



Community Infection Prevention and Control Policy for Domiciliary Care staff

Specimen collection

DC 17

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| Signed: | | | | | |
| Job Title: | | | | | |
| Date Adopted: | | | | | |
| Review Date: | | | | | |

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SPECIMEN COLLECTION

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1. Introduction

A specimen is a sample of body fluid, e.g. urine, faeces. All specimens are a potential infection risk, therefore, all specimens must be collected using standard infection control precautions. Specimens should be transported in a rigid container in accordance with the *Carriage of Dangerous Goods and Use of Transportable Pressure Equipment* (2009).

Taking routine specimens should be avoided to help reduce inappropriate prescribing of antibiotic treatment. Specimens should only be taken if there are indications of a clinical infection.

Urine should not be dipsticked for nitrites and leukocytes unless there are clinical signs of a urinary tract infection, treating a positive dipstick for nitrites and leukocytes without clinical signs of an infection may result in inappropriate prescribing of antibiotics.

Always use standard infection control precautions and transmission based precautions (SICPs and TBPs), refer to the 'SICPs and TBPs Policy for Domiciliary Care staff'.

2. Specimen containers and transport bags

The person who obtains the specimen should ensure:

- Standard infection control precautions are always applied when obtaining specimens and appropriate personal protective equipment (PPE) is worn
- Care is taken to avoid contaminating specimens
- The container is appropriate for the purpose (see Section 3). If an inappropriate container is used, the specimen will not be processed by the laboratory due to the infection risk
- The specimen container is labelled correctly (see Section 5)
- The lid is securely closed
- There is no external contamination of the outer container by the contents
- If provided, specimens are placed inside the plastic transport bag attached to the request form after they have been labelled and the transport bag should be sealed using the integral sealing strip (not stapled, etc)
- For large specimens, e.g. 24 hour urine, specimens may be enclosed in individual clear plastic bags tied at the neck. The request form must not be placed in the bag, but securely tied to the neck of the bag

 If a specimen bag has not been provided by the GP Practice, the specimen container should be placed in a rigid container with a lid, e.g. ice cream or margarine tub, to transport it to the GP Practice. This can then be cleaned and disinfected after use or disposed of, refer to the 'Safe management of care equipment Policy for Domiciliary Care staff'

3. Specific information on microbiology specimen collection

Always apply standard infection control precautions when collecting specimens including:

- Washing hands before and after specimen collection
- Wearing appropriate personal protective equipment

| Sample | Key information | Indication | Container |
|--------|---|---|--|
| Faeces | Service user opens bowels into a receptacle, e.g. commode, clean and dry ice cream container, carrier bag positioned under the toilet seat. Scoop a sample of faeces into the specimen container using the container spoon provided. | Diarrhoea, increase in frequency, presence of blood, abdominal pain | Stool specimen container (at least 1/4 full) |
| | Note: Faecal specimens can be taken even if contaminated with urine | | |
| Sputum | Sputum should be expectorated directly into a sterile container. Early morning specimens taken before eating provide the best results | Productive cough (green or yellow) or presence of blood in sputum | Plain universal container |

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| Sample | Key information | Indication | Container |
|--|--|---|---|
| Urine: Catheter specimen of urine (CSU) | Refer to the 'Urinary cathe staff' | eterisation Policy | for Domiciliary Care |
| Urine: Mid- stream sample of urine (male) | Retract foreskin and clean area with soap and warm water. Ask the service user to urinate, passing the first part into the toilet, collecting the middle part of the flow into the sample pot and pass the remainder into the toilet. Replace foreskin. If the service user is unable to urinate into the sample pot, use a clean and dry container, e.g. ice cream container | Pain on passing urine, increase in frequency, fever, new urinary incontinence, new or worsening confusion, back or lower tummy pain | Universal container with boric acid preservative (red top) which prevents bacteria from multiplying in the container. If sample is less than 5 ml, a white top universal container must be used as the preservative in the red topped bottle will be too potent for a urine sample of less than 5 ml and may kill off any micro-organisms |
| Urine: Mid- stream sample of urine (female) | Clean the genital area with soap and warm water, wiping from front to back. Ask the service user to urinate, passing the first part into the toilet, collecting the middle part of the flow into the sample pot and pass the remainder into the toilet. If the service user is unable to urinate into the sample pot, use a clean and dry container, e.g. ice cream container | Pain on passing urine, increase in frequency, fever, new urinary incontinence, new or worsening confusion, flank or lower abdominal pain | Universal container with boric acid preservative (red top) which prevents bacteria from multiplying in the container. If sample is less than 5 ml, a white top universal container must be used as the preservative in the red topped bottle will be too potent for a urine sample of less than 5 ml and may kill off any micro-organisms |

4. Storage

- Do not store specimens in the service user's fridge.
- Wherever possible, obtain a fresh specimen and take the specimen at a time when it can be transported to the GP Practice in a timely manner.
- For the most accurate results, specimens should be received by the laboratory as soon as possible or at least within 24 hours. After this time, any dominant or more virulent micro-organisms, such as bacteria or viruses, will flourish and weaker ones will die off, which can lead to inaccurate results.

5. Labelling

Specimens must be labelled correctly to prevent misdiagnosis and wastage. At minimum, all specimens must be clearly labelled with the correct service user's details which include:

- Service user's full name
- Service user's address
- Male or female
- Service user's date of birth (and NHS number if known)
- Type of specimen, e.g. catheter or mid-stream urine sample
- Date and time of sample collection
- Signature

Additional information, e.g. relevant clinical details, symptoms and their duration, description of the wound, can be completed by the GP Practice.

6. Spillages of specimens

- Spillages of blood or body fluids should be dealt with immediately and in accordance with standard infection control precautions, refer to the 'Safe management of blood and body fluids for the Policy for Domiciliary Care staff', 'Safe management of care equipment Policy for Domiciliary Care staff' and 'Safe management of the care environment Policy for Domiciliary Care staff'.
- If the outside of the container is contaminated, it should be wiped immediately with paper towels, then cleaned and disinfected. Refer to the 'Safe management of blood and body fluids Policy for Domiciliary Care staff'.

- If the specimen container label or form are contaminated, a new container label or form should be used.
 - Should the specimen leak, a new specimen should be obtained. If this is not possible, carefully transfer the specimen into a clean container.

7. 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:

- IPC Policy documents for Domiciliary Care staff
- 'Preventing Infection Workbook: Guidance for Domiciliary Care staff
- IPC audit tools, posters, leaflets and factsheets
- 'IPC Bulletin for Domiciliary Care staff'

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

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

8. 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*

Department of Health (2007) *Transport of Infectious Substances – Best Practice Guidance for Microbiology Laboratories*

Health and Safety (2009) Carriage of Dangerous Goods and Use of Transportable Pressure Equipment

Royal Marsden NHS Foundation Trust (2020) *The Royal Marsden Hospital Manual of Clinical Nursing Procedures 10th Edition*