## **Infection, prevention and control**

### Infection prevention and control responsibilities will vary across different types of service. The CQC inspection will be shaped around your service and associated responsibilities to comply with your own policies and procedures, as well as national guidance.

### The CQC will look at how you protect people, and how effective the service is in responding to outbreaks. Where people use or live at your premises, these will need to be kept clean and free from infection. In community-based care, staff play an important role in Infection, Prevention and Control of people’s own home environments. Regular cleaning must be to a consistently high standard, and you must maintain clear records, including evidence of audits, spot checks and other methods to maintain a safe environment.

### Recommendations checklist

These recommendations act as a checklist to help you consider what you could potentially evidence, but it’s not intended as a definitive list. We hope they help you reflect on what evidence you might wish to share with the CQC.

|  | Yes | No | N/A | How we evidence | Action |
| --- | --- | --- | --- | --- | --- |
| We can evidence how our infection, prevention and control measures are aligned with the latest good or best practice. We review latest research and contribute to it where possible. | [ ]  | [ ]  | [ ]  |       |       |
| We’ve identified people who are clinically vulnerable from infections and implemented additional processes and procedures to keep them as safe as possible. | [ ]  | [ ]  | [ ]  |       |       |
| We involve the people we support (and/or their family/advocates) in identifying and managing risks associated with cleanliness, infection control and hygiene. | [ ]  | [ ]  | [ ]  |       |       |
| We proactively promote cleanliness, including ensuring where people live is safe and hygienic. | [ ]  | [ ]  | [ ]  |       |       |
| We’ve assessed the impact on residents and the people we support of how PPE may cause fear and anxiety for the people we support, particularly those who have limited mental capacity, and have mitigated these concerns. | [ ]  | [ ]  | [ ]  |       |       |
| The people we support know how to raise any concerns or complaints around infection, prevention and control if they think it’s unsafe or not effective, without fear or discrimination. | [ ]  | [ ]  | [ ]  |       |       |
| We ensure all our staff are effectively trained on infection control and we keep clear training records as evidence.  | [ ]  | [ ]  | [ ]  |       |       |
| Our training covers the basics such as handwashing, through to safe use of PPE and more specialist precautions such as outbreak management, food hygiene, nosocomial and community infections. | [ ]  | [ ]  | [ ]  |       |       |
| Where possible, we provide infection, prevention and control training to the people we support, not just our staff team. | [ ]  | [ ]  | [ ]  |       |       |
| We have open and transparent meetings about interventions e.g., vaccines – if someone is finding it difficult to comprehend, we will ask external trusted professionals to speak to the team/residents / relatives e.g., GP / Pharmacist. | [ ]  | [ ]  | [ ]  |       |       |
| Where relevant to our service, our staff teamare trained and know how to immediately instigate full infection control measures to care for people with symptoms to avoid viruses spreading to other people and staff. | [ ]  | [ ]  | [ ]  |       |       |
| Where relevant to our service, we have infection, prevention and control measures that ensure visitors are protected from harm to themselves and others. | [ ]  | [ ]  | [ ]  |       |       |
| Where relevant to our service, we have excellent communication methods with visitors and relatives to inform them of any outbreaks / changes in visiting. | [ ]  | [ ]  | [ ]  |       |       |
| We provide protective clothing and associated aids to staff and the people we support (e.g., alcohol gels and hand washes, shoe covers, gloves, aprons, and face masks). | [ ]  | [ ]  | [ ]  |       |       |
| All the equipment we use to support the monitoring of the people we support meets infection, prevention and control measures and decontamination standards (e.g., guidance/code of practice.).  | [ ]  | [ ]  | [ ]  |       |       |
| We have a clear cleaning schedule and ensure it’s accessible and regularly updated. | [ ]  | [ ]  | [ ]  |       |       |
| We undertake regular deep cleaning and ensure effective records are kept which help to inform when further intensive cleaning may be required. | [ ]  | [ ]  | [ ]  |       |       |
| We encourage opportunities to keep our staff and the people we support safe using of vaccinations and testing where possible. | [ ]  | [ ]  | [ ]  |       |       |
| We have created a culture which encourages people and staff to raise concerns about cleanliness, infection control and hygiene. | [ ]  | [ ]  | [ ]  |       |       |
| We use infection, prevention and control experts and/or internal champions to help protect from the risk of cross infections. | [ ]  | [ ]  | [ ]  |       |       |
| We have a good understanding of when and how to access local infection prevention and control resources (e.g., the local health protection team or infection control nurse) when they need advice and support. | [ ]  | [ ]  | [ ]  |       |       |
| We have clear procedures in place to notify others about COVID-19 outbreaks and other infectious diseases impacting our service. | [ ]  | [ ]  | [ ]  |       |       |
| We develop and maintain clear policies and procedures for staff to follow that align with infection, prevention and control good practice, including regular spot checks and audits. | [ ]  | [ ]  | [ ]  |       |       |
| Where relevant to our service, we ensure that there’s prominent signage and instructions at our service to explain what people should do to ensure safety. | [ ]  | [ ]  | [ ]  |       |       |
| We have a strategy for continuous improvement in infection, prevention and control, including accountable leadership, multi-agency working and the use of surveillance systems. This is in accordance with NICE Quality Standards. |  |  |  |  |  |
| We ensure managers and staff know how to escalate issues and alert appropriate agencies to help control infection and protect others using the service or in the community. |  |  |  |  |  |

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| Resources to help**GO Online: Inspection toolkit**Learn more about how this is inspected via a short film, practical examples and resources [here](https://www.skillsforcare.org.uk/Support-for-leaders-and-managers/Good-and-outstanding-care/inspection-toolkit/Topic-focus.aspx?services=&kloe=safe-3&topic=infection-prevention-and-control-1).**Recommendations checklists**Access the full range of all Recommendations Checklists, exclusively available to Skills for Care Registered Manager Members [here](https://www.skillsforcare.org.uk/Support-for-leaders-and-managers/Support-for-registered-managers/GO-guide-SAF.aspx).**Good and Outstanding care support**Skills for Care’s Good and Outstanding care resources include practical e-learning modules, guidance and seminars to support you to meet CQC expectations. Learn more about what is available [here](https://www.skillsforcare.org.uk/go). |