





Taking action to prevent infection

WINTER UPDATE October 2024

As winter approaches it's important that key infection prevention and control (IPC) messages are reinforced, and steps taken to ensure staff and patients are kept well this winter.

In this issue:

- 1. Standard IPC Precautions (SICPs)
- 2. Transmission Based Precautions (TBPs)
- 3. Personal Protective Equipment (PPE)
- 4. Keeping Well

1. Standard IPC Precautions (SICPs)

Protecting staff and patients from infection starts with **Standard IPC Precautions (SICPs)** such as effective hand hygiene, cleaning equipment and the environment and wearing the correct Personal Protective Equipment (PPE) when required. Ensuring SICPs are followed will reduce the risk of transmission of infections. All staff should be appropriately trained and aware of SICPs. **See Chapter 1** <u>national-infection-prevention-control-manual-England-version-2.10.pdf</u>

2. Transmission Based Precautions (TBPs)

TBPs are additional precautions used when normal SICPs are insufficient to prevent cross transmission of infection an example of this would be the need to use TBPs when clinically assessing a patient with suspected measles.

TBPs are categorised by the route of transmission of the infection:



CONTACT precautions – used for direct contact with the patient or indirect contact through the patients care environment



DROPLET precautions – used to protect an individual's mucosal surface or conjunctivae (mouth, nose, eyes) from droplets from the respiratory tract



AIRBORNE precautions - used to protect an individual's mucosal surface or conjunctivae (mouth, nose, eyes) from aerosols from the respiratory tract

3. Personal Protective Equipment

The level of PPE required is dependent on the route of transmission of infection. Please see link to IPC manual with a list of different infections and routes of transmission Appendix 11 national-infection-prevention-control-manual-England-version-2.10.pdf

Below is an example of 2 infection transmission scenarios, the transmission route and level of PPE required when clinically

	Gloves	Plastic Apron	Fluid Resistant Long Sleeved Gown	FRSM Fluid Resistant Surgical Face Mask	FFP3 Filtered Face Piece Class 3	Visor
Suspected/ Confirmed Mpox (Clade unknown)	V	X	V	X	V	V
Suspected Measles	\checkmark	X	V	X	$\sqrt{}$	V

Fluid resistant surgical face masks (FRSM) and Filtered face pieces (FFP3)

FRSM – are used to protect the wearer from infections spread through **droplets** for example COVID-19 or Influenza.

FFP3 – are used to protect the wearer from infections spread through **aerosols** for example measles or when patients with infections such as COVID-19 or Influenza are having an aerosol generating procedure (AGP).

FFP3 should also be worn for **High Consequence Infectious Diseases (HCIDs)** such as mpox (monkeypox) Clade I or Middle East respiratory syndrome (MERS).

Staff who are required to wear an FFP3 must undergo fit testing to ensure they are adequately protected; know which brand of mask they should use and understand how to apply and 'fit check' their masks.

3. Keeping Well

- <u>Hand Hygiene</u> one of the most effective ways to reduce the risk of transmission of infection
- Respiratory hygiene follow 'catch it, bin it, kill it 'insert link to poster
- Get vaccinated Vaccination is one of the most important ways to protect ourselves, our loved ones and the people we care for
- Eating healthily and staying hydrated
- Keeping warm whilst continuing to keep areas well ventilated
- Avoiding the workplace and the vulnerable when you are not well for example, if you
 have vomiting and diarrhoea you should not attend work until symptoms have settled
 for at least 48 hours.



For further information, resources and guidance, visit the dedicated IPC Digital Hub or contact the IPC team on 0151 604 7750 or email ipc.wirralct@nhs.net