

Bath & North East
Somerset Council

Improving People's Lives

Infection Prevention And Control Workbook- A guide for Adult Social Care

Contents

1.1. Acknowledgment.....	3
1.2. Contact Details.....	3
1.3 About this Workbook.....	4
1.4 Learning Objectives.....	5
2. Introduction.....	6
3. Causes of Infection.....	8
4. Specific Infections and Conditions.....	11
5. Outbreaks of Infection.....	13
6. Standard Infection Prevention Cautions.....	15
6.1. Hand Hygiene.....	16
6.2. Respiratory and Cough Hygiene.....	19
6.3. Personal Protective Equipment (PPE).....	20
6.4. Safe Management of Blood & Body Fluid Spillages.....	21
6.5. Occupational (post) Exposure Management.....	23
6.6. Safe Management of the Care Environment.....	25
6.7. Safe Management of Care Equipment.....	27
6.8. Safe Management of Linen.....	29
6.9. Safe Management of Waste.....	30
6.10. Resident/Service User Placement (or those you care for).....	32
7. Learning Outcomes.....	33
8. Infection Prevention Control Certificate	36
9. Useful Information Sources.....	37

1.1. Acknowledgement

Bath and North East Somerset Council's Public Health Team would like to thank and acknowledge Wiltshire Council for their support in putting together the Infection Prevention and Control Workbook – A guide for Adult Social Care.

1.2. Contact Details

Authors: Jordan Brunton, Infection Prevention and Control Officer and Anna Brett, Health Protection Manager

For any further information please contact:

Anna Brett

Health Protection Manager
Bath & North East Somerset Council
Public Health & Prevention Department
Keynsham Civic Centre
Keynsham
BS31 1FS
E. anna_brett@bathnes.gov.uk

1.3. About this Workbook

Infection prevention and control is an important part of health and social care and can make a difference to the experience of people: living in care homes, being cared for at home, staff and visitors.

Learning for you is essential, to ensure that your knowledge and skills are up to date with standards and guidance for infection prevention and control. Care and support can then be delivered in as clean and safe environment as possible.

The Francis Report 2013 states “It is unacceptable for a patient to be injured by contracting certain types of infection as a result of the failure to apply methods of hygiene and infection control”.

This Workbook provides you with a structured approach to assessing and developing your knowledge and skills. It can also provide evidence for your Personal Development Plan (PDP).

This is for you to record what you have learned and demonstrate that you have the knowledge and skills needed to help you to carry out the role of infection prevention and control lead/link person. It can also help to demonstrate compliance with the Health and Social Care Act 2008 and Care Quality Commission registration requirements in relation to infection prevention and control training.

The workbook is suitable for a range of staff working in care homes including housekeeping and kitchen staff. The learning outcome page is useful for the appraisal process and training. We recommend that **Section 3 Causes of Infection** and **Section 6 Standard Infection Prevention Precautions** should be completed within the first 3 months of employment and this can also be used during the induction process. The whole workbook should be completed within 6 months and used to refresh your knowledge every 3 years. On completion of the workbook your line manager/supervisor will check your responses and when you have answered every section correctly, they will provide you with the Infection Prevention and Control certificate of completion from page 36 of this workbook.

There are spaces in which you or your line manager/ supervisor can write down notes if required.

About You:

Name:

Job Title:

Date Commenced Workbook:

Date Completed Workbook:

Line Manager / Supervisor:

Place of Work/Team:

1.4. Learning Objectives

On completion of the workbook, you will be able to:

1. Explain the importance of infection and prevention control.
2. Identify what standard precautions are and when to use them.
3. Explain how to apply infection prevention and control into daily practice.
4. Describe common causes of infection and the awareness of preventative measures such as antimicrobial stewardship and immunisation.
5. Describe how to manage an outbreak of infection.

The final page is a certificate of learning, which along with the Learning Outcomes Summary page should be kept for your records.

2. Introduction

In health and social care settings preventing and controlling infection is everyone's business, alongside the safety and wellbeing of those you are caring for, visitors, other staff and yourself.

The Health and Social Care Act 2008: Code of Practice on the prevention and control of infections and related guidance (Department of Health, July 2015), states that, "Good infection prevention (including cleanliness) is essential to ensure that people who use health and social care services receive safe and effective care". There are 10 criteria that have to be met, which are:

1. Systems to manage and monitor the prevention and control of infection. These systems use risk assessments and consider the susceptibility of service users and any risks that their environment and other users may pose to them.
2. Provide and maintain a clean and appropriate environment in managed premises that facilitates the prevention and control of infection.
3. Ensure appropriate antimicrobial use to optimise resident/service user outcomes and to reduce the risk of adverse events and antimicrobial resistance.
4. Provide suitable accurate information on infections to service users, their visitors and any person concerned with providing further support or nursing/ medical care in a timely fashion.
5. Ensure prompt identification of people who have or are at risk of developing an infection so that they receive timely and appropriate treatment to reduce the risk of transmitting infection to other people.
6. Systems to ensure that all care workers (including contractors and volunteers) are aware of and discharge their responsibilities in the process of preventing and controlling infection.
7. Provide or secure adequate isolation facilities.
8. Secure adequate access to laboratory support as appropriate.
9. Have and adhere to policies, designed for the individual's care and provider organisations that will help to prevent and control infections.
10. Providers have a system in place to manage the occupational health needs and obligations of staff in relation to infection.

Infection prevention and control is a key priority for the Department of Health, reinforced with the standards set out in the Health and Social Care Act 2008 and the Care Quality Commission (CQC) registration requirements. Infection prevention and control spans the five key questions the CQC will be asking about your service:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

Infection prevention and control means doing everything possible to prevent infection from developing and spreading to others. Understanding how infections occur and how different microbes (germs/bugs) spread, such as bacteria and viruses, is essential in preventing infection.

We are surrounded by microbes (germs/bugs) – they are found inside us, on our bodies, they're in our food and they're in the environment and can be picked up from contact with contaminated surfaces or objects or by contact with infected persons.

An infection occurs when by microbes (germs/bugs) enter the body and cause damage. These can often take advantage of a route into the body provided by a wound or an invasive medical device, e.g., urinary catheter.

Most microbes are harmless, but some can be serious, particularly for vulnerable groups including older people or people with certain medical conditions.

Some infections can reach the bloodstream. When this occurs, it is known as a bacteraemia, which can cause serious or life-threatening infection and can result in death.

Healthcare Associated Infection (HCAI) is defined as an infection that is acquired because of healthcare interventions. Preventing and reducing rates of HCAI involves infection prevention and control, using evidence-based interventions.

Surveillance programmes are an important part of this, as they provide essential information on:

- what and where the problems are
- how well control measures are working

For surveillance purposes HCAI are infections that are not present when a patient is admitted to a hospital or healthcare facility. If the infection develops in a patient 48 hours or more after admission to the hospital or healthcare facility, the infection is referred to as a hospital-acquired or healthcare associated infection.

Infections that occur within the first 48 hours of admission are considered to be community-acquired infections and were picked up in the community before admission to the hospital or healthcare facility.

3. Causes of Infection

An infection occurs when an infectious agent (microorganisms such as a bacteria, fungi or a virus) invades the body, multiplies and spreads causing disease. The chain of infection describes how an infection spreads based on 6 links of transmission. An infection can be prevented by breaking the chain of infection at any point, this will control the risk of infection by preventing the onward transmission.

1. Growth and multiplication of microbes - can you give an example of a bacteria and an example of a virus?

Bacteria:

Virus:

2. Can you name 3 conditions that microbes need to grow?

1.

2.

3.

3. The Chain of Infection describes the way an infection spreads - can you name the six links of the 'chain' and briefly describe each one?

1.

2.

3.

4.
5.
6.

4. Using an example of a common cold, tick which phrase belongs to which link of the chain of infection:

	Infectious Agent	Reservoir	Portal of Exit	Transmission	Portal of Entry	Susceptible Host
Sneezing openly without covering nose & mouth						
Common cold virus						
Respiratory system						
Unwashed contaminated hands						
Person you care for						
Touching your eyes, mouth or nose						

5. List the most common signs and symptoms of an infection:

6. Some people develop Diarrhoea and may be a sign of infection such as Norovirus. Complete the following sentence by deleting the incorrect words as appropriate.

Diarrhoea is defined as having 2, 3, 4 or more loose or liquid stools per, hour, day, week or more frequently than is normal for the individual.

Signed off by: Trainer/ Manager/ Supervisor Signature.....

Date.....

4. Specific Infections and Conditions

For each specific infection please give at least one answer to each of the common causes, spread by and symptoms and list prevention and control measures:

1. Clostridium difficile Infection (CDI, C. diff)	
Common causes	
Common symptoms	
List prevention & control measures	

2. Norovirus	
Spread by	
Common symptoms	
List prevention & control measures	

3. Urinary Tract Infection	
Common causes	
Common symptoms	
List prevention & control measures	

4. Influenza	
Spread by	
Common symptoms	

List prevention & control measures	
------------------------------------	--

5. Scabies	
-------------------	--

Spread by	
-----------	--

Common symptoms	
-----------------	--

List prevention & control measures	
------------------------------------	--

6. Meticillin-resistant Staphylococcus aureus (MRSA)	
---	--

Spread by	
-----------	--

Common symptoms	
-----------------	--

List prevention & control measures	
------------------------------------	--

:

7. Tuberculosis (TB)	
-----------------------------	--

Spread by	
-----------	--

Common symptoms	
-----------------	--

List prevention & control measures	
------------------------------------	--

Signed off by: Trainer/ Manager/ Supervisor Signature.....

Date.....

5. Outbreaks of Infection

It is important to recognise potential outbreaks promptly and for care staff to implement control measures as soon as possible to prevent further cases. Staff must be aware of the signs of infection, particularly in the elderly, e.g. fever, diarrhoea or vomiting, unexpected falls and confusion. Care staff must also know to report these signs immediately to senior management staff when they occur. A number of infectious diseases may spread easily to other residents and/or members of staff or visitors and cause outbreaks.

1. Describe what you understand by the term "Outbreak"
2. What immediate actions might you take if you suspect an outbreak of infection?
3. Who would you inform and seek advice from about the outbreak?
4. What information would they need to know from you?
5. Where would you find your local policies and guidance in the event of an outbreak?
6. What should you do if you or a colleague develops diarrhoea and/or vomiting?

7. Can you remember some of the important points for preventing infection during an outbreak?

8. Name two infections that can cause an outbreak:

1.

2.

Signed off by: Trainer/ Manager/ Supervisor Signature.....

Date.....

6. Standard Infection Prevention and Control Precautions

All staff involved in the care of residents/service users must use infection prevention and control standard precautions.

There are control measures known as standard precautions (see table below) that underpin routine safe working practices.

They will also break the chain of infection, which in turn helps to protect residents/service users, any visitors and other staff.

As we will not always know who is infected, by applying standard precautions to all people and at all times, best practice becomes second nature and the risks of infection are minimised.

Standard precautions are:

1. Resident/service user placement/assessment for infection risk
2. Hand hygiene
3. Respiratory and cough hygiene
4. Personal protective equipment (PPE)
5. Safe management of care equipment
6. Safe management of the care environment
7. Safe management of linen
8. Safe management of blood and body fluid spillages
9. Safe disposal of waste (including sharps)
10. Occupational safety: prevention of exposure (including sharps injuries)

6.1. Hand Hygiene

Hand hygiene is the process of physically removing dirt, blood or body fluids and other germs/bugs from the hands.

There is evidence and national guidance that identifies effective hand hygiene can result in significant reduction in the carriage of harmful microbes on the hands.

Hand hygiene is the single most important way to prevent the spread of infection. Hands may look visibly clean, but microbes are always present, some harmful, some not.

Hands may become contaminated by direct contact with a service user, handling equipment and contact with the general environment.

1. Hand hygiene is the single most important thing you can do to prevent the spread of infection. Why?

2. Name 5 occasions of when you must carry out hand hygiene:

1.	
2.	
3.	
4.	
5.	

3. Note a situation where alcohol-based hand rub should not be used?

4. Number the steps (in order) if using soap and water - tick if the step also applies to Alcohol Based Hand Rub

Number	Step	Tick	Number	Step	Tick
	Wet your hands			Rub palm to palm with fingers interlaced	
	Dry your hands thoroughly			Rub the tips of fingers in the opposite palm in a circular movement	
	Rub hands palm to palm			Apply soap/alcohol based hand rub from a dispenser	
	Rub each thumb in turn, holding it in opposite hand with rotational movement			Rinse your hands with running water	
	Dispose of paper towel in correct waste bin			Rub back of hands with palm of other hand, fingers interlaced	
	Rub back of fingers to the opposing palm with fingers interlocked			Turn off taps with your wrists or a paper towel	

5. Good practice suggests you should adopt a bare below the elbow approach, free from all jewellery except a plain band ring. What is the clothing and jewellery policy in your work environment?

6. Why is this important?

7. You are encouraged to promote hand hygiene to all staff, visitors and the people you care for, their family /visitors. How might you help someone do this if they are bed bound?

8. Consider all the activities you carry out during your day and not just at work. Discuss with your colleagues and your trainer, manager or supervisor when you might carry out hand hygiene and summarise your discussions.

Signed off by: Trainer / Manager/ Supervisor Signature.....

Date.....

6.2. Respiratory and Cough Hygiene

Good respiratory and cough hygiene can help reduce the risk of spreading respiratory infections, e.g. viruses, such as COVID-19, influenza, TB, and the common cold, which in vulnerable people can cause severe illness, such as pneumonia. Care staff should adopt and promote good respiratory and cough hygiene by encouraging, assisting and advising residents. Ventilation is very important to reduce the amount of microorganisms in the air. Staff should ensure rooms are well ventilated by opening windows, e.g. 10 minutes every hour.

1. How are the common cold and influenza virus spread?

2. What is the purpose of a sneeze?

3. If you do not have a tissue handy, what would you do if you needed to cough or sneeze?

4. Name 3 measures you can take to prevent the spread of cold and influenza:
 - 1.
 - 2.
 - 3.

5. Influenza vaccination is available every year. Why do you need to have it every year?

6. Who should be immunised against the flu?

Signed off by: Trainer/ Manager/ Supervisor Signature.....

Date.....

6.3 Personal Protective Equipment (PPE)

PPE is used to protect health care workers from harm, in this case from risks of infection. Protect yourself and service users by wearing the correct personal protective equipment.

PPE such as gloves may also be required for contact with hazardous chemicals and some pharmaceuticals, for example, disinfectants or cytotoxic drugs.

1. Wearing PPE is a requirement of Health and Safety Legislation. Name the most common types of PPE in use?

2. Why do you need to wear PPE?

3. What factors will you need to consider before deciding what PPE is needed?

4. In what order do you remove PPE such as gloves, apron, mask and eye protection if worn?

5. Where should PPE be stored?

Signed off by: Trainer/ Manager/ Supervisor Signature.....

Date.....

6.4. Safe Management of Blood & Body Fluid Spillages

Blood and body fluid e.g. urine and faeces may contain a large number of microorganisms such as bacteria, viruses and fungi. Contamination or spillages with blood or body fluids should be dealt with immediately, as this may expose staff and others to infection. Blood and body fluid spillages should be managed by staff trained in the correct procedure.

1. When a spillage occurs, you need to do an assessment of the spill. Describe 3 things to consider?

1.	
2.	
3.	

2. Locate and read your local policy for dealing with a spillage of blood or body fluid in your setting, summarise your findings below?

3. Note the process for cleaning a spill on a hard surface - Please include any dilutions of products where appropriate:

Blood and body fluids	Urine, Faeces, Vomit without blood visible

4. How would you clean a spill on soft furnishings?

5. What key factors must be noted in the manufacturer's instruction when using cleaning solutions for blood & body fluid spillages?

6. What PPE would you use when dealing with a spillage where there may be a risk of splashing?

Signed off by: Trainer/ Manager/ Supervisor Signature.....

Date.....

6.5. Safe Management of Blood & Body Fluid Spillages Occupational (post) Exposure Management

1. Can you list some of the items that you may encounter that would be either?

Sharps	Spillages

2. What is a blood borne virus?
3. How might it be transmitted (spread)?
4. What is recommended if you have an abrasion or cut in your skin before you go to work?
5. Name 3 important points about the safe disposal of sharp items?
 - 1.
 - 2.
 - 3.

6. Where would you find details of the procedure if you have a sharps/bite injury?

7. What procedure would you follow immediately if you have a sharps injury or a bite which has broken the skin? List what you would do:

Signed off by: Trainer/ Manager/ SupervisorSignature.....

Date.....

6.6. Safe Management of the Care Environment

Cleaning removes dust, soil, food stuff, large numbers of microbes, (and the organic matter that may shield them – for example, biofilms), faeces, blood and other bodily fluids. Cleanliness applies to the inanimate environment as well as equipment and fixtures and fittings.

A dirty or contaminated clinical environment is one of the factors that may contribute to HCAs. Exposure to environmental contamination with spores of *C. difficile* is one example of an occasion when the environment contributes to the development of infection.

Cleaning and disinfecting are different:

- cleaning with detergent and warm water removes dirt and reduces the number of germs to a safe level
- cleaning must be carried out before disinfection can be performed
- disinfecting destroys most, but not all bacteria and depends on the type of disinfectant used

What you need for cleaning:

- Wear appropriate PPE
- Warm soapy water (e.g. washing up liquid) is suitable for cleaning most surfaces.
- Wash and leave mops and cloths to air dry after each use
- Do not leave mops or cloths soaking overnight
- Use colour coding for kitchen and bathroom cleaning
- wash hands with liquid soap and warm running water

What you need for disinfecting:

- The routine use of disinfectants for general home cleaning is unnecessary
- A disinfectant such as household bleach may be required in some circumstances. For example, equipment soiled with body fluids, the area must first be cleaned and then be disinfected

1. In your own words, can you explain why cleaning the environment is important:

2. Name areas of the care environment that would need cleaning more often and why:

3. How often do you think cleaning should take place? Why?

4. Who is responsible for ensuring the care environment is kept clean?

5. What cleaning solution would be considered the most effective when cleaning the home?

6. Are you aware of colour coding for clean – can you name the colours and the areas they are used for?

7. What PPE should you wear when cleaning? And why?

Signed off by: Trainer/ Manager/ Supervisor Signature.....

Date.....

6.7. Safe Management of Care Equipment

Decontamination is an umbrella term used to describe processes that make equipment safe for re-use which includes the destruction or removal of microbes. Inadequate decontamination is frequently associated with outbreaks of infection in health/social care settings, and all care staff must be aware of the implications of ineffective decontamination and their responsibilities to residents/service users, themselves and their colleagues.

Cleaning is the critical element of the process and should always be undertaken thoroughly regardless of the level of decontamination required.

Equipment used in care settings may be designated as single use, single patient use or reusable multi-patient use.

Any equipment not designated as a single use item must be made safe following use, to prevent microbes being transferred from equipment to residents/service users and potentially resulting in infection. Decontamination is the method for achieving this.

1. Care equipment can be categorised as below. Describe what these terms mean;
 - a. Single use:
 - b. Give an example of a single use item and how it is cleaned and maintained:
 - c. Single person use:
 - d. Give an example of an item that is for single person use and how it is cleaned and maintained:
 - e. Multi-use:
 - f. Give an example of a multiuse item and how it is cleaned and maintained:

2. Find out if you have a cleaning and maintenance schedule for items of care equipment and who has overall responsibility to ensure it is followed?

3. Why do you think cleaning care equipment is important?

4. What items of PPE is essential to be worn when cleaning care equipment?

Signed off by: Trainer/Manager/ Supervisor Signature

Date

6.8. Safe Management of Linen

Linen used in health and social care environments can become soiled with blood, faeces and other body fluids containing micro-organisms when handling used, soiled, fouled and infected linen, it is essential that care is taken to prevent the spread of infection.

1. Describe the safe management and storage of **clean linen** in your care setting?

2. Describe the safe management of **used linen** in your care setting?

3. Describe the procedure for removing **used linen**:

4. How might this differ if the linen is used or infectious?

5. What PPE would you require?

Signed off by: Trainer/ Manager/ Supervisor Signature.....

Date.....

6.9. Safe Management of Waste

The most common type of waste is household or 'domestic waste'. It is also common to generate offensive, clinical and other waste, such as sharps (needles, broken glass and such like).

There are different 'waste streams' for different types of waste, and it's important to understand the importance of segregating waste in line with its correct category and how this is managed where you work.

The following link is to B&NES Council rubbish and recycling page on the website – <https://beta.bathnes.gov.uk/rubbish-and-recycling>

1. Waste can fall under 3 categories, domestic, clinical, and hazardous waste. Complete the table below and identify how each type of waste is handled in your area.

	What waste goes in each category	What colour bag (if used)	How is this waste handled
Domestic			
Clinical			
Hazardous			

2. Who is responsible for the safe disposal of waste in your care setting?

3. Sharps containers should be disposed of when $\frac{3}{4}$ full or every three months even if it is less full. Note the procedure for disposal of this Healthcare waste in your area?

4. Why is good hand hygiene important after handling waste?

Signed off by: Trainer / Manager/ Supervisor Signature.....

Date.....

6.10. Residents/Service User Placement (or those you care for)

1. It is occasionally necessary to separate a person you care for from others in the care environment. Note below why this might be necessary?
2. Name the common signs and symptoms a person with a transmissible infection might have that would indicate the need for isolation?
3. Who should be consulted in making the decision to isolate the person and what information will you need at hand to pass on?
4. Which standard infection control precautions will be important to prevent the spread of infection? List all that apply:
5. When someone needs to be separated from others they may feel frightened and isolated. Describe the measures you could take to alleviate this:

Signed off by: Trainer/ Manager/ Supervisor Signature.....

Date

7. Learning Outcomes

You can use the table to summarise the completion of each section and demonstrate achievement or areas for additional learning.

Page No	Section No	Section Title	Learning Outcomes The learners should show an understanding of:	Learner Initials & date	Supervisor /Line Manager Initials & date
	3	Causes of infection	Different types of microbes What conditions they need to grow What is meant by the “Chain of Infection”		
	4	Specific Infections	The infection and how it affects the body The symptoms associated with it The prevention and control precautions for that infection		
	5	Outbreaks of Infection	What is meant by an outbreak What action must be taken and by whom Where to find the relevant policy and guidance		
	6	Introduction to Standard Precautions	Introduction to Standard Infection Control Precautions		
	6.1	Hand Hygiene	The importance of hand hygiene in preventing and controlling infection When and how hand hygiene should be carried out Awareness of the “bare below the elbow rule”		
	6.2	Respiratory Hygiene and Cough Etiquette	How coughs and colds and influenza can spread The importance of a sneezing and coughing “etiquette” (covering the nose and mouth during coughing and sneezing) The importance of hand hygiene after handling used tissues following coughing and sneezing		
	6.3	Personal Protective Equipment	Why PPE is important When to wear PPE such as gloves, aprons and facial protection How to correctly remove and dispose of PPE Understand the correct procedure regarding storage of PPE		

	6.4	Management of Blood and Body Fluids	The policy within the care home regarding managing spillage of blood and body fluids		
	6.5	Occupational Exposure Management	What items are termed “sharp objects or spillages” How to prevent exposure to sharp incidents and blood and body fluids The correct system for disposing of sharps The correct procedure for dealing with incidents following any exposure		
	6.6	Control of the Environment	The importance of cleaning the environment in the prevention and control of infection The role of all staff in controlling the environment The colour coding system for cleaning and areas Compliance with the COSHH regulations		
	6.7	Management of Care Equipment	The terms single use, single patient use, multi-use What care equipment is used and how it can lead to the transmission of infection When care equipment should be cleaned		
	6.8	Management of Linen	-Correct storage of clean linen -The correct handling of used and soiled linen -The use of PPE		
	6.9	Safe Disposal of waste	-The different categories of waste within the care home -The colour coded system for different types of waste -How to handle, dispose of, and transport waste correctly and safely - Hand hygiene after all tasks associated with waste		

	6. 10	Providing Care in the Most Appropriate Place	<ul style="list-style-type: none">-The reasons for separating people to avoid transmission of infection-The importance of arrangements and plans in the event of the need to move people to another room or area-Where to seek advice concerning infections-To be aware of the psychological needs and issues associated with separation-The need for correct standard infection control precautions at all times		
--	-------	--	---	--	--

Infection Prevention and Control Certificate

This is to certify completion of the
Infection Prevention and Control workbook

Awarded to:

Name: _____

Job title: _____

Employer: _____

Date: _____

9. Useful Information Sources

- a) Infection Prevention Control – Care Homes
<https://www.infectionpreventioncontrol.co.uk/care-homes/>
- b) Care homes: infection prevention and control – Public Health England
<https://www.gov.uk/government/publications/infection-prevention-and-control-in-care-homes-information-resource-published>
- c) Infection Prevention & Control – World Health Organisation
<https://www.who.int/infection-prevention/en/>
- d) Northern Ireland Infection, Prevention and Control Manual – Public Health Agency
<https://www.niinfectioncontrolmanual.net/>
- e) National Infection Prevention and Control Manual – National Services Scotland
<http://www.nipcm.scot.nhs.uk/>
- f) Essential Practice for Infection Prevention and Control – RCN
<https://www.rcn.org.uk/professional-development/publications/pub-005940>
- g) Infection prevention and control- RCN <https://www.rcn.org.uk/clinical-topics/infection-prevention-and-control>
- h) Infectious Diseases – Wiltshire Council <http://www.wiltshire.gov.uk/public-health-infectious-diseases>
- i) Blood-Borne Viruses – Health & Safety Executive (HSE)
<http://www.hse.gov.uk/biosafety/blood-borne-viruses/index.htm>
- j) Infection at Work – HSE <http://www.hse.gov.uk/biosafety/infection.htm>
- k) National Infection Prevention and Control Manual (NIPCM) for England
<https://www.england.nhs.uk/national-infection-prevention-and-controlmanual-nipcm-for-england/>