



Title	Infection Control Manual - Section 1 Reporting Infection
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Developed by	Infection Prevention & Control Team
Equality & Diversity Impact Assessed	No

1.1 THE INFECTION PREVENTION & CONTROL TEAM

Senior Nurse Infection Control

Base: Borders General Hospital, Microbiology Laboratory
Contact: 01896 826255 or page 6255 or long range pager via BGH Switchboard

Infection Control Nurse

Base: Borders General Hospital, Microbiology Laboratory
Contact: 01896 826254 or page 6254 or long range pager via BGH Switchboard

Infection Control Doctor / Consultant Microbiologist

Base: Borders General Hospital, Microbiology Laboratory
Contact: 01896 826231 or page 6231 or via BGH switchboard

Head Biomedical Scientist

Base: Microbiology Laboratory, Borders General Hospital
Contact: 01896 826258

Public Health

Consultant in Public Health Medicine (Communicable Disease & Environmental Health) [CPHM (CD & EH), Health Protection Nurse Specialist (Infection Control) Department of Public Health, Newstead 01896 825565

Infection Control Advice - Out of Hours (NHS Borders)

Microbiologist on Call, via Borders General Hospital Switchboard 01896 826000

Public Health Advice - Out of Hours (Infection Control, Non NHS Borders)

Contact CPHM on-call by contacting the BGH Switchboard 01896 826000 and ask them to contact via longrange pager, CPHM on-call

Occupational Health Department

Contact – Occupational Health Department 01896 825982
For out of hours on call for Sharps Injuries contact Occupational Nurse on Call via Borders General Hospital Switchboard 01896 826000.

Infection Control Nurses

Areas of Responsibility:

- All NHS Borders Hospital and Community Premises
- Advice to all Staff employed by NHS Borders

Health Protection Nurse Specialist (Infection Control)

Areas of Responsibility:

- All Nursing, Residential Homes and other Non NHS areas
- Responsible for the follow up of persons with a communicable disease e.g. meningitis, food borne illness

There will be overlap within these areas but all infection control staff work closely together to ensure a comprehensive service.

NHS BORDERS INFECTION CONTROL COMMITTEE (ICC)

The ICC provides support to the Infection Prevention & Control Team (IPCT) and in conjunction with the team, co-ordinates the prevention and control of infection across NHS Borders.

It is responsible for facilitating the delivery of the Annual Infection Control Programme which includes targeted audit, surveillance, education and training. It co-ordinates the production of an Annual Report on the state of HAI, decontamination and cleanliness together with progress of the annual programme and reports of adverse incidents or significant events.

The committee advises the Chief Executive through the Risk Management Structure, and the Executive Director with delegated responsibility for HAI and Infection Control [HDL(2001)10, HDL(2005)8], on all matters related to infection (See following: 'NHS Borders Infection Control Committee Reporting Structure'). This includes policy development and review, supplies and equipment purchase, building and estates, cleaning and facilities management and antimicrobial prescribing.

It draws attention to areas of non-compliance with local or national guidance and makes recommendations for change.

It has close communication links with the Borders Public Health Protection Group and Clinical Governance Steering Group.

NHS Borders Infection Control Committee meets four times a year. The core membership includes:

- Director of Nursing (HAI Executive Lead) (Chair)
- Antimicrobial Pharmacist
- Consultant in Public Health Medicine (Communicable Disease/Environmental Health)
- Infection Control Nurse (ICN)
- Consultant Microbiologist
- Infection Control Manager (ICM)

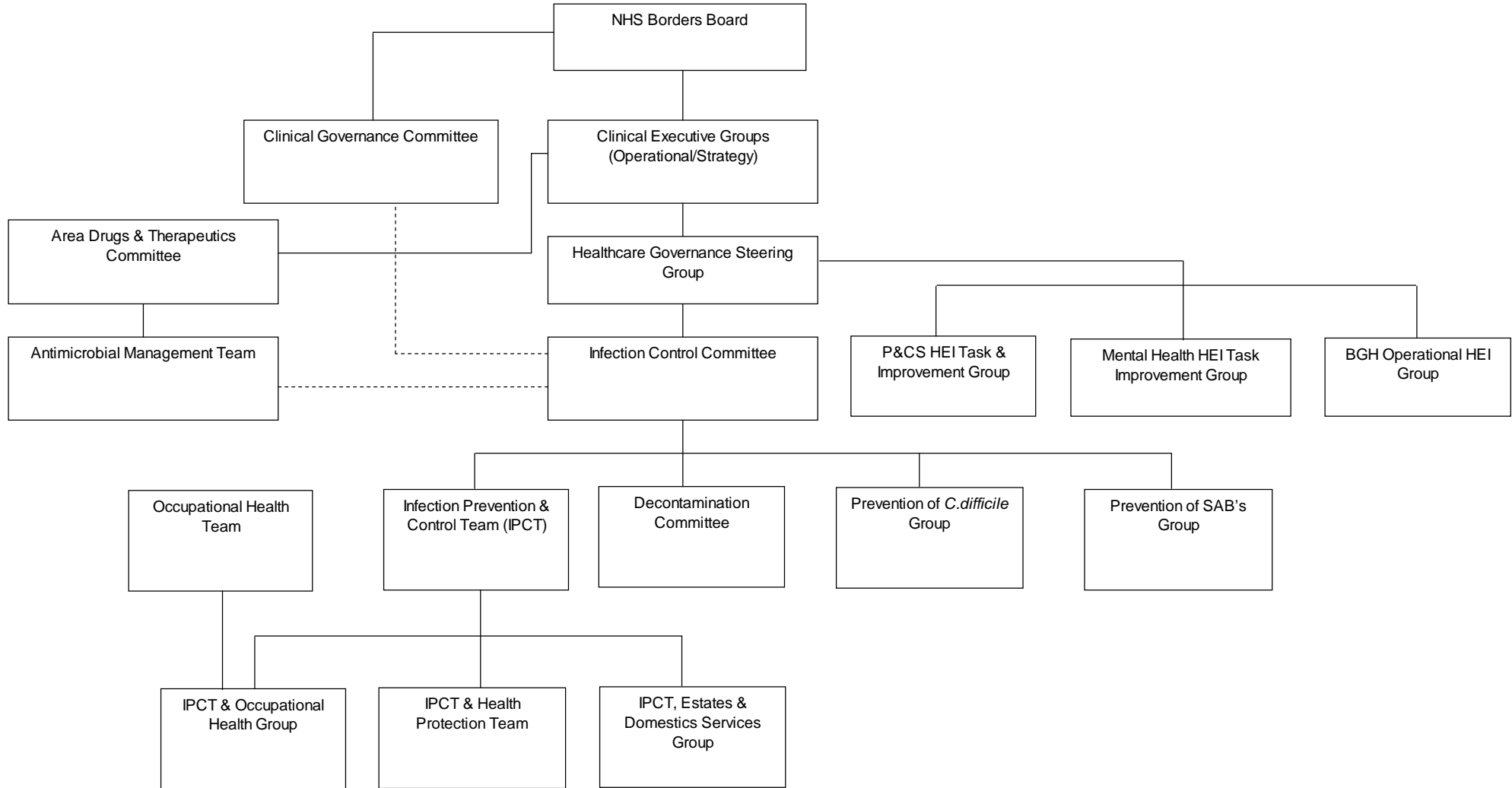
- Medical Director
- Patient Safety Programme Manager
- Head of Estates
- General Manager – Acute Services
- Health Protection Nurse (HPN)
- CSSD Manager
- Public Representative
- Domestic Services Manager
- Occupational Health Service Manager
- Associate Directors of Nursing
- Senior Clinicians (BGH and P&CS)
- Theatres Services Representative
- Clinical Governance Representative/s
- Risk & Safety Manager
- Community Hospitals Representative
- Mental Health & Learning Disability Representative

Others may be invited to attend for specific items, as observers or for training purposes.

Minutes are taken by the Infection Control Secretary and are widely distributed through the organisation.

Questions and feedback from patients/clients, staff or visitors are welcomed in response to the challenges of prevention, management and control of HAI throughout NHS Borders.

NHS BORDERS INFECTION CONTROL COMMITTEE REPORTING STRUCTURE



1.2 THE ROLE OF THE INFECTION PREVENTION & CONTROL TEAM

The Infection Prevention & Control Team (IPCT) advises on the prevention, surveillance, investigation and control of infection within the Board.

The IPCT plays an important role in creating and maintaining a safe environment for patients, visitors and staff. To fulfil this role, they include the following activities in their work plan and activities:

1. Formulating infection control policies/guidelines in conjunction with the Health Protection, Occupational Health and General Services Teams
2. Education of health care personnel (formally and informally)
3. Monitoring practices and standards of care
4. Support NHS Borders with the implementation of infection control policies/guidelines
5. Identifying risk situations and advising on the correct placement and care plan for infected and/or vulnerable patients
6. Liaising with Occupational Health Department, to ensure that staff receive appropriate advice regarding health care and possible infection risk at work
7. Being prime investigators during an outbreak. The Infection Control Doctor will formally declare an outbreak when it has occurred within NHS Borders ([Outbreak Control Section - Infection Control Manual](#))
8. Advice on closure of wards/facilities, for Infection Control purposes, is the responsibility of NHS Borders Infection Prevention & Control Team
9. Creating effective lines of communication between wards, departments, managers in hospital and community, the microbiology department and the Infection Control Committee; Board Executive Team
10. Being active members of Policy Review Groups and any other relevant groups and committees
11. Initiating and/or participating in research based activity.

1.3 REPORTING INFECTION: WHAT TO DO

An important element of the control of infection in hospitals and in the community is the Infection Prevention & Control Team being made aware of the existence of and the extent of problems relating to infection. In order that accurate statistical records can be kept and the spread of infection minimised, the instructions below should be followed by all NHS Borders clinical staff.

Laboratory Reporting

The majority of infections requiring intervention by the Infection Prevention & Control Team (IPCT) are identified from specimens sent to the bacteriology/virology laboratory. Regular liaison with the laboratories and provision of good clinical information on the laboratory request forms is essential in order to identify newly diagnosed patients with infections and to monitor the progress of specimens from existing infected patients.

Ward Based Reporting

There are many infections which are identified by wards, e.g. Varicella zoster virus (VZV) infections, cellulitis. It is extremely important that communication between hospital and community staff and the IPCT is effective. In this way preventative measures can be rapidly implemented and 'infected' and/or susceptible patients isolated to prevent the spread of infection.

As soon as staff in the ward/department are aware of having an infected patient or suspect an infection in a patient, they should contact the IPCT in order to ensure that appropriate control measures are in place or that appropriate advice can be given. It is sometimes also necessary for the IPCT to speak with the infected patient and/or their family in order to identify the source of the infection, identify others affected, give advice on prevention of spread and prevent recurrence of the infection after the patient has been discharged.

Medical staff should report notifiable diseases to the Consultant in Public Health Medicine (CD&EH). Complete the Notifiable Diseases certificate and send to the Public Health Department, Newstead ([Health Protection – Notifiable Diseases](#)).

Clinical staff should notify the ICN:

- before admission of an infected patient

- on clinical diagnosis of an existing patient becoming infected
- before the transfer of an infected patient to another part of the hospital, another hospital or care facility
- before the discharge of an infected patient
- following the death of an infected patient (See also ["death and the procurator fiscal"](#))
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It is also useful to inform the IPCT whenever there is any relevant change in the infective condition of the patient