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Safety in health care

All nurses are expected to adhere to the Standards of Practice (<https://www.nursingmidwiferyboard.gov.au/codes-guidelines-statements/professional-standards.aspx>) and are guided by a nationally consistent statement regarding the level of care consumers can expect from health care organisations. This is governed by the National Safety and Quality Health Service (NSQHS) standards, which aim to protect the public from harm and improve the quality of health service provision.^[1] The NSQHS standards are:

-  Clinical Governance Standard
-  Preventing and Controlling Infections Standard
-  Comprehensive Care Standard
-  Blood Management Standard
-  Partnering with Consumers Standard
-  Medication Safety Standard
-  Communicating for Safety Standard
-  Recognising and Responding to Acute Deterioration Standard

Nurses have a responsibility to implement effective infection control strategies, namely standard and transmission-based precautions.










Source: Reproduced with permission from National Safety and Quality Health Service Standards (2nd edition), developed by the Australian Commission on Safety and Quality in Health Care (ACSQHC). ACSQHC: Sydney 2021.

STANDARD PRECAUTIONS

- Hand hygiene, consistent with the 5 moments of hand hygiene
- Use of appropriate personal protective equipment (PPE)
- Safe use and disposal of sharps
- Routine environmental cleaning
- Reprocessing of reusable medical equipment and instruments

Standard precautions

Standard precautions must always be used when caring for all patients, regardless of their infection status

	Perform hand hygiene		Clean and reprocess reusable patient equipment
	Use personal protective equipment (PPE)*		Perform routine environmental cleaning
	Use respiratory hygiene and cough etiquette		Handle and store waste safely
	Use aseptic technique		Handle and store linen safely
	Use and dispose of sharps safely	<small>*When used as part of standard precautions, PPE protects against probable exposure to blood and body substances. When used as part of transmission-based precautions, PPE serves as a barrier to specific means of transmission of infectious agents.</small>	









Source: Reproduced with permission from Infection Prevention and Control Poster - Standard precautions poster, developed by the Australian Commission on Safety and Quality in Health Care (ACSQHC). ACSQHC: Sydney 2022.

- Respiratory hygiene and cough etiquette
- Aseptic technique
- Waste management
- Appropriate handling of linen.^[1]

■ TRANSMISSION-BASED PRECAUTIONS

- In addition to standard precautions, transmission-based precautions prevent transmission of infectious agents.
 - Contact precautions: direct or indirect contact











For all staff
Contact precautions
in addition to standard precautions

Before entering room/care zone	At doorway prior to leaving room/care zone
 <p>1 Perform hand hygiene</p>	 <p>1 Remove and dispose of gloves if worn</p>
 <p>2 Put on a gown</p>	 <p>2 Perform hand hygiene</p>
 <p>3 Wear gloves, in accordance with standard precautions</p>	 <p>3 Remove and dispose of gown</p>
<p>What else can you do to stop the spread of infections?</p> <ul style="list-style-type: none">• Always change gloves and perform hand hygiene between different care activities and when gloves become soiled to prevent cross contamination of body sites• Consider patient placement• Minimise patient movement	 <p>4 Leave the room/care zone</p>
	 <p>5 Perform hand hygiene</p>

Source: Reproduced with permission from Infection Prevention and Control Poster - Contact precautions poster, developed by the Australian Commission on Safety and Quality in Health Care (ACSQHC). ACSQHC: Sydney 2023.

- Droplet precautions: respiratory droplets

For all staff
Droplet precautions
in addition to standard precautions

Before entering room/care zone	At doorway prior to leaving room/care zone
 1 Perform hand hygiene	 1 Perform hand hygiene
 2 Put on surgical mask	 2 Remove protective eyewear
 3 Put on protective eyewear	 3 Perform hand hygiene
 4 Perform hand hygiene	 4 Remove mask and dispose of mask
	 5 Leave the room/care zone
	 6 Perform hand hygiene












What else can you do to stop the spread of infections?

- Consider patient placement
- Minimise patient movement
- Appropriate bed allocation.

Source: Reproduced with permission from Infection Prevention and Control Poster - Droplet precautions, in addition to standard precautions poster, developed by the Australian Commission on Safety and Quality in Health Care (ACSQHC). ACSQHC: Sydney 2023.

- Airborne precautions: airborne route

For all staff
Airborne precautions
in addition to standard precautions

Before entering room/care zone	At doorway prior to leaving room/care zone
 <p>1 Perform hand hygiene</p>	 <p>1 Perform hand hygiene</p>
 <p>2 Put on a particulate filter respirator (e.g. P2/N95) and perform a fit check</p>	 <p>2 Leave the room/care zone</p>
 <p>3 Put on protective eyewear</p>	 <p>3 Perform hand hygiene (in the anteroom/outside the room/care zone)</p>
 <p>4 Perform hand hygiene</p>	 <p>4 Remove protective eyewear (in the anteroom/outside the room/care zone)</p>
<div style="background-color: #333; color: white; padding: 10px;"> <p>What else can you do to stop the spread of infections?</p> <ul style="list-style-type: none"> • Consider patient placement • Use a negative pressure room, where available • Keep door closed at all times • Minimise patient movement. </div>	 <p>5 Perform hand hygiene (in the anteroom/outside the room/care zone)</p>
	 <p>6 Remove and dispose of particulate filter respirator (in an anteroom/outside the room/care zone)</p>
	 <p>7 Perform hand hygiene</p>

Source: Reproduced with permission from Infection Prevention and Control Poster – Airborne precautions poster, developed by the Australian Commission on Safety and Quality in Health Care (ACSQHC). ACSQHC: Sydney 2022.

Transmission precautions required in addition to the standard precautions are dependent on the infectious agent; see the following table.

Overview of the use of standard and transmission-based precautions							
Type of precautions	Examples of infectious agents	Patient placement	Gloves	Gowns	Mask	Protective eyewear	Handling of shared equipment
Standard precautions	Hepatitis B, Hepatitis C, Cytomegalovirus (CMV)	No restrictions on patient placement.	<ul style="list-style-type: none"> Gloves and gowns to be worn when there is potential exposure to blood or body substances Mask and protective eyewear to be worn when there is potential for blood or body substances exposure to mucosa (for example, attending to a patient who is coughing and sneezing). 	PPE use			Clean with neutral detergent if surfaces are contaminated with blood or body fluids cleaning should be followed with disinfection.
Contact	Multidrug-resistant organisms, <i>C. difficile</i> , norovirus	Single room or cohort with same strain of infectious agent.	Yes	Yes	As per standard precautions		Neutral detergent and disinfectant are required
Droplet^a	Norovirus, pertussis ^a , meningococcus	Single room with door open, or cohort with same strain of infectious agent.			Yes Use surgical mask	As per standard precautions	Neutral detergent. Use disinfectant if infectious agent is a multidrug-resistant organism or in the event of an outbreak.
Airborne	Pulmonary TB, rubella ^a , measles ^a and chicken pox ^a	Single room with door closed. Use negative pressure room if available.	As per standard precautions	As per standard precautions	Use particulate respirator (P2 or N95 mask)	As per standard precautions	Neutral detergent. Use disinfectant if infectious agent is a multidrug-resistant organism or in the event of an outbreak.
Visitors^a							Hand hygiene, respiratory hygiene, cough etiquette
Environmental cleaning							As per standard precautions

Notes: Standard precautions should be used during all patient care to prevent the likelihood of transmission of infection between the patient and the healthcare worker, as well as prevent contamination of the environment.

Use of standard and transmission-based precautions

Source: Reproduced with permission from the Use of standard and transmission-based precaution developed by the Australian Commission on Safety and Quality in Health Care (ACSQHC). ACSQHC: Sydney, 2023.

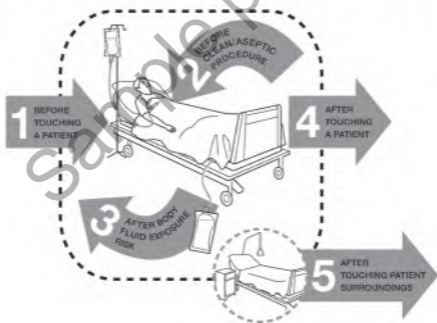
■ OTHER PRECAUTIONS

There are certain circumstances in health care that require specific precautions; for example, cytotoxic and radiation therapy. In these circumstances, strict adherence to organisational policy for best practice applies.

■ HAND HYGIENE

5 moments for hand hygiene

Your 5 Moments for Hand Hygiene



Source: Reproduced with permission of the World Health Organization
<https://www.who.int/publications/m/item/five-moments-for-hand-hygiene>

5 moments for hand hygiene approach

1	BEFORE TOUCHING A PATIENT	When: Clean your hands before touching a patient and their immediate surroundings. Why: To protect the patient against acquiring harmful germs from the hands of the health care worker (HCW).
2	BEFORE A PROCEDURE	When: Clean your hands immediately before a procedure. Why: To protect the patient from harmful germs (including their own) entering their body during a procedure.
3	AFTER A PROCEDURE OR BODY FLUID EXPOSURE RISK	When: Clean your hands immediately after a procedure or body fluid exposure risk. Why: To protect the HCW and the health care surroundings from harmful patient germs.
4	AFTER TOUCHING A PATIENT	When: Clean your hands after touching a patient and their immediate surroundings. Why: To protect the HCW and the health care surroundings from harmful patient germs.
5	AFTER TOUCHING A PATIENT'S SURROUNDINGS	When: Clean your hands after touching any objects in a patient's surroundings when the patient has not been touched. Why: To protect the HCW and the health care surroundings from harmful patient germs.

The poster on page 11 is based on the World Health Organization's My 5 Moments for Hand Hygiene approach, which defines the key moments when health care workers should perform hand hygiene. See Hand Hygiene Australia at <https://www.healthdirect.gov.au/scheduling-of-medicines-and-poisons#classification> for online training and an assessment that can generate a Hand Hygiene certificate.

■ PERSONAL PROTECTIVE EQUIPMENT (PPE)

PPE includes gloves, face masks (simple/utility masks, surgical masks and respirators), protective eyewear (goggles and visors), aprons/gowns, head covers and shoe covers.

When PPE is required:

- Wear *gloves* to reduce the risk of contamination of the health care worker's hands with pathogens, blood, body fluids, contaminated equipment or chemicals. Gloves should also be worn to protect vulnerable patients (e.g. surgical procedures, immunosuppressed patients).
Note: Gloves do not replace the need for hand hygiene practice.
- Wear a well-fitting face *mask* to reduce breathing in airborne contaminants and to reduce the risk of coming into contact with body fluids or chemicals (e.g. drawing up medication from vials such as antibiotics).
- Wear *protective eyewear/face shield* to prevent potential exposure from contact with body fluids, chemicals or acquiring infectious diseases via ocular exposure.

- Wear a fluid-resistant, or impervious, *disposable garment* made of synthetic materials to provide protection from the transfer of microorganisms, body fluids and particulate material.
- Always adhere to organisation protocol for specific conditions.

Sequence for putting on PPE

SEQUENCE FOR PUTTING ON PPE

Put on PPE before patient contact and generally before entering the patient room

HAND HYGIENE

- Wash hands or use an alcohol based hand rub.



GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back.
- Fasten at the back of neck and waist.



MASK

- Secure ties or elastic bands at middle of head and neck.



PROTECTIVE EYEWEAR OR FACE SHIELD

- Place over face and eyes and adjust to fit.



GLOVES

- Extend to cover wrist of isolation gown.



Source: Reproduced with permission from Australian Guidelines for the Prevention and Control of Infection in Healthcare – Sequence for putting on and removing PPE, developed by the Australian Commission on Safety and Quality in Health Care (ACSQHC). ACSQHC: Sydney 2023.