

Community Infection Prevention and Control Policy for Domiciliary Care staff

Safe management of care equipment

SAFE MANAGEMENT OF CARE EQUIPMENT

Version 1.00
March 2020

This guidance document has been adopted as a policy document by:

Organisation:	Cumbria County Council
Signed:	
Name:	Pam Duke
Job Title:	Assistant Director Provider Services
Directorate:	People
Date Adopted:	1 March 2020
Review Date:	28 March 2022

For further information and advice regarding infection prevention and control please contact:

<p>Fiona McCredie Head of Health Protection Public Health People Directorate Cumbria County Council Penrith Community Fire Station Carleton Avenue Penrith Cumbria CA10 2FA</p> <p>Tel: 01768 812539 Mob: 07900 668648 Email: Fiona.McCredie@cumbria.gov.uk</p>	<p>Debbie McKenna Health Protection Specialist Public Health People Directorate Cumbria County Council Cumbria House 107-117 Botchergate Carlisle Cumbria CA1 1RZ</p> <p>Mob: 07769 301904 Email: Deborah.McKenna@cumbria.gov.uk</p>
--	--

Your local Public Health England Team:

Public Health England North West	Tel: 0344 225 0562 Option 2
----------------------------------	-----------------------------

Community Infection Prevention and Control
Harrogate and District NHS Foundation Trust
Gibraltar House, Thurston Road
Northallerton, North Yorkshire. DL6 2NA
Tel: 01423 557340
email: infectionprevention.control@nhs.net
www.infectionpreventioncontrol.co.uk

Legal disclaimer

This Policy produced by Harrogate and District NHS Foundation Trust is provided 'as is', without any representation endorsement made and without warranty of any kind whether express or implied, including but not limited to the implied warranties of satisfactory quality, fitness for a particular purpose, non-infringement, compatibility, security and accuracy.

These terms and conditions shall be governed by and construed in accordance with the laws of England and Wales. Any dispute arising under these terms and conditions shall be subject to the exclusive jurisdiction of the courts of England and Wales.

Contents	Page
1. Introduction.....	4
2. Definitions.....	4
3. Methods of decontamination.....	5
4. Cleaning	5
5. Disinfection.....	5
6. Sterilisation.....	6
7. What you need for decontaminating equipment.....	6
8. Best practice for decontaminating equipment	6
9. Decontamination of equipment prior to inspection, service or repair	7
10. Symbols and their meanings.....	7
11. Infection risks and categories	8
12. References	8
13. Appendices.....	9
Appendix 1: Cleaning a commode and commode pan	10
Appendix 2: Declaration of Contamination Status.....	11

SAFE MANAGEMENT OF CARE EQUIPMENT

1. Introduction

This Policy is 1 of the 10 'Standard infection control precautions' (SICPs) referred to by NHS England and NHS Improvement.

Note. This Policy provides details on the decontamination of equipment. Information on cleaning the environment can be found in the 'Safe management of the care environment Policy for Domiciliary Care staff'.

All staff should know and understand the importance of clean equipment.

- Clean equipment reduces the risk of spreading infection.
- Most micro-organisms, such as bacteria, viruses and fungi, are found in dust and dirt.
- Some micro-organisms are harder to kill and, therefore, enhanced cleaning with disinfectants is required (see Section 5 Disinfection).
- Hands regularly come into contact with equipment surfaces. If hands are not washed, they will transfer any micro-organisms present. This risk is always present, but will increase if cleaning is neglected.
- Items to be cleaned and disinfected should be in a good state of repair to ensure effective cleaning and disinfection.

2. Definitions

Equipment:	Equipment used in Domiciliary Care includes aids to daily living, e.g. wheelchairs, walking frames, commodes, raised toilet seats, shower chairs, pressure relieving mattresses and cushions
Cleaning:	A process that removes dust, dirt including soiling, body fluids and large numbers of micro-organisms
Decontamination:	A combination of processes that removes or destroys contamination
Disinfection:	A process that further reduces the number of micro-organisms to a level at which they are not harmful. It is only effective if the surface is thoroughly cleaned with a detergent solution first. Disinfectant should be used when dealing with blood/body fluid spillages or when a service user has a known or suspected infection

Sterilisation:	A process that removes or destroys all micro-organisms including spores
Contamination:	The soiling of an object with harmful, potentially infectious or unwanted matter

3. Methods of decontamination

There are 3 levels of decontamination; cleaning, disinfection and sterilisation.

All equipment must be adequately decontaminated in between use and between service users. The method recommended will depend on the manufacturer's instructions, a risk assessment of the procedure and the item being used (see Section 11 Infection risks and categories).

4. Cleaning

Cleaning is a process that removes dust, dirt including soiling, body fluids and large numbers of bacteria.

- Warm water and a general purpose detergent, e.g. washing up liquid, is suitable for cleaning most equipment. Always follow the equipment manufacturer's instructions.
- Cleaning is **essential** before disinfection is carried out. A disinfectant solution is not effective if there is dirt or visible soiling, e.g. urine, faeces, blood.
- All cleaned equipment must be dried thoroughly before storage.

5. Disinfection

Disinfection is a process that further reduces the number of micro-organisms to a level at which they are not harmful.

- Disinfectant should be used when equipment is contaminated with blood/body fluids, been in contact with non-intact skin, or when a service user has a known or suspected infection.
- It is only effective if the equipment is thoroughly cleaned with a detergent solution first.
- When using disinfectants, manufacturer's decontamination instructions must be followed, in order to achieve safe practice.
- When disinfection of equipment is required, unless the equipment manufacturer advises against it, household bleach, at the following dilutions shown in the table below, should be used.

- **Note: Household bleach, should not be used on soft furnishings and untreated wooden surfaces as it will cause 'whitening/bleaching'. Therefore, only detergent and warm water should be used on such surfaces.**

Disinfection dilution guide

Equipment, e.g. commode, shower chair, raised toilet seat, contaminated with blood/blood stained body fluid

Household bleach 10,000 parts per million (ppm) available chlorine

Dilution of 1 in 10, e.g. 10 ml of household bleach in 100 ml of water or 100 ml in 1 litre of water.

Equipment, e.g. commode, shower chair, raised toilet seat, contaminated with body fluid (not blood/blood stained), or when the service user has a known infection

Household bleach 1,000 ppm available chlorine

Dilution of 1 in 100, e.g. 10 ml of household bleach in 1 litre of water.

6. Sterilisation

Sterilisation is a specialist means of decontamination of equipment and is not undertaken in a community setting.

7. What you need for decontaminating equipment

- Disposable apron and gloves.
- Separate cloths for cleaning toileting equipment, e.g. commodes, raised toilet seats and urinal bottles, to those used on other items of equipment, such as a hoist, walking frame, wheelchair, wipeable bedframes and mattresses.
- Detergent - warm water and a general purpose detergent, e.g. washing up liquid, is suitable for cleaning most surfaces.
- Disinfectant - when disinfection is required, household bleach at the dilution shown in the table in Section 5 should be used.

8. Best practice for decontaminating equipment

- Wear appropriate personal protective equipment.
- Before putting on and after removing gloves, staff should wash hands thoroughly and dry using paper towels. If none are available, the use of kitchen roll or a clean linen towel for use by the carer only and laundered

daily is acceptable.

- Always work from clean to dirty when decontaminating equipment.
- Cloths used for cleaning equipment contaminated with blood or body fluids, e.g. commodes, commode pans, urine bottles, or when the service user **has an** infection, should be disposed of after use.
- Cleaning cloths used on equipment **not** contaminated with blood or body fluids, e.g. hoists, walking frames, or when the service user **does not** have an infection should be washed after use and left to air dry.
- For instructions on cleaning a commode and commode pan (see Appendix 1).
- **For any queries regarding reprocessing of equipment staff, should contact the manufacturer or your local Community Infection Prevention and Control or Public Health England Team for advice.**

9. Decontamination of equipment prior to inspection, service or repair

When equipment requires servicing, repair or returning to an equipment loan centre, documentation should accompany the equipment stating if the item has or has not been decontaminated (see Appendix 2).

10. Symbols and their meanings

Single use

Single use means that the item is intended to be used on an individual person during a single procedure and then discarded. It is not intended to be reprocessed or used on another person.

Items intended for single use, e.g. catheter bag, are packaged with symbol  or are labelled 'single use'.

KEY ISSUES

- Reprocessing of single use items should never happen – always dispose of them after use.
- Anyone preparing single use items for further episodes of use may be transferring legal liability for the safe performance of the item to themselves with the potential to cause harm to those in their care.

Single patient use

Single patient use means, that if required, the item can be decontaminated and used again on the same person, but cannot be used on another person.

Packaging on items intended for single patient use, e.g. oxygen mask, will be labelled 'single patient use'.

11. Infection risks and categories

Risk category	Level of decontamination	Method	Examples
High risk			
Items in contact with a break in the skin or mucous membrane or introduced into a sterile body area	None for single use items. Cleaning and sterilisation of reusable items	<ul style="list-style-type: none"> Single use items disposed of after use. Reusable items reprocessed by an accredited Decontamination Services facility 	<ul style="list-style-type: none"> Needles, syringes Sterile instruments
Medium risk			
Items in contact with intact mucous membranes, or are contaminated with blood/body fluids or in contact with a service user with an infection	None for single use items. Cleaning and then disinfection or sterilisation of reusable items	<ul style="list-style-type: none"> Single use items disposed of after use. Reusable items cleaned and then disinfected or reprocessed by an accredited Decontamination Services facility 	<ul style="list-style-type: none"> Bedpans, commodes Equipment contaminated with body fluid spillage Equipment in contact with a service user with an infection
Low risk			
Items in contact with intact skin, not contaminated with blood or body fluids, not in contact with a service user with an infection	Cleaning usually adequate	<ul style="list-style-type: none"> Manual cleaning using detergent and water 	<ul style="list-style-type: none"> Wash bowls Mattresses Pressure relieving cushions Hoists Baths

12. References

Department of Health (2015) *The Health and Social Act 2008: Code of Practice for the Prevention and control of healthcare associated infections*

Department of Health (2013) *Prevention and control of infection in care homes*

Department of Health (2006) *Essential steps to safe, clean care*

Loveday et al (2014) epic3: *National Evidence-Based Guidelines for Preventing Healthcare-Associated Infections in NHS Hospital in England*

Journal of Hospital Infection Volume 86; Supplement 1; Pages S1-S70; January 2014

Medicines and Healthcare Products Regulatory Agency (2018) *Single-use medical devices: implications and consequences of reuse*

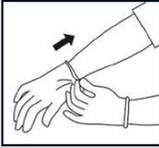
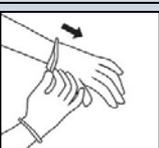
NHS England and NHS Improvement (March 2019) *Standard infection control precautions: national hand hygiene and personal protective equipment policy*

Royal Marsden NHS Foundation Trust (2015) *The Royal Marsden Hospital Manual of Clinical Nursing Procedures 9th Edition*

13. Appendices

Appendix 1: Cleaning a commode and commode pan

Appendix 2: Declaration of Contamination Status

Cleaning a commode	
	1. Wash hands thoroughly with liquid soap and warm running water.
	2. Put on disposable apron.
	3. Put on disposable gloves.
	4. Starting from the top, clean back rest and arms (remember to clean under the arms).
	5. Remove the lid and clean the lid of the commode, topside first then underside.
	6. Remove the seat, if the design allows, and clean the top then underside.
	7. Clean the seat frame, legs, and then foot pedals and wheels if there are any.
	8. Remove gloves (these should be removed before your apron) and dispose of.
	9. Remove apron and dispose of.
	10. Wash hands thoroughly with liquid soap and warm running water.

Cleaning a commode pan	
	1. Wash hands thoroughly with liquid soap and warm running water. Then put on disposable apron and gloves.
	2. Carefully remove pan from commode to avoid spilling the contents.
	3. Empty the pan contents into the toilet.
	4. Place pan into a bucket of detergent and warm water.
	5. Wash the pan with a disposable cloth. Then dry pan with disposable paper towels.
	6. Wipe pan with 1,000 ppm household bleach. Leave to air dry.
	7. Remove gloves then apron and dispose of.
	8. Wash hands thoroughly with liquid soap and warm running water.



DECLARATION OF CONTAMINATION STATUS

From (consignor):	To (consignee):
Address:	Address:
Reference:	Reference:
Emergency tel:	

Type of equipment:	Manufacturer:
Description of equipment:	
Other identifying marks:	
Model No:	Serial No:
Fault:	

Is the item contaminated? **Yes*** **No** **Don't know**

* State type of contamination: blood, body fluids, respired gases, pathological samples, chemicals (including cytotoxic drugs), radioactive material or any other hazard

Has the item been decontaminated? **Yes (a)** **No (b)** **Don't know**

(a) What method of decontamination has been used? Please provide details:

Cleaning:

Disinfection:

Sterilisation:

(b) Please explain why the item has **NOT** been decontaminated:

.....

.....

CONTAMINATED ITEMS SHOULD NOT BE RETURNED WITHOUT PRIOR AGREEMENT OF THE RECIPIENT

This item has been prepared to ensure safe handling and transportation:	
Name:	Position:
Signature:	
Date:	Tel:

Community Infection Prevention and Control, Harrogate and District NHS Foundation Trust
 July 2017 www.infectionpreventioncontrol.co.uk