ASEPTIC NON TOUCH TECHNIQUE POLICY

Aseptic technique
Revised December 2012 Review Date December 2014
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1. Introduction

Aseptic technique is the practice of carrying out a procedure in such a way to prevent contamination of wounds and other susceptible sites by organisms that could cause infection.

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 2011)

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 (2008) 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.”

2. 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.

3. 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.

4. Responsibilities

It is the responsibility of all staff to ensure that they comply with the Health and Social Care Act (2008) and adhere to best practice as described in this policy.

5. Policy Monitoring

It is the responsibility of all department heads/ professional leads, to ensure that the staff they manage adhere to this policy.

6. Review

This policy will be reviewed by the Infection Prevention & Control team in conjunction with other staff groups in December 2014
7. Principles of aseptic technique

- 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.
- Explain the procedure to the patient.
- A clean plastic disposable apron should be worn over uniform or clothing.
- Decontaminate hands as per the hand hygiene guidelines.
- To minimise aerosolisation of microorganisms 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.
  - 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.

8. References


Goodinson SM 1990 Keeping the Flora Out. Professional Nurse. 5(11), 572-5

Infection Control Nurses Association. 2003 Asepsis: Preventing Healthcare Associated Infection


9. Author

Infection Prevention & Control Team