Managing the Mandatories

April 2023





In order to satisfy your annual requirements, please read this entire course.

Because there are several different locations within Covenant HealthCare, you will also need to review any departmental policies and procedures, specific to your area, for any of the topics covered in this course. If you have any questions, please contact your manager, Safety Officer/EM (3.2756), Safety Manager (3.4090), or Infection Prevention and Control. Quizzes are due by April 30, 2023. Newly hired employees must complete within 14 days of their start date.

Bloodborne Pathogens

- The purpose of OSHA's **Bloodborne Pathogen Standard** is to reduce the risks of exposure to Hepatitis B, Hepatitis C and HIV (AIDS) while performing your work duties. Protect yourself! Make the requirements of this standard part of your routine practice.
- The Exposure Control Plan and a copy of OSHA's Bloodborne Pathogen Standard are located in the Infection Prevention Manual. Universal Precautions (now also known as Standard Precautions) are used to prevent contact with blood and other body fluids that may be infectious.





Choose the right protective equipment for the task you are doing. This includes gloves, gowns and mask/goggles. Notice that you need to wear both masks AND goggles to protect your eyes, nose and mouth. There are also masks with an attached visor that can be used. Know where the equipment is located. Be sure to remove and dispose of these items before leaving the work area. Masks should never be worn around the neck for later use.





Bloodborne Pathogens

Treatment and Follow Up

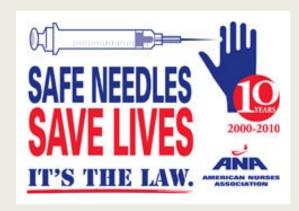
- We follow the latest CDC guidelines in treating Health Care Workers (HCW), including physicians after an
 exposure. If the source patient has AIDS/HIV, there are medications the HCW can take that may prevent
 getting infected from the exposure.
- **Timing is critical!** Our goal is to complete the necessary testing so that the HCW can receive the medicine within 3 hours. The process has been streamlined. This is what you must do:
 - □ Wash exposed area with soap and water. Eyes should be rinsed with saline or gentle tepid tap water splash for 1-2 minutes. If you wear contact lenses, immediately remove contacts and gently flush your eyes with saline or tepid tap water. Please do not reinsert contaminated contacts.
 - Notify your supervisor STAT.
 - ☐ Complete Incident Report on CovNet in SafeNet before the end of shift or within 24 hours of incident.
 - ☐ Call the Employee Health (EH) Nurse or Shift Administrator (SA) STAT. DO NOT leave a message. You must speak directly to the EH Nurse or the SA. Provide EH or SA with patients name and medical record number. Once the exposure is confirmed, the source patient will be tested.
 - The EH Nurse or Shift Administrator will contact you with the results. You will be given directions on the next steps to be taken.

Remember that you may need to be seen that day at Occupational Health & Wellness Services or the Emergency Department (depending on the time of day). You will be directed by EH or the Shift Administrator.

Bloodborne Pathogens

Safety Devices

- The Needlestick Safety Act of 2000 went into effect in Michigan in April 2001. It requires that safety devices be used (when commercially available) to prevent Sharps injuries and exposure to bloodborne diseases. Such devices include safety needles/syringes, IV catheters, needleless IV tubing and phlebotomy equipment. Staff members are involved in brand selection and will continue to evaluate new products at least annually.
- The Bloodborne Pathogens Exposure Plan is revised to reflect these changes. Federal and state
 regulations are available on the MIOSHA website <u>www.michigan.gov/miosha</u>.



General Industry PPE



The Right Thing to Do

Personal Protective Equipment (PPE) helps to protect you. Use the right equipment for each job. PPE is mandatory when indicated by a hazard or policy. PPE can save your life.

HEAD: Head gear provides protection when injury from falling or fixed objects is present.

Hard hats are a rigid shell with suspension that provides head protection against falling objects or bumping
into fixed objects. They are also water resistant and slow to burn. The construction of the hat should protect
you against penetration and the shock of a blow.

EYES AND FACE: This protection is necessary when an employee may be exposed to flying particles, liquid chemicals, infectious materials, chemical gases or vapors, and lasers.

- Safety glasses
- Goggles must be impact resistant and provide a secure seal around the eyes. Used for splash hazards.
- Face shields are used with other eye protection for added safety. Used for protection against heat, splashes
 and chemicals.
- Welding helmets provide complete head, face and neck protection while providing a filtered lens with a cover plate for eye protection. They provide protection against thermal energy and radiation.

EARS: Protects your hearing when exposure to noise reaches hazardous levels, is over recommended decibel limits or where prolonged noise is expected.

- Disposable earplugs are used once and then thrown away.
- Non-disposable earplugs are self-forming and provide multiple wear for one person.
- Muffs can provide protection against temperature extremes or noise hazards.

General Industry PPE

The Right Thing to Do

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HANDS

Used to protect your hands from chemical hazards, blood and body fluids, cuts, lacerations, punctures, burns, radiation and extreme temperatures.

- Disposable gloves protect against mild irritants and infectious materials. They are available in latex, vinyl, nitrile and polyethylene.
- Fabric gloves are usually made of cotton or blends and are used to help improve grip and protect against blister formation. They can also be insulated.
- Leather gloves protect your hands against sparks or scraping.
- Chemical-resistant gloves are usually made of rubber, neoprene, polyvinyl alcohol or vinyl. They protect against corrosives, oils and solvents.

FEET

Used to protect your feet from falling or rolling objects, punctures, cuts or electrical hazards. The shoes you wear must provide protection against the hazards that may be present in your particular work area. Shoes need to protect your feet against blood and body fluid splashes or chemicals in patient care areas, the Lab, Imaging, etc.

- Steel-reinforced safety shoes provide protection against falling or rolling objects, cuts and punctures. They can also insulate against extreme temperatures and guard against slips.
- Safety boots provide protection against chemical splashes or hazards. They are often made of neoprene or nitrile. Some boots are made of non-conductive materials for work around electricity.

General Industry, cont.

The Right Thing to Do

Personal Protective Equipment (PPE) helps to protect you. Use the right equipment for each job. PPE is mandatory when indicated by a hazard or policy. PPE can save your life.

RESPIRATORY

Used for protection when hazards involving inhalation. The type of protection you should use is dependent upon the respiratory hazard that is present.

CLOTHING

Used to protect your body from heat, splashes, caustic and acidic chemicals, blood and body fluids, cuts and radiation.

- Clothing acts as a shield against exposure to blood and body fluids, chemicals, radioactive particles, extreme temperatures, moisture, oil, etc.
- Moisture-resistant gowns, aprons and surgical scrubs protect your body from blood and body fluids.
- Moisture-resistant or level hazmat suits protect you from chemical exposures.

Personal Protective Equipment (PPE)

PPE is specialized clothing or equipment worn by an employee for protection against infectious materials or hazard.

PPE prevents contact with an infectious agent or body fluids that may contain an infectious agent, by creating a barrier between the potential infectious material and healthcare worker. Examples are:

- Gloves
- Gowns
- Masks and Respirators
- Other Face and Eye Protection







Gloves

Gloves help protect you when directly handling potentially infectious materials or contaminated surfaces.

- Wear gloves when handling potentially infectious material or contact with contaminated surfaces is possible.
- Change gloves when visibly soiled, torn or punctured.
- Wash hands for at least 20 seconds upon removing gloves.
- Change gloves in between tasks (e.g., emptying a patients Foley and completing oral care).
- Gloves should be worn for standard precautions and when entering all Contact or Contact Plus isolation rooms.

Gloves help protect you when directly handling potentially infectious materials or contaminated surfaces.

- Wear one glove, if necessary, to handle potentially contaminated items; your ungloved hand is used to open doors, access keypads, etc.
- Food trays from isolation rooms are handled similarly, with one gloved hand and one ungloved hand. If this is not possible have a coworker open doors to ensure the environment is not being contaminated. Hand hygiene must be completed after glove removal.



Gowns

Gowns help protect you from the contamination of clothing with potentially infectious material.

- Wear a gown when contamination of clothing with potentially infectious material is possible.
- Your gown should cover the torso, fit close to the body and cover the arms to the wrists.
- The disposable isolation gowns should only be worn once and then disposed of. These are a single use item.
- Remove gowns before leaving the patient's room.
- Gowns should be worn as part of standard precautions and when entering all Contact and Contact Plus isolation rooms.



Masks and Respirators

Surgical Masks

- Surgical masks help protect your nose and mouth from splattered body fluids (such as blood, respiratory secretions, vomit, urine and feces).
- Surgical masks should be worn as part of Standard or Droplet Precautions.

Respirators

- Respirators filter the air you breathe to help protect from microorganisms including bacteria and many viruses.
- Types of Respirators Include:
 - Disposable Respirators (e.g. N95)
 - Controlled Air Purifying Respirator (CAPR)
- Respirators should be worn as part of Airborne Precautions.



^{*}Education is based on ideal state. Subject to change based on COVID response.

Other Face and Eye Protection

Face Shields

• Face shields protect the mucous membranes of the eyes, nose and mouth from splashes of body fluids (during procedures and patient care activities that are likely to generate splashes or sprays of blood, body fluids, secretions and/or excretions).

Goggles

- Goggles are a barrier style of protection for the eyes.
- Goggles should fit snuggly around the eyes.
 - Prescription glasses without side shields and contact lenses do not provide adequate eye protection.



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Standard Precautions

Standard precautions are the standard of care and apply to ALL patients, regardless of their diagnosis. It is a system of barrier precautions to be used by all personnel and must be treated as potentially infectious for contact with blood, all body fluids (except sweat), all secretions and excretions, all mucous membranes and any non-intact skin. To place a barrier between you and a potentially infectious body fluid remember the following:

You MUST Wear Gloves When:

- Entering the room of a patient in Contact Isolation or Contact Plus Isolation every time.
- Coming into contact with moist body substances, mucous membranes, tissue and nonintact skin of any patient.
- Handling items or touching surfaces visibly soiled with body substances.
- Performing venipuncture and/or other vascular access procedures.

Gowns:

- Fluid-resistant gowns or aprons are worn when soiling of work/street clothes with body fluids is reasonably anticipated.
- Uniforms, scrubs and lab coats are NOT PPE since they are not fluid resistant.
- Once a gown has been worn for patient care, it is considered contaminated. Gowns are not to be hung up or turned inside out for later use.
- Gowns must be removed after each use with one patient and hands immediately washed.
- Gowns should be worn as part of Contact and Contact Plus isolation.



Standard Precautions, cont.

Masks/Eye Protection/Face Shields

- Are worn to protect eyes, nose and mouth during procedures that are likely to generate a splash, spray, spatter or droplets of body fluid.
- Should be worn for tasks including (but not limited to) intubation, extubation, suctioning, line insertion, surgical procedures, emptying bedpans/suction canisters into the hopper, code blue or patient care of coughing patients with suspected infectious etiology.
- Based on the current COVID response plan a mask and eye protection should be worn for all staff doing direct patient care.

Definition of Body Fluids

All body fluids can potentially cause some type of infection. Therefore, all blood and body fluids are treated as potentially infectious and Standard Precautions must be used. These body fluids include (but are not limited to):

Amniotic fluid	Gastric fluid	Synovial fluid
Any unfixed tissue of an organ	Peritoneal fluid	Urine
Any visibly bloody fluid	Pericardial fluid	Vaginal/cervical secretions
Blood or blood products	Pleural fluid	Wound drainage
Breast milk	Saliva	
Cerebrospinal fluid	Semen	
Feces/stool	Sputum	



Clean Hands Are Good for Your Health!

You should wash your hands often. Probably more often than you think because you can't see germs so you don't really know where they are hiding.

It is especially important to wash your hands:

- · Before eating, drinking or handling food
- After using the restroom
- After coughing or sneezing, even if you use a tissue
- After touching bandages or a dressing
- Before touching your eyes or handling contact lenses
- Always wash your hands with soap and water when leaving a C. Diff room
- Before and after contact with a patients intact skin
- After glove removal

To encourage patient-friendly hand hygiene practices:

The essential reasons for the use of hand hygiene are cleanliness and to control the spread of infection.

Covenant is a "Wash in/Wash out" facility, which means every time for everyone in every room with every patient.

Join Our Hand Hygiene Campaign: 200% Accountability

This initiative focuses on every employee being 200% accountable at all times for hand hygiene. That means, being 100% accountable for our own actions and 100% accountable for those around you. Covenant is raising the bar and challenging you to be 200% accountable.

What does 200% accountability look like?

- This gives all employees the power to stop another employee if a missed hand hygiene opportunity is witnessed
- "Don't forget to Wash In/ Wash Out" is all you need to say
- It is the expectation by Leadership that all staff members of Covenant will have an appropriate response if stopped for a missed hand hygiene opportunity. (If this is not the case a report needs to be placed in SafeNet for follow-up).

Together, we can increase our hand hygiene compliance and keep our patients safe from infections! *Thank you for your commitment to being 200% accountable!*

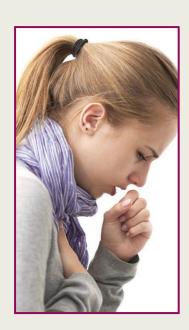
TB Update

The Covenant TB Control Plan

Covenant Health Care has a TB Control Plan for the prevention and control of TB. This plan applies to all departments and services, including all campuses, off-site locations, all affiliated campuses, and affiliated physician offices. The complete TB Control Plan is located in the Infection Prevention & Control Manual under the Exposure Plan section.

Respirators

Before you can be issued a Particulate Respirator (PR), you must be fit tested to assure that the PR is the proper size and will provide adequate protection against TB. These respirators are not effective if facial hair comes in contact with the seal of the PR (where the respirator and skin make contact). Facial hair that comes in contact with the seal of the PR is not permitted. CAPR's are also acceptable to be worn for Airborne Precautions.



TB Update, cont.

Health Care Workers

The TB risk assessment completed by Infection Prevention and Control resulted in a "low risk classification" for Covenant HealthCare. As a result, the guidelines are as follows:

- Upon hire, all health care workers, including those with a history of BCG vaccination, are required to receive baseline screening of a TB Gold blood test.
- Health care workers with a baseline positive or newly positive result with a TB Gold test or documentation of treatment for latent TB or TB disease should receive 1 chest x-ray to exclude TB disease or chest x-ray within last 12 months.
- Additional TB testing is not necessary unless an exposure to M. tuberculosis occurs.
- With "low risk" classification, TB Symptoms Survey Form screening is not necessary on an annual basis, however, if symptoms consistent with TB are noted (prolonged cough, fever, decreased appetite, weight loss, night sweats or coughing up blood), employees are asked to contact Employee Health promptly for evaluation.

According to CDC guidelines, any employee that is visiting a high-risk, TB endemic area that will be working in congregate, high-risk settings such as hospitals and other health care facilities, hospices, correctional facilities, and homeless shelters will be screened before leaving and again 8-10 weeks after they return. This does not include those employees who are planning to go to a TB endemic area for a few weeks to visit family.

If you'd like more information on TB, contact Employee Health.

Latex Allergy/Sensitivity

Precautions

All patients will be assessed to determine if they have a latex allergy or sensitivity. If so, these precautions must be implemented:

- Latex precautions will be implemented without a doctor's order.
- Notify the attending doctor if latex allergy/sensitivity is identified.
- Environmental precautions will be taken until latex allergy is ruled out.
- Apply red armband.
- Place patient in a private room (if possible).
- Remove all latex from the room.
- Use only "latex-free" supplies.
- Place "Latex Allergy" sign on the patient's door and stretcher or wheelchair if transporting.
- Communicate latex allergy/sensitivity to other departments.
- Notify Pharmacy and Nutrition Services of latex allergy.
- Procedures/surgeries for latex allergy/sensitivity patients should be the first cases of the day if possible.



Work Related Injuries

Any time an employee is injured on the job, he/she must immediately report it to his/her supervisor or manager, and an Incident Report must be completed in SafeNet on CovNet before the end of his/her shift or within 24 hours of the incident. If the injury is **non-emergent** (meaning the employee is still capable of performing the essential functions of the job), the employee is **NOT** required to see a physician, except in certain cases of blood and body fluid exposures. During regular business hours, the Employee Health Office at Irving campus should be contacted for direction in this matter. During the off-shifts, please contact the Shift Administrator (SA) to determine whether an ER visit is required.

Should the employee need to be evaluated by a physician, he/she will be sent to one of the Covenant Occupational Health Services clinics during regular business hours. In the case of a serious injury (e.g., broken bones; any injury limiting mobility or ability to ambulate; severe bleeding due to a cut/ laceration), the employee should be treated in the Emergency Care Center. When in doubt about the severity of the injury, please contact Employee Health, a supervisor, manager, or SA for guidance.



In the event of an exposure to blood or body fluids, the employee must report this immediately to Employee Health or to the SA during off shifts. In this case, the employee will be directed to the appropriate place for treatment.

Patient Armbands

Allergies – All Allergies, including Latex

Fall Risk

DNAR (Do Not Attempt Resuscitation)

Specified Resuscitation

Blood Band

LIMB ALERT

DIFFICULT AIRWAY

Code Sepsis

CONGRATULATIONS!



Congratulations!

You have successfully completed this course! Please use the button below to exit and return to Halogen in order to receive credit for this course.