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

Infection Prevention & Control Newsletter for NHS Worcestershire & Worcestershire Health & Care NHS Trust

NOROVIRUS CONSIDERATION

Norovirus season is approaching once again! Are you up to date with what you should do to minimise occurrence of this virus?

- ✎ Carry out effective hand hygiene as appropriate
- ✎ Ensure effective environmental cleaning occurs, e.g. in toilet areas
- ✎ If symptomatic with viral gastro-enteritis, not return to work until at least 48 hours symptom free and well
- ✎ Report symptoms to your manager
- ✎ Avoid/Minimise contact with others whilst you are symptomatic

Ward staff need to remain vigilant when accepting patient admissions/transfers to ensure that they have ascertained that the area they are accepting an admission from does not have symptomatic individuals (those with diarrhoea and/or vomiting) and also that the patient being admitted is not symptomatic and has not had symptoms or been in contact with someone who has symptoms of diarrhoea in the last 48 hours. Be mindful of all previous locations in the last 48 hours, if necessary it may be appropriate to admit into a single room with ensuite. During Outbreaks, there are lots of things to consider, some of which are detailed below...

- ✎ The use of Bank Staff, where they have worked in last 48 hours and where they may work in next 48 hours
- ✎ Open boxes of chocolates/biscuits or fruit that is not to be peeled either on lockers for patients or communally for staff are not advised during outbreaks as potentially may become contaminated
- ✎ Bleach cleaning is one of the first measures that the Infection Control Team will recommend if an outbreak is suspected
- ✎ Outbreak charts and information on viral gastro-enteritis are all available in Section F of the Infection Control Policies and Procedures Binder
- ✎ If a viral gastroenteritis outbreak is suspected, always contact the Infection Control Nurse or out of hours the on call medical microbiologist via switchboard at either Worcestershire Royal Hospital or the Alexandra Hospital, Redditch.



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

95% of people say they wash their hands after using the toilet but observations have found that only 52% actually do. Micro-organisms that are likely to be found in toilet areas have the potential to cause nausea, vomiting, diarrhoea, fever and abdominal cramps and spread easily from one person to another. Please remember to wet, wash, rinse and dry after using the toilet and promote this within the setting you work to colleagues and patients/visitors.



DID YOU KNOW..

Health Protection Agency Scientists have stated the risk of infection associated with *Garra rufa* fish pedicures is likely to be very low.

Following a number of enquiries a working group was established to produce guidance for this spa treatment. Fish tank water has been shown to contain a number of micro-organisms. Therefore, in a fish spa setting there is the potential for transmission of a range of infections, either from fish to person (during the nibbling process), water to person (from the bacteria that can multiply in water), or person to person (via water, surrounding surfaces and fish). However, the overall risk of infection is likely to be very low, if appropriate standards of hygiene are adhered to. This working group has concluded that those with weakened immune systems or underlying medical conditions, including diabetes and psoriasis, are likely to be at increased risk of infection and so fish pedicures are not recommended for such individuals. Anyone considering a fish pedicure can help reduce the risk of infection by taking simple precautions. Allowing any cuts or infections you may have on your feet or legs to heal before having the treatment, also waiting at least 24 hours after having a leg wax or shaving, will minimise your chances of catching anything. If you do experience any ill effects after the treatment, you should obviously visit your GP.

ICE AND AN E.COLI

Did you know that contaminated ice is being served at almost one in three pubs, restaurants and coffee shops. Bacteria found on hands, including some associated with failing to wash hands properly after visiting the toilet have been found on samples of ice. 30% of those tested showed evidence of contamination. Tests on ice, ice machines and utensils carried out at 88 establishments found evidence of poor hygiene. The main problems related to a failure to clean machines and scoops used by staff to fill glasses and cups or using soiled cups to scoop up ice.



Ice samples were found to have unsatisfactory levels of coliform bacteria which can be found in the gastrointestinal tract of humans and animals and may be an indication of faecal contamination on the ice. Research in the U.S. has also found that ice machines in fast-food restaurants and cafes used by customers, rather than those operated by staff, are particularly likely to be contaminated. The Health Protection Agency advise that 'Poor hygiene practices when preparing ice could create the opportunity for harmful bacteria to contaminate our food and drinks.' The main way to ensure that ice is fit to use in food and drink is to ensure that it comes from a safe drinking water source and that all machines and utensils or scoops are cleaned thoroughly and regularly.

EUROPEAN ANTIBIOTIC AWARENESS DAY

18TH NOVEMBER 2011



The resources to accompany this day set out to provide information to help tackle the rise in antibiotic resistance. This is seen to be one of the most significant threats to patient safety across Europe. This annual Europe-wide initiative promotes

responsible use of antibiotics and is supported in England by the Department of Health and other professional bodies. The European Centre for Disease Prevention and Control (ECDC) have produced a series of resources including educational materials to raise awareness of the issues and the need for prudent antibiotic use, which have been adapted for use within England. The materials for primary care include a **fact-sheet** aimed at prescribers and managers detailing the main issues surrounding antibiotic resistance in primary care. The Department of Health is also making available a number of downloadable resources including: **leaflets, posters and non-prescription pads** which can be printed and given to patients as a aide memoire as to why antibiotics have not been prescribed at a consultation. In addition the Royal College of General Practitioners has produced a **booklet 'When should I worry'** (available in a downloadable format or for purchase in hard copy format) **for use in primary care consultations with parents about** the management of respiratory tract infections (coughs, colds, sore throats, and ear aches) in children. This message is being reinforced through a **number of short videos** available for use in patient waiting areas to remind patients to 'Take care, not antibiotics'. **These and other resources in support of European Antibiotic Awareness Day can be accessed from the Department of Health website at: www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_130267**



UPDATE ON LEGIONNAIRES' CLUSTER IN TRAVELLERS RETURNING FROM CORFU

The Health Protection Agency (HPA) has announced that a total of 12 people who have travelled to

Corfu since August have been confirmed to have Legionnaires' disease. Another three possible cases with travel history to Corfu are also being investigated. The patients, whose ages range from 39 to 79, had visited a number of different areas of Corfu. HPA laboratory tests have identified three different subtypes of Legionella from the patients' samples, suggesting that one common source is unlikely and undertaken detailed questioning of the people who became unwell but this has also failed to reveal a common source. As a precautionary measure the HPA has been looking into the possibility of a UK source but preliminary investigations have so far not found a common link between the patients.

Legionnaires' disease can lead to a severe pneumonia, caused by the Legionella bacterium. It is able to survive in water, and may be spread through exposure to water droplets from cooling systems, shower heads, tap faucets etc. It is important to note that Legionnaires' disease cannot be spread from person to person. Symptoms may start between two and 14 days after exposure to the Legionella bacterium, often with an initial 'flu-like' illness leading on to pneumonia. Legionnaires' disease is uncommon in the UK, but can be a nasty infection, can lead to complications, and can be fatal. Early antibiotic treatment is important.

The HPA has issued a briefing note to all GPs asking them to be alert to returning travellers from Corfu with relevant symptoms and is continuing to advise people going on holiday to Corfu to be aware of the signs and symptoms of Legionnaires' disease, which is a form of pneumonia. If you develop 'flu like' symptoms in Corfu or within two weeks of returning from Corfu you should seek medical advice either from NHS Direct or your GP.