

# HEALTHCARE ASSOCIATED INFECTIONS PROCEDURE



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## 1 PURPOSE

- 1.1 CQUniversity has an obligation to provide a work environment without risks to health and safety, so far as is reasonably practicable. This obligation includes eliminating or minimising, so far as is reasonably practicable, the risks associated with the exposure to healthcare associated infections (HAIs).
- 1.2 This procedure provides guidelines for developing local safe work procedures to:
- prevent and control worksites where there is a risk of exposure to biological agents
  - outline minimum recommended measures for immediate assessment and management of exposure, and
  - ensure recommendations for initiation of post-exposure prophylaxis.
- 1.3 This procedure should be read in conjunction with the [Australian Guidelines for the Prevention and Control of Infection in Healthcare](#).

## 2 SCOPE

- 2.1 This procedure applies to employees, students, contractors and their employees, and visitors who participate in CQUniversity business operations and activities.

## 3 PROCEDURE

- 3.1 HAIs can be transmitted via biological agents (also known as pathogens) and can cause serious or life threatening disease or illness to their host. For example, blood and other body fluids, needlestick/sharps, etc.
- 3.2 As differing types and levels of risk exist between facilities, local safe work procedures will need to be developed for each setting.
- 3.3 Universal Precautions are a set of precautions designed to prevent transmission of the Human Immunodeficiency Virus (HIV), Hepatitis B (HBV) and other blood borne pathogens when providing first aid or health care. Blood and certain defined body fluids of all patients are considered potentially infections. Further details regarding these can be obtained from the [Centres for Disease Control and Prevention](#).

## Identifying those at risk of exposure to biological agents

- 3.4 Each business area is responsible for identifying those at risk of exposure to HAIs. Those at risk are likely to include employees, students, contractors and visitors in:
- laboratories with clinical settings where biological agents are handled and/or exposure-prone invasive procedures are performed (including needlestick/sharps use), and
  - other environments where this contact with, or potential exposure to biological agents (for example, plumbers, cleaning employees, first aid officers, etc).
- 3.5 Where there is doubt about the potential for exposure, contact the Safety and Wellbeing Unit for assistance and risk assessments.

## Risk identification and management

- 3.6 Biological agents should always be handled as if they are infectious, even if they have been tested and results are negative for HIV, Hepatitis B (HBV) and Hepatitis C (HCV), or any other potential pathogen.
- 3.7 An appropriate risk identification and management process may include:
- identifying the tasks where there is exposure to biological agents
  - assessing the risks of the exposure, and
  - developing, implementing and reviewing local safe work instructions and procedures which result in minimising the risk of exposure to biological agents.

## Local safe work instructions and procedures

- 3.8 Working environments where exposure to biological agents are, or are likely to be, present may differ with each situation. Work Area Supervisors must maintain awareness and apply vigilance in this regard.
- 3.9 Local safe work instructions and procedures will include, where appropriate:
- ensuring personal hygiene is appropriate (hand hygiene using plain or antiseptic soaps, alcohol-based hand rubs, etc.)
  - induction/orientation for new employees, students, contractors and/or visitors to the work area – to promote familiarity and compliance
  - handling, storage and disposal of specimens and samples
  - proper use and disposal of needles, syringes and sharps
  - cleaning up and disposal of infectious waste
  - cleaning of other contaminated materials
  - informing female participants about exposure to risks to self and unborn children during pregnancy
  - details for an immediate referral to a medical practitioner
  - details for an immediate referral to a medical practitioner disease specialist, as treatment to prevent HIV infection should be started with a few hours of an injury
  - notice that if exposure occurs whilst a student is undertaking approved work studies within an external health care setting, the student will follow the health care protocol adopted in that setting, and
  - the following wording to ensure a prompt response to exposure, especially via a cut or needlestick/sharps injury:
    - if the exposure does not involve a cut or puncture, wash with soap and water
    - if the exposure involves a cut or puncture, gently encourage bleeding, then wash with soap and water
    - if the exposure involves the eyes, rinse with water or normal saline gently but thoroughly while they are open for at least 30 seconds

- if the exposure involves the mouth, try and have the person spit these out and then rinse the mouth with water several times
- if the exposure involves clothing, remove the clothing and shower if necessary
- seek medical advice – and it is imperative that details are provided for an immediate referral to a medical practitioner
- if the injury presents a high risk of exposure to HIV infection, provide the name and contact details of a preferred medical practitioner disease specialist.

## Incidents

3.10 If there is an exposure to a HAI:

- report the incident to the Work Area Supervisor immediately.
- the Work Area Supervisor will notify the Safety and Wellbeing Unit immediately by phone, and then submit the [Report an Incident Form](#) in the CAMMS Risk Reporting System.

## 4 RESPONSIBILITIES

### Compliance, monitoring and review

- 4.1 Management, employees, students, contractors and visitors at CQUniversity worksites (including any work activities that are conducted off-site) have a duty to take reasonable care for their own health and safety and must not adversely affect the health and safety of other person. They must comply with relevant instruction and cooperate with any reasonable legislation or policy document relating to health and safety at the workplace. For further information on an individual's roles and responsibilities for safety and health, refer to the [Work Health and Safety Roles and Responsibilities Procedure](#).
- 4.2 The Director People and Culture and Safety and Wellbeing Unit are responsible for implementing, monitoring, reviewing and ensuring compliance with this procedure.

### Reporting

- 4.3 Non-compliances with this procedure are to be reported and investigated as an incident under the [Incident and Hazard Reporting and Investigation Procedure](#).

### Records management

- 4.4 Employees must manage records in accordance with the [Records Management Policy and Procedure](#). This includes retaining these records in a recognised University recordkeeping information system.
- 4.5 University records must be retained for the minimum periods specified in the relevant [Retention and Disposal Schedule](#). Before disposing of any records, approval must be sought from the Records and Privacy Team (email [records@cqu.edu.au](mailto:records@cqu.edu.au)).

## 5 DEFINITIONS

- 5.1 Terms not defined in this document may be in the University [glossary](#).

## 6 RELATED LEGISLATION AND DOCUMENTS

[Australian Guidelines for the Prevention and Control of Infection in Healthcare](#) (National Health and Medical Research Council)

[Incident and Hazard Reporting and Investigation Procedure](#)

[National Code of Practice for the Control of Work Related Exposure to Hepatitis and HIV \(blood-borne\) Viruses](#)

[Report an Incident Form](#)

[Work Health and Safety Act 2011](#) (Qld)

## 7 FEEDBACK

7.1 Feedback about this document can be emailed to [policy@cqu.edu.au](mailto:policy@cqu.edu.au).

## 8 APPROVAL AND REVIEW DETAILS

Approval and Review	Details
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Notes	This document was formerly known as the Safety Health Environment WorkCover Sustainability (SHEWS) Needlestick and Other Blood and Body Fluid Exposures Procedure (last approved 26/07/2011) and the Safety Health Environment WorkCover Sustainability (SHEWS) Healthcare Associated Infections Procedure (last approved 16/03/2016).