

Registrar and MO Orientation

Infection Prevention and Control

Infection Prevention and Control Department

Prince of Wales Hospital





The Prince of Wales Hospital & Community Health Service



POWH and SSEH Infection Prevention and Control Staff & contact details

| Nurse Manager | Gareth Hockey | Ext: 22519 | Page 44241 |
|---|----------------|------------|-------------------|
| CNC Infection Prevention and Control (POWH) | Erin McSweeney | Ext 22083 | Page 44219 |
| CNC Infection Prevention and Control (SSEH) | Ning An | Ext: 27637 | Mob 0418984255 |
| Occupational Exposure Management CNS | Aurea Ayalon | Ext: 22859 | Page 44186 |
| Infection Prevention and Control RN | Nelley Youssef | Ext: 23980 | |
| Clerical Support Officer | Fiby Sultan | Ext: 22499 | |

Office Hours: 7-day service 0800 - 1630 hours - Page 44219



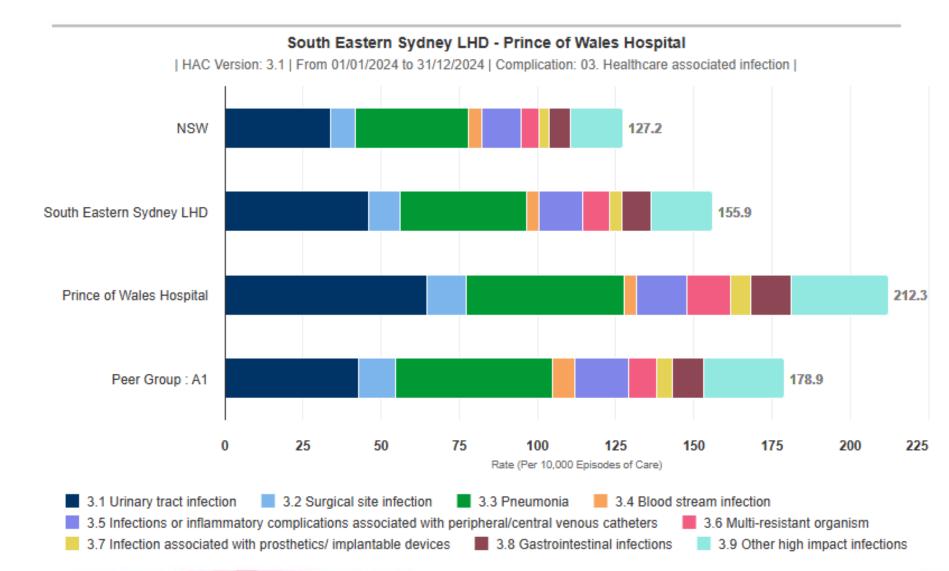
Healthcare associated infections

Most common complication of healthcare Approx 165,000 HAIs in Australia annually

- Many HAI's are preventable
- Increased length of stay
- Increased healthcare cost
- Unnecessary pain and suffering
- Increased antibiotic usage
- Unplanned procedures
- Increased mortality risk
- Loss of income and social impact



HAIs and HACS



Standard precautions

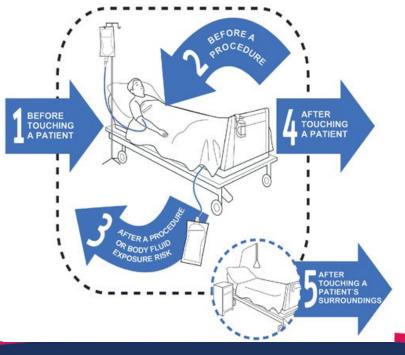
<u>Standard precautions</u> refer to those work practices that are applied to all <u>regardless</u> of their perceived or confirmed infectious status to ensure the foundations infection prevention and control are implemented













Hand Hygiene POW – Audit 3 2024

| | Total Compliance | | |
|-------------------------------|------------------|---------------|------------|
| 40 50 60 | Correct Moments | Total Moments | Compliance |
| 20 10 90 10 87.5% | 4,777 | 5,460 | 87% |

Compliance by Hand Hygiene Moment

| Moment | Correct Moments | Total Moments | Compliance |
|---|-----------------|---------------|------------|
| 1 - Before Touching a Patient | 1,351 | 1,619 | 83% |
| 2 - Before a Procedure | 532 | 572 | 93% |
| 3 - After a Procedure or Body Fluid Exposure Risk | 713 | 756 | 94% |
| 4 - After Touching a Patient | 1,428 | 1,591 | 90% |
| 5 - After Touching a Patient's Surroundings | 753 | 922 | 82% |



South Eastern Sydney Local Health District

Hand Hygiene POW – Audit 3 2024

Compliance by Health Care Worker Group

| Health Care Worker | Correct Moments | Total Moments | Compliance |
|-----------------------------------|-----------------|---------------|------------|
| Nurse/Midwife | 3,261 | 3,646 | 89% |
| Medical Practitioner | 518 | 649 | 80% |
| Personal Care Staff | 76 | 91 | 84% |
| Allied Health Care Worker | 353 | 414 | 85% |
| Administrative and Clerical Staff | 4 | 5 | 80% |
| Invasive Technician | 118 | 129 | 91% |
| Domestic | 44 | 54 | 81% |
| Student Doctor | 7 | 10 | 70% |
| Student Nurse/Midwife | 218 | 249 | 88% |
| Student Allied Health | 24 | 28 | 86% |
| Other - Not Categorised Elsewhere | 20 | 23 | 87% |
| Surgeon | 18 | 22 | 82% |
| Anaesthetist | 49 | 59 | 83% |
| Operations Assistant | 17 | 24 | 71% |
| Scout Nurse | 22 | 24 | 92% |
| Anaesthetic Nurse | 28 | 33 | 85% |

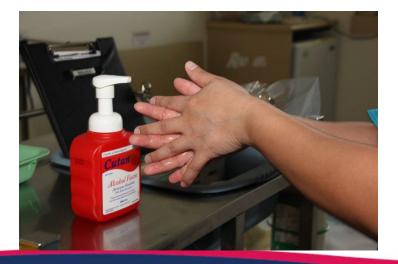
POW Medical officer compliance



Gloves

- To reduce the risk of contamination of healthcare worker hands with blood and body fluids, including contact with mucous membranes and non-intact skin
- Overuse in healthcare?
- Contamination of the environment?
- Hand hygiene adequate unless anticipated contact with bodily fluids and/procedures etc







Contact precautions



in addition to standard precautions

- MRSA
- Scabies
- VRE
- Risk assessment for placement and glove and gown/apron usage
- Strict adherence to hand hygiene
- Cleaning of equipment ie: stethoscopes



AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE

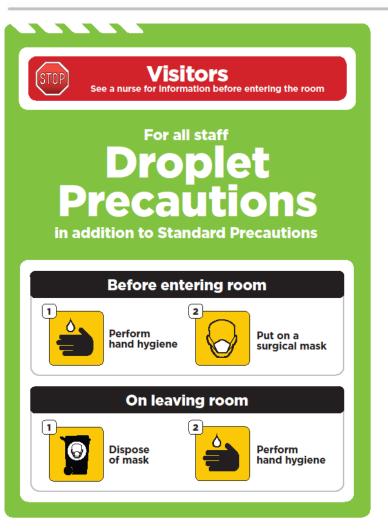
C Difficile and Handwashing

- Alcohol based handrubs are not effective at killing and removing C Diff spores
- · Handwashing with soap and water in conjunction with glove usage
- Isolation on suspicion frequency, antibiotic usage and viral gastro considered





Droplet precautions



- Influenza
- Rhinovirus
- RSV
- hMPV
- Goggles/protective eyewear in if close
 proximity to the patient

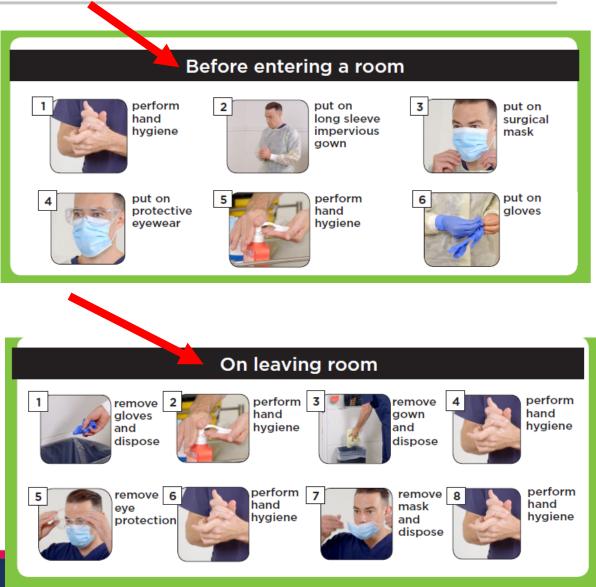
in addition to standard precautions



AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE

Personal protective equipment (PPE) Donning and Doffing

Mandatory PPE Donning and Doffing training

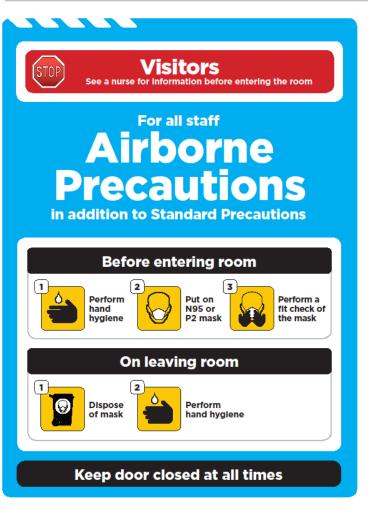


Fit testing



 Currently required every 18mths for Cat A staff working in high risk environments

Airborne precautions



in addition to standard precautions

- Pulmonary TB
- Chicken Pox
- Disseminated shingles
- Measles
- Goggles/protective eyewear



Visitors

See a nurse or midwife for information before entering

For all staff Contact + Droplet + Alrborne Precautions In addition to Standard Precautions

STOP

Before entering the patient zone perform. 2 35 put on Put on P2/N95 and. long sleeve **watere Impervious** miak. gown. erform out on s riber und. petient zone and out on hyglene mote office al owned On leaving the patient zone 3 **Internet** perform Decto style: ond. gloves hand gown and and dispose hysione tion looks dispose he public ni emove 8 dina at maak hand and rotection **NUMBER** hyglene dispose and set line

COVID-19

- Airborne+ Contact + Droplet Precautions
- Suspect and confirmed infection
- Neg Pressure preferred
- Not admitted to Haematology/Oncology
- Within outbreaks units on 100% exhaust



Needlestick or BBF splash injury

- 1. Apply first aid
- 2. Do not squeeze let injury bleed freely
- 3. Report exposures immediately
- Monday to Friday (0800- 1630 hours) Page 44186
- After hours call switchboard via 9 and ask for Needlestick Assessor on call
 ID on call

If after hours injury please contact IP&C on next working day via phone ext. 22859 and/or advice from ID on call assesor





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IIMS+ notification

Preventable line related infection(s)?

Contributing factors

- Dwell time
- Site selection
- Duration of therapy ?PICC
- Hand Hygiene
- Aseptic Technique
- Documentation
- Record of PIVC insertion in iView



UTIs and CAUTIs

BASIC PRINCIPLES FOR URINARY CATHETER INSERTION AND MANAGEMENT IN ACUTE CARE

- Clinically indicated?
- Hand Hygiene
- Aseptic Technique and sampling
- Documentation -record of insertion in iView
- AMS and asymptomatic bacteriuria
- Overtesting?



Review CAUTIs incidents

Notification and communication

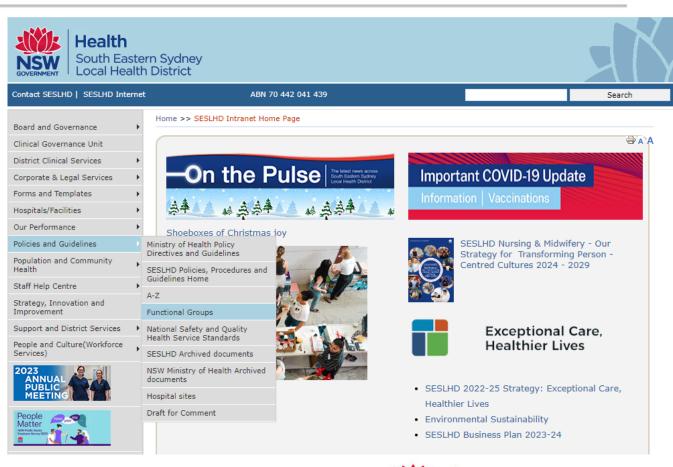
- Isolation advice
- Deisolation advice
- Recognition of clusters
- Travel history: testing and isolation
- Measles and isolation
- CPE and *Candida auris* screening requirements





IP&C - Policies and Procedures

- State, LHD, POW
- Isolation and management
- Notification processes
- Contact IPC as required





Health

South Eastern Sydney Local Health District