**Title**

Infection Control in the General Practice Waiting Room: A Qualitative Study

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**Background**

It has been found through quantitative studies that general practices worldwide have suboptimal adherence to local infection control guidelines1,2, but the reasons for this discrepancy are not clear.

**Aims**

To obtain qualitative information exploring infection control in a sample of Sydney metropolitan general practices.

**Method**

5 general practices participated in the study. Semi-structured interviews were conducted with all categories of practice staff and patients to understand their approach to infection control. A total of 40 interviews were conducted, as well as an objective nine-hour observation of each waiting room. Grounded theory was then used to create the proposed model described below.

**Results**

Preliminary results show that both practice staff and patients conceptualise infection control by visual markers of contagion – Such as illness behaviours (cough, rhinorrhoea, etc) and environmental cleanliness. An intuitive risk assessment is then done by practice staff to determine if intervention is needed. Practice staff rarely referenced infection control guidelines in their decision-making process; Some were not even aware they existed. Most patients did not understand principles of infectious disease transmission and most practice staff felt that patient education and involvement needed improvement.

**Conclusion**

Future editions of RACGP infection control guidelines may need to address engaging patients in the process. Introducing stringent ramifications for adhering to primary care infection control guidelines may result in an improved awareness of them.

**References**

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2. Sneddon, J., Ahmed, S., Duncan, E. (1997). Control of infection: a survey of general medical practices. *J Public Health. 19*(3):313-319.