HANDS UP FOR HANDS-ON!

Infection Prevention & Control Newsletter

The purpose of bringing this newsletter to you is to provide you with information and updates on contemporary infection prevention and control issues that may be relevant to your workplace. We hope you find the information informative and useful.



Hands Up for Hands-On Spring 2013

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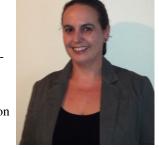
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Introducing Team Member Julie Colvin

Julie graduated as a registered nurse in 1993. Originally from New Zealand Julie has worked in the operating room/day surgery environment within both public and private healthcare sectors in New Zealand, the United Kingdom and Australia.

Since moving to Perth in 2007, Julie has worked in both clinical and management roles, including infection control, within both aged care and the private day surgery sectors. Julie completed her Graduate Certificate in Infection Control in 2011 and Immunisation Certificate in early 2013. She joined the Hands-On team in May of this year and is currently a member of the Australasian College for Infection Prevention and Control.



Farewell to a Valued Team Member

It is with regret that we announce the temporary departure of Yvonne Fletcher, whom many of you will know through her role as Infection Prevention Advisor. We wish Yvonne well in her travels around Australia and look forward to hearing about her exciting adventures.

Hand Hygiene - Update

Operational Directive OD 1429/13 Hand Hygiene in Western Australian Hospitals describes the minimum hand hygiene (HH) improvement strategies and the key components of the National Hand Hygiene Initiative (NHHI) that public and licensed private hospitals funded to provide care for public patients in Western Australia (WA) are required to implement.

Infections resulting from the provision of healthcare are one of the most common causes of unintended harm suffered by health consumers and are associated with increased morbidity and mortality. It is increasingly recognised that healthcare associated infections (HAIs) are preventable adverse events rather than an inevitable outcome of medical care. The association between poor HH practices by healthcare workers.

Compliance with this Operational Directive is mandatory and includes the following components: Product selection and availability, education and training, uniform, jewellery and nail care, skin care, auditing, compliance, feedback, signage, and patients and visitors.

For details contact http://www.hha.org.au/

Reference OD 0429/13 Hand Hygiene in Western Australian Hospitals available at: www.health.wa.gov.au/circulars



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Vaccination Update - Varicella

Varicella-Zoster virus (VZV) is a DNA virus within the herpes virus family. Following primary infection (Chickenpox), VZV establishes latency in the dorsal root ganglia. Reactivation of the latent virus manifests as Herpes Zoster (shingles).

Varicella vaccination can be given as a combination vaccine with Measles, Mumps, and Rubella.

For children <14 years of age:

Varilrix is live attenuated varicella zoster virus

Varivax refrigerated is live attenuated varicella zoster virus

Priorix-tetra is live attenuated measles mumps rubella and varicella combination vaccine

ProQuad is live attenuated measles mumps rubella and varicella combination vaccine

Adolescents (aged \geq 14 years of age) and adults:

Vaccination is recommended for all non-immune adolescents and adults.

The current WA vaccination schedule is:
Primary vaccination for children at 18 months of age
Catch-up dose for children 10 - <14 years of age who have not received varicella and who have not had the disease is funded on the National immunisation program.

For further information see:

www.immunise.health.gov.au

http://www.public.health.wa.gov.au/3/470/2/schedule immunisation.pm

Respiratory Etiquette for Visitors

Many facilities are running some excellent respiratory etiquette programs at this time of year to complement their influenza vaccination campaign.

It is pleasing to see that visitors are also the focus of some facilities. Prominently displayed signs and posters promoting good respiratory etiquette along with the provision of alcohol based hand rubs for visitors at the entrance to a facility will help to break the chain of respiratory infection.



MRSA

Methicillin-resistant *Staphylococcus aureus* (MRSA) is a type of staphylococcus bacteria that is resistant to certain antibiotics (beta-lactams). These antibiotics include methicillin, penicillin and amoxicillin.

MRSA may colonise or infect its host. MRSA is either healthcare or community acquired can be transmitted through direct contact by both colonised and infected cases.

In the community most MRSA infections are skin infections. More severe or life threatening MRSA infections occur more frequently among individuals in healthcare settings.

People who are most at risk of contracting MRSA are those who have been hospitalised or confined in areas where MRSA is present, prolonged or multiple hospital stays, >65 years, severe underlying disease, preceding antibiotic therapy especially with broad spectrum antibiotics, presence of open wounds and/or pressure ulcers and presence of invasive devices.

Precautions to prevent the spread of MRSA include:

Place the patient in a single room where possible.

Hand Hygiene - perform hand hygiene after touching blood, secretions, body fluids and contaminated items.

Gloves - wear gloves when it is anticipated that there will be contact with blood or other potentially infectious materials.

Apron/gown - wear when having direct contact with colonised or infected person.

Mask and protective eyewear only during patient care activities that are likely to generate splashes or spray of blood, body fluids, secretions and excretions.

Appropriate handling of patient care equipment soiled with blood body fluids, secretions and excretions to prevent skin and mucous membrane contamination.

Clean and disinfect surfaces that are in close proximity to the individual (e.g. bed rails, side tables) and frequently touched surfaces frequently.

Appropriate handling of linen and waste to avoid contamination of air, surfaces and persons.

What am I?

I am a severe, sometimes fatal respiratory disease. Anyone is at risk of catching me as I am highly contagious and spread from person to person by respiratory droplets.

I can be very serious in young children, especially those under 6 months of age. Complications can include pneumonia, brain damage from lack of oxygen suffered during bouts of coughing and death.

I am a vaccine preventable disease. My vaccine is recommended to children and adults who live or work with young children.

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Education Matters

Infection Prevention & Control Education & Training Program Oct - Dec 2013 (Places are still available)

Western Australia

Infection Prevention Seminar for Residential Cleaning & Laundry Services Staff 9 October 2013

South Australia

Infection Prevention Study Day for Community Care 4 November 2013

Hands-On Infection Control offers a broad range of education and training programs in infection prevention and management. Programs can be tailored to suit the specific needs of individual organisations, specialities, environments and staff/volunteer groups.

These programs can be incorporated into existing induction/orientation, inservice, professional development and targeted programs for all categories of clinical, support and ancillary staff.

Education and training can be provided on or off site for your organisation using the latest technology and delivered by accredited trainers and assessors.

Hands-On Infection Control educational activities have been endorsed by APEC number 070523701 as authorised by Royal College of Nursing, *Australia* (RCNA) Life Long Learning Program (3LP).

For details of any study days, to obtain registration forms, or discuss your training needs contact us:

Hands-On Infection Control, PO Box 233, North Perth, WA 6906

Phone: 9227 1132 Facsimile: 08 9227 1134 Email: info@handsoninfectioncontrol.com.au Web: www.handsoninfectioncontrol.com.au



ACIPC ANNUAL CONFERENCE

The Australasian College for Infection Prevention and Control (ACIPC) Annual Conference is being held at the <u>Gold Coast Convention & Exhibition Centre</u>, Gold Coast, QLD.

30 September – 2 October 2013

http://www.acipcconference.com.au/

ACIPC WASIG EDUCATION & NETWORKING

BREAKFAST FORUM

The College West Australian Special Interest Group (WASIG) will be holding its next education and networking breakfast forum for members on Friday 8th November 2013 7.30am—9.00am in the Auditorium at St John of God Subiaco Hospital. The program is still being finalised but will include case studies from across the healthcare continuum as well as providing an opportunity to network with colleagues and discuss relevant issues. On-line registration is available via the College.



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Brain Teaser—what am I? Unscramble me using the clue:

Answers This Page

- . LRENEGIA: An antigen that evokes an allergic response.
- 2. ALAMARI: a systemic infection caused by protozoa of the genus Plasmodiium
- 3. TIARAPSE: An organism that derives its nutrients from another living organism (the Host)
- 4. PMSLLAOX: A serious systemic disease that has been eradicated from the world



WORDFIND

i i b O n a n a m o u p k g g a n m C r O d d f b O n S h r r e f d h t S 0 0 0 W C k k d S r C a 0 a a O e m m u n e 0 e u u h k d b t S e u e a S e t i i S j e 1 m m u n a t O n O 1 k b k S a u g n e y u 0 0 k b y S C u r r a n d b i a C t e r a e n S u 0 m

Find these words above

bacteria immune

blood vaccination

cold immunisation

flora immune

precautions disease

Mhat am I? Pertussis
Brain Teaser
I. Allergen
2. Malaria
3. Parasite
4. Smallbox