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## Community Infection Prevention and Control Policy for Care Home settings

# Respiratory and cough hygiene

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**This Policy has been adopted by:**

Organisation: .....

Signature: ..... Name: .....

Job title: .....

Adoption date: .....

Review date: .....

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# RESPIRATORY AND COUGH HYGIENE

## 1. Introduction

NHS England recommends that organisations adopt the *National infection prevention and control manual (NIPCM) for England*, complemented by care setting specific Policies. This Policy has been produced in accordance with this recommendation and incorporates the *NIPCM* version as referenced with detailed care home specific guidance.

This Policy is one of the 'Standard infection control precautions' (SICPs).

Respiratory and cough hygiene is designed to minimise the risk of cross transmission of confirmed or suspected respiratory illness (pathogens).

When a person with a respiratory illness coughs, sneezes, talks, millions of bacterial or viral particles are released from the nose and mouth predominantly in the form of droplets which travel in the air, contaminating people and surfaces within a short distance (1 metre).

Respiratory infections can spread directly from an infected person to another person. If the bacteria or virus lands on the mucous membranes, e.g. eyes, nose, mouth, of another person, it can then enter the body.

If the environment is contaminated during coughing, sneezing or by contaminated hands touching surfaces, it can spread to others who touch the area and then touch their eyes, nose or mouth.

Microorganisms, such as bacteria and viruses, can survive in the environment from hours to months, e.g. influenza virus up to 24 hours, COVID-19 up to 72 hours.

SICPs may be insufficient to prevent transmission of specific infections and additional 'Transmission based precautions' (TBPs) are required. Refer to the 'Isolation Policy for Care home settings' and 'Respiratory illnesses Policy for Care Home settings'.

**When caring for residents in relation to any new or emerging infections, staff should refer to national infection prevention and control guidance.**

## 2. Good respiratory and cough hygiene

Ventilation is very important to reduce the amount of microorganisms in the air which will contaminate surfaces. Staff should ensure rooms are well ventilated by opening windows, e.g. 10 minutes every hour.

Staff should adopt and promote good respiratory and cough hygiene by displaying appropriate posters and by encouraging, assisting and advising residents to:

- Cover the nose and mouth with a disposable tissue when sneezing, coughing, wiping

and blowing the nose

- On any occasion when there is not a tissue available, cough or sneeze into the inside of the elbow or upper arm
- Dispose of all used tissues promptly into a waste bin or bag
- Wash hands with liquid soap and warm running water after coughing, sneezing, using tissues, or after contact with respiratory secretions or objects contaminated by these secretions
- Where there is no running water available or hand hygiene facilities are lacking, staff may use hand wipes followed by alcohol handrub and should wash their hands at the first available opportunity
- Keep contaminated hands away from the eyes, nose and mouth

Residents with respiratory symptoms should be provided with tissues, a dedicated receptacle, e.g. bag for used tissues, and hand hygiene facilities.

For further details, refer to the 'Hand hygiene Policy for Care Home settings'.

Don't:

- Touch the eyes, nose and mouth until hands have been cleaned after contact with respiratory secretions or an item contaminated with them, e.g. tissues, surfaces
- Use skin wipes if suitable handwashing facilities are available
- Contaminate surfaces and pockets with used tissues

**Respiratory and cough hygiene**

- Cough or sneeze into a clean disposable tissue, not into your hands and not into the air.
- Dispose of the tissue immediately into the nearest waste bin.
- If you do not have a tissue, cough or sneeze into the inside of your elbow or upper arm.
- Always clean your hands after coughing or sneezing, either using soap and warm running water, alcohol handrub or hand wipes.

These steps will help prevent the spread of colds, flu and other respiratory infections.

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**CATCH IT**

Germs spread easily. Always carry tissues and use them to catch your cough or sneeze.

**BIN IT**

Germs can live for several hours on tissues. Dispose of your tissue as soon as possible.

**KILL IT**

Hands can transfer germs to every surface you touch. Clean your hands as soon as you can.

**NHS**

The 'Respiratory and cough hygiene Poster' is available to download at [www.infectionpreventioncontrol.co.uk](http://www.infectionpreventioncontrol.co.uk).

The 'Catch it, Bin it, Kill it Poster' is available to download at [www.infectionpreventioncontrol.co.uk/resources/catch-it-bin-it-kill-it-poster/](http://www.infectionpreventioncontrol.co.uk/resources/catch-it-bin-it-kill-it-poster/).

### 3. Evidence of good practice

It is recommended that, for assurance purposes, 'Respiratory and cough hygiene' is audited. This can be achieved by completing the 'SICPs Assurance: Annual IPC Audit Tool for Care Homes' available to download at [www.infectionpreventioncontrol.co.uk/resources/sicps-assurance-annual-ipc-audit-tool-for-care-homes/](http://www.infectionpreventioncontrol.co.uk/resources/sicps-assurance-annual-ipc-audit-tool-for-care-homes/)

Following completion of the audit, an 'Action plan' should be drawn up and implemented to demonstrate continuous improvement.

### 4. Infection Prevention and Control resources, education and training

See Appendix 1 for the 'Respiratory and cough hygiene: Quick reference guide'.

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

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

- 30 IPC Policy documents for Care Home settings
- Preventing Infection Workbook: Guidance for Care Homes
- IPC CQC inspection preparation Pack for Care Homes
- IPC audit tools, posters, leaflets and factsheets
- IPC Bulletin for Care Homes

In addition, we hold IPC educational training events in North Yorkshire.

Further information on these high quality evidence-based resources is available at [www.infectionpreventioncontrol.co.uk](http://www.infectionpreventioncontrol.co.uk).

### 5. References

Department of Health and Social Care (Updated December 2022) *Health and Social Care Act 2008: code of practice on the prevention and control of infections and related guidance*

NHS England (Updated 2025) *National Infection prevention and control manual (NIPCM)*

for England

[www.nhs.uk/conditions/Respiratory-tract-infection/](https://www.nhs.uk/conditions/Respiratory-tract-infection/)

## 6. Appendices

Appendix 1: Respiratory and cough hygiene: Quick reference guide



## Respiratory and cough hygiene: Quick reference guide



### Reduce the risk

Respiratory and cough hygiene is designed to minimise the risk of cross transmission of confirmed or suspected respiratory illness (pathogens).

#### Introduction

When a person with a respiratory illness coughs, sneezes, talks, millions of bacterial or viral particles are released from the nose and mouth predominantly in the form of droplets which travel in the air, contaminating people and surfaces within a short distance (1 metre).

Respiratory infections can spread directly from an infected person to another person. If the bacteria or virus lands on the mucous membranes, e.g. eyes, nose, mouth, of another person, it can then enter the body.

If the environment is contaminated during coughing, sneezing or by contaminated hands touching surfaces, it can spread to others who touch the area and then touch their eyes, nose or mouth.

Microorganisms, such as bacteria and viruses, can survive in the environment from hours to months, e.g. influenza virus up to 24 hours, COVID-19 up to 72 hours.

'Standard infection control precautions' (SICPs) may be insufficient to prevent transmission of specific infections and additional 'Transmission based precautions' (TBPs) are required. Refer to the 'Isolation Policy for Care Home settings' and 'Respiratory illnesses Policy for Care Home settings'.

#### Good practice

Ventilation is very important to reduce the amount of microorganisms in the air which will contaminate surfaces. Staff should ensure rooms are well ventilated. Windows should be opened regularly, e.g. 10 minutes every hour.

Staff should adopt and promote good respiratory and cough hygiene by displaying appropriate posters and by encouraging, assisting and advising residents to:

- Cover the nose and mouth with a disposable tissue when sneezing, coughing, wiping and blowing the nose. Cough or sneeze into the inside of the elbow or upper arm when a tissue is not available
- Dispose of all used tissues promptly into a waste bin or bag
- Wash hands with liquid soap and warm running water after coughing, sneezing, using tissues, or after contact with respiratory secretions or objects contaminated by these secretions
- Where there is no running water available or hand hygiene facilities are lacking, staff may use hand wipes followed by alcohol handrub and should wash their hands at the first available opportunity
- Keep contaminated hands away from the eyes nose and mouth

For further information, please refer to the full Policy which can be found at [www.infectionpreventioncontrol.co.uk/care-homes/policies/](http://www.infectionpreventioncontrol.co.uk/care-homes/policies/)

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