Pennsylvania Act 52: Healthcare-associated Infection Prevention & Control Act

**Defined**
- Known as the Healthcare-associated Infection Prevention and Control Act, it is an extension of the existing act regarding Medical Care Availability & Reduction of Error Act

**Requirements**
- Comprehensive Infection Control Plan
- Reporting of healthcare associated infection (HAI) data through the National Health Safety Network (NHSN)
- Implementation of an electronic surveillance system
- Plan for identification and designation of patients colonized/infected with MRSA (Methicillin-resistant Staph aureus)

**Infection Control Plan**
- Goal: to prevent the transmission of infections among patients, staff, and visitors
- FY09 Plan focuses on the reduction of:
  - Ventilator associated pneumonias (VAPs)
  - Urinary tract infections (UTIs)
  - Central line-associated bacteremias (CLABs)
  - Surgical site infections (SSIs)
  - C difficile

**Isolation Practices**

**TEST YOUR SKILL: DO YOU KNOW THE CORRECT DRILL?**

<table>
<thead>
<tr>
<th>Pers Protective Equipment (PPE)</th>
<th>Gloves &amp; Gown</th>
<th>Gloves &amp; Gown</th>
<th>Mask</th>
<th>N95 Respirator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special Requirements</td>
<td></td>
<td></td>
<td></td>
<td>Place patient in negative pressure room</td>
</tr>
<tr>
<td>Most Common Diseases / Bacteria</td>
<td>MRSA, VRE</td>
<td>Scabies, Lice</td>
<td>C. difficile</td>
<td>Influenza Meningitis</td>
</tr>
</tbody>
</table>

* Combination signs are available for Contact/Airborne or Droplet/Contact
**Handwashing**

- Healthcare associated infections are responsible for approximately 80,000 deaths annually in the U.S.; transmission of these pathogens most commonly occurs via contaminated hands of healthcare workers
- Optimal efficacy is obtained after one applies enough soap and/or sanitizer to cover the hands and fingers followed by a vigorous, 15 second rub/scrub
- Appropriate hand hygiene includes washing and/or sanitizing hands:
  - Upon entering and exiting a patient room
  - After handling potentially contaminated items
  - After removal of gloves
  - Before eating
  - After going to the bathroom
  - MUST wash hands upon entering and exiting a patient room even if nothing was touched
  - MUST use soap and water (not hand sanitizer) if patient is diagnosed with C. difficile
- Encourage families and visitors as well as caregivers to wash hands

**OSHA Bloodborne Pathogen Standards**

**Defined**
- The Occupational Safety and Health Administration (OSHA) has issued regulations based on the premise that any patient or person may be unknowingly infected with bloodborne pathogens such as hepatitis B virus (HBV), hepatitis C virus (HCV), or human immunodeficiency virus (HIV)

**Bloodborne Pathogen Exposure Control Plan**
- Goals: to provide employees with a safe workplace, to minimize bloodborne pathogen exposures and to encourage employees to follow Standard Precautions
- Goals are accomplished by employing various work practice and engineering controls, personal protective equipment, and regulating infectious waste

<table>
<thead>
<tr>
<th>Work Practice Controls</th>
<th>Engineering Controls</th>
<th>Personal Protective Equipment (PPE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work practice controls reduce the chance of employees being exposed to blood and other potentially infectious materials by altering the way they do their work.</td>
<td>Engineering controls use available technology and devices to isolate or remove hazards from employees and help prevent exposure to blood or other potentially infectious materials. Healthcare workers are to take the opportunity to regularly evaluate engineering controls and suggest changes to their on-site safety coordinator.</td>
<td>Personal protective equipment (PPE) is specialized clothing or equipment worn by employees to protect against exposure to blood or other potentially infectious material. General work clothes (i.e. uniforms) are not considered PPE. PPE does not replace using engineering and work-practice controls.</td>
</tr>
</tbody>
</table>

- Appropriate Handwashing
- Separate refrigerators for food, medication, and specimens
- Using safety needles and sharps
- Needleless IV systems
- Plexiglass shields for hoppers
- Eyewash stations
- Pneumatic tube systems
- Safety needles
- Gloves
- Gowns/aprons
- Shoe covers/boots
- Impervious lab coats
- Face shields, masks & eyewear
- Safety goggles

**Employee Responsibilities for Personal Protective Equipment**
- Know where PPE is located in your area
- Remove PPE prior to leaving your work area; place in appropriate container
- Immediately remove any PPE contaminated by blood and/or other potentially infectious materials
- If your scrub is contaminated, change into a clean, dry scrub uniform and place soiled uniform in a clear plastic bag
Infectious Waste Disposal

- In accordance with OSHA, EPA, Department of Health and Joint Commission guidelines, policies and procedures have been implemented to assure the health and safety of our employees, staff, community and environment.

<table>
<thead>
<tr>
<th>Regular Waste (White Bag)</th>
<th>Sharps/Needles (Red Container)</th>
<th>Pathological (Red Bag)</th>
<th>Chemotherapeutic (Yellow Container)</th>
<th>Infectious (Red Plastic Liners)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food, food containers</td>
<td>Needles</td>
<td>Blood / Blood soiled items</td>
<td>Empty chemo bags</td>
<td>Blood / Blood soiled items</td>
</tr>
<tr>
<td>Gloves, gowns, masks unsoiled by body fluids*</td>
<td>Pipettes</td>
<td>Drainage tubing with visible blood</td>
<td>Used chemo needles/sharps</td>
<td>Drainage tubing with visible blood</td>
</tr>
<tr>
<td>Non-glass medication vials</td>
<td>Syringes</td>
<td>Items soiled with body fluids*</td>
<td>Used chemo tubing</td>
<td>Items soiled with body fluids*</td>
</tr>
<tr>
<td></td>
<td>Lancets</td>
<td>covered by Standard Precautions</td>
<td>Other chemo waste</td>
<td>covered by Standard Precautions</td>
</tr>
<tr>
<td></td>
<td>Scalpel blades</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Teeth</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Scissors</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Blood/Body fluids covered by Standard Precautions include: Blood, body fluids and tissue, cerebrospinal fluid, peritoneal fluid, pericardial fluid, semen & vaginal fluid, saliva in dental procedures, synovial fluid, pleural fluid, amniotic fluid. If blood is visible, the following additional fluids as well: feces, nasal secretions, sputum, sweat, tears, vomitus and urine.

Biohazard Labeling

- All regulated waste (liquid/semi-liquid blood or other potentially infectious body fluids) must be labeled with a biohazard label or color-coded red so that employees can accurately identify the hazard.
- Clearly label any equipment that cannot be cleaned or any area on a piece of equipment that was not decontaminated.

<table>
<thead>
<tr>
<th>Biohazard Label Required</th>
<th>Biohazard Label NOT Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any container of regulated waste</td>
<td>Blood/blood products for transfusion which have been screened for bloodborne pathogens</td>
</tr>
<tr>
<td>Sharps disposal containers</td>
<td>Individual containers of blood/body fluids that are in another labeled container</td>
</tr>
<tr>
<td>Refrigerators/freezers used for blood/body fluids</td>
<td>Soiled laundry bags/containers</td>
</tr>
<tr>
<td>Containers used to transport blood/body fluids</td>
<td>Decontaminated regulated waste that is marked with proof of decontamination</td>
</tr>
</tbody>
</table>

Clean Work Environment

- Promptly clean up small blood/body fluid spills with a “mess kit”
- Contact Environmental Services to handle large blood/body fluid spills
- Clean and decontaminate all equipment and surfaces that come in contact with blood or other potentially infectious materials
- Immediately discard contaminated sharps into a puncture resistant, leakproof, resealable, labeled container

Blood/Body Fluid Exposure

<table>
<thead>
<tr>
<th>Exposure Incident</th>
<th>Post-Exposure Evaluation</th>
<th>Post-Exposure Follow-up</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clean exposed area with soap/water; if involves the eye/mouth, irrigate immediately with water</td>
<td>Contact Employee Health (x5050) or go to Emergency Department</td>
<td>Employee Health will report confidential test results and outline recommended follow-up</td>
</tr>
<tr>
<td>Report incident to manager</td>
<td>If significant exposure, appropriate testing will be performed on employee and patient per PA Act 148 and OSHA BBP Std</td>
<td>Documentation of exposure and results will be maintained for 30 years after employee last work date</td>
</tr>
<tr>
<td>Complete Employee Occupational Injury/Illness Report Form</td>
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<td></td>
</tr>
</tbody>
</table>
**Tuberculosis (TB)**

**TB Exposure Control Plan**
- Goal: Early detection, isolation and state-of-the-art treatment of people with active TB
- The Hospital controls the spread of TB by:
  - Prompt identification of patients who may have TB
  - Isolation of the patient in a negative air pressure room
  - Adhering to the hospital respiratory protection program (use of special masks)

**Signs/Symptoms**
- Prolonged, unexplained cough
- Shortness of breath
- Anorexia (loss of appetite)
- Unexplained loss of weight
- Coughing up blood
- Chest pain when coughing
- Night sweats
- Chills
- Fatigue
- Fever

> Any employee who has a history of exposure to a person with active TB, or who develops any of the above signs/symptoms should seek prompt medical evaluation

**Employee Screening**
- All employees are screened for active TB upon hire and annually thereafter regardless of whether they have tested positive or negative in the past
- A positive tuberculin skin test (TST) indicates an exposure to TB; further evaluation is necessary to determine if the disease is active

**Use of Masks**
- When transporting a patient with TB or rule-out TB, a surgical mask should be placed on the patient
- Use of special N95 respirators is restricted to employees who have been properly fitted for use
  - Any gain or loss of 10 pounds or more, facial injury or injury that changes the contour of the face requires a repeat fit-test
  - The N95 respirator is also used to care for patients with Rubeola, Varicella, or other airborne diseases (SARS, Smallpox, Avian Flu, etc.)