

Introduction

In the Community setting infection can easily spread from person to person.

- A Customer/Client may be infected while receiving care.
- A Care Worker may be infected while carrying out their duties.
- People who work or interact with Customers/Clients the community may be infected.

This transmission of infection is called cross infection.

It is essential to understand the way infection is controlled in any health care setting including community services,

At Enhanced Lifestyles and Lifestyle Assistance and Accommodation Service we aim to create a safe and healthy work environment. There is a two-tier approach to management of Cross Infection:

- standard precautions, and
- additional precautions.

Standard precautions

Standard precautions can be defined in three ways. They are:

- safe work practices for the care and treatment of all clients regardless of their known or presumed infectious status,
- the minimum required level of infection control in all settings and all situations, and
- designed to protect both clients and health care workers.

Standard precautions include the following five procedures:

- hand washing,
- use of personal protective equipment,
- correct handling and disposal of waste,
- appropriate cleaning of client care equipment, and
- hygienic environmental control.

Standard precautions apply whenever you may come in contact with the following four bodily substances:

- blood (including dried blood),
- all body substances, secretions and excretions (excluding sweat), regardless of whether or not they contain visible blood,
- non-intact skin, and
- mucous membranes.

Handwashing

Handwashing is the single most effective way to reduce the number of microorganisms on the surface of the skin. It should always be performed:

- before and after contact with a Customer/Client,
- before and after eating,
- after using the toilet,
- before and after using gloves,
- after contact with used equipment, and
- immediately following contact with bodily fluids.

Standard handwashing procedure:

1. Remove jewelry.
2. Wet hands thoroughly all over.
3. Use normal soap.
4. Lather soap all over hands.
5. Rub hands together vigorously for 15-20 seconds. Pay particular attention to the fingertips, thumbs, wrists, finger webs and the backs of the hands.
6. Rinse under running water.
7. Pat hands dry with paper towels.

Waterless handwashing

There are waterless alcohol based hand wash solutions that are as effective as soap and water hand washing. These preparations should only be used when there is no visible soiling of the hands. If there is visible soiling, then soap and water hand washing should be used. These waterless preparations contain an emollient and aid in reducing damage to the hands.

Gloves do not replace hand washing, it is an additional protective measure to handwashing. Hands should be washed before and after using gloves.

Personal Protective Equipment (PPE)

Some of the duties that you perform in the workplace may require you to protect yourself from either the environment in which you are working, infectious Customers/Clients, or to protect the Customer/Client from you if you are infectious.

Following initial training we will provide yearly refresher courses to ensure that all staff are up to date with the equipment. This regular education on the correct use of the equipment ensures that when staff need to use protective equipment they fully understand how and when to use which equipment. All equipment for protective purposes must also meet with Australian standards.







Enhanced Lifestyles and Lifestyle Assistance and Accommodation Service requires all employees to comply with correct personal protective equipment standards while at work.

Hand protection

Hand washing should be carried out before and after glove use as gloves may have pinholes or other defects.

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Workers who develop an allergy or sensitivity to glove powder or contact with latex proteins need to advise their supervisor that they require alternative gloves.

Type of protective equipment	Type of use	Correct usage	Photo of the item in use
1. Non sterile gloves 	<ul style="list-style-type: none"> Wear to reduce contact with blood, bodily secretions, excretions, disinfectants, chemicals. 	Always check for holes. Only wear once. Discard after use.	
2. General-purpose utility gloves 	<ul style="list-style-type: none"> Wear for cleaning and during manual decontamination of used instruments and equipment 	Always check for holes. Clean and store dry between uses. Replace when showing signs of deterioration.	
3. Heavy duty gloves 	<ul style="list-style-type: none"> Wear to reduce the risk of cuts, punctures or lacerations. Wear to reduce the risk of injury from chemical or thermal burns. 	Always check for holes. Clean and store dry between uses. Replace when showing signs of deterioration.	

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Body Protection

Gowns and clothes such as overalls will reduce the possibility of contact with hazardous or contaminated substances. They also protect from contact with microorganisms.

Type of protective equipment	Type of use	Correct usage	Photo of the item in use
1. Fabric or paper gown 	<ul style="list-style-type: none"> Wear to protect self from infectious client. Wear to protect client from possible exposure to microorganisms. 	<p>Has ties at the neck and at the waist.</p> <p>Both sets of ties need to be tied securely. Discard paper gown after use. Wash fabric gown. If infectious, place in correct linen bag and secure. Change between clients.</p>	
2. Plastic Apron 	<ul style="list-style-type: none"> Wear to reduce contact with blood, bodily secretions, excretions, disinfectants, chemicals. 	<p>Has ties at the neck and at the waist.</p> <p>Both sets of ties need to be tied up. Clean and store dry between uses. Change between clients.</p>	

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3. Overalls



- Wear when there is a risk of splashing from corrosive materials.



Change if overalls become contaminated. Wash after use.

Disposable overalls should be correctly discarded after use.



Eye Protection

Eye wear provides the worker or client with protection from splashes. Splashes may be from bodily fluids, chemicals spray or splash, dust or particles.

Type of protective equipment	Type of use	Correct usage	Photo of the item in use
1. Safety spectacles 	<ul style="list-style-type: none"> Wear when there is the risk of eye injury from splashing. 	May look like normal glasses or may have side shields. Cannot wear glasses underneath. Clean after use.	

Sharps Management

Sharps are any item that has the possibility to puncture or penetrate. They include:

- needles, scissors, scalpels, razors, or
- anything that could constitute a danger of penetration such as a sharp piece of metal, broken glass or a sharp piece of plastic.

Contaminated sharps have a high risk of transmitting blood-borne diseases.

All such items need to be treated with care at all times to reduce the possibility of injury or contamination.

Methods to reduce the incidence of needle stick injuries and contamination include:

- safe work practices and on going training,
- the development and use of retractable needles and syringes and needle-free IV delivery systems,
- rigid sharps disposal containers placed strategically in all work and clean up areas, and
- the correct use of personal protective equipment where possible to reduce injury, eg; heavy-duty leather gloves for maintenance personnel.



Sharps containers:

- are made of a puncture proof, rigid plastic material, with a non-opening lid,
- have an opening section through which all "sharp" objects should be placed,
- come in different sizes with larger and smaller openings, and
- may be portable or fixed to a wall.

Sharps containers should be:

- removed and replaced with a new one when full,
- kept in areas where staff may easily access them,
- kept separate from other containers and be easily seen if transported, and
- taken to the area where the sharps are being used to reduce the transporting of the sharps.

Each staff member:

- is responsible for the safe disposal of any sharp they use or come across,
- should at no time try to empty the container, and
- should be educated as to Sunset Bay Health Campus's sharps management policy during induction and again during regular in service training.

Linen Handling

- All linen should be handled carefully so that there is minimum dispersion of microorganisms.
- Appropriate personal protective equipment should be worn when handling linen soiled with bodily substances.
- Used linen should be bagged at location of use in appropriate laundry receptacle.
- Linen that is heavily soiled with blood or other bodily substances should be placed in leak proof bags and securely tied.
- Hands should be washed after handling used linen

Additional precautions

Additional precautions are put into place when there is a higher level of protection required to prevent the transmission of infectious diseases. They are used in addition to standard precautions.

There are three types of infection transmission possible in health care settings:

- Airborne transmission which includes pulmonary tuberculosis, Varicella (chickenpox), measles.
- Droplet transmission which includes rubella, pertussis, influenza and some types of meningitis.
- Contact transmission which includes Vancomycin Resistant Enterococci (VRE), open or discharging purulent wounds, skin ulcers or clients with Methicillin Resistant Staphylococcus Aureus (MRSA).

Additional precautions may include the following procedures:

- the use of gloves and gowns, where the protective equipment is removed and discarded into the waste bin,
- hands are washed before and after glove use,
- equipment stays in the room and not transported into other areas where possible
- equipment cleaning and disinfection of both the equipment and the environment.