



# DE~BUGGED

*Focusing on the provision of Clean, Safe Care...*

Infection Prevention & Control Newsletter provided by Herefordshire & Worcestershire Health & Care NHS Trust



## CHRISTMAS MESSAGES

Whilst everything is progressing well in containing COVID-19 illness and bringing a degree of normality back into lives there are still a number of key challenges to consider which we can expect to see over winter months as we move into the festive season. With Christmas just around the corner, it's important we remain aware of how to stay safe from COVID-19 but also have a fun festive season.

- ✳ With regard to staff Christmas events these can continue as usual but please be mindful and think about how risks of COVID-19 can be minimised and if someone in the group were to be positive what impact would that have on the team and your ability to provide a service.
- ✳ Making your staff Christmas event as safe as possible need not make it any less enjoyable, consider smaller groups, promoting use of lateral flow tests and uploading of results before heading out and then after the event as well if you are someone who does not routinely undertake LFTs (twice in the following week or once 48 hours after the event), ensuring everyone who attends is well, promoting use of IIR masks if circulating round a busy area, try to maintain some distance and also ensure ventilation of an area, undertake hand hygiene and most importantly enjoy your time out and remember the Trust car share guidance. You can also consider other ways to celebrate with colleagues by considering a virtual party. Staff Christmas Lunches will again be a Christmas Take Out Box this year as was in 2020 to enable people to enjoy within their team.
- ✳ Please get agreement from your line manager before wearing festive attire. If you work in a non-patient area feel free to wear a Christmas jumper and if you work in a patient facing area and need to be bare below the elbow, please wear a Christmas T-shirt instead.
- ✳ Ensure to incorporate festive decorations into work areas appropriately where they will not inhibit cleaning procedures. Do not place in clinical areas or in areas where they have the potential to become contaminated or frequently touched.

Please be mindful when sharing Christmas gifts and beverages and consider how you share these distributing individually wrapped food items rather than sharing tins of biscuits and chocolates. It is amazing how COVID-19 quickly spreads in an area so maintain distancing, remember to wear an IIR mask and think about hand hygiene.

## TIPS FOR SMART HAND HYGIENE

Within clinical areas you work, consider whether practices are in accordance with guidance and how you can promote compliance at hand wash sinks. Key points detailed below provide information on how hand wash sinks should be managed and appropriate practices to minimise potential for cross contamination. Clinical hand wash sinks:

- ✳ must only be used for hand washing and should dispense water at an appropriate temperature for hand washing.
- ✳ should not have plugs, sinks in patient ensembles do require plugs as are patient wash facilities.
- ✳ must not be used to dispose of body fluids (including urine samples) or water from patient wash bowls.
- ✳ must not be used to wash any patient or medical equipment in or store used equipment awaiting decontamination.
- ✳ should have their taps run at regular intervals, if you notice any limescale build up report it to your housekeeping team.
- ✳ must be cleaned with appropriate products and left visibly clean at all times.

Finally, gel is not required at the sink as soap and water should be used for hand washing, wherever possible do not locate alcohol gel dispensers at sinks, take time to locate gel so that it provides another location for hand hygiene and promotes compliance. This may be adjacent to a desk in a consulting room or the other side of the bay from the hand wash sink. Further advice is available from the Infection Prevention and Control Nurses on 01386 502552, alternatively look at our hand hygiene guidelines or try out hand hygiene workbook on [www.worcestershirehealth.nhs.uk](http://www.worcestershirehealth.nhs.uk).



## VISIT [www.worcestershirehealth.nhs.uk](http://www.worcestershirehealth.nhs.uk)...

Click on Infection Prevention and Control and you will see where we are updating our website and you can access a variety of new resources on line. Content includes posters, bin labels and awareness raising materials that you can print off; links to other websites which contain infection prevention and control information; access to training resources and workbooks on infection prevention and control in addition to information on forthcoming study days. Mini audit tools for a variety of areas can be downloaded and guidance including cleaning schedules and policies and procedures can be viewed. We are slowly increasing the amount of information and resources available on this website so try and view on a regular basis to ensure you have access to all the latest information, if there is other information you would like to see on the site please contact us on 01386 502597.



Remember out of hours urgent advice is available from the on call medical microbiologist via switchboard at either Worcestershire Royal Hospital or the Alexandra Hospital Redditch.

The Director with responsibility for Infection, Prevention and Control in the Trust is the Director of Nursing and Quality Michelle Greatorex.



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If you require further information about any item in this newsletter please contact the Infection Prevention & Control Nurses on 01386 502552/32552

**Please be alert in your workplace and check that all aspects of infection prevention and control are in place ensuring consistent provision of clean, safe care and minimising infection 100% of the time.**



# ANTIBIOTIC PRESCRIBING GUIDANCE



As we approach winter it is always a good time to consider prescribing of antibiotics and whether these can be reviewed and any changes made. During November we are presented with an opportunity to consider our actions during Antibiotic Awareness Week. Did you know that there is approved guidance for the prescription of antibiotics (oral and IV guidance) in addition to sensitivity reports which ensure compliance with prescribing, these are key antimicrobial stewardship activities. If you are prescribing antibiotics always consider the antibiotics you prescribe or administer, ensure NICHE is complied with and reflect on whether antibiotics were truly required.

## 1. NEED FOR AN ANTIBIOTIC

**WHEN:** Before you prescribe and at any review – consider not prescribing or delayed prescription if patient is well, self-limiting infection (e.g. upper respiratory tract) or no clinical benefit – address patient concerns.

**WHY:** Patients exposed to antibiotics are more likely to develop resistant bacteria making subsequent infections more difficult to treat. Patients who understand about their infection are less likely to re-present.

## 2. INVESTIGATIONS CULTURES BEFORE PRESCRIBING

**WHEN:** When first-line therapy has failed, the patient has been in hospital recently, recurrent infection, pregnancy or known resistance. Consider in severe/serious infection, immunocompromised or co-morbidity.

**WHY:** Cultures are necessary to confirm antibiotic susceptibility and guide you in choosing the most appropriate therapy. They also help us to understand the epidemiology of antibiotic resistant.

## 3. CHOICE SPECTRUM OF ANTIBIOTIC

**WHEN:** Before you prescribe and at any review – consult local or national guidelines – if a positive microbiology test is available, use the narrowest spectrum effective antibiotic.

**WHY:** Use of broad-spectrum antibiotics (e.g. cephalosporins, co-amoxiclav and fluoroquinolones) leads to the emergence of highly resistant bacteria.

## 4. HOW LONG IS YOUR PRESCRIPTION FOR?

**WHEN:** Before you prescribe and at any review consult local or national guidelines – document your planned length of therapy – if no serious infection (e.g. septic arthritis), can you stop if patient is better? ALWAYS DOCUMENT THE REASON FOR THE CHOICE AND DURATION OF AGENT

**WHY:** The longer you expose bacteria to an antibiotic, particularly at low concentrations, the more likely bacteria are to become resistant – dosing correctly is important to achieve adequate concentrations.

## 5. EVALUATE YOUR PATIENT AND PRESCRIPTION

**WHEN:** At any review – is your patient clinically improving? Are any microbiology tests positive? Modify antibiotic therapy according to local or national guidelines and the principles of niche.

**WHY:** It may be appropriate to change the antibiotic for patients with positive tests. Patients not improving may require more tests, a different antibiotic or hospital referral. Can you stop if patient is better?

## WINTER INFECTIONS...

### INFLUENZA

The best way to prevent influenza is to have your flu jab. Keep yourself and those you care about safe.

**REMEMBER TO CONSIDER YOUR PATIENTS**

In inpatient settings where patients may miss the opportunity to receive a flu vaccine due to their hospital stay please ensure that they can access one and don't miss out. ALSO check that admissions in, if eligible for flu vaccine, have taken this opportunity or support them in obtaining a flu vaccine during their stay if they wish. This year the flu jab is more important than ever before and will be key to reduce the amount of respiratory illness this winter and minimise infection risks.



### VIRAL GASTRO-ENTERITIS

Clusters of cases of viral gastro-enteritis have started to present in community and healthcare settings. It is imperative that staff are aware of the need to remain vigilant when accepting admissions/transfers to ensure that they have asked questions relating to prevalence of symptoms within a ward/area and in the individual being transferred including whether they have previously been positive.



Remember for staff who present with symptoms and infection cannot be excluded they need to be 48 hours symptom free before returning to work. Please ask these questions for all transfers or admissions and do not rely on others to provide the information. Contact Infection Prevention and Control Nurses for advice.

## TOP TIP

The best way to prevent influenza is to have your flu jab. Keep yourself and those you care about safe.



## SELF REVIEW...

There is now a short audit tool/questionnaire (only one piece of A4) to review your IPC practices. This sets out to provide healthcare staff with a quick checklist that they can refer to and consider whether their practices are perfect with regard to the key infection prevention and control areas highlighted by the tool. The sections include Hand Hygiene, Personal Protective Equipment, Decontamination, Sharps and Waste Handling and knowledge of key facts such as how to deal with certain scenarios and where to access information. If you would like a copy contact the IPCNs or visit [www.worcestershirehealth.nhs.uk](http://www.worcestershirehealth.nhs.uk)

**BE READY FOR WINTER INFECTIONS...KNOW HOW TO IDENTIFY AND WHAT ACTIONS TO TAKE**

**CORONAVIRUS** Always consider but don't dismiss other infections. Remember protect yourself and others.



**Don't forget to visit [www.worcestershirehealth.nhs.uk](http://www.worcestershirehealth.nhs.uk) for all resources linked to infection prevention and control!**