

# Droplet precautions

**Prompt:** poster colour is blue: use this explainer with the blue droplet precautions poster.

**Patient placement:** in a single room with dedicated toilet / ensuite facilities and ensure that the doors remain closed at all times except when necessary for entry/ exit of patient/ staff. Consider safety risks, risk assess patient placement in a single room with door closed, for example, by the person in charge (PIC).

## Step 1

**Before each patient interaction, a health and care worker must assess the patient/ situation and complete a point of care risk assessment (PCRA)\***

A point of care risk assessment (PCRA) is an integral part of standard practice which should be performed by every health and care worker **BEFORE** every patient interaction to allow them to accurately assess the risk **of exposing themselves and/ or others to infectious diseases/ agents/ transmissible microorganisms.**

This PCRA supports the selection of appropriate actions and personal protective equipment (PPE) in addition to any infection prevention and control (IPC) recommendations already in place, such as patient placement and occupational aspects, (including health and care worker vaccination) to further minimise any risk of exposure. Refer to the following link for details on health and care worker vaccination: [Chapter 04 - Immunisation and Health Information for Health-Care Workers and Others in At-Risk Occupations | HIQA](#)

This is a supporting tool, and risk assessments are likely to vary from person to person.

### 1. PATIENT

#### Consider:

- Has the patient respiratory symptoms or recent contact with a person who has known or suspected respiratory illness, such as known or suspected pertussis, seasonal respiratory viral infection- RSV, influenza, COVID-19, meningococcal infection (for 24 hours after beginning effective treatment), MERS-CoV, mumps?
- Is the patient identified as a potential risk of infection, for example respiratory symptoms, rash, suspected bacterial meningococcal infection, recent travel?
- Has the patient a known history of carriage/ infection with multi-drug resistant organism/ s (MDROs).
- Is the patient mobile/ ambulatory/ independent and are they capable and willing to perform hand hygiene and respiratory hygiene?
- Consider safety risks (risk assess patient placement in a single room).

**Prompt:** check surveillance system / chart / lab results, recent swabs /screens

## 2. TASKS

### Consider:

- What type of task am I about to perform? Is this a non-clinical interaction?
- Is this a clinical intervention?
- Am I about to perform a task for example providing personal care, assisting with respiratory support/ procedures, chest physiotherapy, bathing, assisting with toileting, carrying out a procedure, such as wound care, catheter care (high contact level/ low contact) with prolonged contact?
- Will the task increase the likelihood that my skin / clothing will become contaminated? (high contact / low contact).

## 3. ENVIRONMENT

### Consider:

- Is the person located in a single room? It is recommended for droplet precautions that a single room is used. If the patient becomes symptomatic while in a multi bedded room, move them to a single room and assess other patients in that area. Monitor those patients for development of symptoms. Risk assess: is there a risk to / from other individuals (for example, shared rooms, mobile patients with infectious symptoms). Consider cohorting, where appropriate
- Think about equipment: is there dedicated equipment for the patient (consider blood pressure monitor, cuff, thermometer, hoist sling)?
- Is the equipment shared, for example commode, hoist, blood glucose monitor, blood pressure monitor? If yes, clean and disinfect reusable equipment between each use.
- Consider space for physical distancing/ items of equipment.

# Step 2

**Choose appropriate PPE and implement the required actions in line with standard precautions including the following:**

- **Clean your hands in line with the WHO 5 moments.** Ensure access to hand hygiene products/ facilities & select as appropriate (alcohol based hand rub / handwashing)
- **Surgical mask:** required for droplet precautions. Risk assess requirement for FFP2 respirator (for example aerosol generating procedures), follow procedure for fit checking as on poster \*\*
- **Eye protection:** Risk assess (use PCRA\*)
- **Gloves:** Risk assess glove requirement, consider in relation to tasks such as contact with chemicals or if there is a risk of blood/ body fluid exposure\*\*\* (for example: urine, vomitus, faecal matter, respiratory secretions etc.)
- **Apron:** Low level contact/ interaction with the patient
- **Gown:** High level contact/ interaction with the patient
- **Disposal of PPE:** (inside the patient's room): risk assess disposal in healthcare risk waste/ non risk waste streams
- **Removal of surgical mask:** outside the patient's room and clean your hands.

**NOTE:** Reassessment of PPE requirements should occur as the clinical scenario develops to reflect changes in transmission risk

Visitors do not routinely need to wear PPE. They should be encouraged to clean their hands before and after visiting the patient.

Advise and support visitors, regarding PPE, as appropriate

Visitors should not visit if they have any acute onset of respiratory or GI symptoms.

For further information, refer to **Department of Health (2023). NCG, National Clinical Guideline No. 30 Infection Prevention and Control.**

**Available at:** <https://www.gov.ie/en/department-of-health/publications/infection-prevention-and-control-ipc/>

\*PCRA poster

\*\*FFP2/3 respirator poster

\*\*\* Gloves off poster

#### **Footnote**

The term patient refers to patients, service users, clients, residents, person, supported individual