

NIPCM – Master Timeline – 2012 - 2024

Date	Version	Changes
13 January 2012	Launch of version 1.0 of NIPCM.	Initial chapter 1 which was 10 SICPs and Appendix 1-9.
December 2012	Version 2.0	<p>Amended after Hospital (ICN leads) consensus meeting on 1 November 2012.</p> <ul style="list-style-type: none"> • General updating of wording and examples throughout document. • Inclusion of statement around the launch of the manual. • Inclusion of statement explaining this is the practice guide for all care settings. • Inclusion of reference to the literature reviews. • Inclusion of disclaimer. • Additional responsibility added related to incident reporting. • Further details around patient placement including if had hospitalisations abroad in last 6 months. • Hand hygiene updated to include using personal dispensers, use of soap and water, using antimicrobial hand wipes and using emollients for skincare. Skin care updated to include reference to drying hands. • Respiratory hygiene updated to include reference to wipes. • PPE updated to include disposing of PPE in waste bin, addition of term 'fluid repellent coveralls'.

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		<ul style="list-style-type: none"> • Management of care equipment addition of explanation of what single use means and reference to sterilised packaged items. Reference to storing items clean and dry. Addition of point around contacting IPCT prior to procuring, trialling or lending any reusable care equipment. • Linen updated to include segregation during patient transfer, not placing extraneous items in laundry receptacle and tagging of infectious linen. • Occupational exposure updated to include reference to limiting sharps handling and not resheathing needles. • Appendix 5 glove selection updated around the wearing of sterile/non-sterile gloves for invasive procedures or as a sterile field and gloves for environmental cleaning. • Appendix 7 decontamination of reusable patient care equipment updated to include space for contact details for IPCT team. Addition of boxes for adding in dilution and products locally. • Appendix 8 management of blood and body fluid spillages updated to include space for contact details for IPCT team. Addition of boxes for adding in dilution and products locally. • Appendix 9 management of occupational exposure incidents updated to include space for contact details for IPCT team. Update to box when skin/tissue is affected to reference use of pre-packed solutions where water not available.
January 2013	2.1	<p>Amended after Hospital (ICN leads) consensus meeting 9 January 2013</p> <ul style="list-style-type: none"> • General updating of wording and examples throughout document.

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		<ul style="list-style-type: none"> • New final paragraph in Introduction regarding the literature reviews being used for recommendations. • Disclaimer updated to include reference to risk assessment. • Addition of new appendices <ul style="list-style-type: none"> • Appendix 8 - Decontamination status certificate • Appendix 9 - Procuring, trialling or lending any reusable non-invasive patient care equipment • Appendix 10 - Management of linen at care level • Appendix 12 - Management of waste at care area level.
October 2013	2.2 Consultation	<p>Consultation version issued to consensus and any other groups to trial and amend for the inclusion of Chapter 2 TBPs and associated appendices.</p> <p>Inclusion of:</p> <ul style="list-style-type: none"> • Appendix 14 - Infectious agents and/or disease of HAI concern in NHSScotland requiring additional infection control measures: Transmission Based Precautions and • Appendix 15 - Do I need facial or respiratory protection. • Glossary
4 April 2014	V2.3	<p>Version issued to NHS boards to trial after v2.2 consultation comments had been considered and changes made.</p> <ul style="list-style-type: none"> • General rewording and reformatting throughout.

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		<ul style="list-style-type: none"> • Inclusion of Chapter 2 – TBPs, appendix 14 infectious agents and/or disease of HAI concern in NHSScotland requiring additional infection control measures, glossary. • Inclusion of statement in introduction ‘The national manual is mandatory for NHS employees and applies to all NHS healthcare settings. In all other care settings the content of this manual is considered best practice.’ • Managers responsibilities. Removed the line around following guidance on PPE. • Update of disclaimer to include care home. • Patient placement updated to include patients who have previously had an MDRO. • 1.2 Hand hygiene updated to say that wipes cannot be used by staff in hospital or care home for hand hygiene unless there is no running water available. • 1.3 Cough and respiratory hygiene updated so say that wipes cannot be used by staff in hospital or care home for hand hygiene unless there is no running water available. • 1.5 Safe management of care equipment updated with additional information on the using single-use devices. • 1.7 Linen updated to advise that clean linen deemed unfit for reuse should be disposed of locally or sent back to the laundry for disposal. • 1.9 Waste updated to reference The Health and Safety (Sharp Instruments in Healthcare) Regulations 2013. Updated segregation information for domestic

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		<p>waste. Updated information for disposal of sharps boxes to be manufacturers fill line.</p> <ul style="list-style-type: none"> • 1.10 Occupational Exposure updated to reference The Health and Safety (Sharp Instruments in Healthcare) Regulations 2013. Sentence included around the risk of getting a BBV from an occupational exposure.
January 2015	2.4	<ul style="list-style-type: none"> • Section 1.7 –recommendation updated so that that linen deemed unfit for re-use should be returned to the laundry for disposal rather than being disposed of locally. • Chapter 2. Transmission Based Precautions the distance for droplet precautions has been changed from “less than 3 feet (1 metre)” to “at least 3 feet (1 metre)”. • Addition of section 2.5 ‘Infection Prevention and control during Care of deceased’. • Appendix 14 - Inclusion of Viral Haemorrhagic Fever. • Addition of Appendix 15 - Key Infections from HSE Guidance “Controlling the risks of infection at work from Human Remains”.

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December 2015	2.5	<ul style="list-style-type: none"> • Section 1.4. PPE. Update to theatre headwear section to say 'Changed/disposed of between clinical procedures/tasks or if contaminated with blood and/or body fluid'. • Glossary: <ul style="list-style-type: none"> • Addition of Hazard Group 4 • Fluid repellent changed to fluid resistant • Definition of outbreak changed • Surgical face masks definition changed to include IIR masks. • Appendix 3 – Surgical Scrubbing – Inclusion of footnote 1 on use of surgical sponge between fingers and 2 on repeating steps 1-5 to the forearms. • Appendix 10 – Management of linen at care area level. Inclusion of Linen bagging and tagging guidance. • Appendix 14 – List of infectious agents and/or diseases that require TBPs in addition to SICPs. <p>Inclusion of 'until resolution of symptoms' in the Optimal patient placement box</p> <p>Inclusion of 'e.g respiratory secretions' in the Surgical Facemask box.</p>
April 2016	3.0	<p>This is the version that was used for the first version of the NIPCM website which was launched in April 2016</p> <ul style="list-style-type: none"> • Section 1.2 – Hand hygiene <p>Addition of statement for moment 2 'If ABHR can't be used then antimicrobial soap should be used.'</p>

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		<p>Skin care. Removal of word 'breaks' when referring to when to use emollient hand cream.</p> <ul style="list-style-type: none"> • Section 1.4 – PPE - Footwear New bullet added Footwear must be: Able to either withstand machine washing at 40°C or disinfection with a chlorine releasing agent. • Section 1.5 – Decontamination of patient care equipment Addition of text to replace Appendix 8 – Decontamination status certificate and Appendix 9 – Procuring, trialling or lending any reusable non-invasive care equipment. Addition of text 'Guidance may be required prior to procuring, trialling or lending any reusable non-invasive equipment. (This text replaces the blank Appendix 9 – Procuring, trialling or lending any reusable non-invasive care equipment)'. • Section 1.9 - Waste Addition of text 'Local guidance regarding management of waste at care level may be available.' This text replaces the blank appendix 12 Management of waste at care area level' • Section 1.10 – Management of occupational exposure incidents Inclusion of new sentence 'Always dispose of needles and syringes as 1 unit.'

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		<ul style="list-style-type: none"> • Appendix 1 – How to hand wash Addition of asterisk*Any skin complaints should be referred to local occupational health or GP. • Appendix 3 – Surgical scrubbing Addition of new sentence. Undertake Appendix 1 prior to starting scrub. Image 4 updated with the words ‘using a rotational method’ • Appendix 9 – Management of blood and body fluid spillages Addition of asterisk to say ‘All NHSScotland settings must use granules or equivalent product e.g spill kits’. • Appendix 11 – Aide memoire for patient placement considerations and respiratory protective equipment (RPE) and fluid resistant surgical facemasks (FRSMs) for infectious agents. Addition of extra wording in Footnote 4. Induction of sputum (not including chest physiotherapy).
September 2016	3.1	<p>Addition of Chapter 3 – Healthcare Associated Infection Outbreaks and Data Exceedance. This chapter was not mandatory at this stage and was being used and reviewed by the Steering Group prior to launch in 2017</p> <ul style="list-style-type: none"> • Appendix 7 – Decontamination of reusable non-invasive care equipment Reworking of 3rd bullet in left hand side box to now read. "Disinfect specific items of non-invasive, reusable, communal care equipment if recommended by the manufacturer e.g. 70% isopropyl alcohol on stethoscopes".

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		<p>This is changed from "Disinfectants may be used routinely to decontaminate specific items of non-invasive, reusable, communal care equipment if recommended by the manufacturer e.g 70% isopropyl alcohol on stethoscopes."</p> <p>Replacement of 3rd bullet at the bottom of the middle and right hand side box with an asterisk that reads.</p> <p>*If the item cannot withstand chlorine releasing agents consult the manufacturer's instructions for a suitable alternative to use following or combined with detergent cleaning.</p> <p>This replaces the bullet that read " If the item cannot withstand chlorine releasing agents consult the manufacturer's instructions for a suitable alternative e.g 70% isopropyl alcohol.</p> <ul style="list-style-type: none"> • Section 1.2 – Hand Hygiene <p>Inclusion of new bullet point where reference to when to wash hands with non-antimicrobial soap.</p> <p>Wash hands with non-antimicrobial soap if:</p> <ul style="list-style-type: none"> • caring for patients with vomiting or diarrhoeal illnesses; or <ul style="list-style-type: none"> • Section 2.4 – PPE - RPE <p>Addition of National Minimum Risk Categorisation for HCW fit testing with FFP3</p>
December 2016	3.2	<ul style="list-style-type: none"> • Update to definitions in Chapter 3.
6 December 2016	3.4	<ul style="list-style-type: none"> • All references to Healthcare Associated Infection Incident Outbreak Reporting

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		<p>Template removed and replaced with Healthcare Infection Incident Outbreak Reporting Template.</p> <ul style="list-style-type: none"> • Chapter 3 Title changed to 'Healthcare Infection, Incident, Outbreak and Data Exceedance.' Introduction. Healthcare settings changed to 'health and other care settings.' • Appendix 12 – HIIAT Calculate the Impact. Scoring now changed to allow 1 moderate to be HIIAT Green Part 2- Communication. Bullet point 2 GREEN now reads: Only inform HPS if support/expert advice is required or there is an accompanying press holding/ release/ pro-active statement. Part 2 – Communication bullet point – 'a HIIORT is not required' is removed. • Appendix 13 - HIIORT Red box instruction page 1 changed to – 'Complete within 24 hours for all HIIAT Red and Amber; for HIIAT Green complete only if accompanied by a press statement (holding, release, proactive) and/or HPS support requested.' Red box instruction page 2 changed to – 'Complete this update section weekly as a minimum or as agreed with IMT and HPS for onward reporting to SGHSCD.'
February 2017	3.5	<ul style="list-style-type: none"> • Final changes made to Chapter 3 from comments from steering group.

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March 2017	3.6	<ul style="list-style-type: none"> • Incorporation of Chapter 3 with comments from Steering Group. • Section 1.9 Waste. Taking out of the word 'infectious' under Orange Waste
3 April 2017		<p>Launch on 3 April 2017 of Chapter 3 – Outbreaks and Incidents.</p> <p>The additional appendices and resources are:</p> <p>Revised Appendices</p> <ul style="list-style-type: none"> • NHSScotland Alert Organisms/Conditions list • The Healthcare Infection Incident Assessment Tool (HIIAT) • The Healthcare Infection Incident Outbreak Reporting Template (HIIORT) <p>Additional Resources</p> <ul style="list-style-type: none"> • Generic Outbreak checklist • Draft agenda for an IMT • SBAR report template • Full IMT report template • Incident/Outbreak data collection tool • Hot Debrief <p>A-Z of pathogens launched at same time</p>
July 2017	3.7	<ul style="list-style-type: none"> • Introduction: Minor changes in wording to include health and social care integration.

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		<ul style="list-style-type: none"> • 3.2.2 Inclusion of the line 'The resources section is not mandatory but can be used as a supporting tool for the NIPCM.' • Appendix 11. Amendments to footnotes and inclusion of pathogens <ul style="list-style-type: none"> • Acinetobacter baumannii • Bacillus anthracis • Bacillus cereus • Carbapenemase producing Enterobacteriaceae (CPE) • Corynebacterium diphtheriae • Enterovirus D68 • Hepatitis A virus • Legionella • Novel coronavirus • Panton Valentine Leukocidin (PVL) – positive Staphylococcus aureus • Pseudomonas aeruginosa • Stenotrophomonas maltophilia • Vancomycin-resistant Enterococci (VRE) • Vero cytotoxin-producing Escherichia coli (VTEC) • Appendix 13 – Line updated to say 'Unless otherwise stated, one case would require an IPCT or HPT review to advise SICPs and TBPs have been followed'

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		<p>and continue to be applied as part of routine Public Health response (when dealing with a case).'</p> <ul style="list-style-type: none"> • Appendix 14 – HIIAT. Update to text in Part 2 for Amber to say ‘Review and report HIIAT at least weekly or as agreed between IMT and HPS. • Appendix 15 – HIIORT. Update to text box for Section 6 to say ‘Complete this update section weekly as a minimum if Red or Amber or as agreed with IMT and HPS for onward reporting to SGHSCD.
October 2017	3.8	<ul style="list-style-type: none"> • Document Information grid. Update to include ‘and Chapter 3 Healthcare Infection incidents, outbreaks and data exceedance. It is planned to further develop the content of the manual.’ • Introduction. Inclusion of new paragraph. ‘The manual has subsequently been endorsed by the Chief Medical Officer (CMO), Chief Pharmaceutical Officer (CPO), Chief Dental Officer (CDO) and Chief Executive Officer of Scottish Care.’ • Responsibilities Organisations must ensure. Change 3rd bullet to include ‘including near misses’ Managers of all services must ensure that staff: Change 2nd bullet to include ‘if this cannot be implemented a robust risk assessment must be undertaken and approved through local governance procedures. Change to 5th bullet to include ‘including near misses e.g sharps or PPE failures.’

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		<p>IPCTs and HPTs must:</p> <p>Change to 2nd bullet to say ‘including the HIIAT/HIIORT ensuring actions are taken following completion of HIIAT’</p> <p>Inclusion of new bullet. ‘Complete documentation when an incident/outbreak or data exceedence is reported.’</p> <ul style="list-style-type: none"> • Disclaimer. Inclusion of ‘approved through local governance procedures.’ • Section 1.2 Hand Hygiene Inclusion of new paragraph ‘Hand washing sinks must not be used for the disposal of other liquids (See Appendix 3 of the Pseudomonas guidance).’ In the paragraph ‘Hand wipes should not ‘ the inclusion in the second sentence of the words ‘In this circumstance.’ • Section 1.4 Personal Protective Equipment (PPE) Inclusion of new bullet point ‘not be impeded by accessories such as piercings/false eyelashes.’ • Section 1.7: Safe Management of Linen Inclusion of reference to the National Guidance for Safe Management of Linen in NHSScotland Health and Care Environments For laundry services/distribution

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		<ul style="list-style-type: none"> • Section 1.10 Occupational Safety: Prevention and Exposure Management (including sharps) <ul style="list-style-type: none"> 3rd paragraph addition of word 'recapped' 5th paragraph inclusion of 'If a safety device is being used safety mechanisms must be deployed before disposal.' Inclusion of sentence. 'There is a legal requirement to report all sharps injuries and near misses to line managers/employers.' Footnote 4 updated to say 'A local risk assessment is required if re-sheathing is undertaken using a safe technique for example local anaesthetic administration in dentistry.' • Section 2.4 – PPE: RPE <ul style="list-style-type: none"> Inclusion of new sentence in second paragraph. 'If the hazard is unknown the clinical judgement and expertise of IPC/HPT is crucial and the precautionary principle should apply.' Inclusion of new paragraph. 'The decision to wear an FFP3 respirator/hood should be based on clinical risk assessment e.g task being undertaken, the infectious state of the patient, the presenting symptoms, risk of acquisition and the availability of treatment.' Inclusion of new paragraph: <ul style="list-style-type: none"> Powered hoods must be: <ul style="list-style-type: none"> • Single use (disposable) and fluid repellent • The filter must be enclosed with the exterior and the belt able to withstand disinfection with 10,000 ppm av Chlorine

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		<ul style="list-style-type: none"> • Glossary <ul style="list-style-type: none"> Addition of new terms <ul style="list-style-type: none"> • Mucocutaneous exposure • Non-intact skin • Non-intact skin exposure • Safer sharp • Sharps incident • Significant sharps incident • Significant occupational exposure Update to existing terms <ul style="list-style-type: none"> • Recapping/Re-sheathing • Sharps • Sharps injury • Appendix 10 – Management of occupation exposure incidents <ul style="list-style-type: none"> Update to first bullet in the bottom box to now include ‘For investigation this should be proportionate to the potential severity of the incident.’ • Appendix 11 - Update to title to ‘Optimal patient placement and RPE requirements for Infectious agents.’ <ul style="list-style-type: none"> Update to introductory text. Update to Footnote 3.

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February 2018	3.9	<ul style="list-style-type: none"> • Chapter 1.9 – Waste Updated to ensure follows SHTN3. Under section 'Safe waste disposal at care area level' the reference to liquid waste has been changed to 'placing in an orange lidded leak-proof bin' instead of 'placing in a healthcare waste bag'. • Chapter 2 Inclusion of further details on patient placement (Chapter 2.1) and management of care environment (Chapter 2.3) by hospital, care home and primary care/outpatient settings and PPE/RPE (Chapter 2.4) giving further detail on respirator use and removal. • Appendix 8 – Management of linen at care area Update made to asterisk in the inner bag column for heat labile laundry. It now includes 'Colour coding for personal laundry bags may vary locally'. • Appendix 10 - Management of occupation exposure incidents Change to guidance for contact lenses. • Appendix 11 - Optimal patient placement and RPE requirements for Infectious agents Changes to the layout and content which is an 'Aide Memoire for optimum patient placement and Respiratory Protective Equipment (RPE) for infectious agents whilst a patient is in hospital'.

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March 2018	3.10	<ul style="list-style-type: none"> • Chapter 2.3 – Safe management of the care environment The requirement for 'twice daily' decontamination has been changed to 'at least daily' and now reads. 'Patient isolation/cohort rooms/area must be decontaminated at least daily, this may be increased on the advice of IPCTs/HPTs. These areas must be decontaminated using either:' The word 'Vacated' has also been added and now reads 'Vacated rooms should also be decontaminated following an AGP'.
April 2018	3.11	<ul style="list-style-type: none"> • Chapter 1.7 – Safe management of Linen In the section Clean Linen the third bullet point has been removed. 'Clean linen that is deemed unfit for re-use e.g badly torn, should be disposed of locally or returned to the laundry for disposal' and replaced by 'All linen that is deemed unfit for re-use e.g torn or heavily contaminated, should be categorised at the point of use and returned to the laundry for disposal.'
July 2018	3.12	<ul style="list-style-type: none"> • Section 2.3 Safe management of patient care equipment in an isolation/cohort area Last paragraph inclusion of 'theatre recovery'. Bullet 5 – Change of wording from 'usually about' to 'a minimum of' • Section 2.4 Safe management of the care environment National Minimum Risk Categorisation' changed to 'National Priority Risk Categorisation' Sentence beginning 'All tight fitting RPE; changed to 'Powered respirator hoods'

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		<ul style="list-style-type: none"> • Section 2.5 Infection prevention and control in care of the deceased Paragraph 3 word 'harbouring' changed to 'have' • Appendices Titles updated to include: 1-11 – Best practice 12-15 –Mandatory • Appendix 14 – HIIAT Inclusion of paragraph in table for Part 2. 'Following assessment by the NHS Board and HPS one collective HIIORT may be submitted for instances where multiple areas within a site are affected by the same infection such as seasonal influenza.' • Inclusion of Addendum for Infection Prevention and Control within Neonatal Units (NNUs)
August 2018	3.13	<ul style="list-style-type: none"> • Changes made to Addendum for Infection prevention and control within neonatal units (NNU) 4.1 Placement of neonates/assessment for infection risk. The first sentence now includes '(this is currently under review)' when referring to the Assessment for infection risk. The link to the 'Assessment for infection risk' page has been updated to say 'The clinical risk assessment (CRA) for microbiological screening on admission or transfer in the NNUs is currently under review by the Neonatal Units

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		<p>Infection Reduction Steering Group. This will be available in late September 2018.'</p> <p>4.2 Healthcare infections, incidents, outbreaks and data exceedance. The second bullet point has been changed from 'three or more cases of colonisation with same organisms' to 'two or more cases of colonisation with the same organism.'</p>
March 2019	3.14	<ul style="list-style-type: none"> • Introduction <p>New bullet:</p> <ul style="list-style-type: none"> • Improve the application of knowledge and skills in infection prevention and control <ul style="list-style-type: none"> • Section 1.2 – Hand Hygiene <p>Updates to 'Before performing Hand Hygiene'</p> <ul style="list-style-type: none"> • 'bare below the elbows' added to first bullet point • Inclusion of note in second bullet point *For health and safety reasons, Scottish Ambulance Service Special Operations Response Teams (SORT) in high risk situations require to wear a wristwatch. • Inclusion of new paragraph 'Where there is no running water available or hand hygiene facilities are lacking, staff may use hand wipes followed by ABHR and should wash their hands at the first available opportunity.' • Removal of paragraph 'Hand wipes should not be used by staff in the hospital/care setting for hand hygiene unless there is no running water

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		<p>available. In this circumstance staff may use hand wipes followed by ABHR and should wash their hands at the first available opportunity.'</p> <p>Update to Skin care</p> <p>New bullet</p> <ul style="list-style-type: none"> • Staff with skin problems should seek advice from Occupational Health or their GP. <p>Update to Surgical hand antisepsis</p> <p>Inclusion of 'Single use' before nail brushes in bullet 2</p> <ul style="list-style-type: none"> • Section 1.4 – PPE <p>New bullet added to 'All PPE should be:'</p> <ul style="list-style-type: none"> • changed immediately after each patient and/or following completion of a procedure or task; and <p>Removal of 4th bullet for 'Gloves should be'</p> <ul style="list-style-type: none"> • to avoid excessive sweating and interference with dexterity.' <p>New bullet added to 'Full body gowns/fluid repellent coveralls '</p> <ul style="list-style-type: none"> • Worn when a disposable apron provides inadequate cover for the procedure/task being performed. <p>New bullet added to 'Eye/face protection'</p> <ul style="list-style-type: none"> • 'Not be touched when worn.'

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		<p>Update to 3rd bullet in Footwear. Inclusion of text 'in these areas have a decontamination schedule with responsibility assigned.'</p> <p>New bullet in 'Headwear'</p> <ul style="list-style-type: none"> • removed before leaving the theatre/clean room • Appendix 12 – Application of infection control precautions in the deceased Updated to reflect the new HSE Guidance Managing infection risks when handling the deceased: Guidance for the mortuary, post-mortem room and funeral premises, and during exhumation. • Appendix 14 – HIIAT HIIAT. Part 2: Communication. Amber Addition of the word twice to the paragraph 'Review and report HIIAT at least twice weekly or as agreed between IMT and HPS'. • Appendix 15 – HIIORT Page 1. Box at top – Inclusion of initial assessment Section 2 – Taken out total number of beds and total number of beds occupied. Section 3 – Inclusion of further information in the case definition box Addition of 2 new boxes – implementation of the NIPCM and providing information to patients/relatives Section 5 – Updates to Press statement box

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		<p>Page 2</p> <p>Box at top – Updated information on completion of section</p> <ul style="list-style-type: none"> Appendix 16 – New appendix: ‘Best Practice - Aide Memoire for levels of PPE for healthcare workers when providing patient care’
23 August 2019		<ul style="list-style-type: none"> Addition of Aide-memoire - Prevention and management of healthcare water-associated infection incidents/outbreaks as an interim measure until delivery of comprehensive evidence-based guidance which will form Chapter 4 of the National Infection Prevention and Control Manual (NIPCM) on the built environment and decontamination. Publication of Clinical Risk Assessment for use in neonatal units after being piloted by NHS boards.
31 August 2019		<ul style="list-style-type: none"> Addition of Aide-memoire: Prevention and management of healthcare ventilation system-associated infection incidents/outbreaks as an interim measure until delivery of comprehensive evidence-based guidance which will form Chapter 4 of the National Infection Prevention and Control Manual (NIPCM) on the built environment and decontamination.
8 November 2019		<ul style="list-style-type: none"> Development process/methodology <p>The methodology has been updated to include:</p> <ul style="list-style-type: none"> two-person systematic methodology grading of recommendations updated to include new system based on HICPAC grading

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		<ul style="list-style-type: none"> new search strategies including this for CINHAL included for select literature reviews - more to be included as work progresses
8 Nov 2019		<ul style="list-style-type: none"> Aerosol Generating Procedures (AGPs) Literature review <p>A review of the extant scientific literature regarding aerosol generating procedures (AGPs) in the healthcare environment has been undertaken to form evidence-based recommendations for practice. The specific objectives of the review are to determine:</p> <ul style="list-style-type: none"> What is an aerosol generating procedure (AGP)? Which procedures are considered to be aerosol generating?
29 Nov 2019		<ul style="list-style-type: none"> Appendix 13 - Mandatory Alert Organism/Condition list <p>Following consultation Appendix 13 has been updated with the following changes:</p> <p>Inclusion of new sentence in Paragraph 2. 'Further information on optimal patient placement and use of respiratory protective equipment is available in Appendix 11 of the NIPCM. Pathogen specific information and links to available guidance can be found in the NIPCM A-Z of pathogens.</p> <p>Table 1</p> <ul style="list-style-type: none"> 'Clostridium' changed to 'Clostridiodes'. Staphylococcus aureus locations changed from 'All care settings' to 'High risk units e.g ICU/PICU. ESBL producers locations changed from 'All clinical/care settings' to 'High risk units e.g ICU/PICU/NICU, oncology/haematology'.

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		<ul style="list-style-type: none"> • New bacteria included 'Meticillin-resistant Staphylococcus aureus (MRSA) and borderline oxacillin-resistant S. aureus (BORSA)'. • Carbapenem-resistant Enterobacteriaceae (CRE) changed to 'Carbapenem-resistant organisms (CRO). <p>Table 6</p> <p>Major changes made to text and table</p>
2 December 2019		<ul style="list-style-type: none"> • Appendix 11 - Best Practice - Aide Memoire for Optimal Patient Placement and Respiratory Protective Equipment (RPE) for Infectious agents whilst a patient is in hospital <p>Inclusion of bacteria with exceptional resistance directing to Appendix 13.</p> <p>Inclusion of High Consequence Infectious disease (HCID) directing to PHE List of HICD.</p> <p>Updates to VRE and VHF.</p> <p>Updates to footnote 3, 5 and 7</p>
30 January 2019		<ul style="list-style-type: none"> • Section 2.3 - Management of the care environment - decontamination of vacated rooms following an AGP. <p>The advice has been updated with regard to number of air changes per hour. It now reads:</p> <p>'Vacated rooms should also be decontaminated following an AGP. Clearance of infectious particles after an AGP is dependent on the ventilation and air change within the room. In an isolation room with 10-12 air changes per hour (ACH) a</p>

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		<p>minimum of 20 minutes is considered pragmatic; in a side room with 6 ACH this would be approximately one hour. Advice should be sought from IPCT.'</p>
24 Feb 2020		<ul style="list-style-type: none"> • Literature reviews – eye/face protection and surgical face masks <p>The PPE literature reviews for eye/face protection and surgical face masks have been updated to include ‘a full face shield can be used in place of goggles/visor and a fluid-resistant surgical mask for protection against droplet splash and spray’.</p>
11 Mar 2020		<ul style="list-style-type: none"> • Updated AGP added to Appendix 11 and AGP literature review <p>An update has been made and High flow nasal oxygen (HFNO) has been added to Appendix 11 and the AGP literature review as an aerosol generating procedure.</p> <ul style="list-style-type: none"> • Section 1.4 – PPE <p>Video for donning and doffing of PPE for healthcare workers in primary care settings is added.</p>
12 Mar 2020		<p>Update to requirements for using a full face visor as PPE/RPE</p> <ul style="list-style-type: none"> • Section 1.4 – PPE <p>Fluid Resistant Type IIR surgical face masks must be:</p> <ul style="list-style-type: none"> • worn if splashing or spraying of blood, body fluids, secretions or excretions onto the respiratory mucosa (nose and mouth) is anticipated/likely; • a full face visor may be used as an alternative to fluid resistant Type IIR surgical face masks to protect against splash or spray. However, a full face visor alone is not sufficient when droplet precautions are being employed

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		<p>and a fluid resistant Type IIR surgical face mask and eye/face protection must be worn as outlined in Appendix 16.</p> <ul style="list-style-type: none"> Section 2.4 <p>All tight fitting RPE i.e FFP3 respirators must be:</p> <ul style="list-style-type: none"> Compatible with other facial protection used i.e. protective eyewear so that this does not interfere with the seal of the respiratory protection. Regular corrective spectacles are not considered adequate eye protection. If wearing a valved, non-shrouded FFP3 respirator a full face shield/visor must be worn. <p>Poster below gives further information on compatibility of facial hair and FFP3 respirators and can be used when fit testing and fit checking.</p>
30 Mar 2020		<ul style="list-style-type: none"> Appendix 11 <p>Update to AGPs list in Appendix 11, footnote 3</p> <p>The UK COVID-19 guidance updated following NERVTAG advice and the following AGPs have been added:</p> <p>Bronchoscopy and upper ENT airway procedures that involve suctioning.</p> <p>Upper Gastro-intestinal Endoscopy where there is open suctioning of the upper respiratory tract</p>
13 May 2020		<ul style="list-style-type: none"> Addition of SBAR assessing the evidence base for medical procedures which create higher risk of respiratory infection transmission from patient to healthcare worker.

Date	Version	Changes
		<p>The SBAR and supplementary information reviews the current evidence base on medical procedures that create a higher risk of respiratory infection transmission from patient to healthcare worker.</p> <p>The recommendations in Table 1 of the SBAR are used as the AGP list for footnote 4 of Appendix 11 of the NIPCM.</p> <ul style="list-style-type: none"> Appendix 11 - Best Practice Aide Memoire for patient placement and RPE for infectious agents while a patient is in hospital <p>The list of AGPs in footnote 4 of Appendix 11 has been updated after review of the current scientific literature and was agreed in collaboration with experts from New and Emerging Respiratory Virus Threats Advisory Group (NERVTAG) and Public Health England (PHE).</p>
13 Jul 2020		<ul style="list-style-type: none"> Updated Hand Hygiene Literature reviews - Products, Skin Care, Surgical Hand Antisepsis in the clinical area <p>These 3 literature reviews have been reviewed and updated as part of the planned review process. Lists of all updates made can be viewed in the Version history section.</p>
13 Jul 2020		<ul style="list-style-type: none"> Appendix 11 - Best Practice Aide Memoire for patient placement and RPE for infectious agents while a patient is in hospital <p>Footnote 3 of Appendix 11 now has the updated list of procedures classed as AGPs based on rapid review and SBAR in consultation with NERVTAG.</p>

Date	Version	Changes
23 Jul 2020		<ul style="list-style-type: none"> <li data-bbox="891 256 1957 331">• New literature review Hand Hygiene: Hand washing, hand rubbing and indications for hand hygiene <p data-bbox="965 357 2040 475">Three reviews (Hand washing V2.0 2016, Indications for Hand Hygiene V2.0 2016, and Use of Alcohol Based Hand Rub V2.0 2016) were amalgamated into one review using the two-person NIPCM methodology.</p> <p data-bbox="965 501 1554 528">New recommendations were added in for:</p> <p data-bbox="965 553 1565 580">When should hand hygiene be performed?</p> <p data-bbox="965 606 1644 633">How should hands be dried after hand washing?</p> <p data-bbox="965 659 2007 734">What is the evidence regarding the wearing of jewellery in relation to hand hygiene, including Jewellery worn for religious reasons?</p> <p data-bbox="965 759 1980 834">What are the requirements for sink design, provision and types of tap for clinical hand wash?</p> <p data-bbox="965 860 1995 935">Is the use of alcohol based hand rubs suitable for individuals who abstain from alcohol for religious reasons?</p>
4 Aug 2020		<ul style="list-style-type: none"> <li data-bbox="891 983 1756 1010">• Updated literature review: Blood and body fluid spillages <p data-bbox="965 1035 2040 1153">This literature review has been reviewed and updated as part of the planned review process. Lists of all updates made can be viewed in the Version history section.</p>
6 Aug 2020		<ul style="list-style-type: none"> <li data-bbox="891 1190 1653 1217">• Updated literature review: Safe disposal of waste <p data-bbox="965 1243 2040 1361">This literature review has been reviewed and updated as part of the planned review process. Lists of all updates made can be viewed in the Version history section.</p>

Date	Version	Changes
17 Aug 2020		<ul style="list-style-type: none"> Updated RPE literature review <p>The RPE literature review has been reviewed using the two-person systematic review methodology.</p> <p>New questions added regarding fit testing, valved respirators, respirator standards, powered respirators and respirator storage.</p>
3 Sep 2020		<ul style="list-style-type: none"> Appendix 11 - Best Practice Aide Memoire for patient placement and RPE for infectious agents while a patient is in hospital <p>The SARSCoV-2/COVID-19 entry for optimal patient placement and RPE has been updated and now reads.</p> <ul style="list-style-type: none"> Optimal placement whilst patient is considered infectious and until resolution of symptoms: High Risk (Red) Pathway & ideally single ensuite room or confirmed COVID19 cohort. Respiratory protection (RPE) for healthcare workers whilst patient is considered infectious: Fluid Resistant surgical facemask (FRSM) for routine care and FFP3 or hood for AGPs
4 Sep 2020		<ul style="list-style-type: none"> Section 2.4 PPE and RPE <p>Section 2.4 has been updated after review of the RPE literature review</p> <p>Some sections been moved around to improve readability.</p> <p>Updates made:</p> <p>All tight fitting RPE i.e FFP3 respirators must be:</p> <ul style="list-style-type: none"> Single use (disposable) and fluid-resistant. NB Valved respirators maybe shrouded or unshrouded. Respirators with unshrouded valves are not

Date	Version	Changes
		<p>considered to be fluid-resistant and therefore should be worn with a full face shield if blood or body fluid splashing is anticipated. Fit tested (by a competent fit test operator) on all healthcare staff who may be required to wear a respirator to ensure an adequate seal/fit according to the manufacturers' guidance.</p> <ul style="list-style-type: none"> • Glossary The definition for airborne particles (aerosols) has changed to: 'Very small particles that may contain infectious agents. They can remain in the air for long periods of time and can be carried over long distances by air currents. Aerosols can be released during aerosol generating procedures (AGPs).'
4 Sep 2020		<ul style="list-style-type: none"> • Section 1.2 Hand Hygiene The following changes have been made to section 1.2 to reflect changes in the hand hygiene literature reviews Before performing hand hygiene: <ul style="list-style-type: none"> • 'bracelets or bangles such as the Kara which are worn for religious reasons should be able to be pushed higher up the arm and secured in place); Skin care: 'Warm/tepid water should be used to reduce the risk of dermatitis; hot water should be avoided. Pat hands dry thoroughly after hand washing using disposable paper towels; avoid rubbing which may lead to skin

Date	Version	Changes
		<p>irritation/damage. Do not use refillable dispensers or provide communal tubs of hand cream in the care setting.</p> <p>Surgical hand antisepsis:</p> <p>Nail brushes should not be used for surgical hand antisepsis. Nail picks (single-use) can be used if nails are visibly dirty. Soft, non-abrasive, sterile (single-use) sponges may be used to apply antimicrobial liquid soap to the skin if licensed for this purpose. ABHR can be used between surgical procedures if licensed for this use or between glove changes if hands are not visibly soiled.</p>
9 Oct 2020		<ul style="list-style-type: none"> <li data-bbox="875 646 1995 719">• Literature reviews for Transmission Based Precautions Definitions and Safe Management of Linen <p data-bbox="925 746 1944 820">These literature reviews have been reviewed and updated as part of the programmed review schedule.</p>
19 Oct 2020		<ul style="list-style-type: none"> <li data-bbox="875 853 1995 927">• SBAR: Assessing the evidence base for medical procedures which create a higher risk of respiratory transmission from patient to healthcare worker. <p data-bbox="925 954 1973 1027">This SBAR has been updated to include the footnote for Respiratory Tract Suctioning.</p> <p data-bbox="925 1054 2045 1342">'The available evidence relating to Respiratory Tract Suctioning is associated with ventilation. In line with a precautionary approach open suctioning of the respiratory tract regardless of association with ventilation has been incorporated into the current (COVID-19) AGP list. It is the consensus view of the UK IPC cell that only open suctioning beyond the oro-pharynx is currently considered an AGP i.e. oral/pharyngeal suctioning is not an AGP. The evidence on respiratory tract suctioning is currently being reviewed by the AGP Panel.'</p>

Date	Version	Changes
3 Nov 2020		<ul style="list-style-type: none"> Scottish COVID-19 Infection Prevention and Control Addendum for Acute Settings now available <p>The purpose of this addendum is to provide COVID-19 specific IPC guidance for NHS Scotland on a single platform.</p>
9 Nov 2020		<ul style="list-style-type: none"> Appendix 5 - Glove selection chart <p>This chart has been updated and is now presented in a more accessible format to enable use in other non-hospital care settings for example care homes.</p>
11 Nov 2020		<ul style="list-style-type: none"> Literature reviews on surgical face mask and eye/face protection for SICPs and TBPs <p>The SICPs literature reviews have been updated including new questions on TBPs and have been issued as new versions.</p> <p>Updates have been made within the PPE section of the manual further to the recommendations in the literature reviews.</p>
10 Dec 2020		<ul style="list-style-type: none"> COVID-19 updates to Chapter 3 and Acute Addendum <p>Updates have been made to Chapter 3 and it now includes sections on COVID-19.</p> <p>The COVID-19 acute addendum has been updated and now includes a section on PPE requirements for delivery of COVID-19 vaccinations and section on outbreaks.</p>

Date	Version	Changes
23 Dec 2020		<ul style="list-style-type: none"> Scottish COVID-19 care home infection prevention and control addendum added to NIPCM providing COVID-19 specific infection and prevention control (IPC) guidance for care home staff and providers on a single platform to improve accessibility.
11 Jan 2021		<ul style="list-style-type: none"> Scottish COVID-19 Community Health and Care Settings Infection Prevention and Control Addendum added to NIPCM providing specific IPC guidance for community health and care settings on a single platform improving accessibility for users. The guidance within this addendum is in line with the UK IPC remobilisation guidance however some deviations for NHS Scotland exist.
24 Feb 2021		<ul style="list-style-type: none"> Appendix 13 Mandatory Alert organisms/conditions Table 1 has been updated for Staphylococcus aureus. It now says: 'Boards should implement local surveillance to allow appropriate intervention where a data exceedance is recognised for common circulating strains and where 2 or more cases with the same resistant strain are identified. This might include contact with the ward or development of SPC charts to ensure clusters would be detected and investigated appropriately. NB: S.aureus bacteraemia must be investigated in all wards/departments as per National surveillance protocol.' New management of care equipment literature review for SICPs and TBPs A new literature review has been produced that covers SICPs and TBPs and replaces the separate literature reviews.

Date	Version	Changes
		<ul style="list-style-type: none"> • New Aprons and Gowns literature review for SICPs and TBPs <p>A new aprons and gowns literature review covering SICPs and TBPs has been produced. This replaces the separate SICPs and TBPs literature reviews.</p> <p>The PPE sections of the manual for SICPs and TBPs have been updated to reflect the literature review recommendations.</p>
24 May 2021		<ul style="list-style-type: none"> • Infection Prevention and Control Manual for older people and adult care homes (Care Home IPCM) <p>In order to support care homes successfully adopt and implement the NIPCM, this context specific Care Home Infection Prevention and Control Manual (CH IPCM) has been co-produced with national and local stakeholders.</p> <p>The content of the CH IPCM is completely aligned to the evidence based NIPCM and is intended to be used by all those involved in residential care provision.</p> <p>The CH IPCM contains chapters on Standard Infection Control Precautions (SICPs) and Transmission Based Precautions (TBPs).</p>
9 Aug 2021		<ul style="list-style-type: none"> • Updated literature review development process and footwear literature reviews <p>The literature review development process search strategies have been updated.</p> <p>The Footwear literature review has been updated using the 2 person methodology. 5 additional questions have been included and 2 existing questions have been modified.</p>

Date	Version	Changes
18 Aug 2021		<ul style="list-style-type: none"> • PPE - Headwear literature review and recommendations <p>The headwear literature review has been updated and includes new questions and recommendations. These include a new bullet:</p> <p>Headwear must be:</p> <ul style="list-style-type: none"> • worn as PPE for procedures where splashing/spraying of body fluids is anticipated, and as source control when performing clean/aseptic procedures where risk of infection is deemed to be high.
16 Sept 2021		<ul style="list-style-type: none"> • Updated Literature Review - Cough etiquette/respiratory hygiene <p>This literature review has been reviewed and updated with the following changes made:</p> <p>The inclusion of 'In the absence of disposable tissues and hand hygiene facilities, individuals should cough or sneeze into their elbow/sleeve'</p> <p>Addition of 'Avoid touching face (nose, mouth and eyes)'</p> <p>New question added 'What support is required for patients with restricted mobility or additional needs in understanding cough etiquette principles?'</p>
20 Oct 2021		<ul style="list-style-type: none"> • Updated patient placement literature review and change to chapter text <p>The standard infection and transmission based precautions patient placement, isolation and cohorting literature review has been updated and the following changes made to the NIPCM.</p>

Date	Version	Changes
		<p>Chapter 1</p> <p>Inclusion of new paragraph:</p> <p>'Patients who may present a particular cross-infection risk should be isolated on arrival and appropriate clinical samples and screening undertaken as per national protocols to establish the causative pathogen. This includes but is not limited to patients:'</p> <p>Inclusion of new bullet points:</p> <p>Who have been a close contact of a person who has been colonised or infected with CPE in the last 12 months. Who have been in contact with a confirmed COVID-19 individual and are still within the 14-day self-isolation period.</p> <p>Updated bullet points:</p> <p>With symptoms such as loose stools or diarrhoea, vomiting, fever or respiratory symptoms. Who have been hospitalised outside Scotland in the last 12 months (including those who received dialysis).</p> <p>Chapter 2</p> <p>New and updated bullets as per Chapter 1.</p> <p>New paragraph</p> <p>'When single-bed rooms are limited, patients who have conditions that facilitate the transmission of infection to other patients (e.g., draining wounds, stool incontinence, uncontained secretions) and those who are at increased risk of acquisition and adverse outcomes resulting from HAI (e.g., immunosuppression, open wounds, invasive devices, anticipated</p>

Date	Version	Changes
		<p>prolonged length of stay, total dependence on HCWs for activities of daily living) should be prioritised for placement in a single-bed room. Single-bed room prioritisation should be reviewed daily and...'</p> <p>Hospital settings:</p> <p>Updated bullet point</p> <p>'Isolation of infectious patients can be in specialised isolation facilities, single room isolation, cohorting of infectious patients where appropriate, ensuring that they are separated by at least 2 metres with the door closed.'</p> <p>Cohorting in hospital</p> <p>New paragraph in discontinuing isolation.</p> <p>'Clinical and molecular tests to show the absence of microorganisms may be considered in the decision to discontinue isolation and can reduce isolation times. The clinical judgement and expertise of the staff involved in a patient's management and the Infection Prevention and Control Team (IPCT) or Health Protection Team (HPT) should be sought on decisions regarding isolation discontinuation.'</p> <p>Primary care/outpatient settings</p> <p>Updated bullet point</p> <p>'Patients attending these settings with suspected/known infection/colonisation should be prioritised for assessment/treatment e.g. scheduled appointments at the start or end of the clinic session. Infectious patients should be separated from other patients whilst awaiting assessment and during care management by at least 2 metres.'</p>

Date	Version	Changes
29 Nov 2021		<ul style="list-style-type: none"> • Winter (2021/22) Respiratory Infections in Health and Care Settings Infection Prevention and Control Addendum <p>This guidance has been developed during the ongoing COVID-19 pandemic recognising the likelihood of a surge in other respiratory viruses in addition to COVID-19 over the winter season of 2021/22 and supersedes the 3 COVID-19 addenda (Acute, Care home and Community health and care settings) first published in October 2020.</p> <p>Key changes as we move from the COVID-19 addenda to Winter (21/22), Respiratory Infections in Health and Care Settings Infection Prevention and Control (IPC) Addendum are:</p> <p>Removal of the 3 distinct COVID-19 care pathways (high/red, medium/amber and low/green) to respiratory and non-respiratory pathways.</p> <p>A return to Standard Infection Control Precautions (SICPs) and Transmission Based Precautions (TBPs) as per National Infection Prevention and Control Manual (NIPCM) and the Care Home Infection Prevention and Control Manual (CHIPCM).</p> <p>An algorithm to support placement of service users within health and care settings.</p> <p>Respiratory screening questions to include COVID-19 AND other respiratory pathogens.</p> <p>Ongoing Rapid testing for COVID-19 AND to now include other respiratory pathogens in some settings</p>

Date	Version	Changes
1 Dec 2021		<ul style="list-style-type: none"> 3 new appendices added to NIPCM <p>The NIPCM now includes</p> <p>Appendix 17 - Aerosol Generating Procedures (AGPs) and Post AGP Fallow Time (PAGPFT)</p> <p>Appendix 18 - Physical Distancing in health and care settings: A pandemic measure deployed in 2020 during the COVID-19 Pandemic</p> <p>Appendix 19 - Elective Surgery IPC Principles</p>
2 Dec 2021		<ul style="list-style-type: none"> Section 1.4 PPE <p>The NIPCM has been updated and states 'Transparent face masks may be used to aide communication with patients in some settings'.</p> <p>Further guidance including mask specifications is available.</p>
15 Dec 2021		<ul style="list-style-type: none"> COVID-19 literature reviews and SBARs moved from PHS site to the NIPCM. <p>The literature reviews and SBARs produced by ARHAI as part of the COVID-19 pandemic response have been moved from the PHS website to the NIPCM and can be accessed at the link below.</p> <p>Pandemic response literature reviews.</p>
13 Jan 2022		<ul style="list-style-type: none"> Update of surgical face masks literature review <p>The surgical face masks literature review has been updated to include reference to transparent face masks.</p> <p>Transparent face masks guidance is now provided in the manual.</p>

Date	Version	Changes
		<ul style="list-style-type: none"> Updated literature review: PPE Aprons and Gowns <p>The aprons and gowns literature review has been updated based on expert opinion.</p> <p>The recommendation 'How should aprons/gowns be donned?' has been updated to say:</p> <p>'When worn as part of contact precautions, an apron (or gown if excessive splash or spray is anticipated) should be donned for direct care delivery and contact with the patient's care environment.'</p>
17 Jan 2022		<ul style="list-style-type: none"> Updated TBP door posters and aide memoire <p>The posters for airborne, contact and droplet precautions and aide memoire have been updated to take account changes made to the aprons and gowns literature review.</p>
24 Jan 2022		<ul style="list-style-type: none"> Update to Appendix 14 - HIIAT <p>The HIIAT form has been updated to include reference to the ORT system rather than the previous reporting mechanism.</p>
4 Mar 2022		<ul style="list-style-type: none"> Updated SICPs Occupational Exposure Literature review <p>The occupational exposure literature review has been reviewed and includes 1 new objective and 2 new recommendations.</p> <p>New objective - What is the definition of an "occupational exposure"?</p> <p>This objective was split from the definition of a "significant occupational exposure" to allow clarity between the two definitions.</p>

Date	Version	Changes
		<p>New recommendations</p> <p>What occupational health screening and protection should be offered to healthcare workers?</p> <p>‘Risk assessment of job roles should be undertaken to identify areas where occupational exposure may occur. There should also be policies and procedures in place to update these risk assessments when necessary.</p> <p>Employers are required to eliminate or reduce workplace risks where it is reasonably practicable.’</p> <p>What is the risk to healthcare workers of blood borne virus (BBV) transmission following occupational exposure?</p> <p>‘There have been a total of 23 HCV seroconversions in HCWs reported in the UK, with the most recent reported in 2015. All of these seroconversions were the result of percutaneous exposures from hollowbore needles. A single HIV seroconversion in a HCW was reported in the UK in 1999, again from percutaneous exposure from a hollowbore needle. There have been no reported seroconversions of HBV in HCWs in the UK.’</p>
14 Mar 2022		<ul style="list-style-type: none"> Section 1.10 Occupational Exposure <p>The occupational exposure chapter has been updated to include definitions for Occupational Exposure and Exposure Prone Procedures (EPPs).</p>
31 Mar 2022		<ul style="list-style-type: none"> Appendix 13 - NHSScotland Alert organism/Condition list <p>Table 6- Resistant organisms (exceptional phenotypes) of Appendix 13 has had minor amendments made for:</p>

Date	Version	Changes
		<p>Pseudomonas aeruginosa</p> <p>Staphylococcus aureus</p> <p>Coagulase-negative staphylococci</p> <p>Corynebacterium spp</p> <p>All enterococci</p> <ul style="list-style-type: none"> • New chapter now available - Chapter 4 - Infection Control in the Built Environment and Decontamination <p>Chapter 4 is in its early stages of development and currently is a document repository for evidence reviews and tools related to IPC in the built environment and decontamination.</p> <p>It does not currently fall into mandatory requirements for the NIPCM.</p> <p>Content going forward will be developed via the ARHAI Scotland Infection Control in the Built Environment and Decontamination (ICBED) programme informed by stakeholder engagement and requirements, learning from NHS Assurance programme and outbreaks and incidents.</p>
8 Apr 2022		<ul style="list-style-type: none"> • Appendix 3 - Surgical scrubbing <p>Appendix 3 has been updated and includes an additional step (step 11). This step adds in an additional scrub to the mid forearms before the rinse stage (step 12).</p>

Date	Version	Changes
10 Jun 2022		<ul style="list-style-type: none"> • Updated HAI incidents and outbreaks literature review and practice recommendations The HAI incidents and outbreaks literature review has been updated with reworded and new recommendations made. Chapter 3.1 - new definitions added and rewording of some existing definitions. Chapter 3.2 - inclusion of paragraphs on surveillance systems Chapter 3.2.1 - addition of new second bullet and bullet about monitoring. Chapter 3.2.2 - inclusion of bullet and sub bullets on infection incident investigation, control measures, significant adverse events. Inclusion of section on communication • Updated gloves literature review and practice recommendations The gloves literature review has been reviewed and a number of amendments made to recommendations. The SBARs for use of gloves for environmental cleaning and administration of vaccinations have now been removed and the contents have been incorporated into this literature review. • Appendix 5 - glove selection flowchart has been updated for clarity of wording. • Section 1.4 PPE The bullet points in section 1.4 of the NIPCM for gloves have been reworded with the addition of 2 new bullets: Gloves are a single-use item and should be changed immediately after each use or upon completion of a task, not be worn as a substitute to hand hygiene.

Date	Version	Changes
13 Jun 2022		<ul style="list-style-type: none"> Updated Neonatal HAI incidents and outbreaks literature review <p>This literature review has been updated and the following changes made:</p> <p>The research question, 'How should potential healthcare infection incidents be assessed?' has been reworded to say; 'How should suspected healthcare infection incidents be assessed?</p> <p>New research question added; How should a healthcare infection incident be 'closed', with lessons learned, recorded and disseminated nationally?</p> <p>A number of recommendations have been rephrased and new recommendations have been added. The grading of existing recommendations has also been changed to reflect the quality of the evidence-base used to inform them.</p> <p>The Neonatal addendum has been updated to include these changes.</p>
15 Jun 2022		<ul style="list-style-type: none"> Appendix 13 - Alert organism/condition list <p>Table 6: Resistant organisms (unusual phenotypes) - (amended version based on 'EUCAST Expert rules and intrinsic resistance, 2021', taking into account the epidemiology of Scottish isolates) has been updated and new paragraphs added after the table</p>
29 Jun 2022		<ul style="list-style-type: none"> New Appendix 22 - Community IPC COVID-19 pandemic <p>Appendix 22 forms part of the transition from the Winter Respiratory addendum to using SICPs and TBPs in the NIPCM. It should be used by health and care settings to manage the current COVID-19 pandemic measures still in place.</p>

Date	Version	Changes
11 July		<ul style="list-style-type: none"> • NIPCM Relaunch 11 July 2022 • Removal of COVID-19 Respiratory Addendum • New Appendix 21 and 22 <p>Appendix 21 - COVID-19 Pandemic Controls for Acute NHS settings including Scottish Ambulance Service (SAS)</p> <p>Appendix 22 - COVID-19 Community IPC</p> <p>The NIPCM should now be used along with Appendix 21 and 22 which summarise the remaining pandemic measures which exist in addition to the NIPCM and provide links to helpful resources, guidance and policy documents.</p>
5 Aug 2022		<ul style="list-style-type: none"> • Appendix 13 - Mandatory Alert organism/condition list <p>The second column of Tables 1 - 5 have been updated to outline both the locations and patient cohorts relevant to each pathogen or condition. The following have been added:</p> <p>Burkholderia spp.</p> <p>Staphylococcus capitis</p> <p>SARS-CoV-2</p> <p>Cryptococcus spp.</p> <p>scalded skin syndrome</p> <p>adenoviral conjunctivitis</p> <p>Table 6 has been updated in-line with EUCAST expert rules and expected phenotypes. The footnotes for this table have also been amended.</p>

Date	Version	Changes
22 Aug 2022		<ul style="list-style-type: none"> Section 3.7.5 and 3.9.2 COVID-19 testing during an outbreak and Replacing Transmission based precautions with daily testing, have been updated as per DL (2022)29.
22 Aug 2022		<ul style="list-style-type: none"> Appendix 21 - COVID-19 - Pandemic Controls for Acute NHS settings including Scottish Ambulance Service (SAS), Dental Services Updated to include changes made to COVID-19 testing requirements in line with DL 2022(29) issued on 22nd August 2022.
1 Sep 2022		<ul style="list-style-type: none"> Appendix 16 - Selection of Personal Protective Equipment (PPE) by Healthcare Workers (HCWs) during the provision of patient care Reviewed and general rewording of sections taken place. Changes have been made to the following sections: Aprons/gowns Inclusion of detail on when a gown should be worn. Additional information on wearing for indirect/direct patient care and immediate environment. Doffing information updated Eye/face protection Addition of wearing when dealing with a high consequence infectious disease Fluid resistant surgical masks (FRSM) Addition of wearing for AGPs

Date	Version	Changes
		<p>Respiratory Protective Equipment (RPE)</p> <p>Addition of reference to a fit-tested FFP3 respirator or powered respirator hood</p>
30 Sep 2022		<ul style="list-style-type: none"> Appendix 11 - Best Practice - Aide Memoire for Optimal Patient Placement and Respiratory Protective Equipment (RPE) for Infectious agents whilst a patient is in hospital <p>Following review, several changes to Appendix 11 have been made. General rewording of sections has taken place and pathogens have been added. The 'Modes of transmission' column and reference to pathogen colonisation under the 'Disease' column have been removed.</p>
12 Oct 2022		<ul style="list-style-type: none"> New SBAR 'Aerosol-generating procedures: current situation for Scotland' <p>A new SBAR 'Aerosol-generating procedures: current situation for Scotland' has been published, with recommendations for next steps for Scotland.</p>
27 Oct 2022		<ul style="list-style-type: none"> New PVC maintenance and insertion quality improvement literature review and bundle <p>A new PVC maintenance and insertion literature review has been produced. This replaces the Insertion and Maintenance of Peripheral Venous Catheters (PVC) literature reviews for Adults (V2.0 Sep 2014) and Neonates (V1.0 May 2018) which were amalgamated and updated using a two-person methodology to produce this new literature review.</p> <p>The PVC maintenance and insertion bundle has also been updated.</p>

Date	Version	Changes
		<ul style="list-style-type: none"> • A-Z The entry for Coronavirus disease 2019 (COVID-19) (SARS CoV-2) has been updated. This now includes incubation period, period of infectivity and exclusion period. The updated entry is in the A-Z as Severe Acute Respiratory Syndrome Coronavirus 2 (SARS CoV-2).
17 Nov 2022		<ul style="list-style-type: none"> • Update to NIPCM methodology The NIPCM 'Methodology' document has been updated to reflect the revised ARHAI Scotland governance structure and NIPCM Working Groups, and the updated literature review search strategies. Further changes to the NIPCM methodology are currently being piloted and will be updated in due course.
18 Nov 2022		<ul style="list-style-type: none"> • Updates to NIPCM – DL(2022)10 The NIPCM (Chapter 2), Care Home IPCM (TBPs) and associated Appendices (16, 21 and 22) have been updated to reflect that the advice contained within the Scottish Government's DL(2022)10 remains extant.
23 Nov 2022		<ul style="list-style-type: none"> • New poster - PVC maintenance and insertion quality improvement tool A new poster for the insertion and maintenance of peripheral venous catheters (PVCs) has been produced following the recent update of the PVC maintenance and insertion literature review. This replaces the previous recommendations poster and should be used alongside the bundle as a quality improvement tool.

Date	Version	Changes
28 Nov 2022		<ul style="list-style-type: none"> Archiving of Cystic Fibrosis literature review <p>Following stakeholder feedback the Cystic Fibrosis literature review has now been archived.</p>
1 Dec 2022		<ul style="list-style-type: none"> Updated Decontamination technologies literature review: Ultraviolet Light <p>This literature review examines the available professional literature on the use of ultraviolet light for environmental decontamination in health and care settings.</p> <p>It has been updated using the two-person methodology as described in the NIPCM Development Process and includes new objectives and recommendations.</p>
5 Dec 2022		<ul style="list-style-type: none"> Appendix 20 - Hierarchy of Controls <p>Appendix 20 has been updated to reflect each principle of the Hierarchy of Controls, for health and care settings.</p>
29 Dec 2022		<ul style="list-style-type: none"> Updated decontamination technologies literature review: wipes <p>New and rephrased objectives were included in the review and new recommendations have been added.</p>
30 Dec 2022		<ul style="list-style-type: none"> New Quality Improvement Tool (QIT) literature review - Insertion and Maintenance of Central Venous Catheters (CVC) Content <p>This literature review examines the extant scientific literature on the insertion and maintenance of central venous catheters (CVCs) in the health and care setting.</p>

Date	Version	Changes
		<p>It replaces the Insertion and Maintenance of Central Venous Catheters (CVCs) literature reviews for Adults (V3.0 Sep 2014) and Neonates (V1.0 Sep 2017) which were amalgamated and updated using a two-person methodology. Objectives have been added to address evidence on both insertion and maintenance of CVCs.</p>
18 Jan 2023		<ul style="list-style-type: none"> • Updated literature review and NIPCM/CH IPCM text - Infection Prevention and Control for Care of the deceased <p>It has been updated using the two-person methodology as described in the NIPCM Development Process and includes one new objective along with recommendations.</p> <p>These updates cover:</p> <ul style="list-style-type: none"> • Infection status and risk assessment. • Viewing, washing and dressing of bodies where a specific disease is confirmed or suspected. • Post-mortem of those suspected or confirmed with having a TSE.
26 Jan 2023		<ul style="list-style-type: none"> • Update to literature review and NIPCM content: Indications and techniques for hand hygiene <p>It has been updated using the two-person methodology as described in the NIPCM Development Process and includes updated objectives and recommendations. The NIPCM has been updated to reflect these changes.</p>
6 March 2023		<ul style="list-style-type: none"> • New bundles and posters for CVC insertion and maintenance - Neonatal, Paediatrics and Adults

Date	Version	Changes
		<p>New bundles and posters for CVC insertion and maintenance replace the CVC and neonatal CVC bundle, recommendations and other supporting tools.</p>
15 Mar 2023		<ul style="list-style-type: none"> Update to mpox guidance Version 1.4. <p>This document has been updated to reflect key changes which include:</p> <ul style="list-style-type: none"> Change to terminology, where Monkeypox will now be referred to as 'mpox' and the virus will be referred to as 'MPXV'. As per Mpox Principles for control of non-HCID mpox in the UK: 4 nations consensus statement the Advisory Committee on Dangerous Pathogens (ACDP) have advised that the whole of Clade II MPXV should now no longer be classified as a high consequence infectious disease (HCID).
20 Mar 2023		<ul style="list-style-type: none"> New Appendix 21 - COVID-19 Pandemic IPC controls for health and social care settings <p>This new Appendix 21 combines content from COVID-19 Appendix 21 for acute settings and Appendix 22 for community settings into a single pandemic appendix for health and social care settings.</p>
24 Apr 2023		<ul style="list-style-type: none"> Update to literature review: Infection Prevention and Control During the Care of the Deceased <p>This literature review has updated wording within the discussion section and recommendations to provide additional clarity. Please see the version history table in the literature review for all updates.</p>

Date	Version	Changes
15 May 2023		<ul style="list-style-type: none"> • Update to NIPCM and CH IPCM to reflect Scottish Government DL (2023)11 <p>The National Infection Prevention and Control Manual (NIPCM) and the Care Home Infection Prevention and Control Manual (CH IPCM) have been updated to reflect the Scottish Government DL (2023) 11.</p> <p>This DL outlines that the Scottish Government’s ‘Coronavirus (COVID-19): use of face coverings in social care settings including adult care homes’ guidance and the ‘Coronavirus (COVID-19): extended use of face masks and face coverings in hospitals, primary care and community healthcare settings’ guidance has now been withdrawn.</p> <p>Health and care staff should follow the guidance contained in both the NIPCM and CH IPCM. This reflects a return to pre-pandemic IPC practices.</p> <p>Reference to extended use of fluid-resistant surgical face masks and sessional face mask use has been removed from the NIPCM and CH IPCM. Please note that the decision to undertake a personal PPE risk assessment for Respiratory Protective Equipment (RPE) remains within the NIPCM and CH IPCM.</p> <p>The following sections within the NIPCM and CH IPCM have been updated to reflect the above changes:</p> <ul style="list-style-type: none"> • Chapter and Sections: 1.4, 2.4 and 3.7 (NIPCM) • Chapter 1, Section 4 (CH IPCM) • Appendix 16 • Appendix 21 <p>Reference to ‘extended use’ in the context of length of wear-time, has been changed to ‘prolonged’ use, to avoid any confusion with existing terminologies.</p>

Date	Version	Changes
24 May 2023		<ul style="list-style-type: none"> Revision and update of Care Home IPC Manual <p>The updated Care Home IPC Manual reflects on pandemic learning, emphasising the ongoing importance of Infection Prevention and Control (IPC) guidance for all those working in all care home settings.</p> <p>Appendix 19 provides details of the remaining IPC measures advised for COVID-19 that should continue to be applied alongside the manual.</p>
2 Jun 2023		<ul style="list-style-type: none"> Renumbering of Appendices <p>The Appendices within the NIPCM have been renumbered to reflect the archiving of now outdated COVID-19 materials.</p>
26 Jun 2023		<ul style="list-style-type: none"> Update to Appendix 16 - Selection of Personal Protective Equipment (PPE) by health and care workers (HCWs) during the provision of care <p>Appendix 16 has been updated to reflect changes within the NIPCM and CH IPCM.</p> <p>The changes made are:</p> <ul style="list-style-type: none"> updates related to DL (2023) 11 – step-down of Scottish Government’s extended use of face mask guidance removal of where to don and doff PPE column footnotes included for additional clarity. <p>Please note this is an interim update pending the completion of the TBPs literature review later in the year.</p>

Date	Version	Changes
29 Jun 2023		<ul style="list-style-type: none"> Update to Mpox guidance <p>The following revisions have been made to the mpox guidance.</p> <p>Minor revisions to the extant guidance following an update to the UKHSA guidance.</p> <p>No changes to content, general information section has been condensed and updated electronic links to latest UKHSA guidance as appropriate. Inclusion of link to Advisory Committee on Dangerous Pathogens (ACDP) Guidance.</p>
7 July 2023		<ul style="list-style-type: none"> Updated Hand Hygiene: Surgical Hand Antisepsis in the Clinical Setting literature review <p>Key changes include:</p> <ul style="list-style-type: none"> the addition of sections outlining legislative requirements relating to surgical hand antisepsis products, an updated definition of surgical hand antisepsis an updated recommendation, advising to wash hands with an antibacterial hand wash product prior to the first operation of the day
21 July 2023		<ul style="list-style-type: none"> Update to Surgical Hand Antisepsis Literature Review and related NIPCM content <p>Following stakeholder feedback the Surgical Hand Antisepsis Literature Review has been revisited and updated.</p> <p>Amended recommendation:</p>

Date	Version	Changes
		<p>The following recommendation was clarified to align with the Association for Perioperative Practice (AfPP) and the National Institute for Health and Care Excellence (NICE) recommended practice.</p> <ul style="list-style-type: none"> • Surgical scrubbing using an antimicrobial surgical scrub product should be used for the first surgical hand antisepsis of the day. <p>Removed recommendation:</p> <p>A recommendation was removed from the section ‘What is the correct process and technique for surgical hand antisepsis?’ as it does not form part of the surgical rubbing process.</p> <ul style="list-style-type: none"> • Hands should be washed with non-antimicrobial liquid soap and thoroughly dried after donning theatre clothing. <p>Updates to NIPCM:</p> <p>Section 1.2 of the NIPCM has been amended to take consideration of these amendments.</p> <p>Appendix 3 - Surgical Scrubbing and Appendix 4 - Surgical Rubbing have been updated to reflect these changes.</p>
30 Aug 2023		<ul style="list-style-type: none"> • Update to NIPCM and CH IPCM to reflect changes to Scottish Government COVID-19 Testing Guidance CMO Letter (SGHD/CMO(2023)12) <p>Specific reference to asymptomatic COVID-19 testing has been removed from the NIPCM and CH IPCM. Please note that COVID-19 testing for discharge to care homes/hospices is the only routine testing that has been retained as part of Scottish Government Policy.</p>

Date	Version	Changes
		<p>Testing to support clinical diagnosis and for outbreak management should continue as per the NIPCM and CH IPCM and on advice from local IPCT and HPTs. Health and care staff should follow the guidance contained in both the NIPCM and CH IPCM. This reflects a return to pre-pandemic IPC practices.</p> <p>The following sections within the NIPCM and CH IPCM have been reviewed, updated or archived to reflect a pause in asymptomatic testing and removal of any reference specific to COVID-19:</p> <p>NIPCM</p> <ul style="list-style-type: none"> • Chapter 1 Section 1.1 • Chapter 2 Section 2.1 • Chapter 3 • Neonatal Addendum <p>CH IPCM</p> <ul style="list-style-type: none"> • Chapter 1 Section 1 • Link to Public Health Scotland COVID-19 guidance included <p>Appendix 19 – COVID-19 Pandemic IPC Controls for Health and Social Care Settings – archived</p> <p>COVID-19 Hospital Testing Table - archived.</p> <p>Assessing Staff contacts of COVID-19 in NHS acute healthcare settings – archived.</p> <p>SARS-CoV-2 A-Z Entry – links updated.</p>

Date	Version	Changes
		<p>Transition document: Winter Respiratory Infection IPC addendum to NIPCM - archived.</p>
26 Oct 2023		<ul style="list-style-type: none"> • Update to recommendation for surgical hand antisepsis <p>Following publication of the Surgical Hand Antisepsis literature review version 6.1 in July 2023 we received stakeholder feedback relating to the recommendation. The literature review has been updated</p> <p>Amended recommendation:</p> <p>The following recommendation was amended following stakeholder feedback which highlighted that some settings have designed out scrub sinks to reduce the risk of water-associated infection, and consequently only use surgical hand rub products. Additionally, skin sensitivities and allergies may require avoidance of surgical hand scrub products. In these scenarios where surgical hand rubbing is the preferred option, it is expert opinion that hand hygiene using water and a non-antimicrobial liquid soap should be performed prior to entering the theatre or care area. The rationale for this is to remove physical contamination (which hand rub products are unable to do).</p> <ul style="list-style-type: none"> • Surgical scrubbing using an antimicrobial surgical scrub product should be used for the first surgical hand antisepsis of the day. Additional wording added: Or perform hand hygiene using water and a non-antimicrobial liquid soap prior to the first surgical antisepsis of the day; this can be carried out in an adjacent clinical area. <p>Section 1.2 of the NIPCM has been amended to take consideration of these amendments.</p>

Date	Version	Changes
30 Nov 2023		<ul style="list-style-type: none"> • Care Home IPC resources for both Gastrointestinal and Respiratory Illness now available <p>Two new Care Home IPC resources for Gastrointestinal Illness and Respiratory Illness have been published online today.</p> <p>These resources provide IPC advice in relation to respiratory and gastrointestinal illness and replace the previous Care Home Norovirus and Influenza guidance documents.</p>
15 Dec 2023		<ul style="list-style-type: none"> • Update to Hand Hygiene: Skin care literature review and recommendations <p>This contains an update to Section 1.2 of the NIPCM and Section 2 of the Care Home Infection Prevention and Control Manual advising that barrier creams should not be used in the workplace.</p>
21 Dec 2023		<ul style="list-style-type: none"> • Update to Personal Protective Equipment: Gloves literature review <p>The Personal Protective Equipment: Gloves literature review has been updated to reflect updates to the literature reviews on inserting and maintaining central vascular catheters and peripheral vascular catheters. One correction to a citation has also been made. Details on these changes can be found in the version history.</p> <p>The content of the literature review and associated recommendations remain unchanged.</p>
28 Dec 2023		<ul style="list-style-type: none"> • Update to wording in Standard Infection Control Precautions Literature Review: Occupational Exposure. Management of Occupational Exposure to Blood Borne Viruses

Date	Version	Changes
		<ul style="list-style-type: none"> The SICPs literature review 'Management of occupational exposure to blood borne viruses' has been updated. Under objective 'What is the recommended procedure for managing significant exposure incidents?' wording has been changed to reflect the evidence recommending against the use of antiseptics and skin washes.
11 Jan 2024		<ul style="list-style-type: none"> Update to hand hygiene products literature review and references to hand rub An update has been made to Section 1.2 of the NIPCM, Section 2 of the Care Home Infection Prevention and Control Manual and other relevant resources, advising that hand rub (alcohol and non-alcohol based) can be used in health and care settings if they meet the specified requirements.
18 Jan 2024		<ul style="list-style-type: none"> Development of new respiratory short form and accompanying outbreak checklist ARHAI Scotland have developed a respiratory short form for reporting of any incident/outbreak from key respiratory viruses (COVID-19, influenza and respiratory syncytial virus (RSV) only), where IPC measures align with the newly developed outbreak checklist/NIPCM and where ARHAI support is not requested. Reporting via the respiratory short form uses a minimum dataset which aims to reduce reporting burden for NHS boards whilst maintaining national surveillance of incidents and outbreaks across Scotland. The respiratory short form has now been successfully rolled out to all NHS boards and more information can be found within the Outbreak Reporting Tool Protocol. The updated outbreak checklist is aligned to the NIPCM and is designed to support staff with the prevention and control of suspected or confirmed

Date	Version	Changes
		<p>incidents and outbreaks in hospital settings. This outbreak checklist demonstrates application of controls as recorded in both the respiratory short form and full outbreak reporting tool.</p> <ul style="list-style-type: none"> Appendix 15: Healthcare Infection Incident and Outbreak Reporting Tool (HIIORT) has now also been removed from the National Infection Prevention and Control Manual (NIPCM). All boards have been provided with their local bespoke version of the outbreak reporting tool (ORT) for reporting of incidents and outbreaks in line with chapter 3 of the NIPCM.
26 Jan 2024		<ul style="list-style-type: none"> Updated Ventilator Associated Pneumonia (VAP) Quality Improvement Tool literature review <p>The NIPCM contains a number of quality improvement tools which can assist in the reduction of HAIs. ARHAI Scotland have recently published an updated literature review to support the Ventilator Associated Pneumonia (VAP) Prevention bundle developed by SICSAG.</p>
9 Feb 2024		<ul style="list-style-type: none"> Update to definition of 'an exceptional infection episode' in chapter 3 <p>The definition of 'an exceptional infection episode' has been updated to provide additional clarity and the scientific evidence base which informs this literature review remains extant.</p> <p>The previous definition stated:</p> <p>'A single case of an infection that has severe outcomes for an individual patient OR has major implications for others (patients, staff and/or visitors), the organisation or wider public health e.g., infectious diseases of high consequence such as VHF or XDR-TB, botulism, polio, rabies, diphtheria.'</p>

Date	Version	Changes
		<p>The updated definition now states:</p> <p>“a single case of rare infection that has severe outcomes for an individual AND has major implications for others (patients, staff and/or visitors), the organisation or wider public health for example, high consequence infectious disease (HCID) OR other rare infections such as XDR-TB, botulism, polio, rabies, or diphtheria.”</p>
7 Jun 2024		<ul style="list-style-type: none"> • New Care Home IPC Resource Toolkit in CH IPCM <p>The new Care Home Infection Prevention and Control (IPC) Resource Toolkit is a collection of care home related IPC guidance, resources and tools from national and international organisations which can support local IPC adoption and implementation.</p> <p>It has been structured specifically to support care home staff easily identify key IPC materials.</p> <p>The toolkit should be used in conjunction with the Care Home Infection Prevention and Control Manual (CH IPCM) and supporting resources.</p>
27 Jun 2024		<ul style="list-style-type: none"> • New Notifiable Organism entry now included in A-Z <p>An update has been made to the A-Z of pathogens to show if an organism is notifiable. Previously this option was only included for diseases and has been added to provide clarity.</p>
4 Jul 2024		<ul style="list-style-type: none"> • Update to guidance on disposal of sharps boxes <p>On 20 June Section 1.9 of the NIPCM was updated and the reference to disposal of sharps boxes 'following 3 months of assembly' has been removed after consideration of the lack of evidence that supports this.</p>

Date	Version	Changes
		<p>The bullet now reads</p> <p>‘be disposed of when the manufacturers’ fill line is reached.’</p> <p>Updates to the waste literature review will follow when this review has been completed. Boards may choose to implement this change ahead of these full updates.</p>
4 Jul 2024		<ul style="list-style-type: none"> • Transmission-based precautions (TBPs) definitions literature review update now added to Chapter 2 <p>The transmission-based precautions definitions literature review is currently under review and has not yet been published. To keep stakeholders aware of progress we have produced a summary highlighting the main areas of change, background to these changes and how these will impact practice.</p>
29 Jul 2024		<ul style="list-style-type: none"> • Launch of the new 'water' section of Chapter 4 in the National Infection Prevention and Control Manual (NIPCM) <p>This chapter content supports the prevention and management of infection related incidents and outbreaks associated with healthcare water.</p> <p>The evidence-based content has been informed by a new NIPCM systematic literature review and development of recommendations and good practice points. These, including the benefits, harms, feasibility issues and expert opinion, can be read in detail in the new Considered Judgement Forms.</p>
1 Aug 2024		<ul style="list-style-type: none"> • Update to isolation period for COVID-19 for hospitalised patients <p>The isolation period for COVID-19 has changed. The reduction in isolation period aligns with that of UKHSA guidance.</p>