

# Opportunity Partners

## OP-ISS-15: POLICY AND PROCEDURE ON UNIVERSAL PRECAUTIONS AND SANITARY PRACTICES

New 1/1/14

### I. PURPOSE

The purpose of this policy is to establish guidelines to follow regarding universal precautions and sanitary practices, including hand washing, for infection prevention and control, and to prevent communicable diseases.

### II. POLICY

It is the policy of Opportunity Partners to minimize the transmission of illness and communicable diseases by practicing and using proper sanitary practices. Staff will be trained on universal precautions to prevent the spread of blood borne pathogens, sanitary practices, and general infection control procedures. This includes active methods to minimize the risk of contracting illness or disease through individual to individual contact or individual to contaminated surface contact.

### III. PROCEDURE

#### **Care and sanitation of the general program site**

- A. The Designated Coordinator and/or Designated Manager will ensure that the program site including the interior and exterior of buildings, structures, or enclosures, walls, floors, ceilings, registers, fixtures, equipment, and furnishings are maintained in good repair and in sanitary and safe condition. Furnishings (such as furniture and carpet), particularly upholstery, will be routinely inspected and cleaned as necessary. The program site will be kept clean and free from accumulations of dirt, grease, garbage, peeling paint, mold, vermin, and insects.
- B. Any building and equipment deterioration, safety hazards, and unsanitary conditions will be corrected. The Designated Coordinator and/or Designated Manager will be the primary individual(s) responsible for this coordination. Cleaning and disinfecting schedules will be developed by the Designated Coordinator and/or Designated Manager and implemented by staff.
- C. Food will be obtained, handled, and properly stored to prevent contamination, spoilage, or a threat to persons served. Food and drink will not be stored in areas where bodily fluids, hazardous materials, and harmful substances may be present (i.e. bathrooms).
- D. Chemicals, detergents, cleaning supplies, and other hazardous or toxic substances will not be stored with food or drink products or in any way that poses a hazard to persons served.
- E. Each person served will have the following personal care items for their own use, if needed and/or desired. These items will be stored in a safe and sanitary manner to prevent contamination:
  1. Hair comb/brush and hair accessories.
  2. Toothbrush, toothpaste, and floss.
  3. Cosmetics.
  4. Deodorants.
  5. Razors/shavers.
  6. Bath soap/body wash.
  7. Shampoo/conditioner.
- F. Persons served at day service facilities who become ill during the day will be provided with an area to rest if:
  1. The person becomes ill during the day.
  2. The person does not live in a licensed residential site.
  3. The person requires supervision.
  4. There is not a caretaker immediately available. Supervision will be provided until the caretaker arrives to bring the person home.

# Opportunity Partners

- G. If a day services facility provides refrigeration at their service sites owned or leased by the company for storing perishable foods and perishable portions of bag lunches, whether the foods are supplied by the company or the persons served, the refrigeration must have a temperature of 40 degrees Fahrenheit or less.
- H. At day service facilities, drinking water will be provided in single-service containers or from drinking fountains accessible to all persons. This drinking water must be available to all persons served, if a person is unable to request or obtain drinking water, staff must provide it according to each person's individual needs.
- I. The company must establish general written safety procedures that include criteria for selecting, training, and supervising persons who work with hazardous machinery, tools, or substances. Safety procedures specific to each person's activities must be explained and be available in writing to all staff and persons served.

## **Universal precautions and infection prevention and control**

- A. Hand washing is the single most important practice for preventing the spread of disease and infection. Proper hand washing will be completed as a part of regular work practice and routine, regardless of the presence or absence of any recognized disease and infection. Staff are also expected to assist persons served to ensure regular hand washing. Hand washing will occur often and will include thorough use of water, soap, rubbing hands vigorously together for 20 seconds, rinsing and drying completely.
- B. Staff will ensure that their coughs and sneezes are appropriately covered. Appropriately covered means coughing or sneezing into a tissue or paper towel. When these items are not available, staff will cough or sneeze into their elbows. Staff are also expected to assist persons served to understand and use appropriate means to cover their coughs and sneezes.
- C. Gloves will be used as a barrier between hands and any potential source of infection. Gloves must be worn when contact with high risk bodily fluids can be reasonably anticipated. Fresh gloves will be used for each situation and for each person served.
- D. Eye protection may be made available whenever splashes or drops of high risk bodily fluids are anticipated. This can include, but is not limited to, oral hygiene procedures and clean up of large amounts of high risk bodily fluids.
- E. If necessary, a fluid resistant gown may be provided for staff to wear as a barrier during clean up of high volume fluids.
- F. When handling linen and clothing contaminated with high risk bodily fluids, staff will wear gloves at all times. Contaminated laundry will be cleaned in the washing machine and dried in the dryer separate from non-contaminated laundry.
- G. Staff are to use extreme, deliberate precaution in handling contaminated needles and sharps. Contaminated needles will not be bent or recapped. All needles and sharps will be disposed of in an appropriate sharps container.
- H. Specimens obtained for medical testing or procedures containing high risk bodily fluids or other potentially infectious material must be handled with gloves, placed in a sealed container to prevent leakage, and labeled with the person's name and the type of specimen. If refrigeration is required, the specimen will be placed inside a second sealed container and separated from any refrigerated foods.

## **Compliance**

- A. Staff are responsible to adhere to universal precaution procedures. If there are obstacles to the implementation of universal precaution procedures, they will be immediately brought to the attention of the Designated Coordinator and/or Designated Manager. The Designated Coordinator and/or Designated Manager will then

## Opportunity Partners

develop and implement solutions as necessary.

- B. At a minimum, gloves, disinfectant, and appropriate cleaning supplies and materials will be available at the program site. The supervisor and/or Designated Manager will ensure adequate amounts of the infection control supplies after consideration of the program and staff needs.
- C. Staff will receive training at orientation and annually thereafter on universal precaution procedures, infection control, and blood borne pathogens.

### IV. ADDITIONAL PROCEDURES

In addition to the previously described procedures, when applicable, the following additional procedures will be taken for Intermediate Care Facilities for Persons with Intellectual Disabilities (ICF/ID).

A. Each facility will maintain a record of incidents and corrective action related to infections. The Registered Nurse will review this record and ensure that corrective action was implemented as part of the active program for the prevention, control, and investigation of infection and communicable diseases.

B. In addition, the active program will include, but is not limited to:

1. Staff observation of hand washing, when appropriate
2. Changing gloves after working with a person during mealtimes, providing care to a person with an infectious disease
3. The use of aseptic techniques, when appropriate
4. Training for the person served on the prevention of disease transmission

C. If there is suspicion that a staff person may have a communicable disease, the direct supervisor and/or Designated Manager may require that person to have a medical examination.

D. A staff person with a diagnosed communicable disease will not be permitted to work in the facility until a physician certifies that the staff member's condition will permit them to return to work without endangering the health of other staff or persons served.