**Infection Control in the Radiology Department [QSI Ref: XR-507]**

**Descriptor:**

An audit aimed at assessing staff awareness of the Trust's infection control policies governing the transport of patients within the hospital between departments where there is an identified infection risk.

**Background:**

Despite the great amount of publicity, research and education dedicated to infection control policies [1-3], many hospital staff are “uncertain” [4] and have a “limited knowledge” [5] with regard to the practical details of policies and procedures for infection control.

The aim of this audit is to evaluate current understanding amongst radiology staff of Trust policies relating to the transfer of a patient where there is an identified infection risk.

## The Cycle

**The standard:**

Good practice dictates that all staff are aware of the standard procedures and precautions employed by the trust with regards to infection control. Consider assessing some of the following areas specifically for infection control [6,7]:

* Hand and personal hygiene
* Personal protective gear
* Safe handling of sharps
* Decontamination and cleaning of equipment and rooms

**Target:**

100% level of knowledge of hospital policy via a questionnaire with five to ten clinical scenarios.

Assess understanding amongst a sample of different healthcare professionals (radiologists, radiographers, healthcare assistants, porters).

## Assess local practice

**Indicators:**

Correct response to questions.

**Data items to be collected:**

Answers to questions on five to ten clinical scenarios - The five to ten clinical scenarios should be chosen with the infection control department staff to look at current topical areas (see attached paper based questionnaire for suggested examples)

**Suggested number:**

All staff (doctors, nurses, sonographers, porters and booking clerks) working in a specific area e.g. Ultrasound, on a preselected day.

Consider repeating the audit to assess infection control awareness in different imaging modality areas (US/CT/MRI/Intervention).

**Suggestions for change if target not met:**

Training in infection control is part of statutory training for all staff. It is important that the results of the audit are fed back to those responsible for statutory training as a change in training policy - format, content, frequency etc. may be required. Although the results are from a single unit within a department they may reflect results recorded in other previous studies and may represent more widespread limited understanding of infection control procedures, it would be interesting to consider, therefore how many of the staff have attended these statutory training days and what information they can recall.

**Resources:**

• Paper based questionnaire based on previously highlighted gaps in staff knowledge (The linked questionnaire suggests questions which may be appropriate in an ultrasound department but can be easily adapted for other areas)

• Infection Control Nurse Liaison

• 2 hours to evaluate results and write report

• Audit Meeting/Forum in which to present findings to all the staff and allow them to air queries/concerns and highlight educational points

• Departmental meeting if there are action points that need addressing and to re-audit after these have been implemented.

[**100\_InfectionControlQuestionnaire new.doc**](https://www.rcr.ac.uk/sites/default/files/audit_template/cr/100_InfectionControlQuestionnaire%20new.doc)WORD - 24 KB

**References:**

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**Editor's comments:**

• Many trusts will have slightly different approaches and local policies related to infection control so questions (and correct answers) should be discussed and agreed with your local infection control staff before starting

• The findings of this audit may have significantly more importance for other aspects of statutory training as the knowledge and understanding of these may also be poor and this may too merit auditing

• The questionnaire relates to ultrasound but could be adjusted to take in the whole department or any specific area

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