



# NARAYANA COLLEGE OF NURSING

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## Infection control Policy

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Infection control is an essential component of healthcare services at Narayana Medical College and Hospital. Preventing and controlling infections in healthcare settings protects patients, staff, and visitors from the spread of infections, reduces healthcare-associated infections (HAIs), and ensures a safe and healthy environment. This policy outlines the hospital's approach to infection control, including guidelines and responsibilities for staff to minimize the risk of infection transmission.

## Purpose

The purpose of this infection control policy is to provide comprehensive guidelines for preventing and controlling infections within Narayana Medical College and Hospital. It aims to protect all individuals within the hospital, including patients, healthcare workers, visitors, and support staff, from acquiring or transmitting infections.

## Aim

The primary aim of the infection control policy is to reduce the incidence of healthcare-associated infections (HAIs) through strict adherence to infection control practices, ensuring patient safety and quality care.

## Objectives

- To establish a standardized infection control framework in all areas of the hospital.
- To prevent the transmission of infections between patients, staff, and visitors.
- To ensure compliance with national and international guidelines for infection prevention and control.
- To monitor and report infection control incidents and outbreaks and implement corrective actions.
- To promote education and training on infection control practices for healthcare workers.
- To minimize the risk of occupational exposure to infectious agents among healthcare personnel.

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## Scope

This policy applies to all healthcare professionals, administrative staff, patients, visitors, and any other individuals within the hospital premises. It covers all areas of infection control, including hand hygiene, the use of personal protective equipment (PPE), waste management, sterilization, environmental hygiene, isolation precautions, and the management of infectious diseases.

## Procedure

### 1. Hand Hygiene:

- All staff must perform proper hand hygiene before and after patient contact, after touching potentially contaminated surfaces, and before any procedure. Hand hygiene includes washing hands with soap and water or using alcohol-based hand sanitizers.

### 2. Personal Protective Equipment (PPE):

- Appropriate PPE, such as gloves, gowns, masks, and face shields, must be used depending on the type of patient interaction and the potential for exposure to infectious agents.

### 3. Sterilization and Disinfection:

- Medical instruments, equipment, and devices must be properly sterilized or disinfected after each use, following hospital protocols. Areas with high infection risk should follow stricter sterilization guidelines.

### 4. Waste Management:

- Hospital waste, including biohazards' materials, sharps, and other medical waste, must be disposed of following the hospital's waste management policy. Segregation of waste at the source and proper labeling of waste bins is required.

### 5. Isolation Precautions:

- Patients with suspected or confirmed infectious diseases must be placed in isolation rooms with appropriate precautions, including airborne, droplet, or contact precautions, as per the nature of the infection.

### 6. Environmental Cleaning:

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Principal





- Regular cleaning and disinfection of patient care areas, operating rooms, and high-touch surfaces must be performed using hospital-approved disinfectants to reduce the risk of environmental contamination.

## 7. Vaccination and Immunization:

- All healthcare workers must be immunized according to hospital guidelines, including vaccines for Hepatitis B, Influenza, and other relevant diseases.

## 8. Surveillance and Monitoring:

- Continuous surveillance of infection rates and healthcare-associated infections is conducted by the infection control team. Data collection, analysis, and reporting of infections are integral to identifying trends and areas for improvement.

## 9. Antibiotic Stewardship:

- The hospital follows an antibiotic stewardship program to ensure the appropriate use of antibiotics, reducing the risk of antibiotic resistance and ensuring optimal patient outcomes.

## Responsibilities of the Hospital

### 1. Infection Control Committee:

- The hospital will maintain an active infection control committee responsible for overseeing infection prevention practices, monitoring infection control activities, and implementing changes as necessary.

### 2. Infection Control Team:

- A dedicated infection control team, including specialists in infection control, microbiology, and nursing staff, will monitor infection rates, provide education and training, and support healthcare workers in infection control efforts.

### 3. Staff Education and Training:

- All healthcare workers will receive regular training on infection control policies and practices, including hand hygiene, PPE usage, isolation techniques, and environmental cleaning protocols.

### 4. Compliance Monitoring:



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- The hospital will regularly assess compliance with infection control policies and take corrective actions in cases of non-compliance. This includes audits of hand hygiene practices, PPE usage, and waste management.

## 5. Reporting and Incident Management:

- Any breaches in infection control protocols, outbreaks, or incidents of healthcare-associated infections will be promptly reported to the infection control team. The hospital will conduct investigations and take necessary corrective actions to prevent recurrence.

## 6. Resource Provision:

- The hospital will provide necessary resources, including PPE, hand sanitizers, disinfectants, and waste management systems, to ensure effective infection control measures are implemented across all departments.

## 7. Patient and Visitor Education:

- The hospital will educate patients and visitors on infection control practices, including proper hand hygiene, mask usage, and the importance of adhering to isolation guidelines.

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## NEEDLE STICK INJURY POLICY

Needle stick injuries (NSI) pose a significant risk to healthcare workers, exposing them to blood borne pathogens such as HIV, Hepatitis B, and Hepatitis C. Narayana Medical College and Hospital is committed to preventing needle stick injuries through comprehensive safety measures and providing immediate care and follow-up when injuries occur. This policy aims to safeguard healthcare workers from the risks associated with needle stick injuries and other sharps-related accidents.

### Aim

The aim of this policy is to prevent needle stick injuries in the healthcare setting and to ensure a prompt and effective response when such injuries occur, reducing the risk of infection and promoting a safe working environment.

### Objectives

- To minimize the risk of needle stick injuries by promoting safe handling and disposal of needles and sharps.
- To establish procedures for immediate care and reporting of needle stick injuries.
- To provide post-exposure management, including testing, treatment, and follow-up care for affected individuals.
- To create awareness among healthcare workers regarding the prevention of needle stick injuries.

### Scope

This policy applies to all healthcare workers, including doctors, nurses, technicians, housekeeping staff, and students at Narayana Medical College and Hospital. It covers all situations involving the use of needles, scalpels, and other sharp instruments in patient care, surgical procedures, and laboratory work.

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## Procedure

### 1. Prevention:

#### ○ Safe Handling of Needles and Sharps:

- Avoid recapping needles. If recapping is necessary, use a one-handed scoop technique or mechanical device.
- Use needleless systems or devices with safety features wherever possible.
- Handle all sharps carefully, ensuring they are not passed directly from hand to hand.
- Dispose of needles and sharps immediately in designated puncture-resistant sharps containers after use.

#### ○ Sharps Disposal:

- Sharps disposal containers must be placed at the point of use and within easy reach in all clinical and laboratory areas.
- Containers should be replaced when three-quarters full and never overfilled.
- All personnel must be trained in the proper use and disposal of sharps containers.

#### ○ Use of Personal Protective Equipment (PPE):

- Gloves must be worn when handling needles, performing procedures involving sharps, and during patient care to reduce the risk of exposure.
- Eye protection and face shields should be used during procedures where splashing or aerosolization of blood is possible.

### 2. Immediate Response to Needle Stick Injury:

#### ○ First Aid:

- Immediately after a needle stick injury, encourage bleeding by gently squeezing the area.

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- Wash the wound thoroughly with soap and water. Avoid scrubbing the wound.
  - Do not use harsh chemicals or disinfectants on the wound (e.g., bleach or alcohol).
  - **Reporting the Injury:**
    - Report the incident immediately to the supervisor or infection control officer.
    - Fill out the needle stick injury report form, detailing the circumstances of the injury, including the type of device involved, how the injury occurred, and patient information (if available).
  - **Medical Evaluation:**
    - Seek immediate medical evaluation at the hospital's occupational health or infection control department.
    - Blood samples from the injured worker and the source patient (with consent) should be obtained for testing for bloodborne pathogens (HIV, Hepatitis B, Hepatitis C).
3. **Post-Exposure Management:**
- **HIV Prophylaxis:**
    - Initiate post-exposure prophylaxis (PEP) for HIV as soon as possible, ideally within 1-2 hours, if the source is confirmed or suspected to be HIV-positive.
    - Continue the treatment as per the guidelines, with follow-up testing at intervals of 6 weeks, 3 months, and 6 months.
  - **Hepatitis B and C Management:**
    - If the injured person has not been vaccinated for Hepatitis B, administer the first dose of the Hepatitis B vaccine immediately, followed by subsequent doses.
    - In case of potential Hepatitis C exposure, regular follow-up blood testing should be conducted to monitor for infection.

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## 4. Follow-Up Care:

- Regular follow-up care should be provided to monitor for any signs of infection.
- Counseling services should be available for affected healthcare workers to manage emotional stress following the injury.

## Responsibilities of the Hospital

### 1. Infection Control Committee:

- The Infection Control Committee is responsible for overseeing the implementation of the needle stick injury policy and ensuring compliance with preventive measures across all departments.
- The committee will investigate reported needle stick injuries and review safety protocols to prevent future incidents.

### 2. Training and Awareness:

- The hospital will provide regular training programs for all healthcare workers and students on the prevention of needle stick injuries, safe handling of sharps, and the use of personal protective equipment (PPE).
- Educational materials, such as posters and handouts, will be displayed in high-risk areas to remind staff of safe sharps handling and disposal practices.

### 3. Provision of Safety Devices:

- The hospital will ensure the availability of safety-engineered devices such as retractable needles, needleless systems, and self-sheathing needles to reduce the risk of needle stick injuries.
- Sharps containers will be provided at all points of care to facilitate the safe disposal of needles and other sharp objects.

### 4. Occupational Health Services:

- The hospital will maintain a dedicated occupational health service for the evaluation, treatment, and follow-up of healthcare workers who experience needle stick injuries.

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- The occupational health team will ensure timely post-exposure prophylaxis (PEP) for HIV, Hepatitis B vaccination, and appropriate monitoring for Hepatitis C.

## 5. Monitoring and Reporting:

- A system for tracking and documenting all needle stick injuries must be in place, including detailed incident reports.
- The hospital will conduct regular audits of needle stick injury reports to identify trends, implement corrective actions, and improve safety measures.

## 6. Non-Punitive Reporting Culture:

- The hospital encourages all staff to report needle stick injuries without fear of punitive actions. A non-punitive reporting culture ensures transparency and helps prevent future incidents.

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## PATIENT SAFETY POLICY

Narayana Medical College and Hospital is dedicated to ensuring the safety of all patients through the adoption of evidence-based practices that minimize risks and prevent harm during the delivery of healthcare. Patient safety is a fundamental aspect of healthcare quality, involving a comprehensive approach to prevent errors, reduce adverse events, and create a culture of safety that empowers healthcare professionals and patients alike.

### Aim

The aim of this policy is to safeguard patients by promoting a proactive and systematic approach to patient safety. The policy aims to minimize risks, prevent harm, and ensure the well-being of all patients by adhering to international and national safety standards.

### Objectives

- To implement and maintain patient safety practices throughout the hospital in line with best practices and regulatory standards.
- To prevent errors and adverse events through a structured safety system.
- To foster a culture of safety among healthcare staff, ensuring that all personnel prioritize patient safety in every aspect of care.
- To continuously monitor, assess, and improve patient safety protocols.
- To ensure patient involvement in safety efforts by empowering them with information and clear communication.

### Scope

This policy applies to all healthcare professionals, administrative staff, patients, and visitors at Narayana Medical College and Hospital. It covers all areas of care delivery, including inpatient, outpatient, surgical, and diagnostic services, and applies to all patient safety-related practices such as medication safety, surgical safety, infection control, and adverse event reporting.

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## Procedure

### 1. Safety Risk Assessment:

- All hospital departments must perform risk assessments to identify potential safety risks. These assessments include reviewing processes for medication administration, surgery, patient transfers, infection control, and diagnostic testing.
- Identified risks must be prioritized, and action plans must be developed to mitigate them.

### 2. Patient Identification:

- All patients must be accurately identified using at least two unique identifiers (e.g., name, date of birth) before administering medications, performing procedures, or transferring care.

### 3. Medication Safety:

- Safe medication practices must be followed, including the verification of prescriptions, correct drug administration, and monitoring for adverse reactions. Double-check protocols and the use of technology, such as barcode scanning, are recommended to avoid medication errors.

### 4. Surgical Safety:

- A "Surgical Safety Checklist" must be completed before every surgical procedure to ensure that proper safety protocols are followed, including patient identification, correct surgical site marking, and equipment readiness.

### 5. Infection Prevention:

- Hospital staff must adhere to infection control protocols, including hand hygiene, use of personal protective equipment (PPE), and the sterilization of medical equipment. Isolation procedures must be followed for patients with infectious diseases.
- **Fall Prevention:** Risk assessments must be conducted for patients at risk of falling, especially elderly patients. Appropriate fall prevention measures, such as bed rails and assistive devices, must be in place.

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## 6. Pressure Ulcer Prevention:

- Regular skin assessments must be performed on bedridden patients, and pressure-relieving devices must be used to prevent pressure ulcers. Nurses must reposition immobile patients at regular intervals.

## 7. Communication and Handover:

- Effective communication between healthcare professionals during patient handovers or shifts is crucial for patient safety. Clear documentation and the use of standardized communication tools are essential in preventing information gaps.

## 8. Adverse Event Reporting:

- All adverse events, errors, or near misses must be reported to the hospital's safety committee immediately. A non-punitive reporting culture will be encouraged to allow open communication about safety concerns.

## 9. Patient Involvement:

- Patients will be informed about their care and safety measures. Clear communication about procedures, medications, and potential risks will be encouraged. Patients will be encouraged to ask questions and participate in decision-making processes.

## 10. Monitoring and Auditing:

- Regular audits will be conducted to evaluate compliance with patient safety standards. The results will be used to identify areas for improvement, and action plans will be developed accordingly.

## Responsibilities of the Hospital

### 1. Patient Safety Committee:

- The hospital will establish a Patient Safety Committee responsible for overseeing the implementation of the patient safety policy. This committee will monitor incidents, perform risk assessments, and develop strategies for continuous improvement in patient safety practices.

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## 2. Training and Education:

- All staff members will undergo regular training on patient safety protocols, including infection control, medication safety, fall prevention, and incident reporting. Continuous education programs will be provided to keep staff updated on the latest patient safety standards.

## 3. Incident Management:

- The hospital will have a robust incident management system to ensure that any reported adverse events or near misses are investigated thoroughly. Root cause analysis will be conducted to identify systemic issues, and corrective actions will be taken to prevent recurrence.

## 4. Safety Culture Promotion:

- The hospital will foster a culture of safety by encouraging open communication about patient safety concerns, recognizing staff contributions to safety efforts, and implementing a non-punitive environment for error reporting.

## 5. Resource Allocation:

- Adequate resources, such as safety equipment, hand hygiene products, assistive devices, and medication tracking systems, will be provided to ensure the safety of patients and healthcare workers.

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## 6. Continuous Improvement:

- The hospital will continuously evaluate its patient safety practices through internal audits, external assessments, and feedback from patients and staff. New safety measures will be introduced as needed to maintain the highest standard of care.

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