ASEPTIC & CLEAN (NON TOUCH TECHNIQUE) POLICY

<table>
<thead>
<tr>
<th>First Issued by/date</th>
<th>Issue Version</th>
<th>Purpose of Issue/Description of Change</th>
<th>Planned Review Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Update</td>
<td></td>
<td>September 2012</td>
</tr>
</tbody>
</table>

Named Responsible Officer: - Approved by Date

Infection Prevention and Control Lead
Infection Control Committee
6 October 2010

Policy File: -
Infection Control Policy No 15
Impact Assessment Screening Complete- Yes
Full Impact Assessment Required- No

Key Performance Indicators

1. Compliance with Essential Steps to safe clean care

2. Attendance levels at core mandatory training

3. Compliance with The Health and Social care Act 2008 Code of Practice for health and adult social care on the prevention and control of infections and related guidance

UNLESS THIS VERSION HAS BEEN TAKEN DIRECTLY FROM THE PCT WEB SITE THERE IS NO ASSURANCE THIS IS THE CORRECT VERSION
## Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>3</td>
</tr>
<tr>
<td>Policy aim</td>
<td>3</td>
</tr>
<tr>
<td>Policy outcome</td>
<td>3</td>
</tr>
<tr>
<td>Target group</td>
<td>3</td>
</tr>
<tr>
<td>Specific responsibilities</td>
<td>4</td>
</tr>
<tr>
<td>Related policies</td>
<td>4</td>
</tr>
<tr>
<td>Evidence to support the policy</td>
<td>5</td>
</tr>
<tr>
<td>Aseptic Non Touch Technique (ANTT)</td>
<td>5</td>
</tr>
<tr>
<td>Clean technique</td>
<td>6</td>
</tr>
<tr>
<td>Community settings</td>
<td>8</td>
</tr>
<tr>
<td>Training</td>
<td>8</td>
</tr>
<tr>
<td>Audit</td>
<td>8</td>
</tr>
<tr>
<td>Archiving</td>
<td>8</td>
</tr>
<tr>
<td>Risk assessment</td>
<td>8</td>
</tr>
<tr>
<td>References</td>
<td>8</td>
</tr>
<tr>
<td>List of those consulted in draft process</td>
<td>9</td>
</tr>
</tbody>
</table>
NHS Wirral

Aseptic & Clean Techniques Policy

Introduction

The impact of Healthcare Associated Infection (HCAI) is a priority for all NHS organisations. Within the non-acute setting, standard precautions of Infection Control should be consistently followed to reduce the risk of cross contamination. The Health and Social Care Act 2008 Code of Practice for health and adult social care on the prevention and control of infections and related guidance stipulates that NHS bodies and adult social care providers must have core policies in place, including aseptic technique, in relation to preventing and controlling the risks of HCAI's. Patients have a right to be protected from avoidable infection and healthcare workers have a duty to safeguard the wellbeing of patients. Aseptic Non Touch Technique contributes to reducing avoidable HCAI's.

Policy Aim

The purpose of this policy is to provide guidance on aseptic and clean procedures to healthcare staff using a non touch technique, to reduce the risk of microbial contamination within everyday practice. In situations where there is a breach to the body’s defence through a break in the skin or invasive devices, the healthcare worker should undertake a risk assessment to ensure the most appropriate method is used. The principles contained within this policy reflect best practice and are in line with Essential Steps to safe clean care, preventing the spread of infection (Department of Health, 2006)

Policy Outcome

This policy will provide healthcare staff with the knowledge required to risk assess the need for aseptic or clean technique were appropriate. The policy will ensure that there is a standardised approach to the procedure across the organisation. This will ensure compliance with the Code of Practice. Independent contractors have a responsibility to reduce HCAI, NHS Wirral recommends that the principles of this policy are applied as a minimum standard within practice to ensure professional and contractual duties are discharged.

Target Group

- All staff employed by NHS Wirral who are required to carry out these procedures as part of their role.
- Shared as best practice with Independent General Practice staff.
• Shared as best practice with Wirral Nursing Homes.

Specific responsibilities

Chief Executive

The Chief Executive has overall responsibility for ensuring infection prevention and control is a core part of the Trusts governance and patient safety programmes.

Board

The Board has collective responsibility for ensuring assurance that appropriate and effective policies are in place to minimise the risks of health care associated infections.

Director of Infection Prevention and Control

It is the responsibility of the Director of Infection Prevention and Control to oversee the development and implementation of infection prevention and control policies.

Infection Prevention and Control Team

It is the responsibility of the Infection Prevention and Control Team to ensure this policy is reviewed and amended at the review date or prior to this following new development in asepsis.

Service Managers

It is the responsibility of managers to ensure that staff are aware of this policy and have access to the appropriate resources in order to carry out the procedure appropriately. It is also the manager’s responsibility to ensure staff attend core clinical training.

Staff

It is the responsibility of staff to ensure they have read and are familiar with this policy. All staff required to undertake these procedures will be familiar and competent with these procedures.

Related policies

Please refer to related NHS Wirral policies and procedures.
Evidence to support the policy

www.nric.org.uk – clinical practice – aseptic technique

Department of Health (2006) - Essential Steps to safe, clean care

Department of Health (2005) – Saving Lives: reducing infection, delivering safe, clean care


Aseptic Non Touch Technique (ANTT)

Asepsis is the method by which we prevent microbial contamination during invasive procedures or care of breaches in the skin's integrity. An aseptic technique should be used during and procedure that bypasses the body's natural defence. An aseptic technique aims to minimise the risk of introducing pathogenic micro-organisms into a wound or other susceptible site and the transfer of pathogens from the wound to other patients or staff.

The principles of aseptic non-touch technique play a vital role in preventing the transmission of infection in any environment. A non-touch technique means that when handling sterile equipment, the part of the equipment being used that comes into direct or indirect contact with a key site is not touched or handled. A key site can be a wound, an access site for an intravenous device or a catheter. It is essential that hands do not contaminate the sterile equipment or the patient, this can be achieved through the use of sterile gloves or forceps. Sterile gloves may not always be 100% sterile as they can easily be contaminated after opening and can contribute to a false sense of security.

ANTT can be applied to all aseptic procedures such as administration of intravenous therapy, wound care and catheterisation.

As the patient’s home is not a clinical setting care needs to be undertaken to ensure asepsis is met.

Indications for Aseptic technique:

- Wounds healing by primary intention (before surface skin has sealed) i.e. surgical incisions or burns
- Central venous catheter insertion and ongoing care
- Urinary catheterisation and urine sampling via catheter port
- Suprapubic catheterisation
- Suturing
- Coil fitting
- Enteral feed connection
Guidelines for undertaking an Aseptic technique

Ensure that all equipment required is readily available and there is a clear field in which to carry out the procedure, if dressing trolley to be used ensure it is cleaned prior to use with detergent then disinfected with 70% isopropyl alcohol.

- Explain the procedure to the patient, obtain verbal consent and position the patient so that the procedure can be performed easily
- Decontaminate hands using the Ayliffe technique, staff involved in patient care/treatment must adhere to bare below the elbow
- Open the sterile pack carefully to prevent contamination of the contents
- Wear single use disposable apron and single use disposable sterile gloves for the procedure to prevent the introduction of pathogenic bacteria to the site or direct contact with body fluids
- Use an aseptic non touch technique to ensure that only sterile items come into contact with the susceptible site, that sterile items do not come into contact with non-sterile objects and that key parts are not touched
- Single use items must not be reused
- On completion of procedure remove gloves then apron, dispose of all waste as per policy
- Decontaminate hands using the Ayliffe technique
- Record care in the patients notes

Clean technique

A clean technique follows the same principles as ANTT but the healthcare worker (HCW) is not required to wear sterile gloves, non-sterile gloves can be worn to undertake the procedure safely based on risk assessment by the HCW. A non touch technique must be adopted.

Assessment needs to be undertaken by the healthcare worker in order to establish which procedure is appropriate. In many situations a modified aseptic or clean technique is more appropriate.

Where clean technique would normally be recommended but patient may be vulnerable e.g. immunosuppression, use an aseptic non touch technique. NHS Wirral supports its staff in the use of a single use disposable sterile dressing pack within the patients’ home to achieve a clean technique.
Clean technique aims to avoid the introduction of micro-organisms to a susceptible site and to prevent cross contamination to other patients and staff. The principles of a clean technique differ from those of an aseptic technique as the use of sterile equipment and the environment are not as crucial as would be required for asepsis. The non-touch technique is incorporated as part of a clean procedure in that the ends of sterile connections should not be touched or other items that could contaminate a susceptible site.

Indications for Clean technique:

- Dressing of wounds healing by secondary intention i.e. leg ulcers, pressure sores
- Removal of sutures
- Peripheral intravenous line insertion and ongoing care (Saving Lives, 2005)
- Removal of drains
- Endotracheal suction
- Dressing tracheostomy site
- Vaginal examination

Guidelines for undertaking a Clean technique

- Ensure that all equipment required is ready and that a clean area on which to place it is available
- Explain the procedure to the patient, obtain informed consent and position the patient so that the procedure can be performed easily
- Decontaminate hands using the Ayliffe technique, staff involved in patient care/treatment must adhere to bare below the elbow
- Wear single use disposable apron and single use disposable gloves (sterile if indicated by risk assessment)
- Using a Non-Touch Technique avoid touching any unclean area while performing the procedure
- Single use items must not be reused
- On completion of procedure remove gloves then apron, dispose of all waste as per policy
- Decontaminate hands using the Ayliffe technique
- Record care in the patients notes
Community settings

When carrying out procedures within patients’ home, the healthcare worker may not have access to the same equipment as in a clinical setting. The healthcare worker is responsible for ensuring that the environment allows the procedure to be carried out appropriately. The use of a clean surface i.e. table should be used to arrange the necessary equipment.

Training

All NHS Wirral staff that perform these procedures as part of their role will undergo core clinical training in this procedure.

Audit

As part of the Essential Steps to safe clean care observation of clinical practice audit.

Archiving

Hard and/or electronic copies of previous versions of this document will be held by the Infection Prevention & Control team for the retention period required under current NHS guidance.

Risk Assessment

Included in service risk assessment and procedure risk assessment.

References


**List of those consulted in drafting process**

Infection Control Committee