



Community Infection Prevention and Control Policy for General Practice

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

SICPs and TBPs

(Standard infection control precautions and Transmission based precautions)

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SICPs AND TBPs (STANDARD INFECTION CONTROL PRECAUTIONS AND TRANSMISSION BASED PRECAUTIONS)

1. Introduction

NHS England states that the guidance in the *National infection prevention and control manual (NIPCM) for England* should be applied by all NHS staff involved in patient care, complementing guidance for General Practice settings. This Policy has been produced in accordance with this recommendation and incorporates the *NIPCM* version as referenced in this Policy with detailed General Practice specific guidance.

'Standard infection control precautions' (SICPs) must be used by all Practice staff in all situations for contact with patients, their environment or equipment. SICPs are the foundation for safe practice and break the chain of infection which protects patients, visitors and staff. There is often no way of knowing who is infected, so by applying SICPs to all people at all times, best practice becomes second nature and the risk of infection is minimised.

SICPs may be insufficient to prevent transmission of specific infectious agents. Therefore, additional 'Transmission based precautions' (TBPs) are required for patients with a confirmed or suspected infection or colonisation.

When caring for patients in relation to any new or emerging infections, staff should refer to the latest infection prevention and control guidance.

2. Hand hygiene

Hand hygiene is considered one of the most important ways to reduce the transmission of infectious agents that cause healthcare associated infections (HCAIs). Good hand hygiene should be undertaken by all staff and patients.

Refer to the 'Hand hygiene Policy for General Practice'.

3. Patient placement and assessment for infection risk

Assessment for infection risk and subsequent correct patient placement is an essential infection prevention and control practice to prevent the spread of communicable disease within General Practice.

Refer to the 'Patient placement and assessment for infection risk Policy for General Practice'.

4. PPE

Before undertaking any procedure, staff should assess any likely exposure to blood and/or other body fluids, non-intact skin or mucous membranes or substances hazardous to health, e.g. cleaning/disinfecting products, and wear personal protective equipment (PPE) that protects adequately against the risks associated with the procedure.

The disposal of used PPE has a significant impact on the environment. Selecting PPE according to the level of risk will reduce its overuse. Where appropriate, consideration should be given to sustainable or reusable options of PPE.

Refer to the 'Personal protective equipment Policy for General Practice'.

5. Respiratory and cough hygiene

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

Respiratory and cough hygiene can help reduce the risk of spreading respiratory infections, protecting patients, visitors and staff.

Staff should adopt good respiratory and cough hygiene practices themselves and promote them to patients.

Refer to the 'Respiratory and cough hygiene Policy for General Practice'.

6. Safe disposal of waste, including sharps

All staff are responsible for the safe management and disposal of waste, including sharps. All contaminated waste and used sharps should be correctly segregated and disposed of to prevent injury or infection.

The Health Technical Memorandum 07-01: Safe and sustainable management of healthcare waste, contains the regulatory waste management guidance for all health and care settings (NHS and non-NHS) in England and Wales, including waste classification, segregation, storage, packaging, transport, treatment and disposal.

Refer to the 'Safe disposal of waste, including sharps Policy for General Practice'.

7. Safe management of blood and body fluid spillages

All spillages of blood and body fluids must be dealt with promptly. Best practice is to use

an appropriate spillage kit as per manufacturer's instructions. It is important to regularly check that the spillage kit is within the expiry date.

Refer to the 'Safe management of blood and body fluid spillages Policy for General Practice'.

8. Safe management of care equipment

Cleaning, disinfection and sterilisation are known as decontamination. Safe decontamination of care equipment after use on a patient is an essential part of routine infection control to prevent the spread of infection.

Refer to the 'Safe management of care equipment Policy for General Practice'.

9. Safe management of linen, including uniforms and workwear

The use of linen such as blankets, pillowcases, fabric hand towels, in General Practice is not recommended as it is not practical to launder items between each patient. Disposable paper products, e.g. paper towels, couch roll, can be used to cover the couch, pillow or maintain the patient's modesty. The couch and pillow must be decontaminated after use.

All fabric blinds, curtains and screens should be visibly clean with no blood, bodily substances, dust, dirt, debris stains or spillages.

Refer to the 'Safe management of linen, including uniforms and workwear Policy for General Practice'.

10. Safe management of sharps and inoculation injuries

This is referred to as 'Occupational safety/managing prevention of exposure (including sharps)' in the *NIPCM*.

Sharps are items that could cause cuts or puncture wounds and include needles and sharp instruments. It is the responsibility of the user to dispose of sharps safely into a sharps container. Sharps injuries with a contaminated sharp must be dealt with immediately to reduce the risk of transmission of infection.

Refer to the 'Safe management of sharps and inoculation injuries Policy for General Practice'.

11. Safe management of the care environment

The *Health and Social Care Act 2008: code of practice on the prevention and control of infections and related guidance* requires that registered providers of health and social care 'Provide and maintain a clean and appropriate environment in managed premises that facilitates the prevention and control of infections'.

Refer to the 'Safe management of the care environment Policy for General Practice'.

12. Transmission based precautions

SICPs may be insufficient to prevent transmission of specific infections. Therefore, additional TBPs may need to be taken by staff when caring for patients with a confirmed or suspected infection or colonisation.

Decisions on the need for TBPs must be based on the:

- Confirmed or suspected infectious agent
- Severity of the illness caused
- Transmission route of the infectious agent
- Procedures undertaken

TBPs are categorised by the route of transmission of the infection (some infections can be transmitted by more than one route). Application of TBPs may differ depending on the confirmed or suspected infection.

Contact precautions

These are utilised to prevent and control infections that are spread via direct contact with the patient, or indirectly from the patient's immediate care environment and care equipment. This is the most common route of infection transmission.

Droplet precautions

These are utilised to prevent and control infections which are spread over short distances (at least 1 metre) predominantly via droplets from the respiratory tract of one individual directly onto a mucous membrane, e.g. eyes, nose, mouth, of another individual. Droplets can penetrate the respiratory system to above the alveolar level.

Airborne precautions

These are utilised to prevent and control infections which are spread without necessarily having close patient contact via aerosols from the respiratory tract of one individual directly onto a mucous membrane, e.g. eyes, nose, mouth, of another individual. Aerosols can travel deeper into the respiratory system than droplets, to the endpoint (alveoli).

13. Infection Prevention and Control resources, education and training

The Community IPC Team have produced a wide range of innovative educational and IPC resources designed to assist your General Practice in achieving compliance with the *Health and Social Care Act 2008: code of practice on the prevention and control of infection 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:

- 27 IPC Policy documents for General Practice
- Preventing Infection Workbook: Guidance for General Practice
- IPC CQC assessment preparation Pack for General Practice
- IPC audit tools, posters, leaflets and factsheets
- IPC Bulletin for General Practice Staff

In addition, we hold educational study events in North Yorkshire.

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

14. 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*

NHS England (2025) *National Standards of Healthcare Cleanliness 2025*