

IPC Bulletin for GP Practice staff

Issue No. 38 - April 2022

Standard infection control precautions (SICPs)

'Personal protective equipment' and 'Respiratory and cough hygiene'

This is the second in a series of bimonthly bulletins discussing the SICPs which form the basis of infection prevention and control measures necessary to reduce the risk of transmission of microorganisms from both recognised and unrecognised sources of infection. Each bulletin provides an introduction to 2 of the 10 SICPs. As it is often not possible to tell who has or is carrying an infection, it is essential that all staff apply safe systems of working at every opportunity. The SICPs are recommended for all staff, in all care settings, at all times, for all patients, whether infection is known to be present or not. More information on each of the SICPs can be found at www.infectionpreventioncontrol.co.uk/resources/sicps-tbps-standard-infection-control-precautions-transmission-based-precautions-general-practice/. The SICPs are also covered in more detail in the 'Preventing Infection Workbook: Guidance for General Practice 4th Edition'.

Personal protective equipment

- Personal protective equipment helps protect both patient and staff, but to be effective, PPE must be used correctly. All staff should receive training in the [donning and doffing of PPE](#).
- Best practice is to use PPE dispensers to reduce the risk of the PPE becoming contaminated and be readily available at the point of use.
- Before undertaking any task, staff should assess the risks associated with the interaction or task to be undertaken and wear PPE that protects adequately when:
 - ◆ Dealing with a patient who has a confirmed or suspected infection
 - ◆ There is likely exposure to blood and/or body fluids, non-intact skin or mucous membranes
 - ◆ Decontaminating the environment or care equipment
 - ◆ In contact with substances hazardous to health, e.g. cleaning/disinfecting products
- Glove selection should be risk assessed based on sensitivity to latex, nature of the task, risk of contamination and need for sterile gloves. It is important to remember that gloves are not a substitute for hand hygiene.
- Wearing gloves has been shown to reduce the volume of blood transferred through a needlestick injury by 52% compared with not wearing gloves.
- Hands should be cleaned before putting on and after removing PPE.
- All PPE should be changed between tasks and disposed of as soon as the task is complete.
- The correct order of removal of PPE is important to reduce the risk of self contamination.
- Wearing a mask: 'do's and don'ts' Poster is available to download at www.infectionpreventioncontrol.co.uk/resources/wearing-a-mask-dos-and-donts-poster/.
- It is recommended that, for assurance purposes, annual audits to assess the standard of staff PPE donning and doffing are carried out. A 'PPE Audit Tool for General Practice' is available to download at www.infectionpreventioncontrol.co.uk/resources/personal-protective-equipment-audit-tool-for-general-practice/.



Respiratory and cough hygiene

- Respiratory and cough hygiene can help reduce the risk of spreading respiratory infections, protecting those in contact with an infected person.
- Staff should adopt good respiratory and cough hygiene practices themselves and promote them to patients.
- A 'Respiratory and cough hygiene' Poster can be displayed in the waiting room and is available to download at www.infectionpreventioncontrol.co.uk/resources/respiratory-and-cough-hygiene-poster/.



What's new:

Implementation date for the 'National Standards of Healthcare Cleanliness 2021' for General Practice has been pushed back provisionally to November 2022 by NHS England.

Visit our website to find lots of IPC resources, many of which are free to download.

www.infectionpreventioncontrol.co.uk

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