

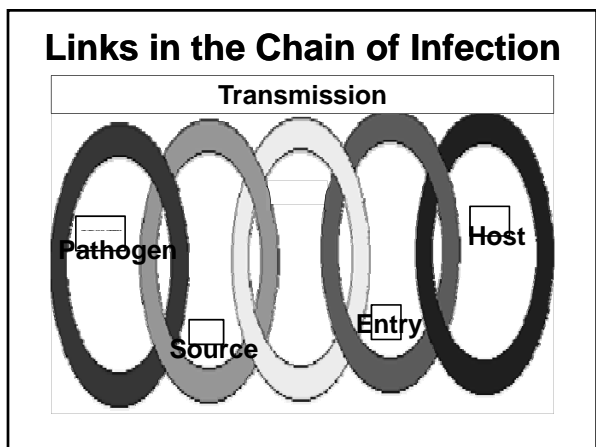
## 2011 Infection Control Update for Home Health Aides and Attendants

**Satellite Conference and Live Webcast  
Tuesday, September 27, 2011  
2:00 - 4:00 p.m. Central Time**




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

### Faculty




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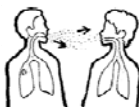

### For Infection to Occur Organism Must:

- Enter the body 
- Grow and multiply 
- Cause a response 

### Routes of Transmission

- Contact
  - Direct 
  - Indirect 
  - Droplet (3 feet) 

### Routes of Transmission

- Vehicle 
- Airborne 
- Vector 

### Hand Washing

- Hand washing/hand hygiene is the first and last step in preventing infections

### How to Wash

- Use warm (not hot, not cold) running water
- Lather soap in hand, then vigorously rub together
  - All surfaces (palms, backs of hands, between fingers, and wrist)
  - Around nail beds and under fingernails
  - Around and under any rings

### How to Wash

- 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 Steps

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

### Hand Washing: Soap

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

### Hand Washing: Soap

- Liquid soap containers may also become contaminated
  - Carry as small 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

### **When to Wash**

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

### **When to Wash**

- After any activity that could contaminate your hands:
  - Emptying trash
  - Sneezing
  - Touching hair
  - Changing diapers
  - Using toilet
  - Emptying vacuum

### **When to Wash**

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

### **Waterless Alcohol Hand Wash 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

### **Waterless Alcohol Hand Wash Products**

- 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

### Hand Washing and Hand Hygiene

- Frequent hand washing will strip the skin of natural oils and lead to dryness, cracking, and irritation
  - Increases the risk of colonization and infection

### Hand Washing and Hand Hygiene

- Lotions and creams should be used with care
- Fingernails should be kept short
  - Any flaking or peeling polish should be removed

### PPE - 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 - Gloves

- Change gloves:
  - If cracked or torn
  - Between tasks and procedures on the same patient
    - Do not wear the same gloves to brush teeth that were used to bathe the patient

### PPE - Gloves

- If a dirtier part of a task was completed before a cleaner part
- After any contact with any material containing a high concentration of bacteria
  - Changing a diaper or cleaning up feces

### PPE - Gloves

- 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
- Do not wash or reuse disposable, single use gloves

### **PPE - Gloves**

- Always wash hands after gloves are removed
- Do not touch your face or adjust PPE with contaminated gloves
- Do not touch environmental surfaces except as necessary during patient care

### **PPE - Gloves**

- Latex gloves are made from natural rubber
- Latex allergies:
  - Skin rash
  - Hives
  - Flushing
  - Nasal, eye and sinus symptoms

### **PPE - Gloves**

- Not only your problem, but possibly your patient's problem, too

### **PPE - Aprons**

- Aprons should be worn with every patient
  - The apron, worn over your uniform, provides a basic barrier to protect you and your patient

### **PPE - Gowns**

- Gowns should be worn during patient care activities when you anticipate your uniform may have contact with blood or body fluids

### **PPE - Face**

- 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

### **PPE - Face**

- **Goggles or safety glasses should fit snugly over and around eyes or eyeglasses**
- **Personal glasses are not a substitute for goggles**

### **PPE - Procedures**

- |                  |                   |
|------------------|-------------------|
| • <b>Donning</b> | • <b>Removing</b> |
| – <b>Gown</b>    | – <b>Gloves</b>   |
| – <b>Mask</b>    | – <b>Goggles</b>  |
| – <b>Goggles</b> | – <b>Gown</b>     |
| – <b>Gloves</b>  | – <b>Mask</b>     |

### **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**

### **Isolation**

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

### **Isolation**

- **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
  - 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**
  - Their blood and body fluids could be infectious to others

### **Hepatitis C**

- 50 million people worldwide
  - 4 million in the United States
- 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

### **Hepatitis C**

- 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
    - Treatment is usually only effective in 10-40% of treated

### **2011 Respiratory Illnesses of Concern**

- Seasonal Flu
- Avian Flu
- Pandemic Flu
  - H1N1

### **Seasonal Flu**

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



### **Pandemic Flu**

- **A virulent (strong) human flu that can cause a global outbreak or pandemic of serious illness**
- **Because there is little natural immunity, the disease can spread easily from person to person**

### **Respiratory Etiquette**

- **When you 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**

### **Infection Prevention**



**Lend Healthcare A Hand  
By Washing Yours™**