



Community Infection Prevention and Control Policy for General Practice

(also suitable for adoption by other healthcare providers, e.g.
Dental Practice, Podiatry)

Safe management of blood and body fluids

SAFE MANAGEMENT OF BLOOD AND BODY FLUIDS

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This document has been adopted as a Policy by:

Organisation:

Signed:

Job Title:

Date Adopted:

Review Date:

If your organisation would like to exclude or include any additional points to this Policy, please include below. Please note, the Community IPC Team cannot endorse or be held responsible for any addendums.

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1. Introduction

This Policy is one of the 'Standard infection control precautions' (SICPs) referred to by NHS England and NHS Improvement.

Blood and body fluids, e.g. urine and faeces, may contain a large number of microorganisms, such as bacteria and viruses.

Staff who may have contact with blood or blood stained body fluids, or are exposed to sharps or other inoculation risks, should have had the opportunity for hepatitis B vaccination and antibody testing to check for their response.

Contamination or spillages with blood or body fluids should be dealt with immediately, as this may expose staff and others to infection. Blood and body fluid spillages should be managed by staff trained in the correct procedure.

Always use standard infection control precautions and, where required, transmission based precautions (SICPs and TBPs), refer to the 'SICPs and TBPs Policy for General Practice'.

When caring for patients in relation to COVID-19 or any other new emerging infections, staff should refer to national infection prevention and control guidance.

GP Practices should ensure regular audits to monitor compliance with the Policy are undertaken and to provide assurance.

2. Dealing with blood and body fluid spillages

Clean up blood and body fluids promptly to reduce the risk of infection to other people.

Appropriate personal protective equipment (PPE) should be worn and standard infection control precautions followed.

Best practice is to use a spillage kit appropriate to the type of spillage, e.g. blood/blood stained body fluids or non-blood body fluids, which should be used following the manufacturer's guidance and within its expiry date.

Spillage kits may contain solidifying polymer granules. A National Patient Safety Alert issued in 2017, following a number of deaths and incidents related

to patients ingesting the product, advises a risk assessment and procedures in place to ensure supplies are securely stored away from the general public.

- If the spillage kit is unsuitable for use on soft furnishings, untreated wood and carpets, clean the surface using a pH neutral detergent and warm water, a carpet shampoo machine or steam cleaner.
- If soft furnishings or other items are heavily contaminated with blood or body fluids that cannot be adequately decontaminated, they should be disposed of appropriately.
- Dispose of waste and PPE as infectious waste.
- Wash hands with liquid soap and warm running water.
- If a mop and bucket are used, they should be in accordance with the national colour coding, refer to the 'Safe management of the care environment Policy for General Practice'. After use, the mop head should be disposed of immediately as infectious waste and the bucket washed with detergent and warm water and dried with paper towels, and then wiped with a chlorine-based disinfectant at 1,000 parts per million and stored upside down to air dry.
- All cloths used must be single use and disposed of after use.

3. Splashes of blood or body fluids

- Splashes of blood or body fluids to the eyes, nose or mouth must be treated as potential exposure to a blood-borne virus, refer to the 'BBVs Policy for General Practice'.
- For appropriate management of percutaneous exposures (sharps/splash injuries), refer to the 'Safe management of sharps and inoculation injuries Policy for General Practice'.

4. Infection Prevention and Control resources, education and training

The Community Infection Prevention and Control (IPC) Team have produced a wide range of innovative educational and IPC resources designed to assist Domiciliary Care in achieving compliance with *The Health and Social Care Act 2008: Code of Practice on the prevention and control of infections and related guidance* and CQC registration requirements.

These resources are either free to download from the website or available at a minimal cost covering administration and printing:

- 25 IPC Policy documents for General Practice
- 'Preventing Infection Workbook: Guidance for General Practice'

- 'IPC CQC inspection preparation Pack for General Practice'
- IPC audit tools, posters, leaflets and factsheets
- 'IPC Bulletin for GP Practice Staff'

In addition, we hold educational study events in North Yorkshire and York and can arrange bespoke training packages and 'Mock IPC CQC Inspections'. Prices vary depending on your requirements and location.

Further information on these high quality evidence-based resources is available at www.infectionpreventioncontrol.co.uk.

5. References

Department of Health (2015) *The Health and Social Care Act 2008: Code of Practice on the prevention and control of infections and related guidance*

Health and Safety Executive *How to deal with an exposure incident*
www.hse.gov.uk/biosafety/blood-borne-viruses/how-deal-exposure-incident.htm#immediate [Accessed May 2021]

NHS England and NHS Improvement (March 2019) *Standard infection control precautions: national hand hygiene and personal protective equipment policy*

NHS England (2017) *Risk of death and severe harm from ingesting superabsorbent polymer gel granules* NatPSA/2019/002/NHSPS
www.england.nhs.uk/wp-content/uploads/2020/02/PS_Alert_Polymer_28_Nov_2019_FINAL.pdf