

INFECTION CONTROL & FLU

THE FAITH FOUNDATION LLC



INFECTION CONTROL

The Faith Foundation, LLC will ensure that all staff and individuals receive annual Infection Control Training.

This training will include the control and prevention of blood borne and other infectious diseases as well as the proper use of personal protection equipment.

The Service Director will ensure that all individuals and employees receive appropriate medical care if exposed to bodily fluids and/or infectious disease.

REPORTING OUTBREAKS

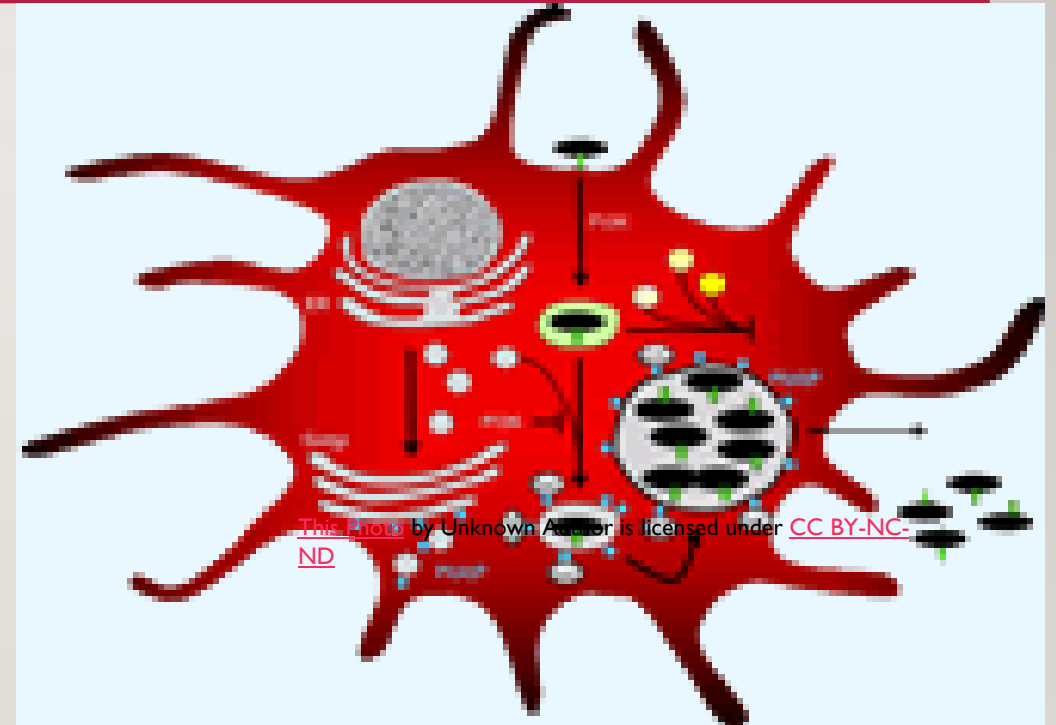
- TFF shall immediately report all outbreaks of infectious diseases to the department of Health in accordance with 32.1-37 of the Code of Virginia



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HEALTH AND SAFETY MANAGEMENT UNIVERSAL PRECAUTIONS

- The Faith Foundation, LLC adopts the Centers for Disease Control (CDC) recommendations that precautions for bloods and certain body fluids be followed in the care of all persons.
- These guidelines commonly referenced as universal precautions, describes procedures that all categories of workers should follow if they have contact with blood or other body fluids.
- These precautions also apply to anyone who may potentially come in contact with the blood or body fluids of another person. They are intended to prevent the transmission of human immunodeficiency virus (HIV) and hepatitis B virus (HBV).



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HEALTH AND SAFETY MANAGEMENT UNIVERSAL PRECAUTIONS

Universal precautions have been promulgated to protect workers from contact with the blood and body fluids of all persons.

Workers are advised to adhere rigorously to universal precautions and infection control precautions that reduce the risk of exposure to blood and body fluids.

Universal precautions do not eliminate the need for other category of disease specific isolation precautions, such as enteric precautions for infectious diarrhea or isolation for pulmonary tuberculosis.

HEALTH AND SAFETY MANAGEMENT UNIVERSAL PRECAUTIONS

- Universal precautions are intended to prevent percutaneous, mucous membrane and non-intact skin exposure of workers to pathogens from persons with symptomatic and asymptomatic blood borne infections.
- By CDC definition, these precautions apply to:
 - Blood and any body fluid containing visible blood
 - Semen and vaginal secretions
 - Tissues and cerebrospinal, synovial, pleural, peritoneal, pericardial and amniotic fluids
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HEALTH AND SAFETY MANAGEMENT

UNIVERSAL PRECAUTIONS

- They do not apply to urine, feces, nasal secretions, sputum, saliva (except for dental workers), tears, sweat and vomit unless they contain visible blood or breast milk (except in circumstances where frequent exposure is likely, e.g., in a milk bank).
- A worker should observe all reasonable precautions whenever he or she had any doubt or concern.
- These precautions do not eliminate the need for specific isolation and infection procedures for persons diagnosed with infectious diseases known to have other routes of transmission (e.g., enteric precautions).
- All laboratory specimens from all persons should be treated as bio-hazardous.

APPROPRIATE BARRIERS

- All workers should routinely use appropriate barriers precautions to prevent skin and mucous membrane exposure when contact with blood or other body fluids. All workers should use good hygiene practices at all times.
- These precautions should be directed toward protecting both workers and individuals.



HAND WASHING

- Hand washing is the single most important and effective way to prevent the spread of an infectious organism.
- Soap and water or an acceptable germicidal hand washing solution should be used.
- Hand washing should be done before and after all aspects of direct physical contact.
- Hands should be washed after removing gloves.
- Hands and other involved skin surfaces should be washed immediately and thoroughly after any physical contact with blood or other body fluids.



GLOVES

- Gloves should be worn for handling blood or anything soiled by other body fluids containing visible blood or touching open lesions.
- Gloves should be worn for drawing blood, starting or removing intravenous lines and collecting (including finger stick blood sampling) and handling specimens.
- Gloves should be changed between contact with one person and another.
- Disposable gloves should not be reused. Only utility gloves used in housekeeping and similar activities may be reused after washing and air drying.
- Gloves should be worn by any worker with cuts, skin breaks or open lesions on his or her hand. Soiled gloves should be disposed of in a plastic bag.



MASKS

- Mask and protective eyewear should be worn to prevent exposure of mucous membranes of the mouth, nose and eyes.
- Masks and goggles or face shields should be worn during procedures that are likely to generate droplets or aerosols of blood and other body fluids containing visible blood (e.g., wound irrigation, orthopedic procedures, endoscopies, and dental procedures).
- Eye glasses do not offer complete protection in situations when fluids are released under pressure.



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NEEDLE STICKS & OTHER SHARP INSTRUMENTS

- All workers should take care to prevent injuries caused by needles, scalpels, razors and other sharp instruments or devices during procedures.
- Extreme care should be exercised when cleaning used instruments after procedures. A tool, such as a Kelly clamp or pliers should be used when necessary to avoid handling soiled sharps. To prevent needle stick injuries, needles should not be recapped, cut, bend, broken, removed from disposable syringes or other manipulated.
- Health care workers should avoid startling persons handling sharps. Workers intending to use sharps should plan and organize their activities in consideration of all involved.
- Workers performing invasive procedures on uncooperative individuals should obtain competent assistance before beginning. Particular care should be taken with non-disposable sharps, e.g., spinal needles. Preparation for the after use handling of such sharps should be completed before use.



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SHARPS CONTAINERS

- Sharp containers should be puncture resistant and leak proof.
- Containers should be kept in close proximity to locations.

INFECTION CONTROL PROCEDURES

UNIVERSAL PRECAUTIONS FOR INFECTION CONTROL

Universal Precautions is a term that refers to the basic standard of infection control. The underlying principle is to assume that all patients and staff are potentially infected with blood-borne pathogens (e.g. hepatitis B virus; Human Immunodeficiency Virus). Universal Precautions are intended to protect transmission of infections from patient to staff; from staff to patients or from patient to patient.

- Handle all specimens of blood and body substances as potentially infectious.
- Wash hands before and after contact with patients or specimens of blood and body substances.
- Wash hands before and after use of gloves.
- Do not recap or manipulate needles.
- Place used syringes, needles, scalpel blades and other sharp items in puncture-proof containers marked BIOHAZARD. Do this immediately after use.
- Wear laboratory gowns, rubber gloves, protective goggles and masks whenever contact with blood or body fluids is likely.

Produced by:



**NATIONAL AIDS/STD
PREVENTION AND
CONTROL PROGRAM
DEPARTMENT OF HEALTH**

REMEDIOS HOTLINES: 50-09-21; 50-05-51
BAGUIO SHALOM: 442-50-29
DAVAO: 739-76
CEBU: 744-26
LEGASPI: 447-39
ILOILO: 798-80
REACHOUT AIDS LINE: 895-16-60
AIDS/STD UNIT: 711-66-93
Trunkline: 711-63-25; 711-60-80
(Local) 2256-2257

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- In order to provide a safe and healthy environment for the individuals of staff of The Faith Foundation, LLC the following infection control procedures are to be followed by all staff

INCONTINENT INDIVIDUALS

- When caring for an incontinent individual, gloves must be worn when toileting, changing or cleaning individuals that are either incontinent or that require assistance to use the restroom.
- Gloves must be also worn during any clean- up of the area. Wearing an apron or scrub jacket can also be done to prevent contamination of clothing.
- Hand washing should be done after any intervention with an individual and before contact with another individual.



WOUND AND SKIN CARE

- When doing wound and skin care, gloves must be worn at all times by staff when providing care to individuals. This includes the application of ointments or creams, especially to skin area of the nose or eyes.
- Gloves with good hand washing techniques are the best barriers with skin care. The use of special applicators should be done by the program nurse as should all wounds and skin care.
- Proper sterile techniques and the proper disposal of wound dressing are very important.
- Contaminated dressings should be disposed of in plastic bags, with the soiled gloves and tightly sealed and double bagged. Disposal of the bags should be given special consideration by all staff.



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CONTAMINATED SPILL

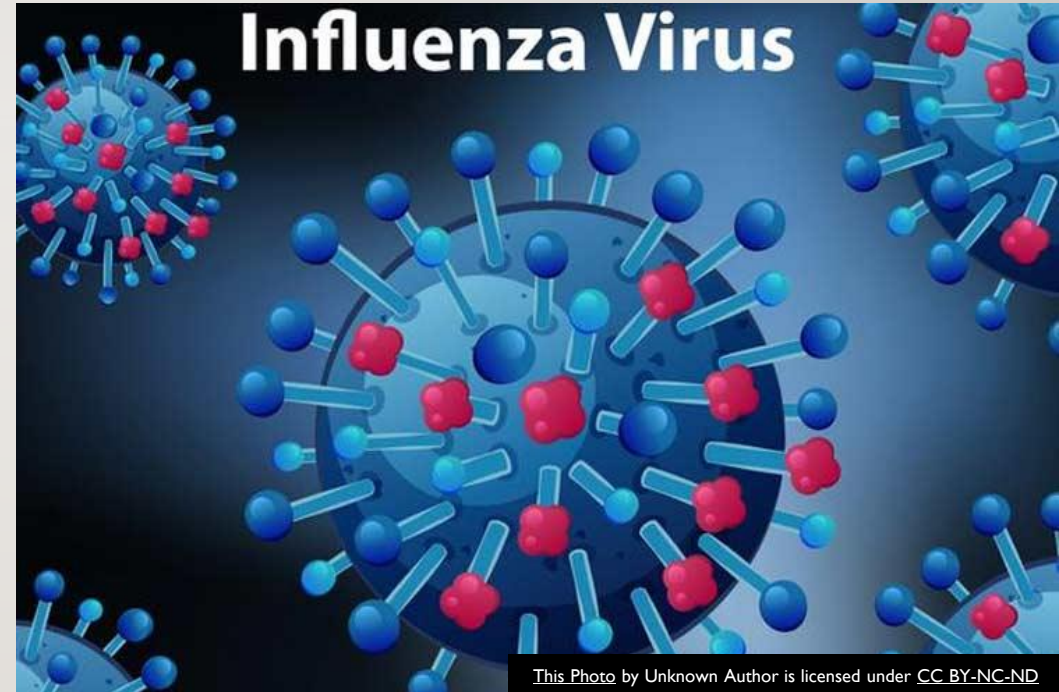
- Wear heavy-duty rubber gloves
- Absorb as much of the spill with paper towels or other absorbent materials
- Cover the area with disinfectant soaked towels and then carefully pour disinfectant around the spill. A more concentrated disinfectant may be required, as the disinfectant may be diluted by the spill.
- Wipe the surrounding areas where the spill may have splashed with disinfectant
- Soak up the disinfectant and the spill and place the materials in a double bagged plastic bag
- Spray the area with ten percent household bleach solution and allow to air dry (or wipe down with disinfectant soaked towels after a ten minute time)
- Place all contaminated paper towels and any contaminated protective clothing into a double bagged plastic bag and dispose of properly
- Wash hands and exposed skin area with disinfectant or antiseptic soap and water

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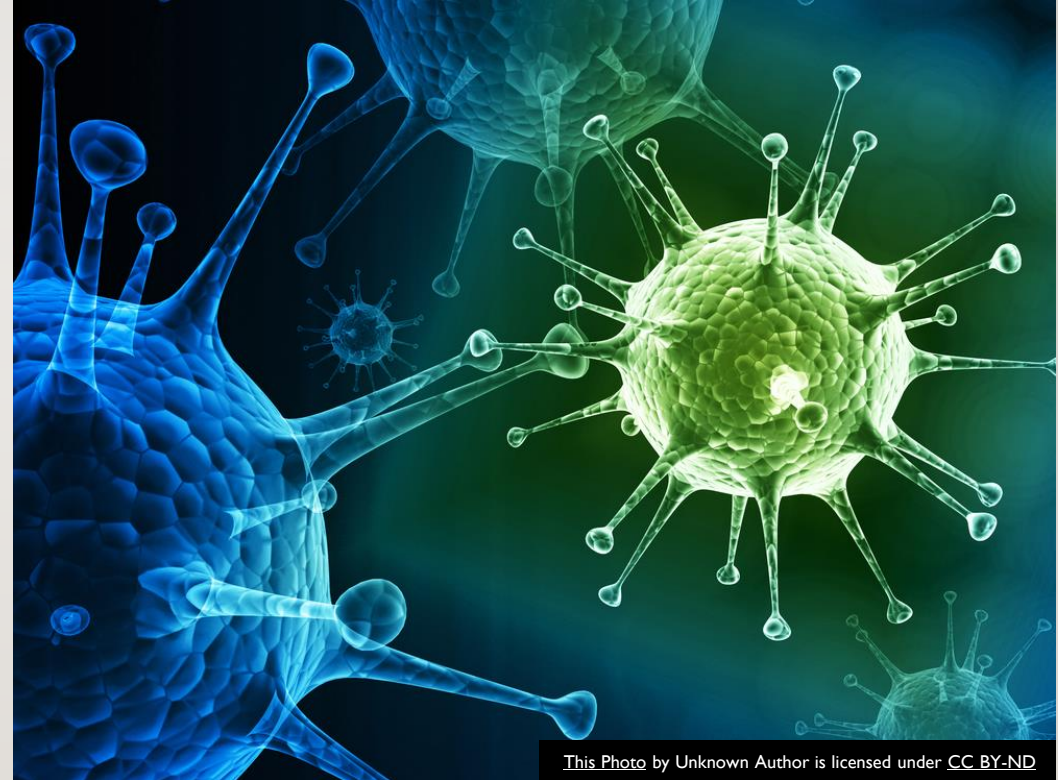
WHAT IS INFLUENZA (FLU)?

- Flu is a contagious respiratory illness caused by influenza viruses that infect the nose, throat, and sometimes the lungs. It can cause mild to severe illness, and at times can lead to death.
- The best way to prevent flu is by getting a flu vaccine each year.



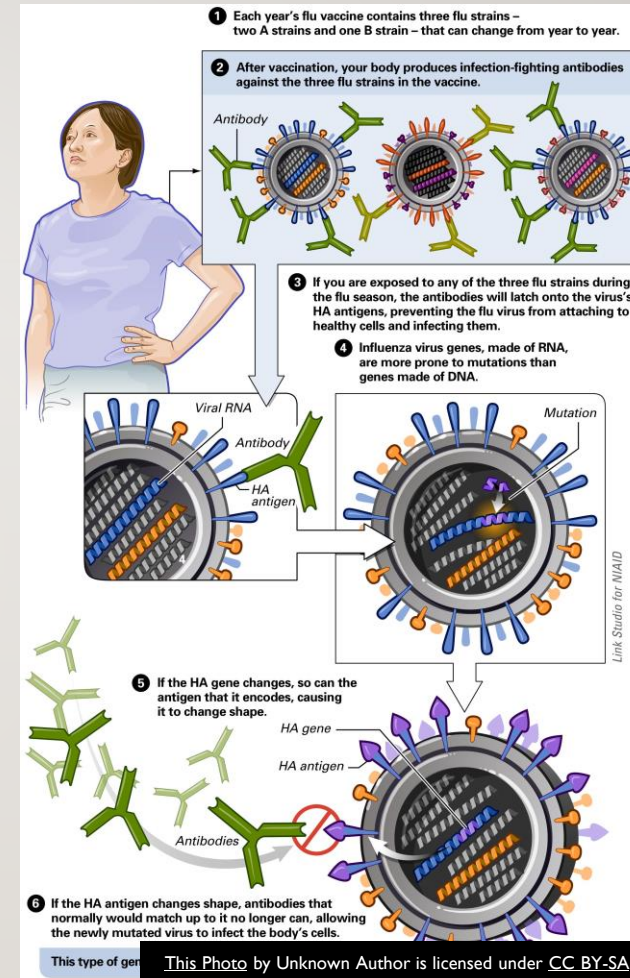
FLU SYMPTOMS

- Influenza (flu) can cause mild to severe illness, and at times can lead to death. Flu is different from a cold. Flu usually comes on suddenly. People who have flu often feel some or all of these symptoms:



FLU SYMPTOMS

- fever* or feeling feverish/chills
- cough
- sore throat
- runny or stuffy nose
- muscle or body aches
- headaches
- fatigue (tiredness)
- some people may have vomiting and diarrhea, though this is more common in children than adults.
- *It's important to note that not everyone with flu will have a fever.
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HOW FLU SPREADS

- Most experts believe that flu viruses spread mainly by tiny droplets made when people with flu cough, sneeze or talk.
- These droplets can land in the mouths or noses of people who are nearby. Less often, a person might get flu by touching a surface or object that has flu virus on it and then touching their own mouth, nose or possibly their eyes.



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PERIOD OF CONTAGIOUSNESS

- You may be able to spread flu to someone else before you know you are sick, as well as while you are sick.
- People with flu are most contagious in the first 3-4 days after their illness begins.
- Some otherwise healthy adults may be able to infect others beginning 1 day **before** symptoms develop and up to 5 to 7 days **after** becoming sick.
- Some people, especially young children and people with weakened immune systems, might be able to infect others for an even longer time.

ONSET OF SYMPTOMS

- The time from when a person is exposed and infected with flu to when symptoms begin is about 2 days, but can range from about 1 to 4 days.

PREVENTING SEASONAL FLU

- The first and most important step in preventing flu is to get a flu vaccine each year. Flu vaccine has been shown to reduce flu related illnesses and the risk of serious flu complications that can result in hospitalization or even death.
- CDC also recommends everyday preventive actions (like staying away from people who are sick, covering coughs and sneezes and frequent handwashing) to help slow the spread of germs that cause respiratory (nose, throat, and lungs) illnesses, like flu.

COVID-19

- The Faith Foundation recognizes the need for COVID-19 infection prevention guidance to support community home care, supportive In Home and home health DSPs that provide care to Individuals in the congregate group home setting and individuals who live their own homes.
- This work includes supporting individuals around the house and while in the community, supporting individuals with personal care, and providing clinical care. The risk for severe illness with COVID-19 increases with age, with older adults at highest risk.
- It the policy of The Faith Foundation that staff take precautions to always protect their individuals and themselves. If an individual tests positive for COVID-19 or any variant of the virus The Faith Foundation will follow all guidelines given by the CDC. The Faith Foundation will submit a Level I CHRIS report and inform the Support Coordinator and Guardian/AR within 24 hours of the positive test.

COVID 19

- The Faith Foundation will explore remote ways of providing or preparing to provide care for non-direct support staff, such as:
 - o Telehealth and electronic charts.
 - o Plan important care services by phone video chat or on a webinar.
- Identify and prepare for times when staff might come into direct contact with the client:
 - o Providing medication, meal prep in the home, cleaning, laundry, or other times where there is direct patient or item contact in the home
- Limit staff on hand to provide only essential care needs currently.
- Ask all patients and other household members to wear a mask while the staff member is in the home.
- Screen patients and household members for symptoms and possible exposures to COVID-19 prior to entering the home.
- Individuals who reside in congregate should follow the following guidelines

COVID 19

- Set them up in a separate bedroom with a separate bathroom away from others if possible.
- Ensure that all people in the home have personal protective equipment to use (at least gloves and facemask) and use healthy habits, such as covering their coughs and sneezes,
- throwing used tissues away and washing their hands often.
- Individuals and staff will be required to have temperature checks at the beginning and end of each shift.
- If an individual test positive, the whole group home including staff will need to test twice a week until the whole home tests negative.
- The individual (and anyone who has come in contact with the individual) will need to quarantine for 10 days after testing positive for covid
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