

The Right Door for Hope, Recovery and Wellness

Chapter Title		Section #	Subject #
Organizational Systems		HR	513.1
Subject Title	Adopted	Last Revised	Reviewed
Infection Control	05/10/02	5/30/23	4/25/08; 9/27/10; 1/9/14; 2/7/17; 2/27/19; 3/13/20; 3/15/21; 3/17/22; 3/31/23; 5/30/23; 3/28/24

PROCEDURE

Application

This procedure shall apply to The Right Door for Hope, Recovery and Wellness.

1. Universal Precautions

- 1.1. The blood and body fluids of all individuals are potentially infectious. Potentially infectious substances include blood, semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, and amniotic fluid. Feces, nasal secretions, saliva, sputum, sweat, tears, urine, and vomitus are not considered potentially infectious unless they are visibly bloody.
- 1.2. Exposures occur through needle sticks or cuts from other sharp instruments contaminated with an infected person's blood or through contact of the eyes, nose, mouth, or broken skin with another person's blood.
- 1.3. Prior to performing a procedure which could result in potential exposure to blood or bodily fluids do the following:
 - 1.3.1. Wash hands.
 - 1.3.2. Don disposable gloves (latex, nitrile, or vinyl).
 - 1.3.3. Don gown and protective eyewear (ONLY if splashes or sprays are likely/expected).
 - 1.3.4. Perform procedure.

The Right Door for Hope, Recovery and Wellness

Chapter Title		Section #	Subject #
Organizational Systems		HR	513.1
Subject Title Infection Control	Adopted 05/10/02	Last Revised 5/30/23	Reviewed 4/25/08; 9/27/10; 1/9/14; 2/7/17; 2/27/19; 3/13/20; 3/15/21; 3/17/22; 3/31/23; 5/30/23; 3/28/24

1.3.5. Remove soiled gown (if applicable) prior to removing gloves, and deposit in biohazard trash/laundry receptacle.

1.3.6. Remove gloves in a manner which does not expose skin to soiled surface of glove and dispose in biohazard container.

1.3.7. Wash hands.

1.4. Note: All contaminated sharps must be deposited into a puncture-resistant, labeled, and secure sharps container immediately after use. Sharps are kept secure in the Medical Services Department and maintained by The Right Door for Hope, Recovery and Wellness nursing staff.

1.5. NEVER recap, bend, or remove used needles under any circumstance.

1.6. Note: Disposable CPR masks are available at all The Right Door for Hope, Recovery and Wellness sites, if needed. These are to be used in any event where CPR must be administered.

2. Hand Hygiene

2.1. Proper hand hygiene is essential in the prevention of disease transmission. Hand hygiene should be performed in the following situations: hands are visibly soiled, prior to eating, after using the toilet/bathroom, after smoking, prior to medication preparation, prior to donning gloves, after removing gloves, between consumer contacts, following the use of hands to cover sneeze or cough, after blowing nose or wiping mouth.

2.1.1. Hand washing procedure

2.1.1.1. Wet hands under running water.

2.1.1.2. Apply a dime-sized amount of soap and work into lather.

The Right Door for Hope, Recovery and Wellness

Chapter Title		Section #	Subject #
Organizational Systems		HR	513.1
Subject Title	Adopted	Last Revised	Reviewed
Infection Control	05/10/02	5/30/23	4/25/08; 9/27/10; 1/9/14; 2/7/17; 2/27/19; 3/13/20; 3/15/21; 3/17/22; 3/31/23; 5/30/23; 3/28/24

2.1.1.3. Rub hands vigorously for 15 to 20 seconds, covering all surfaces of hands and fingers.

2.1.1.4. Rinse hands completely under running water.

2.1.1.5. Dry hands completely with disposable towel.

2.1.2. Procedure for use of alcohol-based sanitizer

2.1.2.1. Apply dime-sized amount of product to palm of hand.

2.1.2.2. Rub hands vigorously covering all surfaces of hands and fingers until hands are dry.

2.2. Note: Hands are not fully sanitized until the alcohol-based hand rub has dried completely.

2.3. Note: The use of alcohol-based hand rubs is an acceptable substitute for soap and water unless hands are visibly soiled.

3. Spills containing blood and/or bodily fluids

3.1. Immediately report all spills occurring on agency property or within an agency vehicle to facilities management staff.

3.2. Clean-up is to occur as follows:

3.2.1. Mark/barricade the area clearly to prevent inadvertent exposure of others and cross-contamination and/or tracking of infectious materials.

3.2.2. Wash hands.

The Right Door for Hope, Recovery and Wellness

Chapter Title		Section #	Subject #
Organizational Systems		HR	513.1
Subject Title Infection Control	Adopted 05/10/02	Last Revised 5/30/23	Reviewed 4/25/08; 9/27/10; 1/9/14; 2/7/17; 2/27/19; 3/13/20; 3/15/21; 3/17/22; 3/31/23; 5/30/23; 3/28/24

3.2.3. Don intact, nonpermeable utility gloves, gown, and protective eyewear, as appropriate.

3.2.4. Flood contaminated area with household bleach solution (one part bleach, 10 parts water) or other The Right Door for Hope, Recovery and Wellness approved disinfectant.

3.2.5. Absorb all liquid with disposable paper towel. Dispose of used paper towel in a marked biohazard container.

3.2.6. Rinse and dry the area completely.

3.2.7. Dispose of all contaminated materials in biohazard container.

3.2.8. Remove and disinfect utility gloves.

3.2.9. Wash hands.

4. TB Screening

4.1. Tuberculin solution for skin testing is stored in accordance with package instructions by The Right Door for Hope, Recovery and Wellness nursing staff in the Medical Services refrigerator at the Ionia Office.

4.2. Upon opening a vial of tuberculin:

4.2.1. Write the date of opening on the outside of the vial.

4.2.2. Discard vial in a designated sharps container 30 days after it is opened.

4.3. Procedure for The Right Door for Hope, Recovery and Wellness staff TB screening:

The Right Door for Hope, Recovery and Wellness

Chapter Title		Section #	Subject #
Organizational Systems		HR	513.1
Subject Title	Adopted	Last Revised	Reviewed
Infection Control	05/10/02	5/30/23	4/25/08; 9/27/10; 1/9/14; 2/7/17; 2/27/19; 3/13/20; 3/15/21; 3/17/22; 3/31/23; 5/30/23; 3/28/24

4.3.1. RN administers tuberculin solution per package instructions.

4.3.2. The Right Door for Hope, Recovery and Wellness staff returns to Medical Services Department to have the TB skin test read within 48 to 72 hours.

4.3.3. RN documents TB test results on the TB test card.

4.3.4. The Right Door for Hope, Recovery and Wellness staff delivers a copy of the TB test card to the Human Resources Department to be placed in the personnel file.

4.4. If the TB screening result is positive:

4.4.1. Report to primary care physician for a chest x-ray and follow-up care within 7 business days.

4.4.2. Complete a "Health Questionnaire for Persons with Past Positive TB Skin Test" form initially and annually.

4.4.3. Return the form to The Right Door for Hope, Recovery and Wellness nursing staff.

4.4.4. The Right Door for Hope, Recovery and Wellness nursing staff will review this form, and forward it to Human Resources for placement in the personnel file.

5. Exposure Control Plan - Employee Exposures

5.1. Positions most at risk of occupational exposure include nurses, physicians, physician's assistants.

The Right Door for Hope, Recovery and Wellness

Chapter Title		Section #	Subject #
Organizational Systems		HR	513.1
Subject Title	Adopted	Last Revised	Reviewed
Infection Control	05/10/02	5/30/23	4/25/08; 9/27/10; 1/9/14; 2/7/17; 2/27/19; 3/13/20; 3/15/21; 3/17/22; 3/31/23; 5/30/23; 3/28/24

5.2. Positions sometimes at risk for occupational exposure include support coordinators, therapists, recipient rights officer, customer service staff, on-call workers, outreach workers, clerical staff, fiscal staff, janitorial staff, any staff trained in CPR and First Aid.

5.3. Tasks that involve exposure to blood, body fluids or tissues include specimen collection, injections, general activities of daily living care (ADL's) such as: bathing, skin care, mouth care, toileting, pericare, linen change, shave, diapering, dressing, and transportation. These activities may expose employees to saliva, mucous membranes, blood, urine, sputum, serous drainage, stool, and vomit.

5.4. In the event of exposure to the blood or bodily fluids of another individual do the following:

5.4.1. Immediately wash needle sticks and cuts with soap and water.

5.4.2. Flush splashes to the nose, mouth, or skin with water.

5.4.3. Irrigate eyes with clean water, saline, or sterile irrigants.

5.4.4. Report the exposure to immediate supervisor or the Human Resources Department.

5.4.5. Report immediately to the nearest emergency department (Sparrow Ionia or Spectrum Health United Memorial Hospital in Greenville). *The effectiveness of post-exposure prophylaxis, when necessary, depends on the immediacy of its delivery.*

5.4.6. An incident report is to be completed and turned in to a supervisor within 24 hours of the incident. The Supervisor is to sign it and turn it in to either the Facility Manager or the RRO within 48 hours of the incident.

The Right Door for Hope, Recovery and Wellness

Chapter Title		Section #	Subject #
Organizational Systems		HR	513.1
Subject Title	Adopted	Last Revised	Reviewed
Infection Control	05/10/02	5/30/23	4/25/08; 9/27/10; 1/9/14; 2/7/17; 2/27/19; 3/13/20; 3/15/21; 3/17/22; 3/31/23; 5/30/23; 3/28/24

5.5. Post-Exposure Follow-up

5.5.1. The Right Door for Hope, Recovery and Wellness will immediately provide confidential follow-up, including at least the following elements:

- 5.5.1.1. Documentation of the route(s) of exposure, and the circumstances under which the exposure incident occurred.
- 5.5.1.2. Identification and documentation of the source individual, unless The Right Door for Hope, Recovery and Wellness can establish that identification is not feasible or prohibited by state or local law.
- 5.5.1.3. Testing of the source individual's blood after consent is obtained in order to determine HBV, HCV, and/or HIV infectivity. If consent is not obtained, The Right Door for Hope, Recovery and Wellness will establish that legally required consent cannot be obtained. When law does not require the source individual's consent, the source individual's blood, if available, will be tested and the results documented. Note: This step is unnecessary if the source individual is already known to be infected with HBV, HIV, and HCV.
- 5.5.1.4. Test results of the source individual will be made available to the exposed employee who will inform his/her treating physician. The employee will be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
- 5.5.1.5. Post-exposure prophylaxis when medically indicated.

The Right Door for Hope, Recovery and Wellness

Chapter Title		Section #	Subject #
Organizational Systems		HR	513.1
Subject Title	Adopted	Last Revised	Reviewed
Infection Control	05/10/02	5/30/23	4/25/08; 9/27/10; 1/9/14; 2/7/17; 2/27/19; 3/13/20; 3/15/21; 3/17/22; 3/31/23; 5/30/23; 3/28/24

5.5.1.6. Counseling to the exposed employee and his/her family on the implications of testing and post-exposure prophylaxis.

5.5.2. The Right Door for Hope, Recovery and Wellness will ensure that all medical evaluations and procedures, including prophylaxis, are made available at no cost and in a reasonable time frame.

6. Practices for Possible Exposure to Communicable Diseases

If The Right Door for Hope, Recovery and Wellness becomes aware of the possible exposure of the employees, persons served, contractors, or visitors to a communicable disease, The Right Door for Hope, Recovery and Wellness nursing staff will consult with the Ionia County Health Department to determine the appropriate follow-up actions to be taken. Potential follow-up action could include, but is not limited to:

6.1. Notifying individuals of potential exposure.

6.2. Referral or instruction for evaluation, immunization, or follow-up care.

6.3. Containment of the infection or disease through environmental cleaning of potentially infected areas and/or equipment.

7. Reporting for Work

The Right Door for Hope, Recovery and Wellness employees who are experiencing symptoms of potentially contagious infections are asked to refrain from reporting to work.

References

The Right Door for Hope, Recovery and Wellness

Chapter Title		Section #	Subject #
Organizational Systems		HR	513.1
Subject Title	Adopted	Last Revised	Reviewed
Infection Control	05/10/02	5/30/23	4/25/08; 9/27/10; 1/9/14; 2/7/17; 2/27/19; 3/13/20; 3/15/21; 3/17/22; 3/31/23; 5/30/23; 3/28/24

CARF Standards Section 2 & 9

Kerry Possehn, Chief Executive Officer			Date