



# **ASEPTIC NON-TOUCH TECHNIQUE POLICY**

**Version No: 8 June 2024**

# Contents

(For quick access to a specific heading - press CTRL and click your mouse to follow the link for the below options)

1.	INTRODUCTION .....	<b>Error! Bookmark not defined.</b>
2.	PURPOSE.....	<b>Error! Bookmark not defined.</b>
3.	SCOPE .....	<b>Error! Bookmark not defined.</b>
4.	RESPONSIBILITIES .....	<b>Error! Bookmark not defined.</b>
5	POLICY STATEMENT .....	3
6.	PROCEDURE.....	3
7.	MONITORING AND REVIEW.....	<b>Error! Bookmark not defined.</b>
8.	REFERENCES ( <i>if relevant</i> ) .....	<b>Error! Bookmark not defined.</b>
9.	ASSOCIATED POLICES & PROCEDURES .....	5
10	AUTHOR .....	5
11.	APPENDICES .....	5
	Appendix 1 - Essential Steps to Safe Clean Care .....	6
12.	EQUALITY & DIVERSITY IMPACT ASSESSMENT .....	10
13.	DOCUMENT CONTROL .....	10

## **1. INTRODUCTION**

Aseptic non touch technique is the practice which aims to prevent the contamination of wounds and other susceptible sites by ensuring uncontaminated equipment, referred to as key parts or sterile fluids come into contact with susceptible or sterile body sites during clinical procedures.

Aseptic technique is required whenever carrying out a procedure that involves contact with a part of the body or an invasive device where introducing micro-organisms may increase the risk of infection. (The Royal Marsden 2017) eg cannulation, venepuncture, IV medication, wound care and urinary catheterisation.

## **2. PURPOSE**

The purpose of this policy and procedure is to ensure that patients have a right to be protected from preventable infection and nurses have a duty to safeguard the well-being of their patients.

The Health and Social Care Act (2012) identified Aseptic technique in its clinical care protocols, stating “clinical procedures should be carried out in a manner that promotes the principle of asepsis. Education, training and assessing in the aseptic technique should be provided to all persons undertaking such procedure, the technique should be standardised across the organisation” and that “audits should be undertaken to monitor compliance with the technique.”

## **3. SCOPE**

This policy is for all staff employed either directly or indirectly by ECCH who are trained in this technique. This policy also applies to Agency staff. These staff may work within ECCH premises or patients’ own homes.

## **4. RESPONSIBILITIES**

It is the responsibility of all staff to ensure that they comply with the Health and Social Care Act (2012) and adhere to best practice as described in this policy.

## **5. POLICY STATEMENT**

This policy will be implemented to ensure that safe practice and every effort is undertaken to keep the patient as free from micro-organisms as possible.

## **6. PROCEDURE**

- Avoid exposing or dressing wounds or performing an aseptic procedure for at least 30 minutes after bed making or domestic cleaning.
- Plan to dress clean wounds prior to known infected cases.
- Assemble all appropriate items for the procedure, check items are appropriate to the task and are undamaged intact and dry.
- Prepare the setting including decontamination of the working surface to be used with soap and water then dry if appropriate or wipe with detergent wipes.
- Explain the procedure to the patient.
- Decontaminate hands as per the hand hygiene guidelines.
- A clean plastic disposable apron should be worn over uniform or clothing.

- Open the sterile field using the corners of the paper only.
- Decontaminate hands as per the hand hygiene guidelines.
- Use non-sterile gloves to minimise aeroionisation of micro-organisms and carefully remove the dressing and place immediately in disposal bag.
- Expose the wound for the minimum time to avoid contamination and maintain temperature.
- Decontaminate hands again.
- Put on sterile gloves for the procedure.
- Perform the procedure including skin preparation where applicable, avoiding contamination of sterile equipment and vulnerable site.
- If the wound is showing signs of infection, a swab should be taken.
  - ✓ Use standard precautions
  - ✓ Open the sterile field using the corners of the paper only.
  - ✓ Open single use only items by peeling back method & tip onto the sterile field
  - ✓ Dispose of single-use items after use
- Remove gloves and aprons.
- Dispose of waste as per waste policy.
- Decontaminate the working surface.
- Decontaminate hands.

A step-by-step clinical guideline is designed to allow the practitioner to:

Always decontaminate hands effectively.  
 Never contaminate key parts or key sites.  
 Touch non key parts with confidence.  
 Take appropriate infection control precautions.

## 7. MONITORING AND REVIEW

It is the responsibility of all department heads/ professional leads, to ensure that the staff they manage adhere to this policy. This policy will be reviewed by the Infection Prevention & Control team in conjunction with other staff groups in June 2024, or sooner if changes in legislation occur or new best practice evidence becomes available.

All clinical staff should complete the ANTT audit yearly on QUEST. Compliance will be monitored and reported at IPACC.

## 8. REFERENCES

Association for Safe Aseptic Practice (2024) ANTT is used in all healthcare sectors & settings- Community/Home Care. Available at: <https://www.antt.org/antt-procedures-settings.html> [Accessed 29.04.2024]

Department of Health. 2008. The Health and Social care Act 2008: Code of Practice for the NHS on the Prevention and Control of Healthcare Associated Infections and related guidance. 13<sup>th</sup> December 2022 Available at: [Health and Social Care Act 2008: code of practice on the prevention and control of infections and related guidance - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/101222/Health_and_Social_Care_Act_2008_code_of_practice_on_the_prevention_and_control_of_infections_and_related_guidance_-_GOV.UK.pdf) [Accessed 29.04.2024]

National Institute for Health and Care Excellence NICE (2017) Healthcare-associated infections: prevention and control in primary and community care Available from:

<https://www.nice.org.uk/guidance/cg139/chapter/Recommendations> [Accessed 29.04.2024]

Palmer, S.J (2019) Practising asepsis during dressing changes in community settings. British Journal of Community Nursing 24(12) Available at: [British Journal of Community Nursing - Practising asepsis during dressing changes in community settings](#) [Accessed 29.04.2024]

The Royal Marsden Hospital Manual of Clinical and Cancer Nursing Procedures Online 10<sup>th</sup> Edition. [Accessed 29.04.2024]

## 9. ASSOCIATED POLICIES AND PROCEDURES

- Hand Hygiene Policy

## 10. AUTHOR

Infection Prevention & Control Team June 2024

## 11. QUALITY & DIVERSITY IMPACT ASSESSMENT

In reviewing this policy, the HR Policy Group considered, as a minimum, the following questions:

- Are the aims of this policy clear?
- Are responsibilities clearly identified?
- Has the policy been reviewed to ascertain any potential discrimination?
- Are there any specific groups impacted upon?
- Is this impact positive or negative?
- Could any impact constitute unlawful discrimination?
- Are communication proposals adequate?
- Does training need to be given? If so is this planned?

Adverse impact has been considered for age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex, sexual orientation.

Blank version of the full Equality & Diversity Impact assessment can be found here:

[http://eccho/Home/FormsGuidance.aspx?udt\\_575\\_param\\_index=E&udt\\_575\\_param\\_page=2](http://eccho/Home/FormsGuidance.aspx?udt_575_param_index=E&udt_575_param_page=2)

## 12. DOCUMENT CONTROL

Version Date	Version No.	Author/ Reviewer	Comments
March 2010	2	IPCT	Policy Updated
December 2012	3	IPCT	Policy Updated
December 2014	4	IPCT	Policy Updated
September 2016	5	IPCT	Policy Updated
September 2018	6	IPCT	Policy Updated
June 2020	7	IPCT	Policy Updated
June 2022	8	IPCT	Policy Updated
June 2024	9	IPCT	Policy updated, references revised

## DOCUMENT CONTROL SHEET

<b>Name of Document:</b>	Non Touch Aseptic Technique
<b>Version:</b>	9
<b>File Location / Document Name:</b>	ECCHO <a href="#">Non Touch Aseptic Technique</a>
<b>Date Of This Version:</b>	June 2024
<b>Produced By (Designation):</b>	Infection Prevention & Control
<b>Reviewed By:</b>	Infection Prevention & Control Committee
<b>Synopsis And Outcomes Of Consultation Undertaken:</b>	Changes relating to relevant committees/groups involved in ratification processes.
<b>Synopsis And Outcomes Of Equality and Diversity Impact Assessment:</b>	No specific issues. National EIA give more details on measures to reduce HCAs.
<b>Ratified By (Committee):-</b>	Infection Prevention & Control Committee
<b>Date Ratified:</b>	13/06/2024
<b>Distribute To:</b>	ECCH
<b>Date Due For Review:</b>	June 2026
<b>Enquiries To:</b>	infectionprevention@ecchcic.nhs.uk
<b>Approved by Appropriate Group/Committee</b>	<input type="checkbox"/> Date:
<b>Approved by Policy Group</b>	<input type="checkbox"/> Date:
<b>Presented to IGC for information</b>	<input type="checkbox"/> Date: