



018 - Infection Prevention and Control Procedure

Document Control	
Recent Author: Fay McNicol	Original Date of Document Sept 2012
Policy Owner: Gill McInnes	Other Key Stakeholders: Chief Executive, Director of Workforce
This document replaces: H&S 18 – Infection Prevention and Control Procedure V2	Consultation & Approval: Health and Safety Committee
Notification of Policy Release: Intranet	
Date of Issue: February 2019	Date of next review: February 2022
Version: V3	

Introduction

Good infection prevention and control requires the provision of a managed environment which minimises the risk of infection to staff and visitors. This is addressed through every employee adopting and practising standard infection control precautions.

Within NHS 24 this relates to:

- Hand hygiene
- A clean environment
- Clean equipment – headsets, telephones and workstations
- First Aid – Personal protective equipment (PPE), Management of blood/body fluid spillages
- Personal hygiene/health – Respiratory hygiene and cough etiquette

Guidance on good kitchen/food hygiene is also provided.

Those NHS 24 staff who are working in clinical roles within Territorial boards will be expected to comply with the National Infection Prevention and Control Manual as applicable to the Territorial Board.

<http://www.nipcm.scot.nhs.uk/>

1. Employers Responsibilities

NHS 24 will ensure employees are provided with suitable materials to facilitate adherence to standard infection control precautions.

2. Employees Responsibilities

Every employee will have a personal responsibility to adhere to standard infection control precautions and use the materials/equipment provided.

Infection control requires team work and co-operation. The members of infection control team are:

- **Infection Control Manager:** Susan Wilson, Scottish Ambulance Service, National Headquarters, Gyle Square, 1 South Gyle Crescent, Edinburgh, EH12 9EB. Tel: 0131 314 0049 or mobile: 07798580123
- **Infection Control Advisor:** Vince Mccluskey, Lead Infection Prevention and Control advisor, Scottish Ambulance Service ,National Headquarters, Gyle Square, 1 South Gyle Crescent, Edinburgh, EH12 9ED. Direct Dial : 01313140045. Mobile: 07392100529
- **Standard Infection Control Precautions (SICPs) Co-ordinator:** Hayden Donaldson, mobile: 07833483864

The Scottish Ambulance Service Infection Control Team is available to provide advice as/when required to NHS 24.

3. The Process

3.1 Hand Hygiene

Hand washing is the single most important activity in preventing the spread of infection.

Thorough hand washing removes 90% of germs, helping to prevent the spread of infection.

You should wash your hands

- On arrival at and before leaving work
- Before and after handling food and eating
- After coughing or sneezing or blowing your nose
- After using the toilet
- After contact with contaminated environment/equipment

There are adequate hand washing facilities (hot water, soap, paper towels and hand dryers) in the contact centres and HQ. These are checked on a regular basis and replaced as necessary.

Where paper hand towels are used these are disposed of in foot operated bins with protective lids.

In addition; alcohol based hand rubs are provided throughout the work environment for staff to use and at main access points for contractors and visitors.

Alcohol hand rub can be used when there is no immediate facility to wash hands with soap and water but only on hands that are not visibly soiled.

Reception staff should ensure they regularly wash their hands after handling mail or receiving packages.

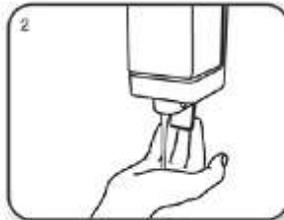
Hand hygiene is at its most effective when consistently applied as follows:

How to hand wash step by step images

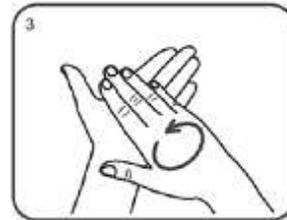
Source: World Health Organisation



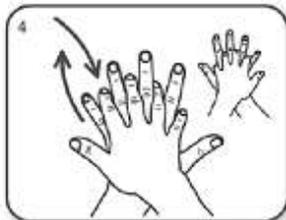
Wet hands with water



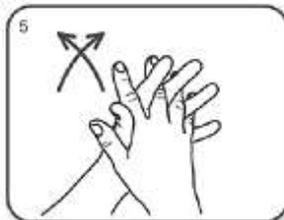
Apply enough soap to cover all hand surfaces



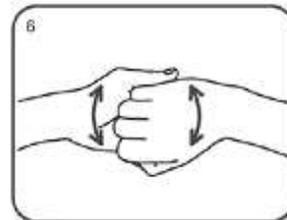
Rub hands palm to palm



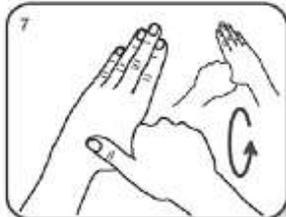
Right palm over the back of the other hand with interlaced fingers and vice versa



Palm to palm with fingers interlaced



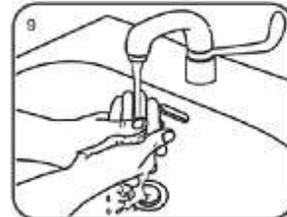
Backs of fingers to opposing palms with fingers interlocked



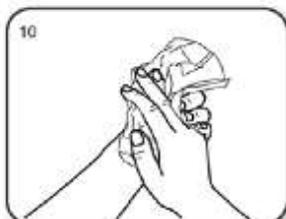
Rotational rubbing of left thumb clasped in right palm and vice versa



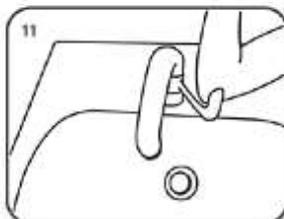
Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa



Rinse hands with water



Dry thoroughly with towel



Use elbow to turn off tap or turn off using the towel



Steps 3 - 8 should take at least 15 seconds

...and your hands are safe

3.2 Clean Environment

All areas within the workplace are cleaned on a regular basis and every employee can contribute by ensuring the workplace is kept clean and tidy and spillages are cleaned up quickly and effectively.

Each contact centre and HQ have their own particular cleaning schedules and the Health and Safety Lead Coordinators will monitor this to ensure there is an appropriate standard of cleanliness within each area.

3.3 Clean Equipment

- Headsets:
Employees are encouraged to change Ear cushions on at least a 6 monthly basis - or sooner if they require this. Anyone with a recent ear infection will be advised to change their ear cushions sooner.

Detergent or antibacterial wipes can be used to clean and refresh headsets daily.

Employees must not share headsets for any reason – a new headset can be supplied if necessary e.g. due to loss or damage.

- Telephone:
Detergent or anti bacterial wipes can be used to clean the telephone equipment; it is also recommended to periodically clean mobile phones using the wipes.
- Keyboards:
Detergent or anti bacterial wipes can be used to wipe keyboards; employees are encouraged to eat away from their workstation to prevent food and drink coming into contact with the keyboard.
- Workstations:
Employees are actively encouraged to clean their workstation at the start and end of their shift.

3.4 Provision of First Aid

- First aiders must complete appropriate hand hygiene before and after applying any first aid treatment.
- Disposable nitrile gloves and disposable plastic aprons are provided in each first aid room and box. Gloves must be used if there is a risk of exposure to blood or body fluids or contact with non intact skin or mucous membranes.
- Every first aider must carefully dispose of any equipment (scissors) or materials (gloves, wipes or dressings) that contain blood.
- Work surfaces used must also be cleaned with antibacterial wipes after use.

If there is a blood spillage the area should be cleaned as follows:

- Wear personal protective equipment (PPE) to include disposable nitrile gloves and disposable plastic apron
- Apply chlorine releasing granules directly to the spill or if these are not available place disposable paper towels over the spillage to absorb and

contain it and apply a solution 10,000ppm available chlorine to the paper towels.

- Follow manufacturers instructions on contact time or leave for 3 minutes.
- Discard the towels or granules into a healthcare waste bag.
- Wash the area with detergent and warm water using disposable paper towels then dry the area.
- Discard paper towels and PPE into a healthcare waste bag
- Wash hands

N.B. with urine or vomit spillage do not use a chlorine releasing agent directly on these use the following procedure:

- Mop up spillage using paper towels
- Clean the area using a 1,000ppm available chlorine solution.
- Leave in contact for 3 minutes then clean with detergent and warm water using disposable paper towels then dry the area

3.5 Personal hygiene/health

Keeping yourself healthy can prevent the spread of infection. Help maintain good health with a balanced diet, regular exercise, sufficient sleep and good personal hygiene.

Any employee with an infectious illness such as severe colds , flu or unexplained rash will be advised to stay at home until the illness is minimised or they have fully recovered.

Staff who develop diarrhoea and/or vomiting of an unexplained or potentially infectious nature should stay off work until they have been symptom free for 48hours. If symptoms persist staff should see their GP and advice on return to work should be sought from the Occupational Health Dept.

Certain types of 'infection control' absence are not counted as sickness absence; this is in recognition of some periods of time where although an employee will be well they are prevented from returning to work.

This is to ensure that certain types of infection and illness are prevented from being brought into the workplace.

Respiratory Hygiene and Cough Etiquette

Respiratory hygiene and cough etiquette is designed to contain respiratory secretions to prevent transmission of respiratory infections:

- cover the nose and mouth with a disposable tissue when sneezing, coughing, wiping and blowing the nose;
- dispose of all used tissues promptly into a waste bin;
- wash hands with non-antimicrobial liquid soap and warm water after coughing, sneezing, using tissues, or after contact with respiratory secretions or objects contaminated by these secretions; and
- keep contaminated hands away from the mucous membranes of the eyes and nose.

Staff should promote respiratory hygiene and cough etiquette to all individuals.

3.6 Kitchen/Food Hygiene

- Food should be stored appropriately
- Fridges should be cleaned, defrosted and temperatures checked weekly.
- Perishable food stored in the fridge should be within date and labelled with the owners name and the date
- Cookers and microwave should be cleaned after each use
- Hands should be washed before handling/preparing food
- Kitchen units and cupboards should be in a good state of repair
- Do not leave food lying around as this attracts vermin

For further information around Standard infection Control Precautions refer to NHS Scotland National Infection Prevention and Control Manual available on Health Protection Scotland website:

<http://www.hps.scot.nhs.uk/haiic/ic/index.aspx>

Review History

Issue No	Reason for review and brief description of changes made	Effective Date
1	Initial Issue	June 2012
2	Reviewed no changes made	Sept 2015
3	Amendment to Infection Control Team contact details. Inclusion of paragraph regarding NIPCM and operational staff	Feb 2019

**Prints of this document are uncontrolled and may not be approved versions.
Please check with the NHS 24 Intranet and or document author/owner.**