


<b>CHAPTER</b> Human Resources	<b>CHAPTER</b> 05	<b>SECTION</b> 003	<b>SUBJECT</b> 15
<b>SECTION</b> Health and Safety		<b>DESCRIPTION</b> Universal Precautions/Standard Precautions	
<b>WRITTEN BY</b> Richard I. Berman, CBHE, Ph.D.	<b>REVISED BY</b> Michelle Gould-Rice, LMSW QI Coordinator		<b>AUTHORIZED BY</b>  Lauren Emmons, ACSW CEO

**APPLICATION:**

<input checked="" type="checkbox"/> CMH Staff	<input type="checkbox"/> Board Members	<input type="checkbox"/> Provider Network	<input checked="" type="checkbox"/> Employment Services Providers
<input type="checkbox"/> Employment Services Provider Agencies	<input checked="" type="checkbox"/> Independent Contractors	<input type="checkbox"/> Students	<input checked="" type="checkbox"/> Interns
<input checked="" type="checkbox"/> Volunteers			

**POLICY:**

Lapeer County Community Mental Health (LCCMH) will use Universal Precautions and Standard Precautions as required for effective infection prevention and control.

Employees have potential for exposure to Human Immunodeficiency Virus (HIV), Hepatitis B Virus (HBV), and/or other Bloodborne pathogens in an occupation in which they are potentially exposed to bodily fluids. Employees may also be exposed to pathogens infecting the respiratory system through contact with infectious respiratory secretions on surfaces or in the air.

**STANDARDS:**

- A. The Center of Disease Control (CDC) has called for implementation of Universal Precautions as the most effective method to block the transmission of Human Immunodeficiency Virus (HIV), Hepatitis B (HBV), and Hepatitis C (HVC) or other blood borne pathogens when there is risk of exposure to blood and/or body fluids.

CHAPTER Human Resources	CHAPTER 05	SECTION 003	SUBJECT 15
SECTION Health and Safety		DESCRIPTION Universal Precautions/Standard Precautions	

- B. Universal Precautions shall be followed by all Lapeer County Community Mental Health Center persons served and staff according to the Occupational Safety and Health Administration (OSHA) Standards.
- C. All individuals are presumed to be infected or potentially contagious for either identified or unidentified diseases. Disease producing agents may be transmitted from one person to another through contact with blood, mucous membranes, sputum, urine, feces or other body fluids. The same infection control precautions shall be taken with all blood and body fluids.
- D. During periods of outbreak of serious respiratory illness, or when a serious respiratory illness is suspected or confirmed with an individual, appropriate personal protection equipment (PPE) will be utilized to help prevent transmission between individuals. Both the potentially infected individual as well as any person he/she may come in contact with will use a mask.
- E. When a potential for occupational exposure exists, LCCMH will, at no expense to the employee, provide protective clothing and equipment appropriate to prevent such exposure.
- F. Standard Precautions, according to the CDC guidelines, requires staff to use personal protective equipment whenever there is an expectation of possible exposure to any infectious material.
- G. Staff will routinely use appropriate barrier precautions to prevent skin and mucous membrane exposure when contact with blood or other body fluids of any person served is anticipated.

#### **PROCEDURES:**

- A. Hand washing is LCCMH's primary means for stopping the spread of infection. Employees will wash hands:
  - 1. Before and after using the restroom
  - 2. Before and after eating
  - 3. After using tissues
  - 4. Between contacts with persons served

CHAPTER Human Resources	CHAPTER 05	SECTION 003	SUBJECT 15
SECTION Health and Safety		DESCRIPTION Universal Precautions/Standard Precautions	

5. After assisting persons served with personal hygiene
6. Immediately after discarding gloves
7. When becoming contaminated or soiled with blood or body fluids and after handling any object contaminated or soiled with blood or body fluids

B. Gloves will be worn when:

1. Contact with blood or body fluids, mucous membranes or broken skin is a possibility.
2. Assisting with tooth brushing.
3. Assisting persons served with toileting and gloves should then be discarded and hands washed before leaving area.
4. Invasive procedures occur, such as blood drawing or injections.
5. Instrumental and digital examination of mouth and throat occurs.
6. Examining and/or handling abraded, non-intact skin or persons served with active bleeding.
7. The employee has cuts, abraded skin, chapped hands, dermatitis, or any other loss of skin integrity.
8. Handling laboratory specimens, soiled linen, and clothing which have been contaminated with blood and/or other body fluids.
9. Cleaning up and decontaminating blood, body fluids and feces.

C. Gloves will be changed between persons served.

D. Breaks in the skin (such as cuts, scrapes and abrasions, or open lesions) need to be kept clean and covered to prevent entry or transmission of infectious organisms.

E. Personnel using sharps must take precautions to prevent injuries. After using syringes and needles, do not recap, bend, break or manipulate by hand.



CHAPTER Human Resources	CHAPTER 05	SECTION 003	SUBJECT 15
SECTION Health and Safety		DESCRIPTION Universal Precautions/Standard Precautions	

- F. Dispose of all sharps in a biohazard puncture-resistant container clearly labeled for that purpose.
- G. Clothing of persons served contaminated with blood or body fluids will be treated as if it were contaminated and shall be handled as little as possible and with minimal agitation. When it must be handled, it shall be handled with gloves, placed in a leak-proof plastic bag, labeled with the name of the person served, the contents, and sent home with the person served.
- H. Agency linens and towels contaminated with blood or body fluids shall be handled with gloves and placed in a leak proof plastic biohazard bag, and labeled. Linen will be laundered using detergent.
- I. Gowns, aprons or lab coats shall be worn when splashes with blood and/or body fluids are likely to occur on clothing.
- J. Masks and eye protectors or face shields shall be worn when splashes or aerosolization of blood and/or body fluids are likely to occur with contamination of mucosal membranes (eyes, mouth or nose). Masks and eye protectors are not required for routine care.
- K. Standard Precautions require masks to be worn when a person exhibits symptoms of respiratory infection or when there is an expectation of possible exposure to infectious material.
- L. Pocket masks, resuscitation bags or other ventilation devices are provided in all fire extinguisher boxes as well as to key personnel where the need for resuscitation is likely.

## DEFINITIONS:

**Body Fluids:** Fluid recognized by Federal Centers for Disease Control (CDC) as directly linked to the transmission of HIV (blood, semen, blood products, vaginal secretions, cerebrospinal fluids, synovial fluid, pericardial fluid, amniotic fluid and concentrated HIV or HBV viruses and to which universal precautions apply.

**Occupational Safety and Health Administration (OSHA):** An agency of the United States Department of Labor, ensuring safe and healthful working conditions by setting and enforcing standards, and by providing training, outreach, education and assistance.

CHAPTER Human Resources	CHAPTER 05	SECTION 003	SUBJECT 15
SECTION Health and Safety		DESCRIPTION Universal Precautions/Standard Precautions	

Respiratory Secretions: Body fluids found in the upper and lower respiratory tract, such as mucus, saliva and nasal secretions. These may potentially contain pathogens that can be transmitted through coughing, sneezing, and/or breathing.

Standard Precautions: Precautions used for all patient care, based on an assessment of risk and making use of common sense practices and personal protective equipment by protecting health care providers from infection and preventing the spread of infection to others.

Universal Precautions: A system of infectious disease control which assumes every direct contact with body fluids is infectious and requires every employee exposed to direct contact with body fluids to be protected as though such body fluid were infected.

#### REFERENCES:

- A. Bloodborne Pathogens Universal Precautions Standard 29 CFR 1910.1030
- B. Centers for Disease Control and Prevention Standard Precautions for All Patient Care
- C. Occupational Safety and Health Administration Universal Precautions and Bloodborne Pathogens.

#### EXHIBIT:

Health-Care Facility Recommendations for Standard Precautions: Key Elements at a Glance (World Health Organization)

LD:mgr

-----  
This policy supersedes  
#02/00015 dated 02/27/2000.  
-----



# Health-care facility recommendations for standard precautions

## KEY ELEMENTS AT A GLANCE

### 1. Hand hygiene<sup>1</sup>

#### Summary technique:

- Hand washing (40–60 sec): wet hands and apply soap; rub all surfaces; rinse hands and dry thoroughly with a single use towel; use towel to turn off faucet.
- Hand rubbing (20–30 sec): apply enough product to cover all areas of the hands; rub hands until dry.

#### Summary indications:

- Before and after any direct patient contact and between patients, whether or not gloves are worn.
- Immediately after gloves are removed.
- Before handling an invasive device.
- After touching blood, body fluids, secretions, excretions, non-intact skin, and contaminated items, even if gloves are worn.
- During patient care, when moving from a contaminated to a clean body site of the patient.
- After contact with inanimate objects in the immediate vicinity of the patient.

### 2. Gloves

- Wear when touching blood, body fluids, secretions, excretions, mucous membranes, nonintact skin.
- Change between tasks and procedures on the same patient after contact with potentially infectious material.
- Remove after use, before touching non-contaminated items and surfaces, and before going to another patient. Perform hand hygiene immediately after removal.

### 3. Facial protection (eyes, nose, and mouth)

- Wear (1) a surgical or procedure mask and eye protection (eye visor, goggles) or (2) a face shield to protect mucous membranes of the eyes, nose, and mouth during activities that are likely to generate splashes or sprays of blood, body fluids, secretions, and excretions.

### 4. Gown

- Wear to protect skin and prevent soiling of clothing during activities that are likely to generate splashes or sprays of blood, body fluids, secretions, or excretions.
- Remove soiled gown as soon as possible, and perform hand hygiene.

### 5. Prevention of needle stick and injuries from other sharp instruments<sup>2</sup>

#### Use care when:

- Handling needles, scalpels, and other sharp instruments or devices.
- Cleaning used instruments.
- Disposing of used needles and other sharp instruments.

### 6. Respiratory hygiene and cough etiquette

#### Persons with respiratory symptoms should apply source control measures:

- Cover their nose and mouth when coughing/sneezing with tissue or mask, dispose of used tissues and masks, and perform hand hygiene after contact with respiratory secretions.

#### Health-care facilities should:

- Place acute febrile respiratory symptomatic patients at least 1 metre (3 feet) away from others in common waiting areas, if possible.
- Post visual alerts at the entrance to health-care facilities instructing persons with respiratory symptoms to practise respiratory hygiene/cough etiquette.
- Consider making hand hygiene resources, tissues and masks available in common areas and areas used for the evaluation of patients with respiratory illnesses.

### 7. Environmental cleaning

- Use adequate procedures for the routine cleaning and disinfection of environmental and other frequently touched surfaces.

### 8. Linens

#### Handle, transport, and process used linen in a manner which:

- Prevents skin and mucous membrane exposures and contamination of clothing.
- Avoids transfer of pathogens to other patients and or the environment.

### 9. Waste disposal

- Ensure safe waste management.
- Treat waste contaminated with blood, body fluids, secretions and excretions as clinical waste, in accordance with local regulations.
- Human tissues and laboratory waste that is directly associated with specimen processing should also be treated as clinical waste.
- Discard single use items properly.

### 10. Patient care equipment

- Handle equipment soiled with blood, body fluids, secretions, and excretions in a manner that prevents skin and mucous membrane exposures, contamination of clothing, and transfer of pathogens to other patients or the environment.
- Clean, disinfect, and reprocess reusable equipment appropriately before use with another patient.

<sup>1</sup> For more details, see: WHO Guidelines on Hand Hygiene in Health Care (Advanced draft), at: [http://www.who.int/patientsafety/information\\_centre/ghhad\\_download/en/index.html](http://www.who.int/patientsafety/information_centre/ghhad_download/en/index.html).