

National infection prevention and control manual (NIPCM) for England

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This is an evidence-based practice manual for use by all those involved in care provision in England. It should be adopted as mandatory guidance in NHS settings or settings where NHS services are delivered, and the principles should be applied in all settings.

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Introduction

The [UK Antimicrobial five-year national action plan](#), published in January 2019 stated that the Scottish national infection prevention and control manual (NIPCM) will be adopted in England as national standards, to be measured by the re

The NIPCM has been adapted for use within England to support and facilitate healthcare providers to demonstrate compliance with the ten criteria of the 'Health and Social Care Act 2008, [Code of practice on the prevention and control of infection related guidance](#) (hereafter referred to as The "Code of Practice").

Aims

The NIPCM has been produced to:

- provide an evidence-based practice manual for use by all those involved in care provision in England and should be applied in NHS settings or settings where NHS services are delivered and the principles should be applied in all settings
- ensure a consistent UK wide approach to infection prevention and control, however some operational and organisational practices may differ across the nations.

In all non-NHS care settings, to support with health and social care integration, the content of this manual is considered as good practice. The manual aims to:

- make it easy for care staff to apply effective infection prevention and control precautions
- reduce variation and optimise infection prevention and control practices across care settings in England
- improve the application of knowledge and skills in infection prevention and control
- help reduce the risk of Healthcare Associated Infection (HCAI)
- help with alignment of practice, education, monitoring, quality improvement and scrutiny.

Pathogen specific guidance is out of remit of the NIPCM, which is not pathogen-specific. Pathogen-specific guidance for England, is produced by other agencies, for example, UK Health Security Agency (UKHSA), and can be found in the [pathogens resource](#). The NIPCM outlines evidence-based standards and transmission-based infection and prevention and control. The literature reviews that underpin and inform the practical application of the NIPCM and highlight implications for practice are available via the NIPCM Scotland website.

Audience and target groups

This manual is guidance for the NHS and as such should be applied by all NHS staff involved in patient care. Further principles in this manual should be applied across all care settings (including acute, community and social care), and specific guidance produced for these settings.

Scope

Guidance contained within this manual relates to infection prevention and control practice with a primary focus on hospital (NHS) settings, however, the principles set out are relevant to all settings where care is delivered. This manual is also relevant to community and social care settings and organism specific guidance, produced by agencies such as UKHSA, and links to other relevant guidance are provided for reference.

Responsibilities for the content of this manual

NHS England will ensure that there is appropriate consultation with key stakeholders, to ensure that the NIPCM recommendations are appropriate to the system and aligned with the relevant pathogen specific guidance, legislation, and mandatory requirements.

for England.

Responsibilities for adopting and implementing this manual

All registered care providers must demonstrate compliance with the [Health and Social Care Act 2008: Code of practice on the prevention and control of infections and related guidance](#) which outlines ten criteria which care organisations must demonstrate compliance against.

Responsibilities of organisation by role

Chief executives/executive board (or equivalent) are responsible for ensuring:

- systems and resources available to implement and monitor compliance with infection prevention and control (Criteria 1, Code of Practice) as specified in this guidance in all care areas; compliance monitoring includes all staff (permanent, agency and, where required, external contractors)
- there is a culture that promotes incident reporting, including near misses, while focusing on improving systemic failures and encouraging safe working practices, that is, that any workplace risk(s) are mitigated maximally for everyone. This may entail local risk assessments based on the measures as prioritised in the [hierarchy of controls](#) in the context of managing infectious agents*.
- safe systems of work, including managing the risk associated with infectious agents through the completion of risk assessments (outlined in Control of Substances Hazardous to Health (COSHH) regulations) and approved through local governance procedures, for example integrated care system level. This is for the protection of all healthcare workers, patients, and visitors. This national guidance outlines the recommended principles to support local decision making within individual organisations.

*Guidance on the hierarchy of controls (HoC) is under development using the defined NIPCM methodology and will be included in the NIPCM content as a priority. Setting-specific risk assessment [tools are available](#) to support organisations in applying the HoC.

Chief Operating Officers (COOs) are responsible for:

- directing the conduct of operational activities in relation to this guidance
- providing leadership, support, direction and assistance.

Directors of infection prevention and control (DIPC) are responsible for ensuring:

- adoption and implementation of this guidance in accordance with local governance processes
- a workforce that is competent in infection prevention and control practice; (Criteria 6, Health and Social Care Act Code of Practice).

Managers/employers of all services must ensure that staff:

- are aware of and have access to this guidance, including the measures required to protect themselves and their employees from infection risk
- have had instruction/education on infection prevention and control by attending events and/or completing training; (Criteria 1 and 9, Health and Social Care Act Code of Practice)
- have adequate support and resources to implement, monitor and take corrective action to comply with this guidance; and a risk assessment is undertaken and approved through local governance procedures
- who may be at high risk of complications from infection (including pregnancy) have an individual risk assessment
- who have had an occupational exposure are referred promptly to the relevant agency, eg GP, occupational health or accident and emergency, and understand immediate actions eg first aid, following an occupational exposure including process for reporting (refer to section 1.10)
- have had the required health checks, immunisations and clearance undertaken by a competent advisor (including those undertaking exposure prone procedures (EPPs)); (Criteria 10, Health and Social Care Act Code of Practice)
- include infection prevention and control as an objective in their personal development plans (or equivalent) (Criteria 6, Health and Social Care Act Code of Practice)
- refer to infection prevention and control in all job descriptions.

Staff providing care must:

- show their understanding by applying the infection prevention and control principles in this guidance
- maintain competence, skills and knowledge in infection prevention and control by attending education events and/or completing training
- communicate the infection prevention and control practices to be carried out by colleagues, those being cared for, relatives and visitors, without breaching confidentiality
- have up-to-date occupational immunisations, health checks and clearance requirements as appropriate
- report to line managers, document and action any deficits in knowledge, resources, equipment and facilities or incidents that may result in transmitting infection including near misses, eg PPE failures
- apply the principles of good practice for uniform and workwear as set out in the [NHS England uniforms and workwear guidance](#), eg, bare below the elbow
- not provide care while at risk of transmitting infectious agents to others; if in doubt, they must consult their line manager, occupational health department, and or their infection prevention and control team (IPCT)
- inform the IPCT and local UKHSA health protection team of any outbreaks or serious incident relating to an outbreak in a timely manner and in accordance with local policies and procedures.

Infection prevention and control teams must:

- engage with staff to develop systems and processes that lead to sustainable and reliable improvements in applying infection prevention and control practices
- have suitably qualified infection prevention and control staff who can provide expert advice on applying infection prevention and control in all care settings and on individual risk assessments, ensuring action is taken as required
- must maintain competence, knowledge and skills in infection prevention and control practices
- have epidemiological/surveillance systems capable of distinguishing patient case(s) requiring investigation and control.

When an organisation eg, an NHS trust, uses products or adopts practices that differ from those stated in this manual, it is responsible for ensuring safe systems of work, including the completion of a risk assessment approved through local governance procedures.