

Preventing infection

Information for patients



At University Hospital Southampton NHS Foundation Trust (UHSFT) we take infection prevention very seriously.

Healthcare associated infections (HAIs) can occur in hospital and in the community. The most common are MRSA (Meticillin Resistant Staphylococcus Aureus) and C.difficile (Clostridium difficile).

At this trust we have very low rates of MRSA and C.difficile and we are committed to reducing these further, as well as focusing on other infections that can occur in hospitals.

We are one of the country's leading trusts for infection prevention, and the risk of getting an infection in one of our hospitals is extremely low. Our director of nursing is responsible for infection prevention, and we have a dedicated infection prevention team who provide specialist advice and support to our staff and patients.

This leaflet explains what our staff do to keep you safe, as well as what you and your visitors can do to help us prevent infections.

What we're doing to keep you safe

Our aim is to keep you safe by:

- Preventing the development of new bacteria (germs) that are resistant to antibiotics and cause infection
- Preventing infection spreading between patients
- Preventing bacteria getting into your wounds

We do this by:

- Always cleaning our hands correctly
- Using the right antibiotics and only when needed
- Using invasive medical devices such as catheters and cannulas to the highest standards and removing them as soon as it is safe
- Ensuring patients with contagious infections are treated in single rooms
- Ensuring wards and equipment are cleaned to the highest standards

All our staff have regular infection prevention and hand hygiene training. Our staff should wash their hands with soap and water or use an alcohol rub or gel before and after contact with each patient they see.

We provide alcohol hand gel at every bedspace and at the entrance and exit to all departments, wards and bays.

As antibiotics can increase your risk of infection, we will only prescribe them when absolutely necessary. We have also reduced the use of broad spectrum antibiotics, which can affect your body's ability to fight infection, because they kill good bacteria as well as bad.

The area around your bed should be cleaned every day. Please tell a member of staff if you have any concerns about how clean the ward is.

If you visit the bathroom or toilet and it does not look clean please report this to the nurse in charge of the ward immediately.

Hand hygiene

Cleaning your hands is one of the simplest, cheapest and most effective ways to prevent bacteria being passed from person to person. A third of infections can be prevented with effective hand hygiene, which means washing hands thoroughly with soap and water or using alcohol hand gel.

Our hospital wards and clinical areas have alcohol hand gel dispensers available for staff and visitors to use.

While you are in hospital, keep your hands and body clean using your own personal toiletries.

We recommend that you have moist hand-wipes with you to ensure there is always something available to clean your hands.

Our staff should always wash their hands or use an alcohol rub or gel before they examine you. Don't be afraid to ask them if they have cleaned their hands. Patients and visitors should always clean their hands with soap and water or an alcohol rub or gel when they enter a ward, and again when they leave. You can find alcohol gel at the entrances to our hospitals and wards.

Everyone should also clean their hands:

- After visiting the toilet, using a commode or changing a nappy
- Before eating, drinking and handling food
- After blowing your nose, sneezing or coughing
- If your hands are dirty.

It's also important to remember that if you have a wound dressing, stitches, drips or catheters you must try not to touch them unnecessarily.

Reducing the risk of MRSA Infection

We aim to keep you safe from all infections in hospital. Our approach to preventing MRSA infection will give you an example of how we do this.

Washing with a liquid soap containing a skin disinfectant

Many germs can live on the skin of healthy people, including MRSA. Usually they do not cause any problems, but if they get into a wound or the blood they can cause infection.

To reduce the risk of MRSA infection, you will be given a special liquid soap, containing a skin disinfectant, to use in hospital.

This soap reduces the risk of MRSA infection, and should be used for the first five days of your hospital stay. If you are having a surgical procedure or intervention, you may be asked to use the soap two to three days before your hospital admission and for two to three days after the procedure.

You do not have to continue using the liquid soap once you leave hospital.

For the soap to be effective you must:

- Use it every day for five days while you are in hospital
- Wet your skin and apply directly onto your skin using a clean wet cloth or hands (like shower gel)
- Wash from head to toe, avoiding your eyes
- Make sure you wash your hair with the soap at least twice during the five days
- Pay particular attention to folds of the skin, such as under the arms and between the legs
- Leave the soap on your skin/hair for 60 seconds before rinsing off.

If you would like more information or require assistance using the skin disinfectant, please ask the nurse or doctor looking after you.

MRSA screening

It is routine practice to screen patients for MRSA.

All adult patients, with the exception of some day cases, will be screened for MRSA. This is normally done in pre-assessment if you are having a planned operation/ procedure, or on the day of admission if you are admitted as an emergency.

By screening for MRSA with a simple swab test we can find out who is carrying the germ and provide any necessary treatment. This helps to prevent the spread of the germ and lowers the risk of it causing complications.

We use a cotton bud to take a swab from in and around your nose or on surfaces of your skin (for example your groin) or wounds. The test will not hurt but might feel a little uncomfortable. We then send the swab/s to the laboratory for testing.

Results are usually available within three to four working days. If you are found to be carrying MRSA we will give you additional information and you may have treatment to reduce the risk of developing MRSA infection.

Screening for other infections

In some situations, for example if you have been a patient in a hospital abroad or another hospital in the UK or if you have been in contact with a carrier of an antibiotic resistance organism, it may be necessary to carry out screening for other infections. If screening is required, our staff will provide you with information relating to this.

What you and your visitors can do to help

Infection prevention is everyone's responsibility, and there are several things you and your visitors can do to help keep you safe:

- Keep the top of your locker, bed table and the area around the bed clutter free, to make it easier for staff to clean thoroughly.
- Visitors who have been unwell should not come into the hospital unless they have been free of symptoms for 72 hours.
- Visitors should not sit on your bed. If there are no chairs available ask a member of staff.

- Always wear something on your feet when walking around, such as a pair of slippers with good grip on the sole.
- If you develop signs of infection, such as a temperature, diarrhoea or vomiting, let the ward staff know immediately.

Occasionally, patients may need to be isolated in side-rooms to prevent the spread of infection. Your nurse will give you advice about any precautions you or your visitors need to take if this happens.

If you know you are or have been colonised or infected with MRSA or *C. difficile* or another antibiotic resistant organism.

If you develop diarrhoea in hospital or were in contact with someone who had diarrhoea just before admission please let us know.

Infections glossary

Clostridium difficile

C. difficile is a bacterium (germ) that is present in the gut of up to 3% of healthy adults, without causing any problems.

However, it can cause illness when certain antibiotics disturb the balance of bacteria in the gut.

Symptoms can range from mild diarrhoea to severe, life-threatening inflammation of the bowel.

MRSA

Staphylococcus aureus is a germ that can live harmlessly on human skin. Up to 40% of healthy people have this on their skin or in their nose. This is called colonisation.

Meticillin Resistant *Staphylococcus aureus* (MRSA) is a type of *Staphylococcus aureus* that is resistant to the more commonly used antibiotics. In most people, MRSA never causes a problem but occasionally it can cause an infection that can be difficult to treat.

MRSA only causes infection when it enters the body, for example during, or after, surgery.

Norovirus

Norovirus is the most common cause of gastroenteritis (stomach bugs) in England and Wales. If you have ever been ill at home with diarrhoea and vomiting lasting one to two days, this is likely to have been caused by Norovirus.

You may have also heard this called winter vomiting bug or Norwalk-like virus.

Symptoms include:

- Sudden nausea and vomiting
- Diarrhoea - often watery
- Stomach pains and cramps

Some people may also have a raised temperature, headaches and aching limbs.

Most people make a full recovery within one to two days, although some (usually the very young or elderly) may become very dehydrated and need hospital treatment.

Where to get further information

If your screening shows that you have MRSA, you will be given a separate leaflet with all the information you need to know.

We will also give you extra information if there is an outbreak of infection while you are in hospital.

For more information, including our current infection rates, visit our website www.uhs.nhs.uk.

Other useful websites are:

NHS www.nhs.uk

Patient UK www.patient.co.uk

Department of Health www.dh.gov.uk

Infection prevention team

Telephone: **023 8120 4672**

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Southampton General Hospital
Tremona Road
Southampton
Hampshire
SO16 6YD

Telephone: **023 8077 7222**

**If you need a translation of this document,
an interpreter or a version in large print,
Braille or on audiotape, please telephone
023 8120 4688 for help.**

www.uhs.nhs.uk

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