

Sample Policy and Procedures Manual



Utopia Medical Clinic



Contents

Medical staff	1
Clinic services	1
Radiology services.....	1
Physiotherapy	1
Health services information	1
Hours of operation.....	2
After hours medical care.....	2
Appointments.....	3
Standard appointments	3
Emergency and priority cases	3
Off site visits.....	3
Making appointments for specialists or consultant physicians.....	4
Patient calls to doctors	4
Clinic security	5
Patients requesting to use the phone.....	5
Calling taxis for patients.....	5
Patient accounts	6
Payment methods.....	6
Bulk-billing policy.....	7
Multilodging (sending in Medicare claims for patients).....	8
Complaints	9
Management of personal health information	10
Medical records	10
Patient confidentiality	10
Patient access to medical records.....	11
Storage and security.....	12



Workplace agreements	13
Administration officer - Australian Workplace Agreement (AWA)	13
Professional conduct	14
Treating people with respect	14
Patient confidentiality	14
Careless talk and gossip	14
Discrimination and harassment	15
What is discrimination?	15
What is harassment?	16
Complaint resolution procedure	17
Workplace safety	18
Immunisation	18
No smoking	18
Emergencies	18
Emergency response codes	20
Infection control	27
Cleaning and sterilising instruments	28
Hazardous waste	30
Needlestick and sharps injuries	31
Manual handling techniques	32
Making your workstation safe	33
Injury/incident reporting	33



Medical staff

Clinic partners	Specialists and consulting physicians
Dr Rajit Habibi General Practitioner	Dr Sarah Soames Obstetrician and Gynaecologist
Dr Heather Pieterse General Practitioner	Dr Gary Richards Orthopaedician
Dr Gerald Rice General Practitioner	Dr Neil Osborne Dermatologist
Dr Tien Huynh ENT Specialist	Dr David Cohen Gastroenterologist
	Dr Peter Holmes Urologist
	Dr Manfred Pinsker Ophthalmologist

Clinic services

Radiology services

Radiology services are available at the clinic Monday to Friday between the hours 9.00 am and 6.00 pm.

Physiotherapy

Physiotherapist Ms Julia Giacomini consults at the clinic on the following days.

- Wednesdays 9.00 am to 6.00 pm.
- Fridays 9.00 am to 3.00 pm.

Health services information

The Utopia Clinic can provide patients with a range of written information on common and serious medical conditions and self-help groups. The clinic also works with a range of health and community services and allied health professionals to improve individual patient care.



Reception staff are responsible for maintaining stocks of brochures and leaflets in the information displays in patient waiting rooms, reception and consulting rooms.

Hours of operation

Consultations at the clinic are available during the following times.

Monday to Friday	9.00 am to 9.00 pm
Saturday	9.00 am to 1.00 pm
Sunday	Closed

After hours medical care

The clinic has engaged the services of Dr James Matthews to provide a locum service for the after hours medical care of patients.

Dr Matthews can be contacted on:

- Telephone: 9905 7457
Mobile: 0409 900 800.

Information on the locum service is recorded on the clinic's answering machine. The answering machine is automatically activated when the clinic's switchboard is placed on night switch.

Medical emergency

Outside of the clinic's normal hours of operation, in cases of medical emergency, patients can seek assistance from:

Arista Hospital
Emergency Department
345 – 350 Pacific Highway, Arista
Telephone: 9998 0000

The hospital's Emergency Department operates 24 hours a day, 7 days a week.

For an ambulance call the emergency services operator on 000.



Appointments

Standard appointments

It is the clinic's policy that all patients should be able to obtain a consultation for a non-urgent medical problem with the doctor of their choice within two working days. However this may be affected by:

- periods of high seasonal demand
- emergencies and priority cases.

Emergency and priority cases

The appointments system is designed to accommodate patients with urgent problems or those who need a longer consultation.

It is the responsibility of reception staff to determine the priority of need and book appointments accordingly.

All reception staff must understand the clinic's procedures in relation to medical emergencies. Refer to the 'Emergencies' section of this manual for more information.

Off site visits

Doctors Habibi, Pieteron and Rice are available for off site visits to patient homes, aged care facilities and hospitals.

Off site visits should only be booked in the assigned time blocks as indicated in each doctor's schedule. Bookings outside these times should only be done in consultation with the relevant doctor.



Making appointments for specialists or consultant physicians

For a patient to receive a Medicare benefit at the referred rate, a referral letter is required before seeing a specialist or a consultant physician.

If a patient sees a specialist or a consultant physician **without a referral**, the refund paid to the patient by Medicare will be at a much lower 'unreferred' rate.

Note: It is the responsibility of the receptionist to advise patients if they need a new referral.

Checklist - making appointments for specialists or consultant physicians

- Each new patient should be referred either by their general practitioner (GP) or by another specialist provider. (Note: Optometrists may refer to ophthalmologists and dentists may refer patients.)
- A referral from a GP is valid for 12 months (unless otherwise specified).
- A referral from another specialist is valid for 3 months.
- If a patient makes an appointment for another consultation, **check** if their referral will still be current. If not, advise them to get a new referral from their doctor.

Patient calls to doctors

Doctors may choose to discuss clinical care with a patient by telephone in situations where a face to face consultation is considered unnecessary and it is safe to do so.

Doctors should be prepared to make time available (at their convenience) to take or return patient calls. Doctors should advise reception staff accordingly.

Reception staff should advise patients of the times doctors are available to take calls and take messages where appropriate.



Clinic security

The clinic uses a roster system to ensure that proper staffing levels are maintained throughout the hours of operation.

The minimum staffing level requires at least one doctor and one administration staff member to be on duty at all times.

Practice security should be maintained at all times to prevent unauthorised access to practice resources.

Medical records, prescription pads, letterheads, administrative records and other official documents should not be accessible to patients and visitors to the clinic.

Drugs must be safely stored and secured in locked cupboards.

Patients requesting to use the phone

Patients may use the phone at the reception desk, but will be required to pay 40 cents per call. STD and mobile phone numbers cannot be dialled from this phone, as this function has been disabled.

Calling taxis for patients

If an elderly or disabled patient asks you to call a taxi for them, phone the local taxi company which is **Black Cabs** on 13 2227. You do not need to charge for this service.



Patient accounts

Fees for professional services are determined by the Department of Health and Aged Care in consultation with professional bodies. The professional services which attract Medicare benefits are listed in the Medicare Benefits Schedule. A copy of the Medicare Benefits Schedule is available on the bookshelf behind the reception desk.

It is the clinic's policy that information about the costs of consultations, treatments, investigations or procedures be provided to patients in advance.

A **Consultation and Service Fees** chart which details the clinic's charges is displayed in reception to assist staff in advising patients of costs.

Payment methods

At Utopia Clinic, we accept payment by cash, credit card or cheque in certain circumstances (see below). When a payment is made, a receipt should be issued from the computer and given to the customer.

Payment by credit card

In the case of payment by credit card, the credit card payment should be processed **first** using the credit card machine. When the patient has signed the receipt, separate the original and the patient's copy. The payment details can **then** be entered into the computer.

The patient's copy of the credit receipt should be stapled to the patient's receipt from the computer.

What to do with Visa and MasterCard slips

The originals from credit card payments are stored in the appropriate box below the reception desk. These should be bundled at the end of each day, to be stored in the file storeroom, clearly labelled with the day's date.



Payment by cheque

It is preferred that only long term patients at the clinic pay by cheque. However if first time patients or patients who have been attending the clinic for less than six months wish to pay by cheque, ask for some means of identification such as a driver's licence or Medicare card.

Record the **type** of identification and the **number** (licence number or Medicare number) on the back of the cheque.

Payment by cash

The clinic keeps a small amount of cash on the premises (\$100.00 in small notes) to give change to customers who pay cash. Towards the end of each day, cash amounts of more than \$100.00 should be banked.

Bulk-billing policy

The Utopia Clinic is **not**, in general, a bulk-billing clinic. Patients who feel they have special needs in this regard should discuss this with the doctor during their appointment.

The doctors decide which patients are to be bulk-billed, and they will indicate this on the patient's notes. If a patient wishes to query this, tell them they must take it up with the doctor at their next appointment.

There is a sign in reception and the patient waiting rooms advising patients of the clinic's policy on this matter.

Bulk-billing patients who do not have their Medicare Card

If the doctor has specified that a patient is to be bulk-billed, but they do not have their Medicare card with them:

- check if their Medicare number is recorded on their file
- phone the HIC hotline 132 150 to get their Medicare number.



Multilodging (sending in Medicare claims for patients)

If patients request it, we can send in their claims to Medicare for them. The procedure in this case is as follows.

1. The patient will need to pay the difference between the Medicare refund and the fee we charge before you accept their Medicare claim form.
2. Give the patient a Medicare form to fill in. In the case of some of our elderly patients, you might offer to do this for them.
3. Check that all details are correctly and clearly filled in such as:
 - name and address
 - Medicare number
 - signatures in the appropriate place
 - doctor's details are correct
 - the box which indicates that the services have **not** been paid in full is ticked.
4. Attach the account.
5. Give the patient one of the clinic's addressed envelopes and ask them to use it to send the cheque to the clinic when Medicare sends it to them.

At the end of each day, any forms for Medicare should be mailed to:

Medicare
GPO Box 9822
MELBOURNE VIC 3001

It is important that this is done each day (even if there are not many forms to be sent) as the time lag between sending the form to Medicare and the patient receiving and forwarding the cheque is considerable.

Medicare and DVA forms

Completed Medicare and DVA forms should be placed in the appropriate box below the reception desk after they have been signed by the patient.

As the Utopia Clinic lodges these forms electronically, the forms do not need to be sent in to the Health Insurance Commission (HIC), but must be kept for auditing purposes for two years.

These should be bundled at the end of each day and stored in the file storeroom, clearly labelled with the day's date.

Ordering stationery from the Health Insurance Commission

Telephone 132 150 or fax 9605 7983 to order new Medicare forms for the clinic.



Complaints

The Utopia Clinic is committed to monitoring the effectiveness of the service we provide to our patients.

If a patient complains about the service provided by the clinic, record the following details and pass the information on to the Practice Manager, Dr Habibi.

1. Name of the patient(s).
2. Nature of the complaint, for example:
 - telephone access to clinic
 - appointment availability
 - being made to wait too long
 - clinic facilities
 - a complaint about their doctor.
3. Whether the complaint was made in person, on the telephone or in writing.

All complaints need to be handled promptly and with a caring and polite attitude.

Reassure the patient that their complaint will be taken seriously and passed on to the Practice Manager, Dr Habibi.

All complaints will be reviewed by the Practice Manager and measures put in place to avoid a repeat occurrence of the situation.



Management of personal health information

Medical records

Medical records contain personal health information which is used by doctors at the Utopia Clinic to manage and plan patient health care.

A typical medical record will contain information such as:

- patient identification sheet
- notes recording patient care
- summaries and reports from consulted specialists and diagnostic services
- test results
- prescribed medications.

It is necessary to collect and keep this information to provide a history of patient health care and to identify safe and effective future treatments.

Some of the information collected by the clinic may also be used to evaluate our service and plan for the future. If a medical record is used for this purpose, information that identifies the patient will be removed.

Patient confidentiality

The Utopia Clinic respects the rights of patients to decide how their personal health information is used or disclosed.

The Utopia Clinic will always ensure that patients:

- agree to have their personal health information collected
- consent to any disclosure to a third party.

Reasons personal health information may be disclosed to a third party include:

- seeking a second opinion from another medical practitioner
- referral to a specialist
- requesting diagnostic testing or examination (such as pathology or radiology)
- admission to casualty or hospital
- disclosure to obtain Medicare or insurance payments
- medical research.



Disclosure of personal health information without patient consent will only occur in situations where:

- the doctor is compelled by court order
- the doctor believes that a higher duty prevails in order to protect the public interest
- the disclosure is necessary to avoid a serious risk of harm to the person concerned
- there is a legal obligation under applicable Commonwealth or State legislation eg statutory provisions requiring the notification of certain infectious diseases or suspected child abuse.

Patient access to medical records

Under the Freedom of Information Act 1982 (Commonwealth), patients have the right to request amendments be made if the record contains information that is:

- inaccurate
- incorrect
- out of date
- misleading.

If a patient requests an amendment, the doctor concerned should add notes to the record to indicate the nature of the request and the changes made.

If a patient requests access to their medical record, this information can be provided by way of a summary. Provision of a medical record or summary should always be accompanied by an explanation from the doctor and an offer to discuss any patient concerns.

On rare occasions, a doctor may request that some information not be made available to a patient. This may be necessary if it is believed the information may be detrimental to a patient's health and well being if read by the patient.

If requested by a patient, the clinic will also transfer a copy of the medical record or summary to another medical clinic or practitioner.

Queries

Patient queries regarding the management of personal health information at the Utopia Clinic should be referred to the Practice Manager, Dr Rajit Habibi.



Storage and security

Active records

Medical records (computerised and paper) are retrievable only by authorised staff at the Utopia Clinic.

The Utopia Clinic is legally obliged to keep medical records for 7 years. The medical records of a minor must be held until the patient turns 25.

All active records are stored securely on the premises.

Inactive records

A medical record is considered inactive when a patient has not attended the clinic for more than three years.

Doctors will be responsible for confirming that a patient's medical record is inactive. The doctor will then produce a summary of the medical record and advise administration staff of the need for archiving.

Reception staff will arrange archiving of inactive medical records with:

Store Safe Security
545 Main Road
BRIGHTLEIGH
Telephone: 9905 6767.

Archived records will be reviewed annually and destroyed as required.



Workplace agreements

Administration officer - Australian Workplace Agreement (AWA)

Staff at the Utopia Clinic are covered by an Australian Workplace Agreement (AWA) developed in accordance with the Workplace Relations Act 1996 (Commonwealth).

An AWA is an individual written agreement between the Utopia Clinic and an employee about the terms and conditions of their employment.

Each AWA has been approved and filed with the Office of the Employment Advocate (OEA), an independent statutory officer appointed under the Workplace Relations Act 1996.

What does the work agreement cover?

- Hours of work.
- Salary and deductions.
- Superannuation.
- Overtime/time in lieu.
- Leave entitlements.
- Discipline and dismissal procedures.
- Uniforms and apparel.

Entitlements under Commonwealth and State law

The AWA preserves the following entitlements applicable to you under Commonwealth law.

- Parental leave (12 months unpaid leave after the birth or adoption of a child).
- Four weeks minimum notice, or pay in lieu, (except in cases of serious misconduct).
- A contribution to a superannuation fund made by your employer.
- Protection against unfair dismissal, including the right to bring a claim if an employee thinks they have been unfairly dismissed.
- The right to be issued with a pay slip which sets out details of pay and any deductions.
- The right to belong to a union.

The AWA is consistent with State laws dealing with OH&S and worker's compensation.

Full details of employee entitlements can be found in the 'Employee copy' of the agreement provided at the commencement of employment with the Utopia Clinic.

Where can I find independent advice?

If you need further information about details of the Act, or about AWAs, or would like assistance or advice contact the **Office of the Employment Advocate (OEA)** on 1300 366 632.



Professional conduct

You have a responsibility to act professionally when communicating with colleagues, patients and visitors to your workplace. This involves the following.

Treating people with respect

In the course of your work you may come across people who exhibit difference of some kind or conduct themselves in ways that are strange or unfamiliar to you. As a consequence, you may be tempted to label them in some way or distance yourself from them.

It is unlawful to treat anyone less favourably at their place of work or with the supply of goods and services. Refer also the clinic's discrimination and harassment policy (see below).

Patient confidentiality

People who work in medical environments have a responsibility to preserve and respect the privacy of patient's personal health information.

When conducting a sensitive conversation with a patient within earshot of others take the patient to a private area, especially if the patient is angry, upset or hearing impaired.

Careless talk and gossip

Patient confidentiality can be breached by careless talk and gossip both at work and in a social setting. Any discussion of a patient's personal health information for other than professional reasons is unacceptable behaviour.



Discrimination and harassment

The Utopia Clinic supports the rights of all employees to work in an environment free from all forms of discrimination and harassment.

Any staff member who engages in this kind of conduct will be subject to internal discipline procedures.

While it is preferred that complaints are handled using internal discipline procedures, all staff members retain their rights under Commonwealth and State law to have their complaints of discrimination and harassment handled by the relevant government agencies.

These are:

- **Human Rights and Equal Opportunity Commission (HREOC)** who administer Commonwealth laws relating to discrimination and human rights infringements
- **Equal Opportunity Commission of Victoria** who administer state laws relating to equal opportunity and discrimination.

What is discrimination?

Discrimination occurs when a person is treated less favourably than someone else in a similar situation because of:

- race, colour, descent or national ethnic origin
- age
- sex
- physical, mental or psychological impairment
- lawful sexual activity
- marital status
- physical features
- political belief or activity
- pregnancy
- religious belief or activity
- parental status.



The relevant Commonwealth and state legislation covers discrimination which takes place in areas of public life, such as:

- employment
- the provision of goods and services
- education
- the administration of government programs.

Equal Employment Opportunity (EEO)

The Utopia Clinic is an equal opportunity employer and as such is committed to all staff receiving fair and equitable treatment in all employment matters.

In line with the Equal Opportunity Act 1992 (Commonwealth), the Utopia Clinic adopts the following employment principles.

- Employment decisions are based on merit.
- Employees are treated fairly and reasonably.
- Equal employment opportunity is provided.
- Employees have an avenue of redress against unfair and unreasonable treatment.

What is harassment?

Harassment is any conduct which is considered by the recipient to be disruptive, coercive, intimidating or offensive.

Sexual harassment

Sexual harassment covers a wide range of intentional and unintentional verbal and physical behaviour which is of a sexual nature.

Behaviour which may be defined as sexual harassment is:

- uninvited
- unwelcome
- intimidating and/or offensive.

This range of behaviour includes:

- physical gestures of a sexual nature
- verbal comments of a sexual nature, including offensive jokes
- display of offensive visual and written material which is of a sexual nature
- pressure for sexual activity
- physical contact such as pinching, patting, hugging or brushing against another person's body.



There are forms of sexual harassment which constitute criminal behaviour and as such bear additional penalties under the criminal justice system. These include:

- physical molestation
- indecent exposure
- sexual assault
- obscene phone calls or correspondence.

Complaint resolution procedure

The following is intended to provide guidelines and procedures for the resolution of discrimination and harassment complaints.

All complaints and internal discipline procedures will be handled by the Practice Manager.

What should you do if you are discriminated against or harassed?

Speak to the person concerned. Inform them that no form of discrimination or harassment is acceptable and you have a right to have the behaviour stop.

Speak to the Practice Manager. If you feel uncomfortable speaking directly to the person concerned or if they refuse to stop their behaviour, you can approach the Practice Manager directly about the issue.

How will a complaint be handled?

All complaints will be handled in the strictest confidence.

Upon receiving a complaint, the Practice Manager will convene separate meetings with the complainant and the respondent. If appropriate, confidential interviews may be held with other persons who have knowledge of the incident(s).

Where appropriate, the Practice Manager will attempt to conciliate the matter with the parties involved.

If the matter is judged to have substance appropriate disciplinary action will be taken against the respondent.



Workplace safety

The Occupational Health and Safety Act 1985 (Commonwealth) provides a framework for improving standards of workplace health and safety and reducing work related injuries and diseases.

The Utopia Clinic is committed to providing education and guidelines to staff regarding workplace health and safety.

Immunisation

All staff will be offered immunisation appropriate for their duties at no cost. This includes Influenza and Hepatitis B.

No smoking

So as to minimise any risk to health and safety, all forms of tobacco usage are prohibited inside the Utopia Clinic premises. This includes enclosed walkways and stairwells.

Emergencies

What is the role of reception in an emergency?

Reception staff must:

- know how to use communications equipment such as telephone, public address (PA) system, pagers, fire and duress alarms
- know the location of emergency equipment
- know the whereabouts of doctors on duty
- keep emergency telephone number on hand.

Emergency Services Operator 000 - Fire/Police/Ambulance

When you dial the 000 emergency telephone number, you will be asked by the operator, 'Which service do you require?' You will then be connected to the appropriate service, either police, fire or ambulance.

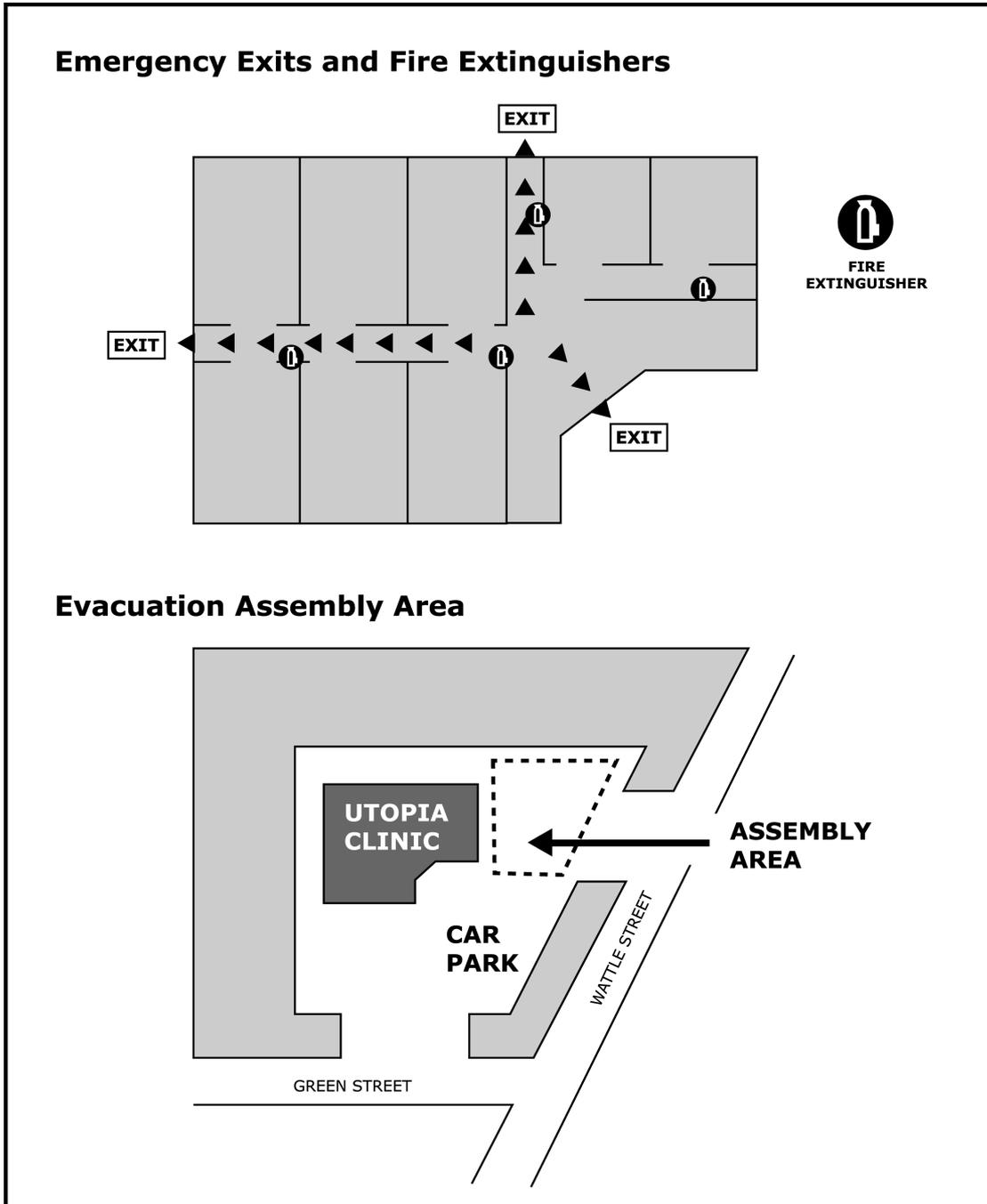
You will firstly be asked for your location and your telephone number. Give the details of your location as exactly as you can. For example, 'the corner of Wattle Grove and Green Street Brightleigh'. This information is important as it will save the emergency service valuable time.

You will then be asked to describe the nature of the emergency. In all cases, it is important to **remain calm**, listen to the questions you are asked, and carry out any instructions issued.

Stay on the line until instructed to hang up.



Emergency evacuation





Emergency response codes

Code Blue - Cardiac arrest/medical emergency

All staff at the Utopia Clinic will undertake first aid training to assist them in dealing with medical emergencies. This will include CPR and the operation of emergency resuscitation equipment.

If patient or visitor presents to you in an injured or distressed state or collapses in front of you, follow these steps.

1. Remain calm and give your undivided attention to the patient.
2. Place the patient in a comfortable position. If possible move them to the medical emergency room (Consulting Room 1).
3. Observe the patient's condition carefully and rapidly assess the severity of the situation.
4. If the situation appears life threatening, announce code blue over the PA system.
5. If a doctor is unavailable, call for a MICA ambulance on 000.
6. Give appropriate first aid until medical assistance arrives.
7. Keep uninvolved personnel away.



Code Red - Fire emergency

If you discover a fire or detect smoke follow these steps.

1. Announce code red over the PA system.
2. Do a group call to staff on emergency pagers or contact most senior person on site.
3. Activate nearest fire alarm and contact the Fire Brigade on 000.
4. Remove any persons from immediate danger **if safe to do so**.
5. Remove any portable oxygen cylinders **if safe to do so**.
6. Close door and windows to contain smoke within immediate fire area.
7. Attempt to extinguish fire **if safe to do so**.
8. Warden or responsible senior staff member delegates a staff member to check all rooms have been evacuated, or checks them themselves.
9. All staff to exit via safest door. Under no circumstances should staff return to office area for files or personal belongings.
10. Assemble at the evacuation assembly area (refer to the emergency evacuation diagram).
11. Warden or responsible senior staff member to do a head count.
12. Await all clear from fire chief and/or warden.



Code Yellow - Flood/water leak emergency

Follow these steps to deal with a flood/water leak emergency.

1. Isolate the source of the leak.
2. Render assistance to personnel **if safe to do so**.
3. **Do not enter flooded areas.**
4. Notify warden or responsible senior staff member on site.
5. Warden or responsible senior staff member to contact the Fire Brigade on 000.
6. Warden or responsible senior staff member to delegate a staff member to check all rooms have been evacuated, or check rooms themselves.
7. All staff to exit via safest door. Under no circumstances should staff return to office area for files or personal belongings.
8. Assemble at the evacuation assembly area (refer to the emergency evacuation diagram).
9. Warden or responsible senior staff member to do a head count.
10. Await all clear from fire chief and/or warden.



Code Yellow - Gaseous explosion

Follow these steps to deal with a gaseous explosion.

1. Activate nearest fire alarm and contact the Fire Brigade on 000.
2. Isolate the gas source.
3. Turn off electricity.
4. Notify warden or responsible senior staff member on site.
5. Warden or responsible senior staff member to delegate a staff member to check all rooms have been evacuated, or check rooms themselves.
6. All staff to exit via safest door. Under no circumstances should staff return to office area for files or personal belongings.
7. Assemble at the evacuation assembly area (refer to the emergency evacuation diagram).
8. Warden or responsible senior staff member to do a head count.
9. Await all clear from fire chief and/or warden.



Code Purple - Bomb/arson threat

Police are responsible for the control of bomb threat actions. All procedures in the Policy and Procedures Manual are subject to instructions issued by the police officer in charge at the scene.

Never ignore threats. If you receive a threat follow these steps.

1. Attract someone's attention to obtain assistance to notify the warden or responsible senior staff member on site.
2. Listen attentively and try to keep the caller talking.
3. Ask questions as per the '**Bomb threat checklist**' (refer next page).
4. **Do not hang up. Leave the phone off the hook.**
5. If safe, remain at telephone until instructions are received.
6. Fill out a '**Bomb threat checklist**' as soon as possible.

The warden or responsible senior staff member on site will contact Police on 000 for further emergency response instructions.



Code Black - Hold up/violent person

This code also includes an alcohol or drug affected person, property damage (inside or out), an aggressive person or any threat of an extreme nature.

If a person approaches you or other staff members in a persistent manner, listen to their concerns, speak with and try to assist them.

When you are confronted with aggressive or agitated behaviour:

- try to remain calm
- seek help from other staff
- do not attempt to resolve the situation.

If faced with a hold up, a violent person or any threat of an extreme nature follow these steps.

1. Announce a code black over PA (if possible).
2. Activate duress alarm.
3. Do a group call to staff on emergency pager or contact most senior person on site.
4. If possible ring the police on 000.
5. Do nothing to provoke or confront the intruder.
6. Observe offender's appearance (height, weight, age, clothing, speech, disabilities etc).
7. Warn other staff and visitors unobtrusively. If possible, move the situation away from them.
8. Be reasonably slow in handing over keys, money or information. Consider your safety.



Infection control

Infection is caused by the transmission of disease causing microorganisms between people. Cross infection can be caused by:

- direct contact with bodily substances such as blood, saliva, mucous membranes, urine, faeces and other bodily fluids, secretions and excretions
- contact with contaminated equipment and medical apparatus.

Preventing the spread of infection in a healthcare environment involves the following practices.

Practising good hygiene

Hand washing is the single most important measure to reduce transmission of microorganisms. It is important to:

- wash your hands after going to the toilet, after blowing your nose and after smoking
- wash and dry your hands before and after patient contact
- do not use linen or cotton towels, use disposable paper towelling instead
- cover all cuts, sores and abrasions.

Wearing protective clothing

Wear protective clothing such as gloves, aprons, masks and goggles when contact with bodily substances is likely.

Wash your hands immediately after gloves are removed to avoid transfer of microorganisms to other patients or environments.



Cleaning and sterilising instruments

Note: It is important to have an established workflow pattern to enable items to progress from the cleaning area to the sterile storage area without risk of recontamination.

Cleaning

Instruments should undergo preliminary cleaning as soon as possible after use. The cleaning procedure is the most important stage in the processing cycle.

When handling used instruments all personnel should wear heavy duty rubber gloves, plastic apron and protective eyewear.

Gross contamination should be wiped off and disposed of in a biohazard waste container. Any residual contamination should be rinsed off with warm water and detergent.

There should be a designated area for cleaning instruments. This area should include:

- a dedicated sink for cleaning and rinsing instruments
- hand washing facilities
- specific bins for waste disposal (biohazards and non-hazardous waste)
- smooth bench top surfaces without cracks or crevices
- adequate bench and storage space.

Only specially formulated cleaning agents should be used to remove residual soil and organic matter from instruments and equipment. Cleaning brushes must have firm plastic bristles and be able to withstand repeated sterilisations.

Household detergent or liquid soap is not suitable for cleaning instruments. Abrasive cleaners must also be avoided as they damage the surface coating and leave a powdery residue. Likewise, do not use steel wool as it also will damage instrument coatings.

Do not use any of these products as they shorten the life of instruments.

Disinfection

After preliminary cleaning the following steps should be taken.

- Fully disassemble instruments.
- Immerse instruments in a sink filled with hot water and disinfectant.
- Scrub instruments with a sterilised brush, while holding instruments under water.
- Rinse instruments in hot water.
- Allow instruments to dry, or dry with a lint free cloth.
- When dry, check the instruments for damage or remaining contamination.



Sterilisation

Autoclaving involves steam sterilisation under pressure. Sterility is achieved when the recommended temperature is reached and held for a specific time.

Note: Benchtop autoclaves should be used in accordance with manufacturers' instructions. If you are required to operate an autoclave make yourself familiar with the operating instructions.

Preparing instruments

Some instruments will need to be wrapped before sterilisation to prevent them from being recontaminated throughout or after the sterilisation process. Wrapping is performed for instruments that need to be delivered sterile (aseptic) into a sterile environment.

Packaging designed for use in sterilisation units should be used.

Instruments such as speculums, instruments used in ear, nose and throat (ENT) examinations, kidney trays, bowls, ear syringes, etc, need not be wrapped. These instruments, while sterilised and free from contamination, do not require aseptic delivery to a sterile field. These items are referred to as being surgically clean, not aseptic.

Handling instruments

All items should be positioned to allow air steam penetration to all surfaces and drainage of condensate. Items should not touch the walls of the unit.

After completion of the sterilising cycle remove the tray and allow items to cool before handling. Do not place warm items onto solid surfaces as condensation will form, making them wet.

When cool, remove items from the chamber and inspect to make sure:

- there is no moisture present
- the chemical or biological indicators on packaging have changed colour
- packaging is intact and seals are not broken.

Storing sterilised items

Once items have been sterilised, they should be stored:

- in an enclosed cupboard for items requiring aseptic delivery, or in a sealed container for surgically clean items
- away from direct sunlight and moisture
- away from dust, insects and other vermin
- loosely packed on clean, smooth, washable shelves.

Rotate the packages by placing the newly processed items behind the items already in storage. Regularly check sterilisation dates or expiry dates and remove and reprocess out of date items.

If items are correctly processed and stored they may have a shelf life of up to four weeks, however, the preferred shelf life is two weeks.



Hazardous waste

Sharps

Sharps such as needles and scalpel blades must be disposed of safely. This minimises the risk of injury and the transmission of disease.

The Utopia Clinic uses sharps safes that meet Australian Standards. They are puncture resistant yellow containers that are clearly labelled and include the biohazard symbol.

The person who uses the sharp is responsible for safely disposing of that sharp immediately after use. Do not force a sharp into the container or fill the sharps container beyond its recommended level - three quarters full.

Sharps safes should be placed in a secure location out of reach of children. When three quarters full, sharps safes should be securely stored in the waste collection area.

Blood spills and other bodily substances

There are standard precautions used in medical environments when dealing with patients regardless of their infectious state or perceived risk to the health of others.

The standard precautions apply to the handling of:

- blood
- dried blood
- saliva
- all other bodily fluids, secretions and excretions
- non-intact skin
- mucous membranes.

The precautions staff must take when dealing with these substances include the following.

- Wear latex gloves and use disposable hand towels to clean up blood spills or any other bodily substances.
- Place the contamination in a biohazard waste container.
- Clean the area thoroughly with detergent and apply undiluted disinfectant such as White King to the area.
- Dispose of the gloves and wash your hands thoroughly.



Waste collection

The Utopia Clinic has engaged the services of Biohazard Waste Management Services for the disposal of sharps and other hazardous waste from the clinic.

Biohazard Waste Management Services will collect and replace sharps safes and biohazard waste containers on Tuesdays and Fridays.

If additional collections are required, call the service on 1800 501 501.

Needlestick and sharps injuries

Treating the contamination site

If blood gets on the skin, irrespective of whether there are cuts or abrasions, wash the area well with medicated soap and water. Flush with a solution of one part bleach to twenty parts water.

If the skin has been penetrated allow the wound to bleed to assist in flushing out the contamination. If the eyes are contaminated, flush the eye area thoroughly with water or normal saline solution. If blood gets in the mouth, rinse the mouth with water several times.

Reporting the incident

Report the incident immediately to the Practice Manager or senior doctor in charge. The doctor in charge will arrange for blood to be taken from the staff member as soon as possible.

If a known source individual is involved in the incident, blood should be taken from the source individual and tested for blood borne viruses. This should be done with the informed consent of the source individual. This should be collected and processed immediately after the incident.

An **injury/incident report** will need to be completed, which includes:

- the date and time of the incident
- how the incident occurred
- the nature of exposure (for example whether the affected person has been stabbed by a syringe or other sharp or been splashed in the eye)
- name of the source individual (if known).

Counselling

If the source individual is known to be positive for HIV antibody, Hepatitis B and/or Hepatitis C, consultation with a health professional with experience in the management of these infections should be arranged for the staff member.

It is important to deal with a needle stick injury immediately, as in some cases preventative medication can be offered to the affected individual to reduce the risk of infection.



Manual handling techniques

Before you lift ask yourself whether the job could be done in a different way. For example, can you:

- get someone to help you
- use mechanical aids for lifting or trolleys?

Assess the weight of the load before you lift. Only carry loads you can handle with ease.

Prepare to lift

- Stand close to the load with your feet spaced apart.
- Bend at the knees, keep your spine straight.
- Grip the load firmly.

Lift

- Tighten your stomach muscles.
- Lift by straightening your legs.
- Keep your back and neck in a straight line (never bend from the waist).
- Do not twist, move, or jerk suddenly.
- Do not lift objects higher than your waist.

Move and carry

- Keep the object close to your body.
- Take short steps and move carefully.
- Avoid sudden or jarring movements.
- Make sure that your path is clear.

Lower

- Keep your back and neck in a straight line.
- Tighten your stomach muscles.
- Bend at the knees (never bend from the waist).
- Place the load firmly on the ground.



Making your workstation safe

Whenever you are working at a computer screen, it is important that the screen is placed correctly in relation to your body to avoid any back, neck or eye strain. To do this you need to consider the following.

Seat height

Check the seat height in relation to the height of your desk.

Adjust your seat height so that your thighs are parallel to the floor and your feet are flat on the floor. If you need to raise your seat height and your feet are not touching the floor, use a footrest to maintain a stable position.

Back support

Sit up straight and adjust the backrest of your chair so that it supports the natural curve of your lower back. Most office chairs adjust in and out as well as up and down to allow this.

Arm position

Your elbows should be at or just below the level of the keyboard so that your arms and wrists are in the most relaxed position for keying.

Screen height and position

Position your computer screen at a height, distance and angle so that your neck and back are comfortable as you view the screen. Position your documents at a suitable height. You might need to use a document holder for this.

Injury/incident reporting

A record is required to be kept for every work injury, work related illness or dangerous occurrence at the clinic where a person has or may have been harmed.

A master copy of the clinic's 'Injury/incident report' form is kept in the Policy and Procedures Manual (see below).



Injury / incident report (sample)

Injury / incident report

Full name: Department:

Address: Telephone:.....

..... DOB:

Where did injury/incident occur? Details of injury:

.....

.....

.....

.....

Date/time of injury/incident:

Describe what happened to cause injury/incident:

.....

.....

.....

.....

Details of person who saw injury/incident or first came to scene (where applicable):

Name: Telephone:.....

Name of person attending:

First aid action taken:

.....

.....

.....

.....

Signature of injured person: Date: