is minor surgery performed Y / <u>N-?</u>	
If Yes, Indicate which types	

Section 2 - Documentation and Environmental Issues:

	Yes	No	Comments/Actions
Is there a daily and weekly cleaning specification written down?			
Does the cleaner / contractor follow it?			
Is the specification reviewed on a regular basis and is evidence of the review available?			

Audit and Annual IPC Statement

This short review should include the following:

Known infection transmission event and actions arising from this

- Audits undertaken and subsequent actions
- Risk assessments undertaken for the prevention and control of infection
- Education and training received by staff
- Review and update of policies, procedures and guidance.

In addition to this, it is considered that this report should include any actions relating to any significant event that has occurred during the reporting period.

To meet the above HSCA directive of “anyone who wishes to see it”, this statement is to be placed on the organisation website.

IPC Statement template will be shared.

Annual IPC Statement Template

YOUR LOGO HERE

Annual Infection Prevention and Control Statement (General Practice)	
Name of Setting:	
Address of Setting:	
Name of Practice Manager:	
IPC Lead for the Setting:	
Date Produced:	
Produced by:	
Purpose: In line with the Health and Social Care Act 2008: code of practice on the prevention and control of infections and related guidance, an annual statement will be prepared each year and will summarise compliance with good practice on infection prevention and control.	
Known infection transmission event and actions arising from this within the last 12 months:	
Audits undertaken and subsequent actions implemented:	




Annual IPC Statement Template

Risk assessments undertaken and any actions taken and recorded for prevention and control of infections:	
Education and training received by staff:	
Review and update of policies, procedures and guidance:	
Antimicrobial prescribing and stewardship:	
Additional information:	
Date of next review:	

Resources

Downloadable free of charge. If you would like to receive IPC Bulletins and other information about Community Infection Prevention and Control, please email:

infectionprevention.control@nhs.net
giving your name, organisation and postcode with the word 'Subscribe'.



The image shows the cover of the 'IPC Bulletin for GP Practice Staff', Issue No. 53 - April 2024. It features the Infection Prevention Control logo and the NHS logo. The main theme is 'World Hand Hygiene Day 2024' on '5th May 2024'. It includes a QR code, a QR code, and a QR code. The cover also mentions that the bulletin is produced by an NHS Community Infection Prevention and Control Team based in North Yorkshire for distribution to subscribers. The cover features a graphic with two speech bubbles: one saying 'Why is sharing knowledge about hand hygiene still so important?' and the other saying 'Because it helps stop the spread of harmful germs in health care'. Below this, it says 'SAVE LIVES Clean Your Hands'. The cover also states 'Hand hygiene saves millions of lives each year when performed at the right time by health and social care staff.' It shows four sample pages of the bulletin, including 'Hand hygiene', 'Hand hygiene', 'Hand hygiene', and 'Hand hygiene'. Below the sample pages, it says 'Hand hygiene resources available to download at www.infectionpreventioncontrol.co.uk'. There is a list of reminders: 'Remember, cover wounds, cuts and grazes with a waterproof dressing.', 'Being 'Bare below the elbows' facilitates good hand hygiene.', 'Gloves are not a substitute for hand hygiene.', 'Always decontaminate hands before and after glove use.', and 'Perform hand hygiene and change gloves between tasks.' There is a 'What's new' section with two items: 'IPC Audit Tools for General Practices can now be downloaded and completed electronically. Link available [here](http://www.infectionpreventioncontrol.co.uk).' and 'IPC training event for General Practice and Dental Practice: 11th November, 2024. A booking form can be downloaded at: www.infectionpreventioncontrol.co.uk/events/'. There is also a section for visiting the website to find lots of IPC resources, many of which are free to download, with the website www.infectionpreventioncontrol.co.uk and a phone number 01423 557340. There is a Facebook logo with the text 'Follow us on facebook'.

Infection. Prevention. Control.
You're in safe hands

NHS

IPC Bulletin for GP Practice Staff
Issue No. 53 - April 2024

Produced by an NHS Community Infection Prevention and Control Team based in North Yorkshire for distribution to subscribers.

World Hand Hygiene Day 2024
5th May 2024

Why is sharing knowledge about hand hygiene still so important?

Because it helps stop the spread of harmful germs in health care

SAVE LIVES
Clean Your Hands

Hand hygiene saves millions of lives each year when performed at the right time by health and social care staff.

Hand hygiene resources available to download at www.infectionpreventioncontrol.co.uk

- Remember, cover wounds, cuts and grazes with a waterproof dressing.
- Being 'Bare below the elbows' facilitates good hand hygiene.
- Gloves are not a substitute for hand hygiene.
- Always decontaminate hands before and after glove use.
- Perform hand hygiene and change gloves between tasks.

What's new

- IPC Audit Tools for General Practices can now be downloaded and completed electronically. Link available [here](http://www.infectionpreventioncontrol.co.uk).
- IPC training event for General Practice and Dental Practice: 11th November, 2024. A booking form can be downloaded at: www.infectionpreventioncontrol.co.uk/events/

Visit our website to find lots of IPC resources, many of which are free to download.
www.infectionpreventioncontrol.co.uk
Call us on 01423 557340

Follow us on facebook

Practice Assessment

- Don't have the time or resources for IPC
- Need support
- Want to outsource IPC management and/or set up.

On-site assessments can be carried out by arrangement - full or half day sessions.

Sample agenda:

- Introductions and overview of the day
- Meeting with the IPC lead(s) and Manager(s)
- Key areas of needs identified
- Full IPC audit of all rooms
- Review of policies, procedures and protocols
- Standard Operating Procedures (SOPs) set up
- Delivery of IPC training session and Q&A
- Summary and outline of findings.

(Timings and areas of work can be adjusted to suit your needs).

Report and action plan produced. Resources shared.
Please contact us for further information.

Thank you for listening.

- **Contact details**
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Any Questions?

