

Infection Prevention and Control Policy

SpiroSense - Independent Respiratory Diagnostics

Person responsible - Catherine Bridges

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Purpose

This policy outlines how SpiroSense prevents and controls infection during **Spirometry and FeNO testing**, in line with:

- Health and Social Care Act 2008: Code of Practice on the Prevention and Control of Infections
- Regulation 12: Safe Care and Treatment
- UK health and safety and infection control guidance

It ensures that the service operates safely, protects service users, and complies with regulatory requirements.

Scope

This policy applies to all diagnostic procedures conducted at SpiroSense, including **PneumoTrac spirometry, SpiroTrac 6 software, and FeNO testing**, and covers:

- Infection risk assessment and monitoring
- Hand hygiene and personal protective equipment (PPE)
- Cleaning, decontamination, and waste management
- Staff health and vaccination
- Consideration of patient-specific needs

Risk Assessment and Monitoring

Identifying and Assessing Infection Risks

Infection risks associated with Spirometry and FeNO include:

- Aerosol generation from forced exhalation (spirometry) or exhaled nitric oxide (FeNO) testing
- Contamination from mouthpieces, filters, or sampling devices
- Environmental surface contamination
- Cross-infection between patients

Risk assessment is carried out by:

- Reviewing the patient's health status prior to testing (symptoms, recent infections)
- Inspecting the devices, consumables, and filters before each use
- Considering specific needs (e.g., immunocompromised patients)
- Maintaining a risk register for spirometry and FeNO procedures

Monitoring Infection Control Measures

- Daily checks of equipment and consumables
- Audits of cleaning and decontamination logs
- Recording incidents of contamination or PPE breaches
- Periodic review of infection control procedures (at least annually)
- Reflection and review after any near-miss or infection-related incident

Systems to Manage and Prevent Infection

- Use of single-use bacterial/viral filters and mouthpieces for each patient
- Immediate disposal of consumables after each test
- Environmental cleaning of surfaces between patients
- Documentation of cleaning, filter, and device use

Prevention and Control Measures

Hand Hygiene

- Wash hands with soap and water before and after each patient
- Use alcohol-based hand rub where appropriate
- Hand hygiene is documented in the infection control log

Personal Protective Equipment (PPE)

PPE available for practitioner:

- Disposable gloves
- Apron
- Face mask
- Eye protection if risk of splashes

PPE use:

- Practitioners wear PPE during all Spirometry and FeNO tests
- PPE is removed and disposed of safely after each patient
- Enhanced PPE is used when a patient is suspected of carrying a respiratory infection

Transmission-Based Precautions

- Symptomatic or infectious patients are deferred where clinically appropriate
- Patients are instructed on cough etiquette and hand hygiene

Cleaning, Decontamination, and Waste

Equipment:

- External surfaces of devices (spirometer, FeNO analyzers) wiped with approved disinfectant before and after each patient
- Internal circuits protected by single-use filters; no further decontamination required
- Mouthpieces and sampling devices are single-use and disposed of after each test

Environment:

- Surfaces (treatment tables, chairs, counters) cleaned between patients
- High-touch areas cleaned at the start and end of the day
- Cleaning checklist maintained throughout the day

Waste:

- Used filters, mouthpieces, PPE, and tissues disposed of in clinical waste bags
- Bags removed at the end of each session and stored securely for collection

Laundry / Uniforms:

- Not applicable; practitioner wears clean clothing daily and PPE covers clothing during procedures

Consideration of Patient Needs

- Immunocompromised or high-risk patients: additional cleaning and PPE measures
- Adjustments for patient mobility or sensory needs, e.g., seated testing, assistance with hygiene

Staff Health and Vaccination

- Practitioner must be fully vaccinated in line with current NHS occupational health guidance, including:
 - Seasonal influenza
 - COVID-19 (if recommended)
 - Hepatitis B (if applicable)
- Practitioner must not perform testing if acutely unwell or symptomatic with a respiratory infection
- Overseas practitioners must provide proof of immunisation according to UK guidance
- Health status and vaccinations reviewed annually

Governance and Compliance

- Infection control practices audited regularly and documented
- Logs of cleaning, filter use, and hand hygiene are maintained
- Any IPC incident triggers reflection and corrective action
- Policy reviewed annually or sooner if guidance or legislation changes
- Linked to the Governance and Quality Assurance Policy for oversight

References

- Health and Social Care Act 2008: Code of Practice on the Prevention and Control of Infections
<https://www.gov.uk/government/publications/code-of-practice-on-the-prevention-and-control-of-infections>
- Regulation 12 – Safe Care and Treatment
<https://www.legislation.gov.uk/uksi/2014/2936/regulation/12/made>
- UK Health and Safety and Infection Control Guidance
<https://www.gov.uk/government/publications/infection-prevention-and-control-in-healthcare-settings>

Policy Review

This policy is reviewed annually or following changes to legislation or guidance. Legislation and guidance links are checked and updated as part of the annual policy review.

Last review date: 04/02/26

Next review date: 03/02/27