

ALASKA PIONEER HOME		P&P No: 08.01
Title: Standard Precautions		Approval: O. COTE
Key Words: Exposure, Communicable Disease, OSHA		
Team: Nursing, Housekeeping	Effective Date: 8/1/12	Page: 1 of 5

## PURPOSE

To describe precautions designed to reduce the risk of transmitting microorganisms from both identified and unidentified sources of infection in the Alaska Pioneer Home (AKPH).

## POLICY

AKPH has an infection control program that meets licensing and OSHA requirements for infection control in assisted living facilities.

AKPH staff uses Standard Precautions while working in the Home and caring for the residents.

## DEFINITIONS

**Blood borne pathogens** are germs that are present in human blood and can cause disease in humans.

**Infectious disease**, also known as communicable disease, happens when infection is introduced into a host, and then grows causing symptoms of disease.

**Exposure incident** is eye, mouth, or other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials.

**Parenteral** describes the introduction of substance into the body by a route other than the gastrointestinal tract (mouth, stomach, and intestines).

**Universal Precautions** refer to the medical practice of avoiding contact with patient' body fluids, by means of wearing nonporous articles such as gloves, goggles, and face shields. They were replaced with Standard Precaution for health care in 1996 by the Center for Disease Control and Prevention (CDC).

**Standard Precautions** reduce the risk of transmission of blood borne and other pathogens from both recognized *and* unrecognized sources. They are basic infection control measures which are used in the care of all patients, such as hand washing.

**Title: Standard Precautions****PROCEDURE****I. Standard Precautions****A. Definition**

1. Standard Precautions are infection control practices to reduce the risk of transmission of blood borne and other pathogens in health care settings.
2. Standard Precautions are a combination of Universal Precautions and body substance isolation.
  - a. Universal Precautions reduce the risk of transmitting blood borne pathogens.
  - b. Body substance isolation reduces the risk of pathogens from moist body substances.
3. Standard Precautions apply to:
  - a. Blood;
  - b. All body fluids, secretions, and excretions (except sweat), regardless of whether or not they contain blood;
  - c. Non-intact skin; *and*
  - d. Mucous membranes.
4. Standard Precautions are designed for the care of all persons regardless of whether or not they are infected.
  - a. Most people with blood borne viral infections such as Hepatitis B virus (HBV), Hepatitis C virus (HCV), and human immunodeficiency virus (HIV), do not have symptoms, nor can they be visually recognized.

**B. Infectious diseases are spread from person to person in 4 ways:**

1. Airborne or respiratory
  - a. These germs are spread when infected droplets from the nose, mouth, sinuses, throat, lungs, or contaminated tissues or fabric are inhaled.
  - b. Examples include tuberculosis, common colds, and influenza.
2. Direct contact
  - a. This germ contact occurs by directly touching an infected area or body fluid, such as saliva, mucous, eye discharge, pus, or spit.
  - b. Examples include conjunctivitis, lice, poison ivy, and chicken pox.
3. Fecal-oral
  - a. These germs enter the body from hands, food, mouthed objects, toilet, and disposable briefs that have been infected with feces.
  - b. Examples include Hepatitis A and rotavirus.
4. Blood contact
  - a. The person comes into contact with the infected blood or body fluids.
  - b. Examples include HIV, HBV, and HCV.

**Title: Standard Precautions**

- C. Standard Precautions are used when providing resident care:
1. Hand hygiene
    - a. The most important procedure for preventing cross contamination from person to person or object to person.
    - b. Refers to both washing with soap and water and to using alcohol gel to decontaminate the hands.
    - c. Always wash hands:
      - 1) When you arrive at the Home.
      - 2) Before and after contact with a resident.
      - 3) Immediately after touching blood, body fluids, non-intact skin, mucous membranes, or contaminated items.
      - 4) Immediately after removing gloves.
      - 5) When moving from contaminated body site to clean body site during care.
      - 6) After touching objects and equipment in the resident's room.
      - 7) Before eating.
      - 8) After using the rest room.
      - 9) After coughing or sneezing into the hands or a tissue.
  2. Personal protective equipment (PPE)
    - a. PPE includes disposable gloves, gowns, masks, and eyewear to create barriers that protect skin, clothes, mucous membranes, eyes, and the respiratory tract from infectious agents.
    - b. Wear gloves whenever it is likely that blood, body fluids, non-intact skin, mucous membranes, and contaminated items will be touched. Gloves must be discarded after one use.
    - c. Wear a mask and goggles or face shield if a splash of blood or body fluid may contact the face.
    - d. Wear a gown if skin or clothing may be exposed to blood or body fluids.
    - e. Remove and dispose PPE immediately after use and wash hands.
  3. Needle stick and sharps injury prevention
    - a. Safe handling of needles and sharp devices with engineered safety devices prevent exposure of Home staff to blood borne pathogens.
    - b. Used needles are discarded immediately after use and not recapped, bent, manipulated, or removed from the holder.
    - c. Used needles, lancets, and contaminated sharps are placed in a leak-proof, puncture-resistant sharps container that is red or labeled with a biohazard label.
    - d. Sharp containers are located away from resident reach.
    - e. When the sharps inside the container reach the *full line*, lock and discard the container, per protocol.

**Title: Standard Precautions**

4. Cleaning and disinfection
  - a. Resident rooms, common areas, and surfaces or objects that are frequently touched by staff and residents are cleaned routinely.
    - 1) Frequently touched surfaces include door knobs, phone receivers, multi-use computer keyboards, and television remote controls.
  - b. Floors and walls are disinfected when soiled with blood or body fluids.
  - c. Disinfectants are effective after dirt and organic matter have been cleaned from the surface.
  - d. Some pathogens such as norovirus and *Clostridium difficile* require a 1:10 bleach solution to disinfect a contaminated surface. 1:10 is one part bleach to 10 parts water.
5. Respiratory hygiene (cough etiquette)
  - a. Cover the nose and mouth with a tissue when coughing or sneezing, or use the crook of the elbow to contain droplets.
  - b. Perform hand hygiene immediately after contact with respiratory secretions and contaminated objects.
6. Laundry procedures
  - a. Clothing and linens stained with blood are handled with gloves, placed in a plastic bag, and labeled or color coded to alert laundry staff.
  - b. Bloody laundry is washed in hot (160° F) soapy water, or cooler water with bleach or laundry disinfectant.
7. Waste disposal
  - a. There are two types of waste:
    - 1) Contaminated waste includes items with blood and body fluids (not saturated with blood), discarded gloves and PPE, vomitus, etc. This waste is discarded into regular garbage bags.
    - 2) Bio-hazardous waste includes items that are saturated with blood or caked with dried blood. This waste is discarded into red garbage bags.
  - b. Sharp items are disposed in puncture-resistant and leak-proof containers.
8. Safe injection practices
  - a. Safe injection practices have been reinforced with outbreaks of Hepatitis B and Hepatitis C infections.
  - b. A new needle and syringe is used with each injection.
  - c. Use medication vials for one resident only when possible.

**II. Home Staff Safety and Health**

- A. Occupational Safety and Health Administration (OSHA)
  1. The mission of OSHA is to save lives, prevent injuries, and protect the health of America's workers.
  2. OSHA is a division in the Department of Labor.

**Title: Standard Precautions**

3. OSHA's blood borne pathogen standard protects employees who are at risk of exposure to blood or other potentially infectious materials.
  4. To protect the health and safety of the workers, OSHA requires training of staff that may have contact with blood and infectious materials.
- B. Each Home has at least one nurse to perform infection control tasks.
- C. Each Home has an exposure control plan which guides the staff when an exposure to blood or infectious materials occurs.
1. Exposure Control Plan describes methods of compliance, post-exposure evaluation and follow-up, information sent to the evaluating physician, communication of hazards, record keeping, and evaluation of the incident.
- D. Food service and housekeeping staff knows the applicable sanitation requirements while handling food and cleaning the Home.

**HISTORY OF REVISIONS**

New: 1/1/12

Revised: 2/28/12; 7/20/12

Reviewed: 2/28/12

**ATTACHMENTS****REFERENCES**

7 AAC 10.1045-1050