Infection Prevention

Tucson Medical Center

TMC HOSPICE

Required Education

- Per the Joint Commission National Patient Safety Goals 07.03.01 – 07.06.01:
  - Goal 7: Reduce the Risk of Healthcare-associated Infections

Tucson Medical Center is required to educate staff and licensed independent practitioners about healthcare–associated infections and the importance of prevention upon hire, when new exposure risks surface (new job, new diseases etc) and annually thereafter.

What Can You Do to Prevent Infection?

In addition to specific prevention actions performed by direct patient care staff, there are things every person at TMC needs to do:

- ALWAYS clean your hands (gel or soap/water) before and after entering a patient care area or having contact with a patient or their environment
- Follow respiratory etiquette to prevent sneezes and coughs from spreading germs
- Keep our hospital environment clean
- Handle all patient supplies with clean hands
- Clean (disinfecting wipe) any reusable patient care item before use and again after use

Hand Hygiene

Hand Hygiene is the number one way to prevent the spread of infection

- Hand Hygiene includes:
  - Washing hands with soap and water for a minimum of 20 seconds or
  - the use of alcohol-based hand sanitizer to thoroughly cover all surfaces of the hands

Hand Hygiene

- When should you perform hand hygiene?
  - Beginning and ending your shift
  - Before entering a patient's room and when leaving a patient's room
  - Before putting on gloves
  - After removing gloves
  - Before and after eating
  - After using the bathroom
- Alcohol-based hand sanitizer is appropriate unless:
  - Hands look or feel dirty
  - You have entered a G contact precautions room
    - C difficile spores are not killed by hand sanitizer – you MUST wash well with soap and water.

Hand Hygiene

"Have You Seen Hannah?"

- A non-confrontational way to remind each other to wash our hands
- Use this verbal cue when you see others forgetting to perform hand hygiene to remind them to wash their hands
- Hand Hygiene compliance is monitored and reported monthly
- Become the culture that does NO HARM by cleaning your hands for every patient every time!
- Help keep our patients safe!

Respiratory Hygiene/Cough Etiquette

- Cough droplets can go out 3-6 feet before falling from the air. Spread of infection comes from exposing your nose, mouth or eyes to these droplets

- Offer someone who is coughing a tissue or surgical mask

- If you cannot use tissue or wash hands immediately after coughing or sneezing, then cough or sneeze into the crook of your elbow. That way your hands remain clean.

Personal Protective Equipment (PPE)

- PPE consists of gloves, gown, mask, goggles, and/or face shield
- Use when you anticipate exposure to blood or body fluids
- Use for isolation precautions following the isolation sign directions

Environment

Cleaning equipment and environment

- Use disinfectant wipes or bleach wipes if appropriate to keep your work environment and patient areas clean
- If you see trash pick it up
- If you see overflowing dirty linen or trash containers, please help clear it or report it to staff
- If you see floors or areas in need of cleaning, please report to management to arrange specific cleaning

Clean in, Clean out for all reusable items that may have contact with a patient.

To ensure there is no contamination of shared patient care equipment that is not covered, disinfect before and after use.

What is a Wet or Contact Time?

This is the amount of time a surface **must remain wet** to kill bacteria and viruses in the environment.

Hydrogen Peroxide

Wet time = 1 min

Use for all patient care environments **except** those on G-Contact Precautions and where manufacturer's instructions state otherwise.

Bleach

Wet time = 3 min for G-contact

Wet time =1 min for all non-G contact use

May be used for **all** patient care environments. **Required** for equipment and rooms of G-Contact Precaution patients.

After wet time, you may re-wipe surfaces with a damp cloth to remove any residue.

Donning & Doffing

Donning and doffing refers to changing into and out of work clothes, gear, or equipment. To **don** means to put on work clothes, gear, or equipment. To **doff** means to take off work clothes, gear, or equipment.

The appropriate use of PPE is one of the most effective strategies for protecting both patients and healthcare providers from transmissible pathogens.

Volunteers, staff and visitors are required to wear PPE when entering rooms with isolation precaution rooms or with possible exposure to blood or body fluids.

IMPORTANT: Even if you aren't routinely performing hands on patient care in your volunteer role, it's important to know how to properly don and doff in case you come into contact with bodily fluids or someone that is contagious so you can properly protect yourself and others.

Transmission-based Precautions

Some communicable diseases require that we use additional precautions as well as standard precautions. The rooms of patients with these communicable diseases are tagged with an isolation sign.

There are 4 types of transmission-based precautions

- Droplet (green sign)
- Contact (red sign)
- G-contact (purple sign)
- Airborne (blue sign)

Methods of Disease Transmission

Contact

Droplet

Airborne

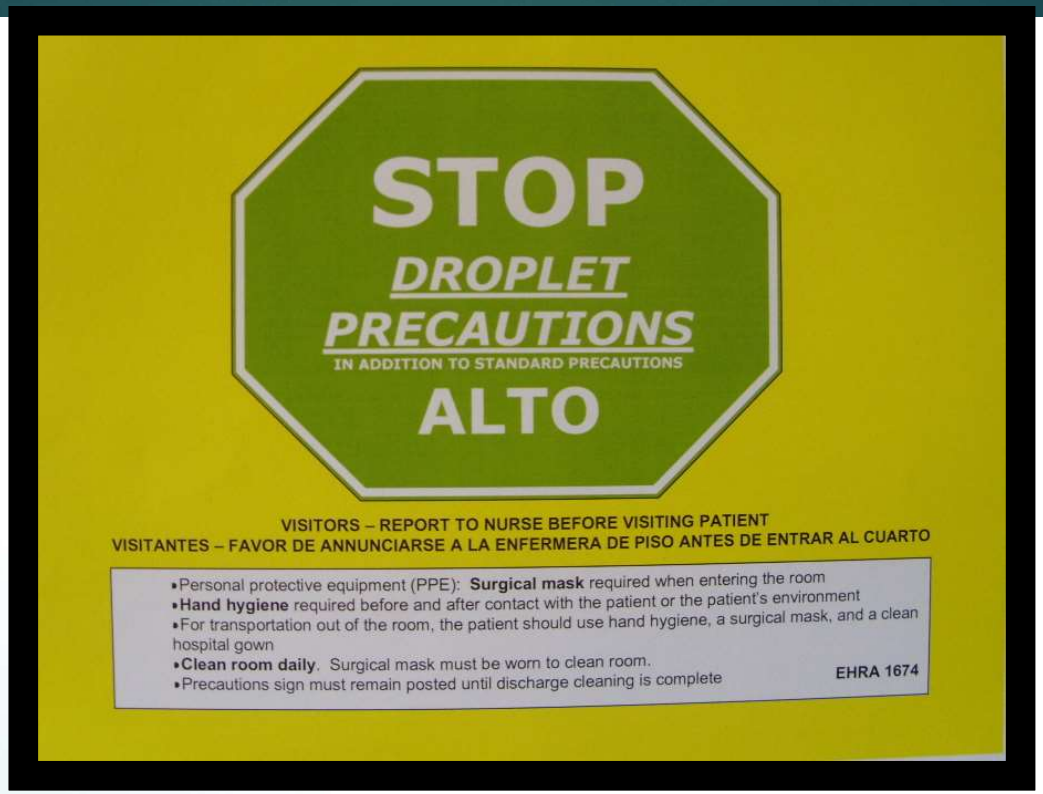
Gastrointestinal-Contact (G-Contact)

Transmission-based Precautions

The following precaution signs will be displayed on the patient door, and the PPE will be in front of the patient room door.

- Never remove a sign, even if the room is empty.
- If you are unsure of what the proper protocol is with isolation rooms, be sure to seek staff for assistance.

IMPORTANT NOTE: Volunteers are permitted to enter isolation rooms if wearing the proper PPE and abiding by the listed precautions. However, if a volunteer isn't comfortable entering such rooms, they don't have to.

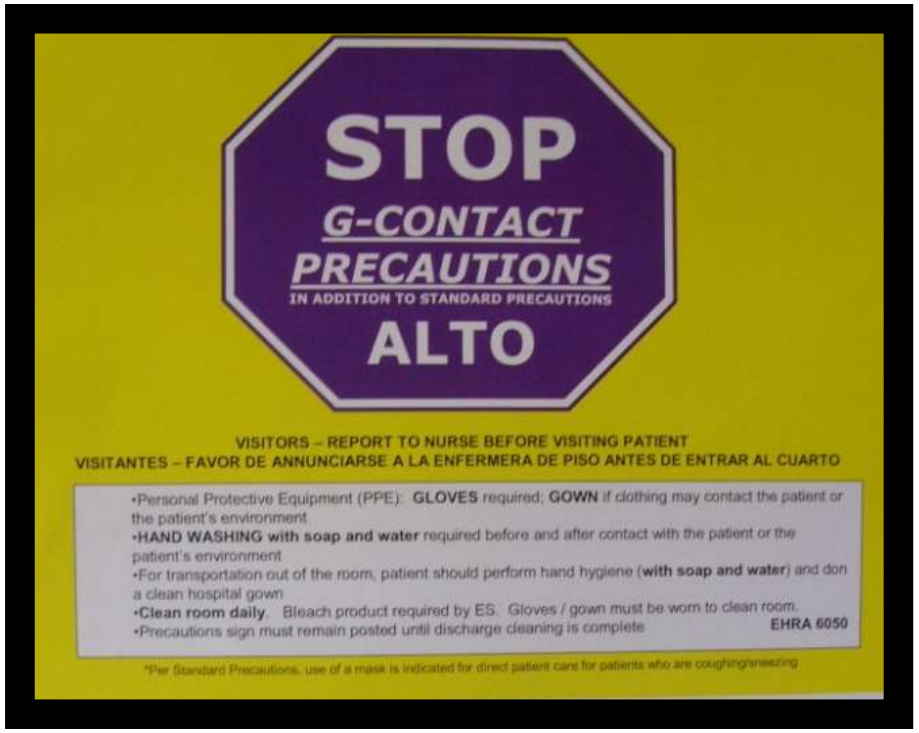


Sign designed to prevent diseases transmitted by DROPLETS

- Wash hand with soap & water or hand gel before and after entering patient's room
- Wear a surgical mask when inside patient's room

Designed to prevent diseases transmitted by CONTACT

- Wash hands with soap & water or hand gel before and after entering patient's room
- PPE: Wear a gown and gloves when inside room



Designed to prevent *Gastrointestinal diseases* transmitted by CONTACT *(like C. diff see next slide for information)*

- Wash hands with soap & water before and after entering patient's room
  - Do no use antimicrobial hand gel
- PPE: Wear a gown and gloves when inside room

Clostridium Difficile (C. diff) Infection

C. Diff is a bacterium found in the colon and can produce a spore form that can be spread. These spores can survive for months on inanimate objects and are spread via the fecal-oral route. C diff is spread by contact with contaminated hands or equipment.

How does TMC prevent C diff Infections?

- Initiate G contact isolation for patients with a positive C. diff test
- Use of gown and gloves to enter a G contact isolation room
- Clean items that come into contact with the patient or patient care environment with **bleach wipes***
  - Only specific types of disinfectants will kill spores
- Perform **soap and water** hand hygiene
  - Hand sanitizer will not kill/remove spores from hands
- Screen symptomatic patients (presence of diarrhea) for C. diff during first three of days of admission to make sure isolation and treatment are started as soon as possible

What is your role?

- Always clean your hands (using soap/water) before and after entering a G contact isolation room
- Wear gown and gloves when entering a G contact isolation room
- Disinfect any reusable items that are taken into a G contact isolation room with bleach wipes*…before leaving the room

**EVS uses a sporicidal cleaning solution other than bleach that kills C. diff spores*

Airborne

Use Airborne Precautions for patients known or suspected to be infected with pathogens transmitted by the airborne route (e.g., tuberculosis, measles, chickenpox, disseminated herpes zoster). Airborne precautions involve the use of negative pressure.

The only time you will see Airborne precautions used at Peppi's House is for COVID patients with active symptoms. Those who are recovering from COVID with no active symptoms are put on droplet precautions.

VOLUNTEERS ARE NOT PERMITTED TO ENTER AIRBORNE CONTACT ROOMS

A very important role staff and volunteers have regarding isolation precautions is observing it's use on the unit. Anyone entering an isolation room (including visitors) are required to wear the proper PPE.

Please remind them that it's a requirement and if there is an issue with compliance, please let management know right away.

OSHA's Bloodborne Pathogen Standard

- The Occupational Safety Healthcare arm of the government has developed specific standards we all must follow.
- The Bloodborne Standard protects us from bloodborne diseases such as Hepatitis B & C, Syphilis & HIV.
- A copy of TMC's Exposure Control Plan and OSHA's bloodborne pathogen standard is available upon request.

Blood & Body Fluid & Exposures

Body fluids that should be treated as infectious:

- Semen
- Vaginal secretions
- Fluid from around an unborn baby
- Fluid from spine, lungs, heart, joints, lining of abdominal cavity
- Body tissue
- Saliva in a dental procedure
- Urine, feces sputum and vomitus

Blood & Body Fluid & Exposures

On the Inpatient Unit:

An exposure occurs when a sharp object, such as a needle, penetrates the skin or a body fluid splashes into mucous membranes.

To clean a blood or body fluid spill call 4-1111.

In the event of an exposure, it is mandatory to notify the charge nurse or nurse supervisor and volunteer office IMMEDIATELY.

Blood & Body Fluid & Exposures IN THE HOME

Homecare volunteers who are in the patient's residence: A body fluid spill in the home should be treated with great caution. Since there isn't a "clean-up crew," the volunteer would have to do some of the clean-up.

- First and foremost, put on gloves!
- Absorb as much of the fluid as possible, with a paper towel or cloth (the chux provided to patients by hospice is great to use as well). Even just placing it on top of the fluid helps.
- If you can clean it up without providing personal care (and are comfortable doing so), please proceed.

continued

Blood & Body Fluid & Exposures IN THE HOME

- If the patient is requiring more personal care to be cleaned up, please notify the patients loved one/caregiver or the hospice case manager.
  - If the patient lives alone, notify hospice staff to have the patient cleaned up.
  - Use your disinfectant wipes to wipe down any hard surfaces after the fluid is sopped up.
  - You can always call the main line at hospice 324-2438 or the nurse on call (evenings, holidays and weekends) with any questions.
- Sometimes you may be able to head off issues.

  For example, if the patient complains of nausea, you can put a bowl, towel or chux close by, just in case they vomit (or even lay a towel on them).
- Be sure to report these type of occurrences in your visit documentation (patient care report) and never hesitate to call hospice with any questions.
- Be sure to notify hospice with any possibility of exposure (sharp object, or needle, penetrating the skin or body fluid splashing into mucous membranes)

Preventing infections . . .
We all have a role

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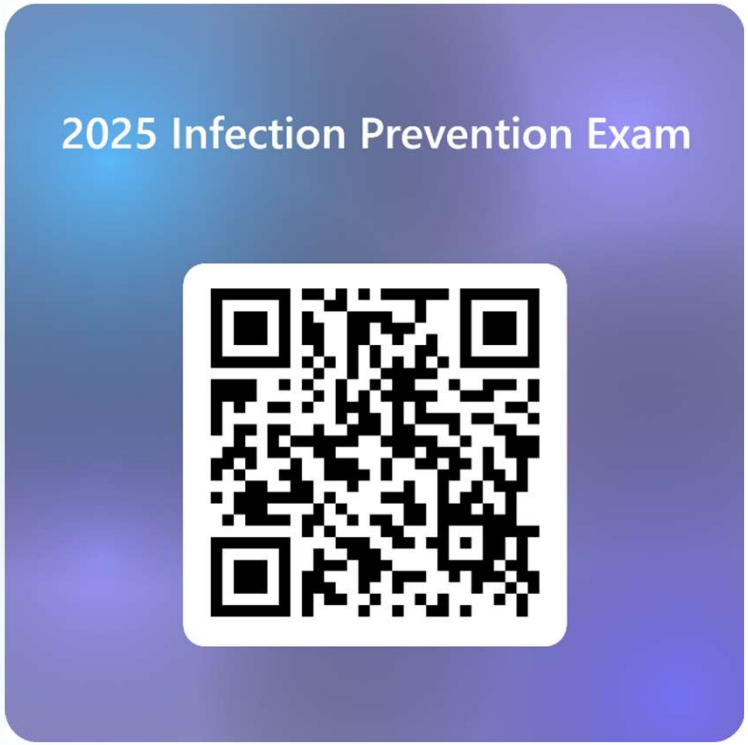
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