

Priory Medical Group Policy for Infection, Prevention and Control

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Introduction

Patients, visitors, and healthcare staff can acquire infection in a healthcare setting. These are known as HAI or Healthcare Associated Infections. This policy sets out the measures undertaken at Priory Medical Group (PMG) to minimise the risk of HAI to our team, contractors, patients, and visitors.

Duties and Responsibilities

Every member of PMG Staff has a duty of care to prevent HAIs within the practice and to reduce transmission of infections between healthcare professionals and patients.

Relevant Legislation

The Health and Safety at Work Act 1974 ensures that within their capability, employers provide a safe environment for employees and others attending the work area.

The Health and Safety at Work Regulations 1999 ensures that employers assess risk to employees and implement relevant control measures. This relates to Infection, Prevention and Control (IPC) as the employer has a responsibility to ensure exposure of HAI to the employee is minimised. For example, PPE, handwashing facilities, safe waste disposal and safe storage and handling of specimens.

Control of Substances Hazardous to Health 2002 (COSHH) refers to protection against hazardous substances including chemical and biological agents in the workplace.

The Health and Social Care Act (2008) is a code of practice on the prevention and control of infections. It requires that registered providers of health and social care provide and maintain a clean and appropriate environment in managed premises.

Staff IPC Training

As infection prevention requires a whole team approach, all staff working in clinical environments need appropriate and up to date knowledge.

Infection prevention and control training is accessed on Practice index via the Priory Portal [Priory Medical - TeamPMG](#) and choose the "Training Hub" Tab. This will be undertaken every two years unless specific guidance change is implemented in that time, in which case special or local updates will be circulated via email. This is monitored by the HR team and individuals will be contacted if their training falls outside this timeframe.

Vaccine specific training and Anaphylaxis training are undertaken separately and are required each year, or as new vaccines are developed/adopted into the vaccination schedule.

Monitoring Compliance & Effectiveness

The IPC Lead Nurse will compile an annual report for the PMG Partners and an interim report each quarter. The partners will make decisions based on the recommendations of the report, working towards regulatory compliance and providing mitigation where compliance is not achieved.

A local audit of antibiotic use is undertaken by ICB each financial. This is reviewed by the GP Prescribing Lead and the IPC Lead Nurse and disseminated to the team by the Prescribing Lead where the practice falls below expectation. Action plans will be developed where necessary.

The practice undertakes "self" audits three times per annum of Compliance with IPC Policy and CQC Guidance at each of the eight practice locations. These audits will be done using a self-audit tool and via "Check It" automated monitoring.

Summary of IPC Policies

PMG has adopted the following infection, prevention and control policies provided by a national NHS IPC provider, <https://www.infectionpreventioncontrol.co.uk>.

Policy No.	Title	Version	Written/ Updated
1	Antimicrobial stewardship	1	Nov 2023
2	Aseptic technique	3	Dec 2023
3	Blood-borne viruses (BBVs)	3	Dec 2023
4	Clostridioides difficile (C. Difficile)	3	Dec 2023
5	Creutzfeldt – Jakob disease (CJD)	3	Dec 2023
6	Hand hygiene	3	Dec 2023
7	Invasive devices	3	Dec 2023
8	Multidrug-resistant organisms (MDROs) including extended-spectrum beta-lactamase (ESBL) and carbapenemase-producing organisms (CPOs)	3	Dec 2023
9	Meticillin resistant staphylococcus aureus (MRSA)	3	Dec 2023
10	Notifiable diseases	3	Dec 2023
11	Outbreaks of communicable diseases	3	Dec 2023
12	Patient placement and assessment for infection risk	3	Dec 2023
13	Personal protective equipment (PPE)	2	Dec 2023
14	Panton-valentine leukocidin staphylococcus aureus (PVL-SA)	3	Dec 2023
15	Respiratory and cough hygiene	3	Dec 2023
16	Respiratory illnesses	1	Nov 2023
17	Safe disposal of waste	3	Dec 2023
18	Safe management of blood and body fluids	2	Dec 2023
19	Safe management of care equipment	3	Dec 2023

20	Safe management of linen (including uniforms & workwear)	3	Dec 2023
21	Safe management of sharps and inoculation injuries	3	Dec 2023
22	Safe management of the care environment	3	Dec 2023
23	Scabies	4	Dec 2023
24	Specimen collection	4	Dec 2023
25	Standard infection control precautions and transmission-based precautions	3	Dec 2023
26	Venepuncture	3	Dec 2023
27	Viral gastroenteritis/norovirus	4	Dec 2023

References

National standards of healthcare cleanliness 2021: <https://www.england.nhs.uk/wp-content/uploads/2021/04/B0271-national-standards-of-healthcare-cleanliness-2021.pdf>

Department of Health (2015) The Health and Social Care Act 2008: Code of Practice on the prevention and control of infections and related guidance:

<https://www.gov.uk/government/publications/the-health-and-social-care-act-2008-code-of-practice-on-the-prevention-and-control-of-infections-and-related-guidance>

NHS England and NHS Improvement (March 2019) Standard infection control precautions: national hand hygiene and personal protective equipment policy:

<https://www.england.nhs.uk/patient-safety/standard-infection-control-precautions-national-hand-hygiene-and-personal-protective-equipment-policy/>

CQC IPC guidance: <https://www.cqc.org.uk/publications/major-reports/infection-prevention-control>

Peninsula Health & Safety Policy & Procedures (2018) via Practice index

RIDDOR – [RIDDOR – Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 – HSE](#)