

INFECTION CONTROL AND PERSONAL PROTECTIVE EQUIPMENT (PPE)

1. Purpose

Utilize Universal Precautions to prevent the spread of infection causing microorganisms or pathogens to health care workers, patients or their families. SBA requires that all personnel must use Personal Protective Equipment (PPE) at all times when there is a possibility of exposure to blood or other potentially infectious body fluids or materials. It is the responsibility of the clinician to obtain the PPE appropriate to render patient care/treatment.

2. Supplies/Equipment

Personal Protective Equipment which may be used for infection control measures includes gloves, mask, fluid resistant clothing (gowns, aprons), head and foot coverings, protective eyewear (goggles), as well as CPR mask/micro (with one way value) shields.

3. Procedure

Universal Precautions apply to blood and other potentially infectious fluids including:

- Body fluids (feces, urine, sputum, vomitus)
- Semen or vaginal secretions
- Cerebrospinal fluid, synovial, pleural, pericardial and amniotic fluids.
- Saliva
- Infection Material may be wet or dry

1. Staff will implement infection control procedures with regard to patients and their environment.
2. Universal Precautions may include, but are not limited to, the implementation of the following procedures when providing patient care:
 - Hand washing before and after rendering patient care
 - Establishing a clean working area and then placing supplies/equipment in the clean area

- Use of personal protective equipment such as gloves, aprons, masks, and goggles when appropriate
- Covering the nose and mouth when coughing or sneezing
- Protecting cuts on fingers or hands with clean bandages and changing the bandages when wet
- Not reporting to work when suffering from a contagious or infectious illness
- Use of sound personal grooming habits
- Insuring clean and dirty items are separated
- Insuring sterile supplies used are not outdated and that they are stored intact (Discard any open or damaged supplies)
- Instruct and reinforce infection control procedures with patients and their families as appropriate
- Take precautions with sharps and instruments
- Disinfect equipment and discard disposables
- Any piece of disposable equipment which has come in contact with blood/body fluids or moist body substance must be disposed of in a plastic bag. Close securely and place plastic bag in the patient's covered trash receptacle.
- If a clinician encounters a body/fluid splash or exposure, they should wash the area thoroughly and report incident to Supervisor as soon as possible. Complete proper Incident Report documentation

Gloves

1. Worn whenever there is a possibility of direct contact with blood or other body fluids which could be infectious, mucus membranes or non-intact skin, and any equipment soiled with blood/body fluids.
2. Are disposable and only used once. They should be changed any time barrier effectiveness is lost.
3. Gloves must be removed and disposed of after each patient contact
4. Hands are to be washed immediately after gloves are removed

Gowns

1. Impervious gowns/aprons are to be worn anytime there is possibility of contamination of clothing.

Mask/Protective Eyewear

1. Masks or goggles are to be worn whenever there is a potential for splash, spray, droplets, or mists of blood/body fluids to the face to prevent mucus membrane exposure.
2. If prescription eyeglasses are used for prevention of eye exposure, they must have side shields for protection.

Shoe Covers

1. Shoe covers should be worn when possibility exists of contamination of shoes with infectious material.

CPR Mask/MicroShields(with one way valve)

1. All persons certified to perform CPR are to use masks/micro shields with one way value when performing CPR.

Donning Personal Protective Equipment

NOTE: All equipment may not be necessary in every case. If not, follow same order when omitting items not used.

1. Put on shoe covers
2. Wash hands
3. Put on goggles
4. Put on masks to cover nose and mouth, tying upper strings first or other face protection devices
5. Put on gown/apron and tie from upper to lower strings
6. Put on gloves, pulling cuffs up and over gown sleeves to prevent exposed skin between gloves and gown

Removing Personal Protective Equipment

NOTE: PPE should be removed/changed anytime contamination occurs and/or the effectiveness of the barrier is compromised.

1. Remove shoe covers-

If shoe covers are worn, they should be removed being careful to touch only the outside shoe covers to avoid contaminating employee shoes

2. Remove gloves

3. Remove gown/apron-

Avoid contamination (Outside of gown is considered dirty while inside considered clean).

4. Remove mask-

Untie bottom strings and then top strings or other face protection devices. Avoid letting mask fall down into clothing.

5. Remove goggles last (if used) and discard

6. Wash hands

HAND WASHING

1. Purpose

To prevent the spread of infection by contaminated hands by reducing the number of microbials, soil and transient organisms.

NOTE: All employees are responsible for implementing hand hygiene procedures in an ongoing attempt to prevent and/or contain infections processes and communicable disease.

2. Supplies Needed/Equipment

- Paper towels
- Soap
- Water and/or bacteriostatic foam/gel/liquid
- Wastepaper basket

3. Procedure

A. Water/Sink (Avoid splashing water against clothing)

1. Utilize closest sink with running warm water, soap or disinfectant and paper towels.
2. Push up sleeves and any wristwatch above your wrists
3. Turn on water and adjust to comfortable warm temperature
4. Wet hands and wrists and keep hands pointed downward, lower than the elbows.
5. Apply soap or detergent; lathering thoroughly, making sure soap is between fingers and under nails.
6. Using a rotating and rubbing motion, rub vigorously for at least 10-15 seconds. (Friction is the key to removing microorganisms and if hands are visibly soiled, more time may be needed)
7. Wash at least two inches above wrists and if areas underlying fingernails are soiled, clean them with fingernails of other hand or clean orangewood stick.
8. Rinse thoroughly hands and wrists, keeping hands down and elbows up.
9. Dry thoroughly from fingers to wrists and forearms.
10. Turn off water faucet using paper towel and discard in waste basket.

B. Bacteriostatic Foam/Gel/Liquid is the preferable hand hygiene method.

1. Place adequate amount of foam or liquid on hands.
2. Using friction, vigorously rub into all surface areas, including between fingers, under nails, palms and backs of hand. Rub until liquid is completely dry.

4. **Indications**

1. Before and after direct patient care
2. Before and after specimen collection
3. Before and after performing each invasive procedure
4. After any contact with contaminated materials or equipment
5. After using the bathroom, wiping nose, eating or when hands are soiled.
6. Before re-entering a clinical bag or patient's clean supplies

EQUIPMENT MAINTENANCE

1. Purpose

To assure that reusable equipment is safe, accurate and cleansed in accordance with manufacturer's written guidelines to reduce the risk of infection. Disposable supplies will be used where possible.

2. Supplies Needed

- 1:10 Bleach solution
- 70% Alcohol solution or wide spectrum antimicrobial wipes

3. Procedure

1. Reusable medical equipment will be cleaned with Alcohol solution (stethoscopes and digital thermometers) or as the manufacturer recommends.
2. Blood Pressure Cuffs are to be cleaned when visibly soiled using alcohol, a 1:10 bleach solution or an antibacterial solution. Calibrate and check for accuracy. BP cuffs can be safely washed or dry cleaned, but Velcro strips should always be in a sealed position. The bladder and meter can be cleansed with alcohol, bleach solution or antibacterial solution.
3. Equipment that is exposed to body fluids or blood will need to be cleansed immediately with 1:10 bleach solution or a wide spectrum antimicrobial wipe.
4. Each staff member will be responsible for the cleansing of reusable equipment.
5. Endoscopes will be cleansed before and after each use. See Policy "Cleaning/Disinfecting the Endoscope".

HAZARDOUS MATERIALS/WASTE

1. Purpose

The purpose of this policy is to educate and train clinicians in the identification and safe handling of hazardous materials/waste in an effort to comply with federal/state/local laws and regulations regarding the identification, handling, transportation and disposal of hazardous materials/waste, e.g., OSHA and Environmental Protection Agency.

2. Supplies Needed

- Personal Protective Equipment, gloves, masks, eyewear, apron, shoe covers, etc.
- Disposable bags (color coded red for biohazardous)
- Leak proof containers

3. Procedure

1. Staff will assess the patient's plan of care and medical record for the need to address hazardous material/waste. Universal Precautions will be observed on all patient care.
2. The patient's environment will be assessed to determine the presence of appropriate supplies and information in the event of an exposure incident, e.g., disposal bags and PPE.
3. The clinician will implement appropriate work practice controls, engineering controls, and personal protective equipment in the provision of patient care.
4. Contaminated items will be bagged and double bagged as appropriate and disposed of per agency/facility policy. Sharps will be placed in hard plastic containers that are leak proof and impermeable to sharp objects.
5. Non Hazardous materials/waste may be bagged and disposed of in the patient's trash receptacle to be discarded daily.
6. Inservice education will be provided to staff upon hire and annually thereafter on all policies/procedures related to the identification, handling, transportation, disposal and exposure to hazardous material/waste. This includes the Hazard Communication Standard and the Hazardous Chemical Right-To-Know Law.
7. Hand Washing will be performed before and after any patient contact/procedure as well as after waste is properly disposed.
8. In the event of exposure to a hazardous material/waste, clinicians will:
 - Implement immediate action as indicated by the type of hazardous material
 - Notify the supervisor

- Seek follow up care as necessary
- Complete an Incident Report as soon as possible.