PERSONAL PROTECTIVE EQUIPMENT AND HAND HYGIENE

Overview
The environment caregivers work in on a day-to-day basis increases their chances of exposure to many types of infections and diseases. **Universal Standard Precautions** are an approach to infection control that involves treating all blood and other potentially infectious materials as if they are known to be infectious.

Safety Information
The term "Universal" refers to the steps that need to be taken in every case, not only when an infection is known to exist.

Common Blood borne Diseases

- Human immunodeficiency virus (HIV) is a virus that invades and destroys the cells that help us to fight off infections
- A person who is infected with HIV may look and feel healthy for many years
- However, during this time the virus is breaking down the person's immune system
    - People who are infected with HIV may eventually develop acquired immunodeficiency syndrome (AIDS)
    - A person with AIDS is unable to fight off infections that a healthy person would be able to resist or control. The person dies from one of these infections.
    - Although medications have been developed to help slow the progression of HIV infection, currently there is no cure
- Hepatitis is inflammation of the liver, an organ that performs many vital functions for the body
- There are many different types and causes of hepatitis
- Hepatitis B (HBV) and hepatitis C (HCV) are caused by infection with bloodborne viruses
    - Chronic infection with the viruses that cause hepatitis B and C can lead to liver failure, liver cancer and other serious conditions

Other common Diseases

- Bacteria, which can cause Staphylococcal (Staph) infection, Pneumonia, and Tuberculosis (TB)
- Viruses can cause Influenza and colds
- Parasites can cause disease/exposure like Giardia, Pediculosis (Lice), scabies, and Toxoplasmosis

Other potentially infectious materials (OPIM)

- The following human body fluids: cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, semen, vaginal secretions and all body fluids in situations where it is difficult or impossible to differentiate between body fluids

- Any unfixed tissue or organ (other than intact skin) from a human (living or dead)
- HIV-containing cell or tissue cultures, organ cultures and HIV or HBV-containing culture medium or other solutions; and blood, organs or other tissues from experimental animals infected with HIV or HBV

Personal Protective Equipment (PPE)
All employees will be provided with and utilize appropriate barrier precautions to prevent exposure to blood borne pathogens, and other potentially infectious materials.

PPE must be worn when:
- When there is a break in the skin on your own hands (cover any cuts, scrapes or sores before putting on the gloves)
- Whenever there is a possibility that you will come in contact with a person's blood or other potentially infectious materials.
- When you must handle items or surfaces soiled with blood or other potentially infectious materials.
- Helping an individual in the Restroom

Before and During the use of PPE:
- When you are wearing gloves, try to limit how much you touch other surfaces with your gloved hands. Pathogens from your soiled gloves can transfer to other items or surfaces that you touch, putting the next person who handles the item or touches the surface at risk for infection.
- Wash and dry your hands before use using the proper technique
- Ensure the gloves are a food fit and check for any tears or holes after fitting
- Never touch your mouth, eyes, ears, or any other part of your body while wearing gloves

After the Use of PPE:
Removing Gloves Properly
- Pinch the palm side of one glove near your wrist
- Pull the glove toward your fingertips, turning it inside out as you pull it off the hand
- Hold the glove in the palm of your gloved other hand
- Slip two fingers under the wrist of the other glove
- Pull the glove toward your fingertips, turning it inside out as you pull it off your hand
- The other glove is now contained inside
- Dispose of the gloves according to Assisted Independence's Policy and wash your hands

Examples of PPE
This equipment includes latex-free disposable gloves, gowns, protective eyewear, masks, resuscitation devices (such as CPR breathing barriers) and shoe covers. Appropriate PPE should be used whenever exposure to blood or other potentially infectious materials is likely.
- Gloves are worn whenever there is the possibility of contacting blood or other potentially infectious materials
- A gown is worn to protect your clothes and body from splashes and sprays of blood and other potentially infectious materials

- A mask is used to protect the mucous membranes of the nose and mouth from splashes and sprays of blood or other potentially infectious materials
- Wear protective eyewear, such as goggles or a face shield, to keep body fluids from splashing into your eyes when giving care, cleaning items or disposing of contaminated fluids
- Shoe covers are worn when it is necessary to walk through a contaminated area
- CPR breathing barriers and other resuscitation devices are used to prevent contact with another person's nose and mouth while giving rescue breaths

Maintaining a Safe Environment

- Disposable equipment and supplies need to be discarded in a manner that limits others' exposure to the contaminated items
- Similarly, reusable equipment and surfaces that have been contaminated by blood or other potentially infectious materials need to be properly cleaned and disinfected before the equipment is put back into service or the area is reopened
- Always wear latex-free disposable gloves (and other PPE as necessary) when cleaning equipment or surfaces or disposing of contaminated equipment or supplies
- Place soiled items in labeled biohazard containers for disposal, cleaning or laundering according to the procedures specified in Assisted Independence's exposure control plan
- Follow Assisted Independence's procedures for handling sharps (such as needles or broken glass) safely
- In general: Dispose of sharps in an approved puncture-resistant sharps container immediately after using them. Be careful and watch as you place the sharp into the container
    - Never recap a sharp object before disposing of it, because you could stick or cut yourself while trying to replace the cap
    - Never clean up broken glass using your hands. Use tongs, a broom and dustpan, or two pieces of cardboard to pick up and dispose of the broken glass
    - Trash bags may contain sharp objects, so avoid packing them down with your hands or swinging them near your legs when you walk

Cleaning up spills of blood and (OPIM)

- Spills of blood or other potentially infectious materials must be cleaned up promptly and properly to limit the potential for exposure to bloodborne pathogens
- Cleaning up spills of blood or other potentially infectious materials is a two-part process, because the surface must be cleaned before it can be disinfected

Hand Washing

At minimum, hands should be washed:

- Before providing care (if possible), and always after providing care, even if you wore gloves
- After touching blood, other potentially infectious materials or broken (non-intact) skin
- After touching objects or surfaces that could be contaminated with blood or other potentially infectious materials.
- After removing gloves and other personal protective equipment (PPE)

- Before and after eating and drinking
- After using the restroom

Proper Technique

- You should wash your hands at least 20 seconds
- Be sure to clean the palms and backs of the hands, in between the fingers the wrists, and underneath the nails

Hand Sanitizer

- Alcohol-based hand sanitizer can be used to decontaminate the hands when soap and water are not readily available
- Alcohol-based hand sanitizers may not be as effective if the hands are visibly soiled with dirt or body fluids

Proper Technique

- Dispense the recommended amount of product into the palm of one hand
- Rub your hands to cover all surfaces of both hands, including underneath the nails and between the fingers
- Continue rubbing the hands until the product evaporates

Exposure Incident Occurs

If another person's blood or other potentially infectious material comes into contact with your eyes, mouth or an opening or break in your skin, or if you experience a needlestick injury, then you have been involved in an exposure incident.

- In the event of an exposure incident, follow these steps immediately:
  - First, decontaminate the exposed area: Wash needlestick injuries, cuts and contaminated skin thoroughly with soap and water. If blood or another potentially infectious material splashes into your mouth or nose, flush the area with water. If blood or another potentially infectious material splashes into your eyes, irrigate them with clean water, saline or a sterile solution for 15 to 20 minutes.
  - Notify Assisted Independence
  - Complete the necessary documentation, per the exposure control plan. An incident report form is used to record the time and date of the exposure, the circumstances of the exposure, the actions taken after the exposure and other relevant information about the incident.
  - Seek immediate follow-up care as identified in Assisted Independence's exposure control plan.

Please visit the Center for Disease Control for more details and additional safety topics.

- https://cdc.gov/niosh/topics/safety.html
- https://www.cdc.gov/infectioncontrol/guidelines/index.html