

Key actions: infection prevention and control and testing

Organisations

It is the board's responsibility to ensure that:

- 1** Staff consistently practice good [hand hygiene](#) and all [high touch surfaces and items are decontaminated](#) multiple times every day – once or twice a day is insufficient.
- 2** Staff maintain social distancing in the workplace, when travelling to work (including avoiding car sharing) and to remind staff to follow public health guidance outside of the workplace.
- 3** Staff wear the right level of PPE when in clinical settings, including use of face masks in non-clinical settings.
- 4** Patients are not moved until at least two negative test results are obtained, unless clinically justified.
- 5** Daily data submissions have been signed off by the Chief Executive, the Medical Director or the Chief Nurse, and the [Board Assurance Framework](#) is reviewed and evidence of reviews is available.
- 6** Where bays with high numbers of beds are in use, these must be risk assessed, and where 2m can't be achieved, physical segregation of patients is considered, and wards are effectively ventilated.

7 Staff testing:

- a. Twice weekly lateral flow antigen testing for NHS patient facing staff is implemented. Whilst lateral flow technology is the main mechanism for staff testing, this can continue to be used alongside PCR and LAMP testing.
- b. If your trust has a high nosocomial rate you should undertake additional targeted testing of all NHS staff, as recommended by your local and regional infection prevention and control team. Such cases must be appropriately recorded, managed and reported back.

8 Patient testing:

- a. All patients must be tested at emergency admission, whether or not they have symptoms.
- b. Those with symptoms of COVID-19 must be retested at the point symptoms arise after admission.
- c. Those who test negative upon admission must have a second test 3 days after admission, and a third test 5-7 days post admission.
- d. All patients must be tested 48 hours prior to discharge directly to a care home and must only be discharged when their test result is available. Care home patients testing positive can only be discharged to CQC-designated facilities. Care homes must not accept discharged patients unless they have that person's test result and can safely care for them.
- e. Elective patient testing must happen within 3 days before admission and patients must be asked to self-isolate from the day of the test until the day of admission.

Systems

Local systems must:

- 9 Assure themselves, with commissioners, that a trust's [infection prevention and control interventions \(IPC\)](#) are optimal, the [Board Assurance Framework](#) is complete, and agreed action plans are being delivered.
- 10 Review system performance and data; offer peer support and take steps to intervene as required.