

Induction and On-going training for Staff

All staff should receive infection prevention training as part of their induction. This training should be a formal and documented part of the induction training pack.

Induction training should include:

- Practical hand hygiene; *(clinical and non-clinical staff)*
- Correct use and disposal of Personal Protective Equipment (PPE), including gloves, aprons and face protection; *(clinical staff)*
- Safe use of sharps and correct sharps disposal; *(clinical staff)*
- Management of inoculation injuries; *(clinical and non-clinical staff)*
- Waste segregation and disposal; *(clinical and non-clinical staff)*
- Decontamination of equipment; *(clinical staff)*
- Practical asepsis; *(clinical staff)*
- Safe handling of specimens. *(clinical and non-clinical staff)*

There is no mandatory frequency for ongoing infection prevention training and this should be provided based on a local needs assessment for clinical and non-clinical staff.

Practices may wish to adopt the following on-going training regime:

Non-clinical staff: 2-3 yearly update (either e-learning or face to face)

Clinical staff: 1-2 yearly update (either e-learning or face to face)

As best-practice, all staff should be offered yearly hand hygiene practical training with asepsis refreshers offered to clinical staff.

	INDUCTION		ONGOING TRAINING		RATIONALE
	Clinical Staff (Doctors, Nurses, Healthcare Support Workers)	Non-Clinical Staff (Receptionists, Managers)	Clinical Staff (Doctors, Nurses, Healthcare Support Workers)	Non-Clinical Staff (Receptionists, Managers)	
Practical hand hygiene (covering soap & water and alcohol hand rubs)	√	√	√yearly	√every 2 years	Non-clinical staff may be exposed to infectious patients in reception or receive clinical specimens
Correct use and disposal of Personal Protective Equipment (PPE)	√	√	√yearly	√every 2 years	Non-clinical staff may be required to wear PPE to receive clinical specimens or handle spills
PPE – face protection (including safe fitting, removal and disposal)	√		√yearly		Cover for clinical staff for respiratory or droplet pathogens e.g. influenza, Ebola, or for surgical procedures
Safe use of sharps and correct sharps disposal	√		√yearly		
Management of inoculation injuries (including exposure to BBV & PEP)	√	√	√yearly	√every 2 years	Non-clinical staff may come into contact with sharps or body fluid through accidental exposure
Waste segregation and disposal	√	√	√yearly	√every 2 years	
Decontamination of equipment / clinical cleaning	√		√yearly		
Safe handling of specimens (packaging, handling & delivery)	√	√	√yearly	√every 2 years	Non-clinical staff may have to receive clinical specimens
Practical asepsis	√		√yearly		Intended to refresh asepsis skills for those conducting aseptic technique, inc. minor surgery, dressings etc.
Prudent antimicrobial prescribing	√for prescribers		√yearly for prescribers		Standardisation of practice and ongoing awareness raising