
 WELLMED	Effective Date: 02/17/2015	Revision Date(s): 10/2018
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Originating Department: Clinic Operations		
Policy and Procedure Title: Infection Prevention and Control-Standard Precautions Policy and Procedure		

Impacted Areas: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Administration <input type="checkbox"/> ALL <input type="checkbox"/> Bexar Imaging <input checked="" type="checkbox"/> Care Coordination <input checked="" type="checkbox"/> Claims/CBO <input checked="" type="checkbox"/> Clinic Administration <input checked="" type="checkbox"/> Clinic Patient Management <input type="checkbox"/> Comfort Care <input type="checkbox"/> Credentialing <input type="checkbox"/> Customer Service </div> <div style="width: 45%;"> <input type="checkbox"/> Finance <input checked="" type="checkbox"/> HomeCare Dimensions <input type="checkbox"/> Human Resources <input type="checkbox"/> Information Technology <input type="checkbox"/> Membership Accounting <input type="checkbox"/> Network Management/Provider Services <input type="checkbox"/> Pharmacy/Part D <input type="checkbox"/> Quality Improvement <input type="checkbox"/> Sales/Marketing <input type="checkbox"/> Social Programs <input type="checkbox"/> Utilization Management </div> </div>		
Approved By: Carlos O. Hernandez, M.D. Bryan Grundhoefer, MBA, CPA	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <div> Carlos O. Hernandez, MD <small>Digitally signed by Carlos O. Hernandez, MD DN: cn=Carlos O. Hernandez, MD, o=WellMed Medical Group, PA, ou=WellMed, email=caros@wellmed.net, c=US Date: 2018.10.22 10:21:33 -05'00'</small> </div> <hr/> <i>Signature of Approver</i> <i>Title: President, WellMed Medical Group, P.A.</i> </div> <div style="width: 35%; text-align: right;"> Date: </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <div> Bryan Grundhoefer <small>Digitally signed by Bryan Grundhoefer Date: 2018.10.26 07:34:53 -05'00'</small> </div> <hr/> <i>Signature of Approver</i> <i>Title: President, WellMed Medical Management, Inc.</i> </div> <div style="width: 35%; text-align: right;"> Date: </div> </div>	
Reviewed By: Laura Huete, M.D., MBA, FACMQ, CMQ Jimmie Keenan, MSN, RN, FACHE, FAAN	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <div> Laura Huete, M.D., MBA, FACMQ, CMQ <small>Digitally signed by Laura Huete, M.D., MBA, FACMQ, CMQ Date: 2018.10.19 13:08:27 -05'00'</small> </div> <hr/> <i>Signature of Reviewer</i> <i>Title: Senior Medical Director</i> </div> <div style="width: 35%; text-align: right;"> Date: </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <div> Jimmie Keenan <small>Digitally signed by Jimmie Keenan Date: 2018.10.19 16:47:57 -05'00'</small> </div> <hr/> <i>Signature of Reviewer</i> <i>Title: Sr. VP, Enterprise Clinic Operations</i> </div> <div style="width: 35%; text-align: right;"> Date: </div> </div>	
Originated By: Monty LaPierre, MSN, RN	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <div> Monty LaPierre, MSN, RN <small>Digitally signed by Monty LaPierre, MSN, RN Date: 2018.10.19 09:46:20 -05'00'</small> </div> <hr/> <i>Signature of Originator</i> <i>Title: VP, Enterprise Specialty Operations</i> </div> <div style="width: 35%; text-align: right;"> Date: </div> </div>	
Scope of Practice and Regulations: Including, but not limited to, Patient Service Representatives, Medical Assistants, Clinic Administrators, Nurses (LVN/LPN, RN), Advanced Practice Registered Nurses (APRN), Physician Assistants (PA), Physicians (MD, DO), Podiatrists		
Attachments: Exposure Control Plan; Respiratory Protection Program for Healthcare Workers; Donning and Doffing PPE, UHG Bloodborne Pathogen/Needlestick (Sharps) Post-Exposure Procedure, UHG Enterprise Exposure Control Plan		
References: Texas Administrative Code, Title 30, Part 1, Chapter 330, Subchapter Y; Florida Statute Section 381.0098; Florida Administrative Code, Chapter 64-E16; Centers for Disease Control and Prevention		

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<https://www.cdc.gov/hai/pdfs/ppe/ppe-sequence.pdf>

PURPOSE:

To ensure that safe practices are followed to prevent transmission of diseases amongst patients, staff and others.

POLICY:

All WellMed clinical staff and Providers, to include students, volunteers, contractors, temporary staff, etc., will adhere to the practices described in this policy and procedure. Standard precautions are a set of infection control practices used to prevent transmission of diseases that can be acquired by contact with blood, body fluids, non-intact skin (including rashes) and mucous membranes. These measures are to be used when providing care to all patients, whether or not they appear infectious or symptomatic.

DEFINITIONS:

Standard Precautions: Infection prevention practices that apply to all patients, regardless of diagnosis or presumed status, in terms of infection. (This concept expands those provisions covered by the terms “universal precautions” and “body substance isolation”.) Practices are based on the principle that all blood, body fluids, secretions, excretions (except perspiration), non-intact skin and mucous membranes may transmit infectious agents. This also includes hand hygiene and, depending on the anticipated exposure, use of gloves, gown, mask, eye protection or face shield. Equipment or items in use around patients that are likely to have been contaminated with infectious fluids must be handled in such a manner so as to prevent transmission of infectious agents (i.e., should be regarded as infectious).


PROCEDURE:

A. Hand Hygiene

- Hand hygiene refers to both hand-washing with plain or anti-bacterial soap and water, as well as to the use of alcohol-based hand rub (ABHR; 60% to 95% alcohol) to decontaminate hands
- If hands are not visibly soiled, ABHR is the preferred method of hand hygiene when providing health care
- Hand hygiene should be performed before and after contact with a patient, immediately after touching blood, body fluids, non-intact skin, mucous membranes or contaminated items (even when gloves worn during contact), immediately after removing gloves, when moving from contaminated body sites to clean body sites during patient care, after touching objects and medical equipment in the immediate patient-care vicinity, before eating, after using the restroom and after coughing or sneezing into a tissue as part of respiratory hygiene

B. Personal Protective Equipment (PPE)


- PPE items used to create barriers to protect skin, clothing, mucous membranes and the respiratory tract from infectious agents include:
 - Gloves
 - Gowns
 - Masks
 - Respirators
 - Eye and face protection

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- PPE is used as a last resort when work practices alone cannot eliminate employee exposure
- Items selected for use depend on the type of interaction an employee will have with a patient and the likely modes of disease transmission
- Don gloves when touching:
 - Blood
 - Body fluids
 - Non-intact skin
 - Mucous membranes
 - Contaminated items
- Gloves must always be worn during activities involving vascular access, such as performing phlebotomy
- Wear a surgical mask, goggles and/or face shield if there is a reasonable chance that a splash or spray of blood or body fluids may occur to the eyes, mouth or nose
- Wear a gown if skin or clothing is likely to be exposed to blood or body fluids
- Remove PPE immediately after use
 - PPE must be removed in the proper order to prevent contamination or skin or clothing
 - The sequence for removing PPE is as follows:
 - Gloves
 - Goggles or face shield
 - Gown
 - Mask or respirator
- Perform hand hygiene immediately after removing all PPE
- If PPE or other disposable items are saturated with blood or body fluids such that fluid may be poured, squeezed or dripped from the item, discard into a biohazard bag
- PPE that is not saturated may be placed directly in the trash

C. Needlestick and Sharps Injury Prevention

- Safe handling of needles and other sharp devices are components of standard precautions that are implemented to prevent employee exposure to blood borne pathogens
- The Needlestick Safety and Prevention Act mandates the use of sharps with engineered safety devices when a suitable device exists
- Safety devices on needles and other sharps are activated immediately after use
- Used needles are discarded immediately after use and not recapped, bent, cut, removed from the syringe or tube holder or otherwise manipulated
- Any used needles, lancets or other contaminated sharps are placed in a leak-proof, puncture-resistant sharps container that is either red in color or labeled with a biohazard label
- Do not overfill sharps containers
 - Discard container after 3/4 full
- Used sharps containers are collected by an approved vendor that provides the appropriate disposal of biohazard materials
- In the event of an employee needlestick, refer to the following documents for more information:
 - UHG Bloodborne Pathogen/Needlestick (Sharps) Post-Exposure Procedure
 - UHG Enterprise Exposure Control Plan
 - Reporting Communicable Disease Policy and Procedure-TX/FL

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D. Safe Injection Practices

- Outbreaks of hepatitis B and hepatitis C infections in ambulatory care clinics across the United States (US) have prompted the need to re-emphasize safe injection practices
- All health care employees who give injections must strictly adhere to the Centers for Disease Control and Prevention (CDC) recommendations, Safe Injection Practices, which include:
 - Use of a new needle and syringe every time a medication vial or intravenous (IV) bag is accessed
 - Use of a new needle and syringe with each injection of a patient
 - Use of a single dose medication vial for one patient only, whenever possible

E. Respiratory Hygiene/Cough Etiquette

- WellMed employees must follow the guidelines set forth in the Exposure Control Plan and Respiratory Protection Program for Healthcare Workers
- Staff and Providers with signs and symptoms of respiratory illness are encouraged to mask when in patient care or common areas
- Patients and others in waiting rooms or other common areas can spread infections to others in the same area or to employees
- Measures to avoid spread of respiratory secretions should be promoted to help prevent respiratory disease transmission
- Elements of respiratory hygiene/cough etiquette include:
 - Covering the nose/mouth with a tissue when coughing or sneezing, or using the crook of the elbow to contain respiratory droplets
 - Using tissues to contain respiratory secretions and discarding in the nearest waste receptacle after use
 - Performing hand hygiene immediately after contact with respiratory secretions and contaminated objects/materials
 - Asking patients with signs and symptoms of respiratory illness to wear a surgical mask while waiting in common areas or placing them immediately in an examination room or area away from others
 - Provide tissues and no-touch receptacles for used tissue disposal
 - Minimize contact with other patients in waiting areas (e.g., avoid facing chairs toward each other; if patients must face each other, ensure at least three feet distance between chairs)
 - Supplies such as tissues, waste baskets, alcohol gel and surgical masks should be provided in waiting/lobby areas

F. Regulated Medical Waste


- WellMed has contracts in place for the safe and legal disposal of all regulated medical waste
 - Refer to the Medical Waste Management Policy and Procedure regarding safe practices for handling, storing, disposing and overall management of Regulated Medical Waste in the clinic setting

DISCIPLINARY ACTION:

Failure to follow the procedures outlined in this policy may result in disciplinary action up to, and including, termination of employment.

RESPONSIBILITY:

It is the responsibility of all WellMed clinic staff, administrators and Providers to read, understand and follow this policy and procedure.

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POLICY HISTORY

Date Revised	Type of Changes Significant or Minor	List Significant Changes and/or Status of policy
02/17/2015	Significant	Policy created
10/2018	Minor	Policy reviewed