Guides to Good Nursing Practice
Infection Control

Preamble
The field of hospital infection control started in the middle of the 1800s when Semmelweis and Nightingale introduced sanitation and hygienic practices into hospital. Modern ‘infection control’ as practised today, was initiated when a series of hospital outbreaks of Staphylococcus aureus infection in the 1950s occurred in United States and United Kingdom (Lin, Ching & Seto, 2004). Infection control has become a formal discipline in Hong Kong since mid 1980s because of the Methicillin Resistant Staphylococcus Aureus (MRSA) outbreak publicity. The emergence of life-threatening infection during the outbreak of Severe Acute Respiratory Syndrome (SARS) in March 2003 has highlighted the need for efficient infection control programmes in all health care settings and capacity building for health care workers (World Health Organization, 2003).

Healthcare-associated infections (HAI), whether acquired during home, ambulatory, institutional or hospital care, constitute one of the greatest challenges of modern medicine. HAI have shown to be expensive. They extend clients’ stay and increase mortality (Dawson, 2003). The prevention and control of infection is fundamental to the provision of a safe environment for clients and forms an integral part of the practice of any health care workers in the clinical settings. Nurses, as front-line care givers, are ideally placed to practise infection control which is an integral part of quality client care.

Definition
Infection control refers to policies and procedures used to minimize the risk of spreading infections, especially in hospitals and health care facilities (Jones & Frey, 2004).

Principles
In implementing infection control, the nurse needs to consider the following:
1. Remove source of infection by treating infections, decontamination procedures and environment cleaning.
2. Prevent transfer of infections with good hand hygiene practice, aseptic procedures and appropriate precautionary measures.
3. Enhance body resistance with good nutrition, appropriate antibiotic prophylaxis or vaccination.

Responsibilities of the nurse
1. The nurse assesses the situations for potential or actual transmission of infectious disease during care delivery in all settings.
2. The nurse ensures necessary action(s) is/are taken to reduce the risk of developing HAI in clients, self and others.
3. The nurse applies measures to prevent and control transmission of micro-organisms that are likely to cause infection. These include:
   a) Keeping updated record of immunization status of self.
   b) Adopting appropriate precautions during caring practices.
   c) Adhering to appropriate hand hygiene guidelines/protocols.

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d) Using appropriate personal protective equipment.
e) Reporting, intervening and providing appropriate care when an infectious risk of exposure has occurred to client(s), self or others.

4. The nurse monitors the compliance of infection control policies and practices.
5. The nurse ensures that timely and appropriate investigations, treatment and care are provided to the client with infection.
6. The nurse reports the abnormal clustering of symptoms other than infectious diseases in accordance with the prevailing reporting system.
7. The nurse collaborates in surveillance with regard to prevention and control of infections.
8. The nurse educates client and family with regard to personal and environmental hygiene, prevention and control of infections.
9. The nurse proactively identifies appropriate resources to upkeep the standards of infection control practices and infectious diseases management.
10. The nurse updates self knowledge and practices of infection control.

Bibliography


Useful Web-sites in Hong Kong
Webpage on Infectious Diseases & Infection Control, Hospital Authority Intranet: www.ha.home/visitor.

Infectious Disease Control Training Centre: www.ha.org.hk/idctc.

Centre for Health Protection: www.chp.gov.hk.

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