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Health and Safety

I-46

Health Policy and Procedures

Refer also to the following ProAct Policies for more information

- I-70 Red Wing/Zumbrota Safety Policy
- I-70E Eagan/Hudson Safety Policy
- I-59 Behavior management policies
- I-39 Medication administration policies
- I-82 Exposure control plan, policy on elopement
- I-50 Emergency procedures

POLICY AND PROCEDURE ON STANDARD PRECAUTIONS AND SANITARY PRACTICES

PURPOSE

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

POLICY

It is ProAct's policy to minimize the transmission of illness and communicable diseases by practicing and using proper sanitary practices. Staff will be trained on standard 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.

DEFINITIONS

INFECTIOUS DISEASE - An illness due to a specific infectious agent which arises through transmission of that agent from an infected person to a susceptible host. This includes diseases spread through direct contact, airborne or respiratory, blood or bodily fluid, and fecal-oral contamination.

MOIST BODY SUBSTANCES - Include blood; semen; drainage from sores, scrapes, and cuts; feces; urine; vomitus; respiratory secretions; saliva; heavy perspiration, and tears.

STANDARD PRECAUTIONS are designed to reduce the risk of transmission of pathogens from moist body substances. They are used for the care of all persons regardless of their diagnosis or presumed infection status. Standard precautions apply to blood, all body fluids, secretions and excretions, non-intact skin, and mucous membranes. They include: use of personal protective equipment, hand washing, use of personal care equipment, and environmental hygiene and control.

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 at ProAct , if needed and/or desired. These items will be stored in their lockers in a safe and sanitary manner to prevent contamination:
- Hair comb/brush and hair accessories
 - Toothbrush, toothpaste, and floss
 - Razors/Shavers
 - Deodorants
- F. **Persons served will be provided with an area to rest if:**
- The person becomes ill during the day.
 - The person does not live in a licensed residential site
 - The person requires supervision
 - There is not a caretaker immediately available
 - Supervision will be provided until the caretaker arrives to bring the person home
- G. **If ProAct provides refrigeration at service sites owned or leased by ProAct for storing perishable foods and perishable portions of bag lunches, then whether the foods are supplied by ProAct or the persons served, the refrigeration must have a temperature of 40 degrees Fahrenheit or less.**
- H. **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. **ProAct 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.**

Standard 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 members are not responsible for handling sharps. There is a sharps disposal container in the medication/health room for individuals who self-administer or self-test. In the event that staff members inadvertently handle a sharp item that is contaminated with blood, i.e. broken glass, it would be handled as any blood exposure incident.
- 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.
- I. Staff are responsible to adhere to standard precaution procedures. If there are obstacles to the implementation of standard 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 develop and implement solutions as necessary.
- J. At a minimum, gloves, disinfectant, and appropriate cleaning supplies and materials will be available at the program site. The Designated Coordinator and/or Designated Manager will ensure adequate amounts of the infection control supplies after consideration of the program and staff needs. A sanitizer and disinfectant product should be used when wiping food handling surfaces (tables, counters) or items that could go in a person's mouth. For more information, consult the guidelines copied from the Hennepin County manual which can be found in the ProAct Safety Manual.
- K. Items soiled with moist body substances must be bagged in plastic bags and sealed for disposal-- in regular trash. If so soaked with blood that blood can be squeezed out or so caked as can be scraped off, place in biohazard-labeled bag to be disposed of by medical waste facility.
- L. Persons assigned to do laundry should have any open skin areas, rash, dermatitis, chapped, or abraded skin areas covered by clothing or bandage. It is the supervising staff's responsibility to ensure that the person wears gloves and plastic apron when doing laundry and is instructed in adequate handwashing technique.
- M. If ProAct staff have a parenteral (E.G., needlestick or cut) or mucous membrane (E.G., splash to the eye or mouth) exposure to moist body substances or have a cutaneous exposure involving blood or prolonged contact with blood, especially when the exposed skin is chapped, abraded, or afflicted with dermatitis, cleanse involved area with warm soap and water immediately following. (See I-82 Exposure Control Plan for procedures) An assessment of risk of infection will be made and steps taken if further investigation or treatment is necessary. ProAct's medical consultant will be consulted for recommended action if person served is known to have an infectious disease.
- N. Staff members are encouraged to report to the Director of Programs and Services any immunosuppression or other clinical condition that may increase their risk of acquiring infection. The Director may require a medical statement from a physician and may restrict work placement depending on the health risk of the staff member.
- O. Staff education will be made available on an ongoing basis as needed. Resources available to staff

include, but are not limited to, communicable disease procedure guidelines through Goodhue County Health & Human Services, and Health Counseling for the Eagan/Hudson Site.

- P. There will be an annual infection control update provided by Goodhue County Health & Human Services, or Health Counseling.
- All new employees will have infection control training within the first week of employment.
 - Job descriptions for those positions involving known risk exposure will so state; the plan for dealing with risk exposure is that ProAct uses standard precautions.
1. All staff with occupational exposure to blood will be offered the Hepatitis B series after receiving training regarding bloodborne pathogens and within ten (10) days of their assignment.
 2. All employees who have been exposed to blood or other potential infectious materials (OPIM) must complete (Form A-30) or appropriate form. This information will be kept in the personnel file for the duration of that person's employment plus thirty years.
 3. All persons being served by ProAct who require assistance with personal care will have a plan in their records that describes what services are to be provided, why, and by whom. The plan will further state that ProAct uses standard precautions.
 4. When a person with HIV infection requires special handling or infection control precautions based on his or her health status, the nurse consultant should recommend special handling orders based on standard medical practice. These recommendations should be made to the Director of Programs and Services.

GUIDELINES FOR EXCLUDING PERSONS SERVED FROM PROGRAM

Persons who have the following symptoms should be excluded from the worksite or facility until a qualified health professional has certified the symptoms are not associated with an infectious agent or they are no longer a threat to the health of other persons at the worksite or the symptoms have subsided.

For the mildly ill person exclusion should be based on whether there are adequate facilities and staff available to meet the needs of both the ill persons and other persons in the group. Questions re: the need to exclude should be directed to ProAct's Director of Program and Services, or ProAct's PHN Consultant through Goodhue County Health & Human Services (651-385-6100) or RN Consultant, Susan Vanderbecke at (612-865-2466) The Eagan/Hudson facility. For hospitalized or post operative individuals a doctor's order to return to work is required.

FEVER

Axillary temperature of 100 degrees Fahrenheit or higher or oral temperature or a temperature taken in the ear of 101 degrees F. or higher; especially if accompanied by other symptoms such as vomiting, sore throat, diarrhea, headache, lethargic, stiff neck or undiagnosed rash. An accurate temperature is in an "at rest" state in normal environment conditions. (not just finished working, or with blankets on etc.) It is not after administration of fever reducing medications. Due to body temp being normally lower in the morning, clients should be fever free for 24 hours before returning to ProAct.

VIRUS/COLDS

If accompanied by fever or are too sick to participate, send home. If cough is severe, difficulty breathing or person has history of respiratory disorders, or lasts more than two weeks, consult with caregiver re: medical follow up.

DIARRHEA

After two episodes contact caregiver to rule out possible causes. If not related to use of stool softeners,

antibiotics or food, give Kaopectate per doctor's orders. If other symptoms accompany diarrhea ie; fever, vomiting, obvious signs of illness exclude until well enough to return to worksite and diarrhea is controllable.

VOMITING

Two incidents of vomiting not accompanied by fever, cramping, diarrhea, assist the person to rest and call caregiver to discuss cause. If discomfort is persistent, or accompanied by other signs of illness, send home.

SORE THROAT

Sore throat, especially when fever or swollen glands in the neck are present.

SKIN PROBLEMS

Rash - Skin rashes, undiagnosed or contagious.

Infected Sores - Sores with crusty, yellow or green drainage which cannot be covered by clothing or bandages.

ITCHING

Persistent itching (or scratching) of body or scalp.

APPEARANCE

Person looks or acts different than usual: unusually tired, pale - consult with caregiver.

BEHAVIOR

Lacking appetite, confused, irritable, difficult to awaken that differs from individual's usual behavior - consult with caregiver.

UNUSUAL COLOR

Eyes or skin - yellow (jaundice)
Stool - Grey or white
Urine - Dark, tea colored

These symptoms can be found in hepatitis and should be evaluated by a physician.

EYE REDNESS/DRAINAGE

Exclude only if accompanied by white or yellow discharge that causes matting of the eyelids, and then for 24 hours after treatment starts or discharge stops.

DISEASE REPORTING

MINNESOTA REPORTING RULE

Many diseases must be reported to the health department according to Minnesota Rule (MCAR 4605.7040, 4605.7080). Some communicable diseases can be very serious, so it is important that you call right away, even if you think that someone else has already made a report. If in doubt, call ProAct's consulting nurse or the Minnesota Department of Health at 1/877/676/5414 (24/7). A list of reportable diseases and how to make a report can be found at: <http://www.health.state.mn.us/divs/idepc/dtopics/reprtable/rule/poster.html>. The list is posted in the medication room and is current as of the date of this document.

CHOKING INCIDENT PROCEDURE FOR PARTICIPANTS AT PROACT AND/OR COMMUNITY SITES

- A. In the event of a choking incident, staff will administer the Heimlich maneuver as taught in CPR training.
- B. At the onset of a choking incident, another staff or other individual will call 911.
- C. Emergency responders will assess the affected consumer for further choking rescue, and transport to ER.
- D. If the participant has recovered from the choking incident and the Heimlich maneuver by the time the first responders arrive, they (the first responders) will be asked to assess the participant as to whether or not to transport to the ER to rule out any complications from the incident. Note: if the participant is not transported, ProAct is not billed for services.
- E. An appropriate report (A-30 and/or R-107 as needed) will be written.
- F. The resident care provider, parent or guardian and the ProAct nurse (Eagan) will be notified of any choking incident immediately.

GUIDELINES FOR PARTICIPANTS RETURNING TO WORK/PROGRAM AFTER ILLNESS OR INJURY

Participants returning to ProAct for services following a medical absence that requires a doctor's care or hospitalization must notify the Case Coordinator of their impending return a minimum of one business day prior to that return. A discharge summary or documentation about their medical condition must be e-mailed or faxed to the Case Coordinator a minimum of one day prior to their return which clearly states any restrictions and physician's approval to return. Participants without appropriate documentation will not receive services until the appropriate documentation has been received by ProAct.

