Infection Control Update

Satellite Conference and Live Webcast Wednesday, September 19, 2007 2:00-4:00 p.m. (Central Time)

Produced by the Alabama Department of Public Health Video Communications and Distance of Learning Division

Faculty

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Program Objectives

- Define hand hygiene and its importance in preventing the spread of disease
- List three products that may be used for disinfection in the home
- List two of the more common multi-drug resistant organisms
- Discuss the importance of personal protective equipment to the healthcare worker

IC Basics

What Makes Your Patients More Susceptible to Infection

- Broken skin
- · Small children in the house
- · Poor personal hygiene
- · Decreased defenses due to illness
- Home sanitation
- Questionable water supply and purity
- · Care giver technique

You can be a Teacher! You are an Example!!

Handwashing/hand Hygiene Is the 1st and Last Step in Preventing Infections

Handwashing

How to Wash

- Use warm (not hot, or cold) running water
- Lather soap in hand, vigorously rub together
- Rub all surfaces, including palms, backs of hands, between fingers and wriet
- Clean around nail beds and under fingernails
- Clean around and under any rings

Handwashing

- Most sources recommend a minimum of 10 – 15 seconds of friction
- Rinse well under running water to remove all soap
- Turn off water with a paper towel, discard, then dry hands

Hand Hygiene

Hand Hygiene Steps

- Apply 3 5 ml. (5 ml. is a teaspoon) of alcohol based, waterless agent into hands
- Then vigorously rub hands (all surfaces) together until dry

Handwashing

Soap

- · Liquid soap is best
- Bacteria can grow on bar soap, especially if it is resting in water
- Storing in a drainable dish is acceptable, but rinse bar under running water before use
- Do not carry bar soap from home to home

Handwashing

Soap

- Liquid soap containers may also become contaminated
- Carry as small of a container as possible
- If you refill a container, be sure that the container is clean and dry

Hand Hygiene

 Antimicrobial soap and alcohol hand hygiene agents are used to kill or retard resident microorganisms in the deep epithelial skin layers

Handwashing/Hand Hygiene

When to Wash

- Prior to any patient care activity
- · When handling food
- · Between tasks
- · After removal of gloves

Handwashing/Hand Hygiene

- After any activity that could contaminate your hands
 - -Emptying the trash
 - -Sneezing
 - -Touching hair
 - -Changing a diaper
 - -Using the toilet
 - Emptying a vacuum

Handwashing/Hand Hygiene

- At the end of the visit, before doing any paperwork
- · When in doubt, decontaminate!
- Also, use friction when drying hands with a clean unused paper towel
 - -helps remove bacteria

Hand Hygiene

Waterless Alcohol Handwashing Products

- First used only when soap and water were not available
- Now know they are more effective than soap and water
- Cause less skin irritation and dryness

Hand Hygiene

- Decreases the amount of time needed to decontaminate hands
- Increases hand hygiene compliance
- Alcohol is not a good cleaning agent and is not recommended in the presence of physical dirt or contamination with body fluids

Handwashing/Hand Hygiene

- Frequent handwashing will strip the skin of natural oils and lead to dryness, cracking and irritation
- This increases the risk of colonization and infection
- Lotions and creams should be used with care
- Fingernails should be kept short and any flaking or peeling polish should be removed

PPE

The Usage of Gloves

- Use for any task involving a potential for contact with non-intact skin, mucous membranes and blood or body fluids
 - -Except sweat
- · If in doubt use gloves

PPE

Change Gloves

- · If cracked or torn
- Between tasks and procedures on the same patient
 - don't wear the same gloves to brush teeth that were used to bathe the patient
- If a dirtier part of a task was completed before a cleaner part

PPE

- After any contact with any material containing a high concentration of bacteria
 - Changing a diaper or cleaning up feces
- After any contact with patients that have MRSA or VRE
- Remove gloves as soon as possible after a task is completed to prevent cross contamination

PPE

- Do not wash or reuse disposable, single use gloves
- Always wash hands after the gloves are removed
- Don't touch your face or adjust PPE with contaminated gloves
- Don't touch environmental surfaces except as necessary during patient care

PPE

- Latex gloves are made from natural rubber
- · Latex allergies
 - -Skin rash
 - -Hives
 - -Flushing
 - Nasal, eye and sinus symptoms
- Not only your problem, but possibly your patients also

PPE

- The apron worn over your uniform provides a basic barrier to protect you and also protect your patient Aprons should be worn with every patient
- Gowns should be worn during patient care activities when you anticipate your uniform may have contact with blood or body fluids

PPE

- Wear mask and/or eye protection when there is a possibility of splashes or sprays to the facial area
- Masks/facial shields should protect the nose and mouth and prevent fluid penetration
- Goggles or safety glasses should fit snugly over and around eyes or eyeglasses
- Personal glasses are not a substitute for goggles

PPE

- Donning
- Removing
- -Gown
- GlovesGoggles
- MaskGoggles
- -Gown
- -Gloves
- Mask

PPE

PPE Safe Work Practices – Always Remember to

- · Keep hands away from face
- · Limit surfaces touched
- Change equipment when torn or heavily contaminated
- Perform hand hygiene immediately after removing all PPEs

Cleaning

Patient Care Equipment

- All items must be cleaned first to remove any blood or body fluids before disinfecting
- Most non-critical items can be cleaned with a detergent

Cleaning

- Disinfection
 - Products suitable for disinfection in the home:
 - Bleach
 - Hydrogen peroxide
 - Boiling water
 - · Phenolics (e.g. Lysol, Pinesol)
 - Isopropyl alcohol (70%)

Cleaning

- Acetic acid (vinegar) is often used for disinfection, but since vinegar may not contain a standard concentration of acetic acid, it is not recommended
- Vinegar is not effective against Staphylococcus aureus

Cleaning

Principles of Cleaning, Disinfecting

And Sterilization

- Clean all items thoroughly to remove any soil organic material
- Read manufacturer's recommendations or departmental procedure
- Leave disinfectant on items for the recommended contact time

Cleaning

- Thoroughly rinse items and allow to dry
 - -take care not to re-contaminate
- Rinse with fresh tap water or sterile water
- Use appropriate PPE when cleaning and disinfecting items
- Always store items properly

Cleaning

Waste Disposal

- Waste can be disposed with other home waste in correct containers
- Be familiar with pamphlet Handling and Disposal of Home Medical Waste: a Household Guide for Alabamians

Cleaning

- Medical waste is not transported from patient's home to home health office for disposal
- Disposable supplies should be double bagged in plastic trash bags, securely fastened and placed with other household trash

Cleaning

- Soiled linen and clothing can be safely laundered in the family washer using
 - Detergent
 - Hot water (as hot as safe for material being washed)
 - Bleach (read washing instruction on clothing)
- A dryer will also boost antibacterial activity

Cleaning

- Never hold clean nor soiled linen against your clothing
- If soiled with fecal material, dispose in the toilet and wash separately
- Keep off the floor and upholstered furniture
- · Never shake linen, clean or soiled

Food

Food Preparation

- Wash hands before and after food preparation
- Store cooked and uncooked foods separately
- · Do not thaw and refreeze foods
- Persons with diarrhea should not assist with food preparation

Food

- · Dishes need no special treatment
- Refrigerate leftovers
- · Keep all food prep areas clean
- · Do not use cracked eggs
- Heat leftovers thoroughly
- · If in doubt throw it out!

85% of ALL Foodborne Illness Is Preventable

General

Pets

- · Man's best friend and a big comfort
- · Pets can speed recovery
- Should not be in area when any treatments are being done
- · Problems with reptiles

Transmission

- · Communicable disease seen in home
 - Pinkeye (conjunctivitis)
 - Acute diarrhea
 - Fifth Disease
 - -Lice
 - -RSV
 - -Ringworm of the scalp
 - -Scabies

Transmission

- · MDRO's
 - The bacteria that has become resistant to the antibiotics that are normally used to treat infections they cause
 - The most common are
 - -MRSA (Methicillin Resistant Staphylococcus)
 - VRE (Vancomycin Resistant Enterococcus)
 - -C. difficle

Transmission

- Transmitted in 2 ways
 - Direct contact
 - · Skin to skin
 - -Indirect contact
 - Exposure to contaminated environment or equipment
- Protect yourself and your next patient by washing your hands and wearing the appropriate barriers (PPE's)

Transmission

- · Risk factors for MDRO's
 - Underlying chronic and/or immunosuppressive illness
 - Cancer
 - HIV
 - Transplant
 - Steroid therapy
 - Multiple health problems

Transmission

Colonization versus Infection

- Colonization bacteria is present, but is not causing infection
- Infection Bacteria is causing an infection such as UTI, skin wounds (spider bite, cellulitis), blood or other body site

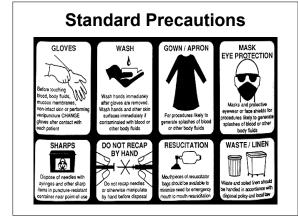
Isolation

Standard Precautions

- All patients blood, body fluids, secretions, excretions, non-intact skin, and mucous membranes
 - -Except sweat

Contact Precautions:

- Patients who are infected with MDRO's
- · Use when having direct contact



Viral Hepatitis

- · Signs and symptoms
 - -Jaundice
 - Dark urine
 - -Pale colored stools (clay colored)
 - Flu-like symptoms
 - -Pruritus (generalized itching)
 - -Anorexia (loss of appetite)

Hepatitis A

- Transmission
 - Close personal contact fecal/oral route
 - · household, sexual, daycare
 - -Contaminated food or water
 - infected food handler, raw seafood
 - -Blood exposure
 - very rare

Hepatitis A

- · Present vaccine is 99% effective
- Two dose schedule given 6 months apart
- Recommended for children 2 years or older, homosexual and bisexual men, IV drug users and travelers to endemic countries

Hepatitis B

- Transmission
 - -Sexual
 - Parenteral
 - -Perinatal
 - -Other

Hepatitis B

- Approximately 30 60% of young children and 2 – 10% of adults who are infected, will develop chronic disease
- Persons with chronic HBV infection are often asymptomatic
- Approximately 15 25% of these may die prematurely from either cirrhosis or liver cancer

Hepatitis B Vaccine

- · Vaccine is a yeast product, not blood
- 96% effective
- 3 dose series, given IM in the deltoid (arm)
- 0, 3 and 6 month interval

Hepatitis C "The Silent Epidemic"

- A major healthcare problem worldwide
- Many people who are infected do not have symptoms for many years, but their blood and body fluids could be infectious to others

Hepatitis C

- 50 million people worldwide
- · Of these 4 million are in the U.S
- 70 90% of those infected will develop chronic infection
- Contributes to over 12,000 deaths annually

Hepatitis C

- Transmission
 - -Injecting drugs
 - -Sexually
 - -Blood transfusions
 - prior to blood donation screening
 - -Perinatally rare
 - -Household
 - sharing toothbrushes, razors, etc.
 - -Other

Hepatitis C

- Treatment
 - There is no vaccine at present for Hepatitis C
 - There are some anti-viral medications available for treatment of some hepatitis C patients, but the treatment is usually only effective in 10 - 40% of those treated

HIV/AIDS

- Routes of transmission are very similar to hepatitis B
- AIDS is the last stage of an infection causes by the HIV virus
- HIV weakens the immune system (the body's natural defense against illness)

HIV/AIDS

- · Infection with HIV can last for years
- By the AIDS stage the immune system is very weak and cannot protect against illness
- There are good antiviral medications that can prolong life and boost the immune system

2007 Respiratory Illnesses of Concern

- · Seasonal Flu
- · Avian Flu
- · Pandemic Flu
- Pertussis in teenagers and adults
- RSV
- Meningitis

Seasonal Flu

- A respiratory illness that can be transmitted easily from person to person
- Most people have some immunity.
 There are also very effective and safe vaccines available
- Everyone is strongly encouraged to get a yearly flu shot

Avian Influenza

- Avian (bird) flu is caused by influenza viruses that occur naturally among wild birds
- The H5N1 variant is deadly to domestic fowl (chickens, ducks, geese, etc)
- When it becomes easily transmitted to people and from person to person, a possible pandemic may emerge
- There is no human immunity and vaccines are developed

Pandemic Flu

- A virulent (strong) human flu that can cause a global or worldwide outbreak or pandemic of serious illness
- Because there is little natural immunity, the disease can spread easily from person to person
- · There is no pandemic flu currently

Pertussis

- Seeing more teenage/adult age cases
- Most infectious during catarrhal (runny nose) stage
- Incubation period is seven to ten days

Pertussis

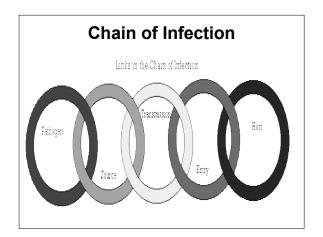
- Transmission
 - Coughing or sneezing
 - -Unclean hands
 - -Inanimate objects

Respiratory Etiquette

- When cough or sneeze, cover nose and mouth with a tissue
- · Dispose in a waste basket
- If you do not have a tissue, sneeze or cough into your sleeve
- Avoid touching eyes, nose or mouth

Prevention

- After coughing or sneezing, always clean your hands with soap and water or an alcohol based hand cleaner
- Stay home when you are sick
- Do not share eating utensils, drinking glasses, towels or other personal items



Handwashing Infection Prevention



Lend Healthcare A Hand By Washing Yours TM

Upcoming Programs

Working Towards Independence: Employment of Persons with Disabilities Thursday September 20, 2007 2:00-4:00 p.m. (Central Time)

Workplace Violence:
ADPH Polices & Prevention
September 28, 2007
2:00-4:00 p.m. (Central Time)

Upcoming Programs

Short Term Interval: Counseling Family Planning Patients Thursday, October 4, 2007 2:00-4:00 p.m. (Central time)

Patients Rights and Responsibilities Wednesday, November 14, 2007 2:00-4:00 p.m. (Central Time)