



Community Infection Prevention and Control Policy for Domiciliary Care staff

Patient placement and assessment for infection risk

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| Signed: | |
| Job Title: | |
| Adoption Date: | |
| | |

Review Date:

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PATIENT PLACEMENT AND ASSESSMENT FOR INFECTION RISK

. Introduction

Patient placement is not applicable when personal care is provided by a domiciliary care provider to a service user in their own home. Provision of the information required for patient placement will apply when the domiciliary care provider provides personal care to a group of service users in a supported living or sheltered housing complex and takes an active role in liaising with or contacting healthcare professionals on behalf of service users.

Assessment for infection risk is applicable in a service users own home, as well as in a supported living or sheltered housing complex.

Where applicable as above, it is a requirement of the *Health and Social Care Act 2008: code of practice on the prevention and control of infections and related guidance* to provide suitable, accurate information on infections to any person concerned with providing further support or nursing/medical care in a timely fashion.

This Policy is one of the 'Standard infection control precautions' (SICPs) referred to by NHS England in the *National infection prevention and control manual (NIPCM)* for England.

When caring for service users in relation to any new emerging infection, staff should refer to national infection prevention and control guidance.

2. Assessment for infection risk

Prior to a service user's transfer to and/or from another health or social care provider, an assessment for infection risk must be undertaken. This ensures both the appropriate placement of the service user and that appropriate precautions are taken.

This applies to all admissions, transfers and discharges to all health and social care facilities including:

- Admissions to hospital
- Transfers from one Domiciliary Care provider to another Domiciliary Care provider or to a Care Home
- Attendances for treatment or support in another health or adult social care setting

Transfer documentation, e.g. a patient passport or Inter-health and social care infection control transfer Form (available to download at <u>www.infectionpreventioncontrol.co.uk/resources/inter-health-and-social-care-infection-control-transfer-form/</u> and can be completed electronically), must be completed for all transfers, internal or external and whether the service user presents an infection risk or not.

Transfers to other health and social care providers

- If the service user is in the 'confirmed or suspected infection risk' group (see Section 3), the person completing the patient passport or Inter-health and social care infection control transfer Form is responsible for advanced communication. This includes informing the ambulance service at the time of booking and also the receiving health or social care provider prior to the transfer, to enable them to make appropriate arrangements. Due attention should be paid to service user confidentiality.
- Ensure that any leaking wounds are covered with an appropriate dressing, as advised by a healthcare professional.
- When transferring a service user who has had diarrhoea of any cause in the past 7 days, staff should ensure they include the infection risk, history of type of stool (see the Bristol stool form scale, available to download at <u>www.infectionpreventioncontrol.co.uk/resources/bri</u> <u>stol-stool-form-scale-poster/</u>) and frequency of bowel movements during the past week. The history should be given in any verbal communication to the ambulance personnel and the receiving unit, to ensure that isolation facilities are identified.

The completed patient passport or Inter-health and social care infection control transfer Form should be supplied to the receiving provider and a copy filed in the service user's notes.

Transfers from other health and social care providers

- When service users are transferred from another health or social care provider, the transfer documentation must be checked for confirmed or suspected infection risks.
- On arrival at the first visit following transfer, the Domiciliary Care provider should, whenever possible, confirm the service user's current infection status, to ensure the appropriate infection prevention and control measures are in place.
- For further guidance on specific infections, refer to the relevant Community Infection Prevention and Control Policies. Advice can be sought from your local Community Infection Prevention and Control (IPC) or UK Health Security Agency (UKHSA) Team.



3. Definition of infection risk

Confirmed risk

A 'confirmed risk' service user is one with an infection that has been confirmed by a laboratory test or clinical diagnosis, e.g. COVID-19, Multi-resistant Gramnegative bacteria (MRGNB), Meticillin resistant *Staphylococcus aureus* (MRSA), Pulmonary Tuberculosis (TB), scabies, seasonal influenza and enteric infections (diarrhoea and/or vomiting) including *Clostridioides difficile (C. difficile)*.

Suspected risk

A 'suspected risk' service user includes one who is awaiting laboratory test or clinical diagnosis results to identify infections/organisms or those who have been in recent contact/close proximity to an infected person.

No known risk

A 'no known risk' service user does not meet either of the criteria above.

4. Infection Prevention and Control resources, education and training

The Community Infection Prevention and Control (IPC) Team have produced a wide range of innovative educational and IPC resources designed to assist Domiciliary Care in achieving compliance with the *Health and Social Care Act 2008*: code of practice on the prevention and control of infections and related guidance and CQC registration requirements.

These resources are either free to download from the website or available at a minimal cost covering administration and printing:

- 24 IPC Policy documents for Domiciliary Care staff
- Preventing Infection Workbook: Guidance for Domiciliary Care staff
- IPC audit tools, posters, packs, leaflets and factsheets
- IPC Bulletin for Domiciliary Care staff

In addition, we hold educational study events in North Yorkshire.

Further information on these high quality evidence-based resources is available at <u>www.infectionpreventioncontrol.co.uk</u>.

5. References

Department of Health (2009) *Clostridium difficile infection: How to deal with the problem*

Department of Health and Social Care (Updated December 2022) *Health and Social Care Act 2008: code of practice on the prevention and control of infections and related guidance*

NHS England (Updated 2024) *National infection prevention and control manual* (*NIPCM*) for England