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Birmingham Women's NHS
NHS Foundation Trust

INFECTION PREVENTION AND CONTROL TRAINING POLICY

Date of Policy: October 2008

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Next Review Date: October 2011

Type:	Infection Prevention and Control Training Policy	**Version: Ref:**	1	**Directorate:**	N/A

Aim:	To detail the level and frequency of training required for individual staff groups within the trust. To outline the responsibilities of ward and department managers in ensuring that all staff attend relevant mandatory training sessions.
Scope (who it applies to):	This policy applies to all employees irrespective of grade, level, location or staff group.

Ratified by: **Date:**	Infection Prevention and Control Committee- Chairman's action 23.10.08 Management Board
Final Approval by: **Date:**	Board of Directors
Approval Signatories	
Implementation Date:	

Review and consultation process (when review required & by whom):	September 2011 Infection Control Nurse
Responsibility for Implementation:	Director of Nursing/Midwifery/DIPC

Revisions:		
Date:	**Author:**	**Description of Revision (Action by whom):**

HISTORY

Review date:		**Effective from:**	
Effective to:			
Action Required by Trust/Dept			

Distribution methods:	Copy on Global U Drive Any printed copies may not necessarily contain latest updates and should be compared to the version on the U Drive.

1. INTRODUCTION

The prevention and control of infection is a fundamental principle that all staff must adhere to ensure that safe care is provided for patients. The statutory Health Act (2006) Code of Practice for the Prevention and Control of Health Care Associated Infections (HCAI) identifies the obligation that all staff are suitably educated in the prevention and control of HCAI. There is also key emphasises on ensuring that prevention and control of health care associated infection (HCAI) is embedded into everyday practice and applied consistently by everyone.

Staff training is a key component in ensuring that staff members are educated in principles to minimise the risk of spread of infection to patients who are receiving health care either within the hospital or community. *The Health Act (2006)* and *Clean, safe care: Reducing infections and saving lives (2008)* state that staff should receive Infection Control training on induction and also as part of regular on-going training programmes .

In addition the NHS Litigation Authority Risk Management Standards for Acute Trusts (2008) identifies the requirements for managing the risks associated with infection prevention and control, with one component being the requirement for a training needs analysis to identify the training requirements for all staff. The NHSLA also identifies that the organisation should have approved documentation which describes the process for ensuring the delivery of effective hand hygiene training for all relevant permanent staff groups and that this is identified in the training needs analysis.

This Infection Control Training Policy outlines the infection prevention and control training requirements that are required by staff, with detailed requirements for individual staff groups.

It links to the Trust Risk Management Strategy which details all mandatory training required throughout the organisation. In that strategy, the training requirements for Infection Control are listed in the Risk Management Training Matrix and a copy of the Training Needs Analysis is also included.

2. PURPOSE

The purpose of this Infection Prevention and Training Policy is to determine the level of training required by individual staff groups. This Policy will ensure that all staff members know which training is relevant for their staff group and will also outline the responsibility of managers in ensuring that all staff attend mandatory training so that all they remain competent in their role.

3. DUTIES

3.1 Duties within the Organisation

Specific infection prevention and control training and hand hygiene training are requirements of the NHS Litigation Authority Risk Management Standards for Acute Trusts and are therefore recognised by the Birmingham Women's NHS Foundation Trust to be an integral component of Clinical Governance.

The Board of Directors has a responsibility to ensure that adequate resources are in place for staff training, and that staff have sufficient time allocated to them to receive the appropriate level of training to enable them to fulfil their duties and responsibilities.

- Clinical Directors and Professional Heads of Nursing/ Midwifery have overall responsibility for ensuring that staff have attended mandatory training and that they are competent within their role. In practice, this responsibility may be delegated to other staff within the Directorate e.g. Ward / Department Managers.

- It is the responsibility of each Directorate to performance manage staff attendance at mandatory training sessions and Directorates should identify individual mandatory training KPI's (Key performance Indicators) for their directorate; these should be dependent on current levels of staff attendance at mandatory training.

- The Line Manager of the individual is responsible for ensuring that staff attend and receive training applicable to their staff group. Whilst all staff groups will need to have an understanding of the importance of infection prevention and control, not all staff groups will need the same detail and level of information (see Appendix 1, for the Training Needs Analysis).

- All new staff members are required to attend the Trust Induction programmes where infection prevention and control and hand hygiene are key components. The exceptions to this are, junior doctors in training and short term medical locums. Junior doctors are required to attend specific medical staff induction programmes and short term medical locums have access to a leaflet which is downloaded from the Global U Drive and distributed as part of local induction.

- All relevant staff must attend an Infection Control Update session each calendar year within a maximum of 2 months after their expiry date. Initial attendance should occur within the first 12 month period of their post.

- It is the responsibility of individual staff members to access the necessary training in regards to their professional accountability and to raise any concerns that they may have relating to their competency.

- Attendance at relevant training will be identified and monitored through the individuals Personal Development Review process.

- The Infection Prevention and Control team are responsible for ensuring that the Training Policy will be available electronically on the Trust Intranet (accessed via the Global 'U' Drive) so that it is available to all staff.

3.2 Identification of Stakeholders

This policy is applicable for all staff working at Birmingham Women's NHS Foundation Trust. Key stakeholders include the following:

- Director of Infection Prevention and Control
- Professional Heads of Nursing/Midwifery
- Clinical Directors/ Medical Director
- Clinical Support Managers (Professions allied to medicine i.e. Physio, OT, etc)
- Facilities Manager (Estates, Housekeepers and Portering staff).
- HR Department

3.3 Consultation with Stakeholders

Comments were sought from the key stakeholders listed above and amendments made to the policy as necessary.

4. Training

4.1 Levels of Training

Introduction to Infection Control - Induction

Infection control education on induction is compulsory for all new starters to the Trust. This will be achieved by either attending the corporate trust induction session or by attending induction sessions on the medical staff induction programmes.

It consists of a 15 minute session using a power point presentation. The session is delivered by a member of the Infection Control Team or the Infection Control Directorate Lead for Neonates. The session provides an introduction to infection control arrangements, Trust policies, basic infection control principles & practices and key principles of the Health Act Code of Practice (2006). It also focuses on key principles such as:

- Hand Hygiene & Standard Precautions
- Reporting Staff Illness
- Safe Sharp Practice & Management of Inoculation Injuries

A leaflet is available for agency and locum staff and will be given to the member of staff by the shift leader . The leaflet can be downloaded from the global 'U' drive and it details infection control arrangements, where to locate Infection Control policies and standard key principles of Infection Control.

Infection Prevention and Control and Hand Hygiene Updates

Sessions include reinforcement of key principles of good infection prevention and control practice including hand hygiene. They also include an update on local or national issues, changes or new additions to infection control policy, as well as feedback of relevant audit or surveillance data. Separate programmes for individual staff groups are delivered by the Infection Control Team and the Infection Control Lead for Neonates over the year which are tailored for each specific staff group:

- Consultant Medical Staff
- Midwives
- All other permanent staff members that have clinical contact with patients, including, Nurses, Midwifery assistants, Healthcare assistants, AHPs, Theatre Staff and Genetic Counsellors
- Housekeepers, Porters and Estates Staff

Staff members may also access the NHS online e- learning training to meet their training requirement for one year, but must the attend trust training programme sessions on alternate years.

Appendix 1 (Training Needs Analysis) details more information about the content of each session. Staff should attend update training on an annual basis.

Good Laboratory Practice for Infection Prevention

The session includes key principles of good laboratory practice and hand hygiene. It is delivered by a member of the Infection Control Team or an identified cascade trainer, using a specific training package updated annually by the Infection Control team.

Additional Infection Prevention and Control Training

Formal or informal ad hoc sessions may be arranged throughout the year and delivered locally in ward and department areas by the Infection Control Team or Infection Control leads in response to need.

4.2 Notification of training

Dates and venues for training are currently accessible via several routes, dependant upon the session:

Induction programmes – Human Resources Department
Update programmes

- Midwives (Skill drills) – Practice Development Midwife

- Permanent Clinical Staff , Housekeepers and Porters – Infection Control Nurse Specialist/Infection Lead for Neonates
- Consultant Medical Staff – Education Resource Centre Manager

4.3 Booking Training

Line Managers are responsible for ensuring that staff are booked onto the appropriate induction and update training sessions.

4.4 Attendance, Audit and Monitoring

A record of staff infection control training is required under one of the compulsory duties identified by the Health Act (2006). Therefore attendance sheets should be completed for each training session and all training records inputted onto the Trust Training Database. Directorates and Ward and Department managers are responsible for ensuring that all staff attend the relevant training sessions and any staff members whose training has lapsed are followed up.

4.5 Continuing Professional Development

It is recommended that to remain competent staff need to access training as detailed in Appendix A and this must be reflected in their individual Personal Development Plan and monitored as part of the Personal Development Review process.

4.6 Further Developments

Whilst this Training Policy has outlined the current infection prevention and control training requirements this may change over time with teaching methods being adapted (as necessary) which take into consideration the time availability and other commitments of the Infection Control team.

5. MONITORING OF COMPLIANCE WITH THIS POLICY

Monitoring of compliance with this policy will be undertaken by the Infection Control Team and the Infection Control leads, during routine informal visits to clinical areas. Knowledge base and compliance with infection control policy will also be assessed by formal audits undertaken as part of the Annual Infection Control Programme. Ward and Department managers will be responsible for monitoring action plans that are formulated following Infection Prevention and Control audits.

6. ASSOCIATED DOCUMENTS & REFERENCES

1. Department of Health (2006) The Health Act: Code of Practice for the Prevention and Control of Health Care Associated Infections.

2. Department of Health (2008) Clean Safe Care: Reducing Infection and Saving Lives.

3. NHS Litigation Authority (2008) NHSLA Risk Management Standards for Acute Trusts.