**Infection Precautions**

**Information for Residents and Visitors**

Infection prevention and control is taken seriously to protect all residents, staff, and visitors. Some precautions are always in place, and others are added when someone has an infection that can spread to others.

**🔹 Standard Precautions – For Everyone, Every Time**

These are some everyday precautions used in the care environment and with residents:

* Clean hands with soap and water or alcohol-based hand rub
* Cover coughs and sneezes with a tissue or elbow
* Wear personal protective equipment if directed by staff
* Handle waste and laundry safely
* Keep shared areas and items clean

**🔸 Transmission-Based Precautions – Extra Steps When Needed**

When a resident has or may have an infection that can spread to others, additional precautions are used. These are added to standard precautions and differ depending on the organism and means of spread.

**When Are These Needed?**

* When resident shows signs of possible infection (e.g., fever, cough, diarrhea)
* Started immediately, even before lab results
* Stopped when resident is no longer infectious, duration varies in accordance with organism

**🧤 Contact Precautions**

Used for organisms spread by direct and indirect contact (e.g. resistant bacteria, diarrhoeal infections, mites):

* Clean hands before and after use of PPE
* Contact PPE precautions worn by staff/visitors: gloves and gown when entering the resident’s room, remove on exiting the room (or as directed)
* Resident isolation= single room or 1–2 m distancing if shared

**😷 Droplet Precautions**

For infections spread by large respiratory droplets (e.g., Pneumonia, Pertussis):

* Clean your hands before and after use of PPE
* Clean hands before and after use of PPE
* Droplet PPE precautions worn by staff/visitors: surgical mask, eye protection when entering the resident’s room, remove on exiting the room (or as directed)
* Resident assisted to wear a mask if they must leave the room – as possible
* Resident isolation= single room or 1–2 m distancing if shared, door closed

**🧤 😷 Contact and Droplet Precautions**

Used for infections spread by contact and droplets from coughing or sneezing (e.g. influenza, RSV):

* Clean hands before and after use of PPE
* Contact and droplet PPE precaution worn by staff/visitors: gloves, gown, surgical mask and eye protection when entering the resident’s room, remove on exiting the room (or as directed)
* Residents assisted to wear a surgical mask if they must leave the room (as possible)
* Resident isolation= single room or 1–2 m distancing if shared, door closed

**🫁 Airborne Precautions**

Used for infections that travel in the air (e.g. tuberculosis, measles, COVID-19). Contact precaution PPE may also be required depending on the organism and means of transmission:

* Clean hands before and after use of PPE
* Airborne PPE precaution worn by staff/visitors: a checked respirator (N95/P2) mask and eye protection
* Residents assisted to wear a surgical mask if they must leave the room (as possible)
* Resident isolation= single room (as possible), door closed

**👨‍👩‍👧 Your Role as a Visitor**

* Clean hands-on facility entry, before and after removing PPE and on exiting facility
* Stay away if unwell
* Always read and follow the signs throughout the home
* Follow directions from staff
* Use protective equipment as directed
* Limit contact: stay in resident’s room unless told otherwise
* Avoid touching surfaces/items unnecessarily
* Ask staff if you’re unsure what to do – we’re here to help

**💬 Why This Matters**

These steps help stop infections from spreading and protect:  
✔ You and your loved one  
✔ Other residents  
✔ Our staff and the wider community

**Thank you for helping us keep everyone safe.**

*For more information, please speak to our staff or access this government link* [*https://www.safetyandquality.gov.au/our-work/infection-prevention-and-control*](https://www.safetyandquality.gov.au/our-work/infection-prevention-and-control)