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**Cumberland
Council**

Community Infection Prevention and Control Policy for Care Home settings

Venepuncture

VENEPUNCTURE

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VENEPUNCTURE

1. Introduction

Venepuncture is the procedure of entering a vein with a needle in order to obtain a sample of blood for diagnostic purposes.

Venepuncture breaches the circulatory system, therefore, to minimise the risk of injury and/or infection to both staff and residents, 'Standard infection control precautions' (SICPs) and, where required, 'Transmission based precautions' (TBPs), should be adhered to, refer to the 'SICPs and TBPs Policy for Care Home settings'.

The procedure should only be undertaken by appropriately trained and competent staff.

2. Tourniquets

Single use tourniquets should be disposed of after each use. Reusable fabric tourniquets can harbour microorganisms, such as bacteria and viruses, and, therefore, pose a potential risk of transmission of infection and should not be used. If reusable tourniquets are used, they should be suitable for decontamination in accordance with the manufacturer's instructions and cleaned with either a detergent wipe or a combined '2 in 1' wipe after each use.

3. Gloves

A risk assessment should be undertaken to determine if gloves are required. Close fitting gloves, e.g. nitrile, are recommended. Best practice is to wear gloves, which should be removed and disposed of and hands cleaned after each procedure.

The wearing of gloves has been shown to reduce the volume of blood transferred in a needlestick injury by 52% compared with not wearing gloves. This can help reduce the risk of acquiring a blood-borne virus (BBV) if you sustain a needlestick injury.

4. Skin decontamination

Both the World Health Organisation and Royal Marsden Hospital Manual recommend that best practice is to clean the skin:

- Good skin preparation reduces the risk of infection from colonising skin bacteria
- Use a 70% isopropyl alcohol or 2% chlorhexidine in 70% alcohol skin wipe to clean the area for 30 seconds in a circular motion, working away from the centre, and allow the skin to air dry

5. Preparation for venepuncture

Ensure all equipment is available:

- A single use or clean reusable tourniquet
- Vacuum blood collection system needles, preferably a safer sharps device to reduce the risk of accidental sharps injury, and appropriate blood bottles
- Clean tray or receiver
- Sharps container
- Non-sterile disposable nitrile gloves or equivalent, if worn
- Disposable apron, if required
- 70% isopropyl alcohol or 2% chlorhexidine in 70% alcohol skin wipes
- Clean gauze or cotton wool ball
- Adhesive tape/plaster or alternative dressing

Check the resident's details and discuss the procedure. Check for any previous problems with venepuncture, any allergies and obtain verbal consent.

Note: Blood must be drawn in a specific order, 'the order of draw', to avoid cross-contamination of additives from one tube to another, affecting laboratory results. Follow your blood collection systems guidance for order of draw.

6. Procedure

- Assemble specific equipment required, checking packaging for damage and expiry dates.
- Wash hands with liquid soap and warm running water or use alcohol handrub, using the technique given in the 'Hand hygiene Policy for Care Home settings'.
- Put on disposable apron, if required.
- Position the resident comfortably and support the limb. If a pillow is used, it should be free from a linen pillow case and have a wipeable cover.
- Apply tourniquet above the proposed puncture site.
- Palpate the proposed puncture site to select a vein.
- Wash hands or use alcohol handrub.
- Put on disposable gloves, if worn.
- Clean resident's skin with 70% isopropyl alcohol or 2% chlorhexidine in 70% alcohol skin wipes. Clean the area for 30 seconds in a circular motion, working away from the centre, and allow the skin to air dry.
- Do not re-palpate or touch the area after cleaning.

- Remove the cover from the needle and inspect the device for any faults.
- Anchor the vein by applying manual traction on the skin a few centimetres below the proposed puncture site.
- Insert needle smoothly and undertake the procedure of venepuncture as per training received and vacuum system being used. If there is a failed attempt, the needle must be discarded in the appropriate sharps container and the procedure repeated as stated with a new needle.
- Release the tourniquet (if not previously done).
- Place a clean gauze or cotton wool ball over the puncture site.
- Remove the needle, but do not apply pressure until fully removed.
- Activate the safety feature if a needle safety device is used.
- Discard sharps in a sharps container as per 'Safe management of sharps and inoculation injuries Policy for Care Home settings'.
- Apply pressure and use additional clean gauze or cotton wool ball if necessary. Discourage the resident from bending their arm.
- Gently invert each blood bottle tube immediately after blood collection, as per manufacturer's instructions.
- Inspect puncture point for bleeding.
- Apply adhesive plaster or alternative dressing.
- Remove and dispose of gloves and apron, if worn.
- Wash hands with liquid soap and warm running water or use alcohol handrub.
- Label sample bottles.
- Complete the specimen request form.

7. Skin dressing

Use of clean gauze or a cotton wool ball to the puncture site is recommended, asking the resident to apply pressure until bleeding has ceased. To reduce the risk of contamination, small packs of gauze swabs or cotton wool balls should be used and care taken when removing them from the pack.

8. Infection Prevention and Control resources, education and training

The Community Infection Prevention and Control (IPC) Team have produced a wide range of innovative educational and IPC resources designed to assist your Care Home in achieving compliance with the *Health and Social Care Act 2008: code of practice on the prevention and control of infections and related resources* and CQC registration requirements.

These resources are either free to download from the website or available at a minimal cost covering administration and printing:

- 30 IPC Policy documents for Care Home settings
- Preventing Infection Workbook: Guidance for Care Homes
- IPC CQC inspection preparation Pack for Care Homes
- IPC audit tools, posters, leaflets and factsheets
- IPC Bulletin for Care Homes

In addition, we hold IPC educational training events in North Yorkshire.

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

9. References

Hospital Infection Society (2007) Standardization of needlestick injury and evaluation of a novel virus-inhibiting protective glove *Journal of Hospital Infection* Volume 66, Issue 4, August 2007, (Pages 339-345)

Royal Marsden NHS Foundation Trust (2020) *The Royal Marsden Hospital Manual of Clinical and Cancer Nursing Procedures 10th Edition*

World Health Organisation (2010) *WHO guidelines on drawing blood: best practice in phlebotomy*