Infection Prevention and Control Policy

Summary	This policy sets out Capmed Diagnostics IPC arrangements for non-invasive Capsule Endoscopy in line with CQC and national IPC guidance.
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Target Audience	All staff delivering Capsule Endoscopy Procedures and handling equipment
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Version Control

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Introduction

This policy outlines how Capmed Diagnostics Ltd, herein referred to as the company, prevents and controls infection risks associated with Capsule Endoscopy, aligning with CQC IPC expectations that services assess, manage, and reduce infection risks.

The National Infection Prevention and Control Manual (NIPCM) is an evidence-based practice manual that highlights SICP and TBP, for use by all those involved in care provisions within the company. The company therefore adopts this as mandatory guidance (policy), and the principles should be applied by all staff involved in delivery of care to patients and those staff involve in handling equipment used in the delivery of care to patients.

Link: NHS England » National infection prevention and control

Scope

This policy applies to all CE processes including, but not limited to, patient preparation, capsule administration, sensor belt/recorder handling, receipt and decontamination of returned electronic equipment, storage, data extraction, and disposal.

This policy covers all staff involved in any of the above activities, premises used by the company to deliver procedures, equipment used in the delivery of procedures, and courier interactions.

The information in this policy has been adopted from the National Infection Prevention & Control manual for England (NIPCM). The NIPCM is an evidence-based practice manual for use by all those involved in care provision in England.

Link to NIPCM: NHS England » National infection prevention and control

Reference: https://www.england.nhs.uk/publication/national-infection-prevention-and-control/#heading-1

Definitions

Term	Definition
IPC	Infection prevention and Control Measures
SICPs	Standard Infection control precautions as outlined in the NIPCM Chapter 1: Standard Infection Control Precautions. **Link**:NHS England » Chapter 1: Standard infection control precautions (SICPs) **Reference**: https://www.england.nhs.uk/national-infection-prevention-and-control-manual-nipcm-for-england/chapter-1-standard-infection-control-precautions-sicps/

TBPs	Transmission Based Precautions as outlined in the NIPCM Chapter 2: Transmission Based Precautions **Link**: NHS England » Chapter 2: Transmission based precautions (TBPs) **Reference**: https://www.england.nhs.uk/national-infection-prevention-and-control-manual-nipcm-for-england/chapter-2-transmission-based-precautions-tbps/
CE	Capsule Endoscopy
NIPCM	National Infection Prevention Control Manual – document produced by NHS England specifying Infection Prevention and Control measures for use by all those involved in the provision of care within England. **Link**: NHS England » National infection prevention and control **Reference**: NHS England » National infection prevention and control

Roles and Responsibilities

All Staff

All staff have a duty to comply with the Standard Infection Control Precautions and Transmission based precautions with an aim of protecting both patients and themselves from harm.

Procedures and Processes

1. Standard Precautions

Standard infection control precautions (SICPs) are **to be used by all staff, in all care settings, at all times, for all patients** whether infection is known to be present or not, to ensure the safety of those being cared for, staff and visitors in the care environment.

SICPs are the basic infection prevention and control measures necessary to reduce the risk of transmitting infectious agents from both recognised and unrecognised sources of infection. Sources of (potential) infection include blood and other body fluids, secretions, or excretions (excluding sweat), non-intact skin or mucous membranes and any equipment or items in the care environment that could have become contaminated.

The current precautions can be found via this link: NHS England » Chapter 1: Standard infection control precautions (SICPs)

2. Transmission based precautions

Standard infection control precautions may be insufficient to prevent cross transmission of specific infectious agents and additional precautions called “transmission based precautions” (TBP) may be required when caring for patients with known / suspected infection or colonisation.

Transmission based precautions are categorised by the route of transmission of infectious agents (some infectious agents can be transmitted by more than one route).

Clinical judgement and decisions should be made by staff on what additional precautions are required and this will be based on:

- suspected/known infectious agent
- severity of the illness caused
- transmission route of the infectious agent
- care setting and procedures undertaken.

The current precautions can be found at the following link: NHS England » Chapter 2: Transmission based precautions (TBPs).

For clarification, the company wishes to make clear that;

- All consultations and procedures take place in an **Outpatient setting** and therefore the appropriate measures as appropriate to this environment should be used.
- All staff who directly handle equipment related to the delivery of procedures should follow the decontamination guidelines outlined in Appendix 7 of the NIPCM at all times, specifically when handling returned equipment. **Link**: Appendix 7

Compliance and Enforcement

The company expectation is that any lapse of compliance with IPC measures is addressed **immediately and safely** to minimise any risk to patients or clinicians.

This includes addressing issues with other organisations that the company may have a commercial relationship with. For example, during an environmental pre-clinic audit, the facilities provided are not of the agreed standard. The outpatient room or provided equipment (desk, couch etc.) may not be clean, this should be raised by the clinician delivering the clinic with the site lead as well as being documented as part of the audit.

If compliance within the environment cannot be achieved prior to clinic delivery

- The clinic should be delayed until later in the day/alternative date, when the facilities can be compliant with relevant IPC standards as outlined in NIPCM.

and/or

- The company seeks an alternative location to deliver the clinic ensuring that the new location is compliant with the IPC standards outlined in the NIPCM.

The company will ensure, and evidence, compliance with the guidelines outlined in the NIPCM as outlined in the table below;

Monitored Element	Tools	Frequency	Reporting Arrangements
Compliance with the WHO 5 moments with effective hand hygiene technique and produce use. Compliance with bare below the elbows. Appropriate glove use.	Clinician Self declarations. Documented observation. Patient questionnaire.	Survey sent to all patients, results collated Monthly.	Survey results to be analysed and reported monthly. Trends to be highlighted and discussed as Agenda item within directors meetings.
Decontamination on non-invasive care equipment	Equipment tracking and decontamination log. Quality control confirmation and inspections of equipment prior to issue.	Per appointment (minimum weekly).	Issues logged and discussed as Agenda item within directors meetings.
Safe management of the care environment	Pre-clinic audit	Carried at the start of each clinic	Compliance reported and discussed as part of Agenda item within directors meetings.

Directors Meeting

Infection Prevention and Control to be a fixed Agenda item at scheduled Directors Meetings. Outputs of the above monitoring as well as any other concerns to be discussed and documented.

Related Policies

- Complaints Policy
- Quality and Governance Policy