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GENERAL PROTECTION GUIDELINES FOR ALL EMPLOYEES

The following groups of agency employees are at risk of exposure to transmittable pathogens:

Therapists, therapists assistants, and especially those who regularly encounter "dirty diapers" or other body wastes, and staff especially those assigned to areas where they regularly encounter quantities of body fluids.

"Universal Safeguards" is a policy intended to protect employees from inappropriate contact with body fluids of clients during the course of their workday. Because specifying the types of safeguards needed for every clinical situation is impractical, some judgment on the part of the employee is needed. The following general guidelines shall be applied to all tasks with a potential source of exposure.

- 1) Gloves must be worn where the potential exists for touching blood and body fluids, mucous membranes, or non-intact skin of all clients; for handling items or surfaces soiled with blood or body fluids; and during procedures that are likely to generate droplets or splashes of blood or body fluids.
- 2) Gloves must be changed after contact with each client and during procedures if they become torn or otherwise damaged.
- 3) Gloves must be removed properly so as not to contaminate surfaces or hands.
- 4) Hands and other skin surfaces must be washed immediately and thoroughly if contaminated with blood or other body fluids. Hands must be washed immediately after gloves are removed.
- 5) The following general guidelines shall be applied when selecting and using gloves:
Surgical and Examination Gloves:
 - Sterile gloves shall be worn for procedures involving contact with normally sterile areas of the body.
 - Examination gloves shall be used for procedures involving contact with blood, body fluids, mucous membranes and non-intact skin, unless otherwise indicated, and for the client care or diagnostic procedures that do not require the use of sterile gloves.
 - Surgical and examination gloves shall not be washed or disinfected for reuse.
 - Gloves shall be removed and discarded properly.

6) Utility Gloves:

- General purpose utility gloves (e.g. rubber household gloves) shall be used for housekeeping and maintenance activities involving potential blood or body fluid contact and for instrument cleaning and decontamination procedures.
- Utility gloves may be decontaminated and reused.
- Any reusable gloves shall be examined before each use for cuts, tears, or punctures. Gloves shall be discarded if they are peeling, cracked, discolored or if they have punctures, tears or other evidence of deterioration.

7) To prevent exposure of mucous membranes of the mouth, nose and eyes, masks and protective eye wear shall be worn during procedures that are likely to generate droplets or splashes of blood or other body fluids. Examples of such procedures include intubation and invasive procedures.

8) Masks, protective eye wear, gowns or aprons must be worn during procedures that are likely to generate splashes of blood or other body fluids.

9) All non-disposable protective equipment must be cleaned at the end of the shift or whenever it becomes contaminated. Proper cleaning, drying and storage of this equipment shall be incorporated into the daily routing of the department.

10) All agency workers must take precautions to prevent injuries by sharp instruments and devices during procedures; when cleaning used instruments; during disposal of or when handling sharp instruments after procedures. Employees are to activate/ utilize safety features on safer sharp devices. Sharps are not to be passed hand to hand, use trays.

11) To prevent sharp-instrument injuries, contaminated items must not be recapped, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand.

12) After they are used, disposable syringes, or sharp instruments, scissors, tweezers, and other sharp items must be placed in a puncture-resistant container for disposal. The puncture-resistant containers (sharp containers), must be located as close as practical to the use area.

13) Resuscitation mouthpieces, resuscitation bags (Ambu bags), and other ventilation devices must be strategically located and available for use in areas where the need for resuscitation is predictable.

14) In general, workers with exudative lesions or weeping dermatitis should refrain from direct client contact and from handling client care equipment until a physician has assessed their condition. The physician will determine whether the worker may safely perform work activities and what specific restrictions will be required.

15) Eating, drinking or applying makeup must not be performed in any client care area, or central supply area within the agency.

16) Use of Standard Precautions:

According to agency policy standard precautions apply to all clients receiving care in this facility. Standard precautions encompass and surpass the requirements of universal safeguards.

17) Employee Safeguards for Invasive Procedures:

The agency only provides educational and therapeutic services. There shall not be any invasive procedure performed on the agency's premises.

- An invasive procedure is defined as surgical entry into tissues, cavities, organs or repair of major traumatic injuries:

- a) In an outpatient setting, including both therapists' and agency offices.
- b) The manipulation, cuffing, or removal of any oral or perioral tissues in which the potential for bleeding exists.

- All workers who participated in invasive procedures must routinely use appropriate barrier precautions to prevent skin and mucous membrane contact with blood and other body fluids of all clients.

18) Housekeeping

- Housekeeping staff will wear heavy-duty impervious gloves when performing tasks that could involve handling items contaminated with infectious materials or body fluids. The procedure for reusable gloves described in this policy must be followed.
- Hand-washing facilities (including sinks, soap and towels) will be available to staff during their work hours. Hands must be washed whenever gloves are removed; before meals and breaks; before leaving at the end of the day; and whenever appropriate during the course of work hours.
- Consistent with accepted housekeeping practices, any mops or other nondisposable cleaning equipment must be decontaminated with the appropriate germicide.
- When emptying all waste containers, housekeeping personnel must use utility gloves. No employees shall reach into a waste receptacle and directly remove its contents. General housekeeping workers should not open or sort through any bags.
- Housekeeping schedules must be in place to assure that cleaning and removal of soil is done routinely. Extraordinary attempts to disinfect or sterilize surfaces are not necessary.

19) Cleaning and Decontaminating Spills of Body Fluids

- Spills of body fluids must be cleaned up immediately. The housekeeping worker must put on the appropriate protective equipment and gather an adequate supply of disinfectant, material to absorb the spill, and any other cleaning supplies that may be needed. The type of personal protective equipment will depend on the nature of the

spill. For a small amount of body waste on the floor, protective gloves may be all that is needed. For larger spills where there is a potential for splashing, it may be necessary to wear goggles, face mask, coveralls, etc.

- Any sharp materials involved in the spill (broken glass, etc.) must be carefully removed. Where possible, the use of tongs is recommended. Sharps must be placed in a sharps container immediately. Once sharps are removed, the worker can proceed to carefully clean up the spills as per standard procedure.
- The spill area should be washed thoroughly with a solution or other appropriate disinfectant. If there is concentrated infectious agents in the laboratory, the liquid germicide before cleaning and cleaned up procedure.

20) Procedure for Accidental Contamination of Clothing

If an employee's uniform or personal clothing is accidentally contaminated with potentially infectious body fluid, the following procedure must be followed:

- The staff member should remove the soiled garment and replace it with a clean replacement garment.
- The employee must remove the soiled garment as soon as possible to prevent contact of skin with potentially infectious material. The employee should don clean replacement clothes.
- The garment will be bagged and sent to the cleaners for laundering.
- All contaminated laundry should be handled as little as possible with a minimum of agitation. All linen is bagged in a manner to prevent contamination of the environment.

- devices should not be the sole means of regulating hot water temperature, although they can be installed as a secondary back up device.
- Mixing valves can wear out and fail. Water temperature should be regularly tested, including the bath/shower time.
- Be mindful that flushing a toilet or using cold water anywhere else in the home can momentarily raise the water temperature in the shower. Take any necessary precautions.
- In all cases in which testing shows that hot water temperature exceeds stated limits, the service provider must have a procedure to correct the problem expeditiously.

BATHING PROCEDURES:

- Assess each person's need for bathing supervision and assistance. Make sure that this assessment is clear and that the care provider knows each person's supervision needs. Be particularly aware of how a person's health care conditions can impact upon their need for supervision or assistance when bathing. Be particularly vigilant for people:
 - with a history of seizures
 - who are taking sedation drugs
 - who can't sit up without assistance
 - who have difficulty getting in and out of tubs
- Consumers who require constant supervision when bathing or showering should NEVER be left alone in the shower or tub.
- Showers are generally safer than tubs, particularly for people with seizure disorders.
- Extreme water temperatures increase the likelihood of seizures.
- Bathing times should be chosen to allow for needed supervision.
- BEFORE beginning the bathing process, make sure you have all the supplies that you will need, such as clothing, soap, shampoo and towels.
- Test hot water before the consumer gets into the tub or shower. If the hot water feels too hot to your touch, IT IS PROBABLY TOO HOT FOR THE CONSUMER'S BATH/SHOWER.
- Care providers must be able to correctly operate all special tubs and bathing equipment. Specialty tubs generally have safety gauges; use them.
- Beware of drips from a tub spout; if the water is too hot and drips from a tub spout onto a consumer's leg or foot, injury can result.
- If after bathing or showering, a consumer has reddened skin, apply cool compresses and seek medical evaluation.