



DECEMBER 2011

For IC Issues contact your onsite ICC / HICMR ICC via the new 24 hr Pager No: 1300-657-359

HICMR wish all our clients a MERRY CHRISTMAS, and a happy, healthy 2012. Thanks for your support in 2011!

**“FOOD FROM HOME” SAFETY UPDATE**

Facilities should have a Policy to manage food brought to patients from home by friends and relatives, to ensure they are made aware of the higher risk foods and safe food practices. HICMR will continue to update relevant Policies as required, but it is up to the individual facility to manage this process and therefore a local policy is advised. e.g.

- Some healthcare facilities have banned foods brought in from home, except under special circumstances.
- Other healthcare facilities provide patient labels, day dot stickers and an information sheet regarding the facilities practices, (e.g. HACCP /Food Safety Principles, information on high risk foods).
- A risk assessment could be conducted, which includes the immune status of the patients who are at greater risk, prior to developing policies, eg. Oncology /ICU pts.
- All food storage fridges should have the temperature documented daily and food disposed of after 24/48 hrs as required in their current facility Food Safety Guidelines.
- Food bought in from home should be monitored/managed during a Gastroenteritis diagnosis/outbreak.
- Those responsible for the patients’ fridge/s should have HACCP/ Food safety knowledge.

**CLIENT PORTAL HARP UPDATE**

**Policy Manuals:** The 3 year review is progressing well. Updated sections of the S-AM Manual are being loaded progressively on the Client Portal. All other Manuals will follow.

**Current Versions of HICMR Manuals:**

- **Infection Control:** (All under review)
  - Surgical-Acute Medical (S-AM) - Index V19. Revised Section 1: Leadership & Management available soon.
  - Aged Care (AC) – Index V7.
  - Day Surgery – Index V3.
  - NonSurgical (NS) – Index V6.
  - DI & NEPT Manuals (Under review).
- **Endo/Probes** – Index V13 (Under review). Nb. Education Program updated, & revised Tracking Toolkit is now available.
- **Sterilising Services** – Index V3. To be reviewed when Draft AS/NZS 4187 Guidelines available, which are due to be released for public comment in February.
- ❖ **RA Tools:** Currently under review as per Policies, including Angiography, Critical Care, Emergency Services.
- ❖ **BBFEI Reports:** Monthly Reports have been reviewed & the updated version will be available soon. The new Periodic/Annual Report is almost complete and will be available in the New Year. Relevant facilities will need to supply data for Occupied Bed Days and No of Operations (where applicable) as requested.
- ❖ **HARP:** An automated process to self generate a forgotten login is now available.

**TRANSMISSIBLE DISEASES TOPIC “HEAD LICE”**

📌 **Head lice** are small wingless biting insects. They live and breed in human hair, and feed by sucking blood from the scalp. Some infestations cause no symptoms.

📌 **Diagnosis:** Use a bright light or sunlight to inspect the hair. Look for small white or brown oblong eggs (‘nits’) attached to the shafts of hair that are difficult to move. “Live” lice are more difficult to find as they move rapidly away from disturbances in the hair. Adult lice are 2-4mm long and whitish brown in colour. The best way to check for head lice is to apply a generous amount of hair conditioner, (which can stun head lice for 20 mins) then dry the hair and comb through with a coarse comb to detangle the hair. Comb hair with a fine toothed comb, wiping it on a tissue regularly so you can check for lice and their eggs.

📌 **Transmission:** Spread is by direct head-to-head contact with a person who has head lice, or more rarely by contact with items such as combs, brushes, hats, scarves or pillowcases which have been recently used by someone with head lice. Some animals have lice, but lice, which live on animals, will not live on humans.

📌 **Incubation period:** Eggs hatch in 7 - 10 days.

📌 **Infectious period:** As long as the eggs or lice are alive. Once hatched, the lice are capable of laying eggs after 10 days and lice live for up to 35 days on the scalp. They do not survive more than 2 days away from a human host.

📌 **Treatment:** Many head lice treatments are available without prescription. Follow directions on the packaging. Family members may also need treatment. Seek medical advice before using on pregnant/breastfeeding women, infants under 2 years old or people with sensitive skin or dermatitis. Re-treatment after 7 to 10 days is necessary because lice in un-hatched eggs may not be killed by the first treatment.

📌 If infestations persist despite correct insecticide use, medical advice should be sought on alternative methods of treatment. Using conditioner and a fine toothcomb once a week may help to detect infestations early and minimise spread from person-to-person.

**HAZARD ALERT – SENTINEL NODE PROBES**

♣️ Sentinel Node Probes are generally used as a diagnostic tool in breast cancer. If used in sterile sites they are classified as critical devices, and should undergo sterilisation prior to use, regardless of whether a sheath/sleeve is used.

♣️ The current Australian Standard for use of sheaths/sleeves states: “12.5. Sheaths/ sleeves for instruments and equipment shall not be used as a substitute for cleaning, disinfection and sterilisation procedures.” AS/NZS 4187 2003, (p82)

♣️ The device manufacturer should validate all reprocessing, however the manufacturer’s Instructions For Use (IFU) must also comply with current Australian Standards. If not the manufacturer should be requested to address same. If they choose not to, the matter should be referred to the TGA – Incident Reporting Investigation Scheme (IRIS).

**NEW/REVISED STANDARDS GUIDELINES**

✓ CDNA Creutzfeldt-Jakob Disease (CJD) Infection Control Guidelines – 2011 Revision has been released for comment. Review the full document by visiting the AICA website/links and resources page.

<http://www.aica.org.au/default.asp?PageID=44&n=Quick+Links>

✓ GENCA Position Statements: Single Procedure Single Use of Endoscopes and Accessories, Sept 2011. Care of the Equipment and Associated Environment during Endoscopic Retrograde Cholangio-Pancreatography (E.R.C.P.), Sept 2011. [www.genca.org.au](http://www.genca.org.au)

**ENDOSCOPY/PROBES & STERILISING SERVICES INFECTION PREVENTION AND CONTROL WORKSHOP: 2012**

HICMR Endo/Probes & SS Workshops are for interested Health Care Workers. For details/ online Registration [www.hicmr.com.au](http://www.hicmr.com.au)

Date	Location	Workshop	Comment
21 Feb 12	Sydney	Sterilising Services	Moved from Dec 11
22 Feb 12	Sydney	Endo/Probes	Moved from Dec 11
23 Feb 12	Brisbane	Sterilising Services	Moved, New Venue
28 Feb 12	Melbourne	Preceptor	
29 Feb 12	Melbourne	Sterilising Services	FULL
01 Mar 12	Melbourne	Endo/Probes	
13 Mar 12	Sydney	Preceptor	
14 Mar 12	Sydney	Endo/Probes	FULL
15 Mar 12	Sydney	Sterilising Services	FULL
27 Mar 12	Launceston	Preceptor	
28 Mar 12	Launceston	Endo/Probes	
29 Mar 12	Launceston	Sterilising Services	
17 Apr 12	Gold Coast	Preceptor	
18 Apr 12	Gold Coast	Endo/Probes	
19 Apr 12	Gold Coast	Sterilising Services	
01 May 12	Adelaide	Preceptor	
02 May 12	Adelaide	Endo/Probes	
03 May 12	Adelaide	Sterilising Services	
16 May 12	Melbourne	Preceptor	New Venue
17 May 12	Melbourne	Endo/Probes	New Venue
18 May 12	Melbourne	Sterilising Services	New Venue
05 Jun 12	Sydney	Preceptor	
06 Jun 12	Sydney	Endo/Probes	
7 Jun 12	Sydney	Sterilising Services	
21 Aug 12	Melbourne	Preceptor	
22 Aug 12	Melbourne	Endo/Probes	
28 Aug 12	Brisbane	Preceptor	New Venue
29 Aug 12	Brisbane	Endo/Probes	New Venue
30 Aug 12	Brisbane	Sterilising Services	New Venue
10 Sep 12	Perth	Preceptor	
11 Sep 12	Perth	Endo/Probes	
12 Sep 12	Perth	Sterilising Services	
24 Oct 12	Melbourne	Sterilising Services	New Venue
13 Nov 12	Sydney	Preceptor	
14 Nov 12	Sydney	Endo/Probes	
15 Nov 12	Sydney	Sterilising Services	
27 Nov 12	Melbourne	Preceptor	New Venue
28 Nov 12	Melbourne	Endo/Probes	New Venue