What is OSHA

• O  Occupational
• S  Safety and
• H  Health
• A  Administration
Universal Precautions

• Blood and certain body fluids are assumed to be possibly infected and precautions are taken “universally” in all potential exposure situations.

• These precautions are written in accordance with guidelines established by the Center for Disease Control (CDC) and OSHA.

• These apply to all personnel.
Categories of Germs

- Bacteria (Strep, Staph, e-coli)
- Fungus (Ringworm, Thrush, Yeast, Mold)
- Viruses (Common Cold, HBV, HIV)
- Parasites (Malaria, Fleas, Ticks, Lice)
How are Germs Transmitted? Five Modes:

- Airborne (Legionnaires Disease)
- Droplets (Cold, Influenza, TB)
- Blood and Body Fluids (STD’s, HBV, HIV)
- Skin to Skin (Pinkeye, Ringworm)
- Oral/Fecal (Hepatitis A, Food Poisoning, e-coli)
Links in the Chain of Infection

- Infectious Agent – germs/microbes that cause disease
- Reservoir – carrier or host
- Portal of exit – the way I. A. leaves the host
- Mode of transmission – Means of traveling (on hands)
- Portal of Entry – the way I.A. enter the body
- Susceptible host – person with low resistance
What are Bloodborne Pathogens?

• The 3 we are most concerned with are:

  • Hepatitis B – HBV
  • Hepatitis C
  • HIV - AIDS
Hepatitis B Virus

- Extremely contagious.
- Causes:
  - Inflammation of the liver
  - Jaundice
  - Fatigue
  - Loss of Appetite
  - Abdominal Pain
- About 10% of those infected become carriers.
- Can live outside the body for up to 2 weeks.

There is an effective vaccine!!

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Hepatitis C Virus

- Very contagious.
- Initially causes symptoms similar to HBV.
- 10,000 people die from HCV-related chronic liver disease every year.
- Can live outside the body for 3-4 days.
- About 85% are chronically infected – carriers.

There is no vaccine!!
Human Immunodeficiency Virus

- HIV attacks the immune system, eventually destroying the body’s ability to fight infection.

- 800,000 people in the USA are HIV positive.

- Many appear healthy and lead normal lives for years.

- Eventually leads to AIDS!

There is no vaccine and no cure!!
Body Fluids which require Universal Precautions:

- Blood
- Any body fluid with visible blood
- Wound secretions
- Vaginal secretions and semen
Body Fluids which DO NOT require Universal Precautions

- Urine
- Feces or stool (with no visible blood)
- Saliva (with no visible blood)
- Sputum/mucous (with no visible blood)
- Vomit (with no visible blood)
- Sweat
- Tears
Potential Infections

• Even though you can’t get HIV, HBV or HCV from these body fluids they are still a potential source of many other types of infection.

• Practice Universal Precautions when handling anything which may have been contaminated.

• Contact with these is NOT considered an Exposure Incident.
Procedure Related to Direct Care

• PPE (Personal Protective Equipment) is used anytime exposure to blood or OPIM (other potentially infectious material) is possible.

• The type of protective equipment used must be appropriate for the situation.

• Every home/site must have an OSHA kit and sharps container.
Exam Gloves

• Exam gloves of latex, vinyl or other non-allergenic material **MUST** be worn by staff when performing tasks which involve handling blood or body fluids.

• Gloves must be removed and discarded after each use.

• Take care to remove them by “peeling them down” without touching the outside, ball them up and discard. Then wash your hands.
Personal Protective Equipment
OSHA Kit / PPE

- Masks or Face shields to protect against splashes or droplets of P.I.M. through the mucous membranes of the eyes, mouth or nose.

- Gowns – disposable paper gowns or aprons to protect against clothing becoming contaminated.

- Utility gloves – like thick plastic or vinyl gloves

- CPR pocket mask
Wear your P.P.E.

It’s your last line of defense against infection
Open Wounds or Cuts

• Any open cuts, scratches or sores must be kept covered, unless specified by a doctor, and protected from coming into contact with others.

• Staff with cuts or skin irritations on their hands are to keep them covered with gloves when coming in contact with any body fluids.
Handwashing

The most effective means of preventing disease transmission

It should be done:

- At the start of the day or when soiled.
- Before contact with food.
- After using toilet facilities or assisting with personal hygiene.
- After coming into contact with any Potential Infectious Material, *even if gloves were worn.*
- After handling or feeding pets.
- After working or playing outside.
Handwashing Procedure

• Use liquid, pump soap.

• Rub hands together vigorously under warm running water for 30-40 seconds, between fingers and under nails.

• Rinse.

• Use paper towel to turn off the faucet after drying your hands.
How to Wash Your Hands

1. Wet your hands with warm, running water.
2. Use soap to wash away the germs.
3. Wash your hands for 20-30 seconds.
4. Wash the fronts and backs of your hands.
5. Scrub under your fingernails and between your fingers.
6. Rinse well with warm, running water.
7. Dry your hands with a fresh paper towel.
8. Use the paper towel to turn off the faucet.
**AMERICANS’ HAND HYGIENE HABITS**

A majority of Americans are getting caught dirty-handed when it comes to their handwashing habits. A survey by SCA, a global hygiene company, uncovered that consumers understand the importance of hand hygiene but their practices may be grossly exaggerated.

571% say they practice good hand hygiene and wash their hands regularly,

yet... 58% have witnessed others leaving a public restroom without washing their hands,

20% witnessed restaurant employees,

33% witnessed friends,

35% witnessed co-workers,

MORE THAN HALF do not wash their hands after riding public transportation, after using shared exercise equipment, or handling money.

39% do not wash their hands after sneezing, coughing, or after blowing their nose.

On average, you come in contact with 300 surfaces every 30 minutes, exposing you to 940,000 germs*

*According to 2011 Test® report

On behalf of SCA, KRC Research conducted 1,900 online interviews among a randomly representative sample of adults in the U.S. from October 4 to October 7, 2011.

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What is an Exposure Incident?

An exposure incident involves blood or OPIM coming in physical contact with another person through a cut, puncture or other non-intact skin or by means of a splash to the eyes, mouth or other mucous membrane.
Managing Exposure Incidents

• Immediately wash hands and other skin surfaces that are contaminated.

• Mucous membranes or eyes must be flushed with clear water.

• Allowing puncture wounds to bleed for a short period prior to washing will help to clean the wound from the inside.
More Management

• All exposure incidents must be reported to your supervisor or the On-call supervisor as soon as it is safe to do so.

• This includes: Staff to Staff, Individual to Individual, Staff to Individual and Individual to Staff.

• In addition to an Incident Report, an Exposure Incident Report must be filled out and given to your supervisor by the end of your shift.
Hepatitis B Vaccine

• All employees who have been identified as having potential exposure to blood or OPIM will be offered the HBV vaccine.

• You can accept the vaccine, decline the vaccine or report you have already taken the vaccine.

• Staff who decline can opt to have the vaccine at any time during their employment.
IMPORTANT!
(please read the completion instructions)

• Review the Exposure Incident Report
• Sign off on the Infection Control Training Form
• Print & Complete the quiz
  *(Please be sure to add your name & date to the quiz.)*
• Print the Certificate; add your name, signature and date, and return to your supervisor along with the Quiz Results.

THANK YOU!
INFECTION CONTROL
TRAINING SIGN-OFF FORM
(For Employee’s Personnel File)

To be completed by the Trainer

This is to certify that ________________________________________________________________ has successfully
Completed the training on infection control as required by the OSHA Standard on Bloodborne Pathogens and
the KenCrest Policy & Procedures on AIDS/HIV.

Signature of Trainer ___________________________ Date Completed ___________________________

To be completed by the Employee

I have received training on infection control as outline by the OSHA Standard On Bloodborne Pathogens and the
KenCrest Policy & Procedures on AIDS/HIV. I understand the information presented to me and have had the
opportunity to ask questions.

Signature of Employee ___________________________ Date Completed ___________________________

Revised 10/18/2016 (MEM)
EXPOSURE TO BLOODBORNE PATHOGENS
INCIDENT REPORT

The following information must be completed by the supervisor, in all instances where an employee has been exposed to blood or other potentially infections materials (i.e.; bites, needle sticks, etc.). This form must be completed, in addition to the KenCrest report of injury form, completed with any workers’ compensation claim. A copy of this form is to be sent with the employee to the physician providing post exposure treatment and the original forwarded to Kathleen Stevens, Human Resources, 960 A Harvest Drive, Suite 100, Blue Bell, PA 19422; 610-825-9360, ext. 1031. All information will be confidential and maintained in a separate employee medical file.

<table>
<thead>
<tr>
<th>Employee Name:</th>
<th>Date of Incident:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Job Title:</td>
<td>Social Security #:</td>
</tr>
<tr>
<td>Division:</td>
<td>Site:</td>
</tr>
</tbody>
</table>

**Type of Exposure: (Check One)**

- [ ] Needle Stick
- [ ] Bite (e.g.; skin was broken and source individual has history of gingivitis or bleeding gums)
- [ ] Other (explain):

**Describe how the incident occurred:**


**Employee’s Hepatitis B Vaccination Status: (Check One)**

- [ ] Has received the vaccine
- [ ] Has not received – only some doses
- [ ] Has not received the vaccine

**Source of individual information** (person from whom blood or other potentially infectious material (OPIM) was transmitted):

- Social Security Number:

To the Physician: If you need further information regarding the source individual, contact Kathleen Stevens at (610) 825-9360, ext. 1031.

**Treating Physician:**

- Address:


Employee Signature  Date  Supervisor Signature  Date

Revised 10/18/2016 (MEM)
Question 1.
The bloodborne pathogens putting you at greatest risk at work are HBV, HCV, HIV.

( ) True
( ) False

Question 2.
Dealing with children’s everyday cuts and scrapes doesn’t require any particular precautions.

( ) True
( ) False

Question 3.
Many people with bloodborne viruses seem healthy and show no symptoms

( ) True
( ) False

Question 4.
There is no effective vaccine for Human Immunodeficiency Virus (HIV).

( ) True
( ) False

Question 5.
A blood test is the only way to confirm infection by a bloodborne pathogen.

( ) True
( ) False

Question 6.
Your skin is a natural, protective barrier against exposure.

( ) True
( ) False
Name: _________________________________ Date: _________________________________

Question 7. You should consider all blood, or any substance containing visible blood, to be potentially infectious.

( ) True
( ) False

Question 8. The hazards of bloodborne pathogens are outlined in your facility Exposure Control Plan.

( ) True
( ) False

Question 9. Personal protective equipment works by putting a physical barrier between you and potentially infectious materials.

( ) True
( ) False

Question 10. If you wear gloves, it’s not necessary to wash your hands after handling potentially contaminated substances.

( ) True
( ) False

Question 11. You can minimize your risk of infection by bloodborne pathogens if you know the facts and take precautions.

( ) True
( ) False
This is to certify that ___________________________________________________________________________ has completed

.5 Hour(s) of Universal Precautions / OSHA (no breaks)

on ________________ at KenCrest Online Module

Presented by: Pam Schaefer, Program Coordinator, Staff Training and Development

Provider Signature: ___________________________________________________________________________