



Department
of Health

Infection Diseases and Blood
Policy, Room 114,
Richmond House
79 Whitehall
London
SW1A 2NS

www.dh.gov.uk

30th January 2015

Dear colleague

Revision of *the Health and Social Care Act 2008 Code of Practice on the Prevention and control of infections and related guidance*.

I am writing to invite you to take part in a public consultation on the revised version of *The Health and Social Care Act 2008 Code of Practice on the Prevention and control of infections and related guidance (The Code)*.

Regulatory changes

The registration requirement for Cleanliness and Infection Control is part of *The Health and Social Care Act 2008 (Regulated Activities) Regulations 2010*.

In April 2015 these Regulations will be replaced by *The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014* which will introduce new registration requirements. The Department of Health is undertaking this consultation in response to this change as the Secretary of State for Health is responsible for setting the infection control compliance criteria.

The Code, published in 2010, provides guidance on how providers should interpret and meet the registration requirement on cleanliness and infection control in *The Health and Social Care Act 2008 (Regulated Activities) Regulations 2010* to comply with the law. Although it is not a Statutory Code, providers must “**have regard**” to it when satisfying the Care Quality Commission (CQC) requirements, but they may take an alternative approach if they can show this satisfies the registration requirements and ***is equivalent or better than the guidance in the Code***.

The current Code sets out the criteria used by the CQC to decide if registered providers of health and adult social care in England comply with the registration requirement on cleanliness and infection control.

Rationale for reviewing the Code

In April 2015 *The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014* will introduce new registration requirements. The main registration requirement for infection prevention and control (IPC) will be **Regulation 12** on Safe Treatment and Care, but **Regulation 15** on Premises and Equipment is also relevant under which there are a

number of criteria to follow. These changes need to be clear to all users and it is timely to revise the Code to explain this.

Tackling antimicrobial resistance (AMR) is a Government priority. Preventing infections and practicing good antimicrobial stewardship (AMS) are key components of the AMR Strategy¹. The Code helps ensure measures are rigorously and consistently applied in all health and care settings and we are committed to strengthening the Code to help improve AMR and AMS as part of the UK AMR Strategy implementation plan².

We have also used this review of the Code to reflect the NHS structures introduced in April 2013 and to reinforce the need to ensure that staff and patients are properly protected from infection in all settings. The revised Code also takes account of informal consultation with colleagues at Public Health England, NHS England and CQC.

Thus the *Code* is being revised to

- Reflect the new registration requirements which come into force in April 2015
- Support implementation of the UK AMR Strategy by giving greater prominence to antimicrobial resistance
- Reflect the NHS Structures introduced in 2013.
- Update the bibliography.

Benefits of these changes

The current Code is well regarded and used extensively by the Regulator, providers and others. Updating the bibliography and making antimicrobial stewardship a compliance criterion will strengthen the IPC and antimicrobial stewardship framework for healthcare providers by signposting available guidance thus, improving consistency in delivery of standards and reducing the risk of old guidance being used. The proposed changes will help providers ensure they are aware of the latest guidance.

In addition, we are taking the opportunity to clarify the Criteria on information provision for providers, service users and the public.

We would welcome views on the revised Code, in particular the questions in the attached response form.

The revised *Code* will be available on www.gov.uk in April 2015 when the new Regulations are in place.

Thank you for taking the time to read this letter and we will look forward to receiving your comments. Please send any comments on the revised *Code* using the attached response form to AMR@dh.gsi.gov.uk by Friday 13th March 2015.

¹ UK Five Year Antimicrobial Resistance Strategy 2013 to 2018

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/244058/20130902_UK_5_year_AMR_strategy.pdf

² UK 5 Year Antimicrobial Resistance (AMR) Strategy 2013–2018 Annual progress report and implementation plan, 2014 <https://www.gov.uk/government/publications/progress-report-on-the-uk-five-year-amr-strategy-2014>

Yours sincerely

A handwritten signature in black ink that reads "Ailsa Wight". The signature is written in a cursive style with a large initial 'A' and a long, sweeping tail on the 't'.

**Dr Ailsa Wight
Head Infectious Diseases and Blood Policy Branch**

RESPONSE FORM FOR THE CONSULTATION ON THE REVISED VERSION OF THE HEALTH AND SOCIAL CARE ACT 2008 CODE OF PRACTICE ON PREVENTION AND CONTROL OF INFECTIONS AND RELATED GUIDANCE (THE CODE)

Please send this completed form to AMR@dh.gsi.gov.uk by 13 March 2015

Name	
Job role	
Organisation	
Telephone number	e-mail
Q1 Does the revised Code explain the changes in the new registration requirements Yes/No Any comments?	
Q2 Does the revised Code explain the need to ensure infection prevention and control systems take a holistic approach by including antimicrobial stewardship and cleanliness? Yes/No Any comments?	
Q3 Which phrase is most suitable for use in the Code? a) infection prevention or b) infection prevention and cleanliness? Why?	
Q4 Are the definitions of AMR and stewardship clear on page 7 Yes or No and If not please suggest alternative wording and the basis for your suggestion.	
New version of compliance criterion. Please explain the reasons for any concerns that you have in relation to this revised criterion. Q5 Do you agree that merging compliance criteria 3 and 4 reduces the scope for confusion on provision of information? Yes/No Q5a Do you have any comments on the guidance for compliance for the new criterion 3? Yes/No Q5b Do you have any comments on the guidance for compliance for the new criterion 4? Yes/No Q5c Do you have any specific comments on the interpretation of criteria 3 and 4 in specific settings outlined in appendices Yes/ No	
Q6 Do you have any comments on the re-wording of criterion 10 on occupational health? Yes/No If yes, please explain the reasons for your concern	
Q7 Do you have any comments on the inclusion of reference to a water safety lead on page 12 Yes/No If yes, please explain the reasons for your concern	

Q8 Do you have any specific comments on the appendices Yes/No If yes, please explain the reasons for your concern

Q9 Any other comments? Yes/No
We would be interested to hear of any general concerns about the revised Code, including topics not covered by the guidance, areas where clarification is required and amendments to the bibliography

List of organisations consulted on the Code of Practice

Advisory Committee on Antimicrobial Resistance and Healthcare Associated Infection (ARHAI) – secretariat
Anchor Trust
Advisory Committee on Dangerous Pathogens (ACDP) secretariat
Antibiotic Action
Association of British Healthcare Industries
Association of British Pharmaceutical Industries
Academy of Medical Royal Colleges
Association of Healthcare of Cleaning Professionals
Association of Independent Healthcare Organisations
Association of Medical Microbiologists
Association of Perioperative Practice representing the Engineering and Science Advisory Committee
Biochemical Society
Bio-Industry Organisation
BMA General Practitioners Committee – GPC
British Association for Cancer Research
British Association of Oral and Maxillofacial Surgery, The
British Association of Sexual Health and HIV (BASHH)
British Association of Urological Surgeons
British Geriatrics Society
British Generic Manufacturers Association (BGMA)
British Dental Association (BDA)
British Medical Association (BMA)
British Pregnancy Advisory Service
British Institute of Musculoskeletal Medicine
British In Vitro Diagnostics Association (BIVDA)
British Infection Association (BIA)
British Orthopaedic Association (BOA)
British Renal Society
British Society for Haematology
British Society for Immunology
British Society for Sexual Health and HIV
British Society of Antimicrobial Chemotherapy (BSAC)
British Society of Paediatric and Adolescent and Gynaecology
British Thoracic Society
British Transplantation Society (BTS)
C. diff support
Care home working group - care of Bexley Care Trust
Care Quality Commission (CQC)
Chartered Institute of Environmental Health
Chemical Biology Ventures
Clinical commissioning groups (CCGs)
Department of Health
Department for Business, Innovation & Skills (BIS)

Director of Infection Prevention and Control
Faculty of Dental Surgery
Faculty of General Dental Practice (UK)
Faculty of Occupational Medicines
Faculty of Pharmaceutical Medicines
Health Estates Facilities Management Association – HEFMA
Faculty of Public Health
Harrogate District Hospital
Health Education England
Healthcare Infection Society (HIS)
Health and Safety Executive
ICNET plc
Imperial College London
Infection Prevention Society (IPS)
Infectious Disease Research Network
Institute of Decontamination Sciences
Institute of Healthcare Engineering and Estate Management (IHEEM)
Intensive Care Society (ICS)
Innovate UK
Local Government Association
Médecins Sans Frontières
Medicines and Healthcare products Regulatory Agency (MHRA)
Ministry of Defence (MOD)
NHS Direct
NHS Bath and North East Somerset CCG
Monitor
National Concern for Healthcare Infections
National Audit Office (NAO)
National Institute for Health and Clinical Excellence
National Care Association
National Care Forum
MRSA Action
National Pharmacy Association
National Voices
NHS Core Learning Unit
NHS England
Patients Association
Public Health England
Primary Health Care Proprietary Association of Great Britain
Royal College of Pathologists (RCPATH)
Registered Nursing Home Association
Royal College of Anaesthetists, The
Royal College of General Practitioners (RCGP)
Royal College of Nurses (RCN)
Royal College of Midwives (RCM)
Royal College of Ophthalmologists
Royal College of Obstetrics and Gynaecologists (RCOG)
National Resource for Infection Control (NRIC)
Royal College of Paediatrics and Child Health (RCPCH)

Royal College of Physicians (RCP)
Royal College of Radiologists
Royal College of Surgeons (RCS)
Royal Pharmaceutical Society (RPS)
Royal Society of Chemistry (RSC)
Sepsis Trust UK
Society for Applied Microbiology
Society for Cardiothoracic Surgery in Great Britain and Ireland
Society for General Microbiology
Society of Biology
Society of Chiropractors and Podiatrists
South Central Ambulance service
St John Ambulance
The International Scientific Forum on Home Hygiene
The Kings Fund
Trust Development Agency (TDA)
UK Clinical Pharmacist Association
UNISON
United Kingdom Home Care Association
University of Cambridge
University of Edinburgh
University of Liverpool
University of Newcastle
University of Nottingham
University of Warwick
University of West London
Voluntary Organisations Disability Group
Wellcome Trust

The House of Commons Science and Technology Committee were notified the consultation went live.

Please pass onto anyone who has been missed off the circulation list.

Confidentiality of information

We manage the information you provide in response to this consultation in accordance with the Department of Health's [Information Charter](#).

Information we receive, including personal information, may be published or disclosed in accordance with the access to information regimes (primarily the Freedom of Information Act 2000 (FOIA), the Data Protection Act 1998 (DPA) and the Environmental Information Regulations 2004).

If you want the information that you provide to be treated as confidential, please be aware that, under the FOIA, there is a statutory Code of Practice with which public authorities must comply and which deals, amongst other things, with obligations of confidence. In view of this it would be helpful if you could explain to us why you regard the information you have provided as confidential. If we receive a request for disclosure of the information we will take full account of your explanation, but we cannot give an assurance that confidentiality can be maintained in all circumstances. An automatic confidentiality disclaimer generated by your IT system will not, of itself, be regarded as binding on the Department.

The Department will process your personal data in accordance with the DPA and in most circumstances this will mean that your personal data will not be disclosed to third parties.

Comments on the consultation process itself

If you have concerns or comments which you would like to make relating specifically to the consultation process itself please

contact Consultations Coordinator
Department of Health
2e26, Quarry House
Leeds
LS2 7UE

e-mail consultations.co-ordinator@dh.gsi.gov.uk

- **Please do not send consultation responses to this address**