

# Cornerstone Behavioral Healthcare

## HS.3A Infection Control

It shall be the policy of Cornerstone Behavioral Healthcare (CBH) to establish procedures to follow in the prevention and spread of contagious, infectious, or communicable diseases, and to educate and train employees with regard to those procedures. Policy will be based on current recommendations of the Centers for Disease Control and Prevention (CDC), the State of Maine, and OSHA standards. Infection control policies will apply equally to all employees, and it is the responsibility of all employees to observe precautions set forth in this policy as they carry out their job functions.

### **General Guidelines:**

As there are many undiagnosed potentially infectious situations prevalent in the general population, CBH will observe universal precautions at all times. This approach to infection control is to treat all blood and body fluids as if known to be infectious.

All staff with direct client contact will receive orientation and annual training in Infectious Disease, Blood Borne Pathogens and Universal Precaution Prevention/Control and Management Policy and Procedures.

Exposure to blood borne pathogens will be defined as direct contact with blood or other body fluids through percutaneous inoculation (needle stick) or direct contact with an open wound, non-intact skin or mucous membrane during the performance of their work responsibilities.

- Any employee with symptoms or signs of communicable disease *may* be asked to leave work and *may* not be permitted to return to work until he/she has provided Human Resources with a signed and dated physician's certification that he/she is free of any contagious, infectious, or communicable disease, or that he/she may return to work. Such certification shall be placed in the employee's personnel file
- It shall be the responsibility of all CBH employees to maintain a sanitary, healthful environment and to be watchful of exposing others to known contagious, infectious, and communicable diseases
- It is recommended that employees have Hepatitis B vaccinations and the Tuberculosis Test to protect themselves (it is not a requirement)

### **Procedures:**

- Hand washing is the single most important step in infection control. Hands must be washed before and after all client contact, after using the bathroom, and before handling any food
- In cases where an employee of CBH has a cut or mucous membrane contaminated with blood or other potentially infectious materials from a client, the contacted skin areas must be immediately washed with soap and water and any contacted mucous membrane flushed with water. The supervisor must be notified immediately, an accident report completed, specifically The Blood Borne Pathogens Incident Report Form, and confidential evaluation and medical follow-up, as needed, shall be obtained
- In cases where exposure of intact skin to other potentially infectious materials occurs, the area must be immediately cleansed with soap and water, but need not be reported. Please

# Cornerstone Behavioral Healthcare

## HS.3A Infection Control

complete a Blood Borne Pathogens Exposure Incident Report form and contact the CEO or designee to determine if further medical intervention will be necessary

- If there is a need to handle items that are soiled with body fluids or to clean surfaces that are contaminated with body fluids, latex gloves shall be used in this process (any staff member with an allergy to latex will report this to the Health and Safety Personnel who will obtain non-allergic disposable gloves for their use). Such contaminated articles shall be cleaned with soap and water and disinfected with a 1:10 dilution of household bleach or other appropriate disinfectant. Materials used to clean up spilled body fluids will be disposed of by double bagging them and placing the double-bagged materials in the outdoor trash bin. Under no circumstances will staff dispose of contaminated materials in any indoor trash receptacle
- All CBH employees that have been possibly exposed to body fluids will immediately report this possible exposure to their direct supervisor who will complete a Blood Borne Pathogens Exposure Incident Report form and contact the CEO or designee to determine if further medical intervention will be necessary. If the CEO or designee determines further medical intervention is necessary, the staff member will be offered, at agency expense, a medical evaluation, at a medical facility of the agency's choice, within 24 hours of a possible exposure
- Should further medical interventions be necessary, CBH will follow State and Federal guidelines for payment of those medical costs
- In accordance with OSHA regulations, all documentations involved with a possible exposure will be kept in a confidential file for a period no less than 30 years
- If there is a possible exposure from a client source, CBH will, upon advice of a medical professional, advocate to have the client's/guardian's consent to testing to rule out HBV (hepatitis) and/or HIV (AIDS virus)

### **Airborne Infections Policy and Procedures:**

CBH supports an Infection Prevention (IP) Program designed to ensure the safety of patients, staff, and visitors within its healthcare environment by reducing the risk of acquiring a healthcare-associated infection (HAI). The process is based on published guidelines from CDC. The IP Program maintains a culture of safety that promotes zero tolerance for both the occurrence of preventable HAIs and for noncompliance with established infection prevention and control practices.

If an employee reports that they have been exposed to a communicable disease, CBH will provide appropriate notification to staff. Supervisors will notify the CEO or designee. They will also notify supervisors in the affected area. All due diligence will be used to protect the confidentiality of employees. The supervisors will also notify their staff that an employee has been exposed to a communicable disease and take appropriate action to mitigate the potential spread of infection in their supervisory area. Cleaning procedures for respective location should be consulted.

All policy and procedures will be developed by leadership team and approved by CEO or designee. Employees are encouraged to report issues of IP risk to supervisors. Supervisors are

# Cornerstone Behavioral Healthcare

## HS.3A Infection Control

required to report these issues in the Leadership Meeting. The goal is to make a safe environment for both our clients and staff.

### **Using PPE:**

- Identify and gather the proper PPE, and don it in the following order:
  - Gown: Ensure choice of gown size is correct
  - Wash hands: Perform hand hygiene using hand sanitizer or washing in warm water for 20 seconds
  - Isolation gown: Put on isolation gown. Tie all ties on the gown. Assistance may be needed by other healthcare personnel
  - Facemask: Mask ties should be secured on crown of head (top tie) and base of neck (bottom tie). If mask has loops, hook them appropriately around your ears
  - Protect face: Put on face shield or goggles if available
  - Gloves: Put on gloves. Gloves should cover the cuff of gown

### **Removing PPE:**

- Remove PPE in the following order:
  - Gloves: Ensure glove removal does not cause additional contamination of hands. Gloves can be removed using more than one technique (e.g., glove-in-glove or bird beak)
  - Gown: Untie all ties (or unsnap all buttons). Some gown ties can be broken rather than untied. Do so in gentle manner, avoiding a forceful movement. Reach up to the shoulders and carefully pull gown down and away from the body. Rolling the gown down is an acceptable approach. Dispose in trash receptacle after double bagging
  - Facemask: Leave facemask on after removing rest of equipment to protect against CD transmission for remainder of visit
  - Remove face protection: Carefully remove face shield or goggles by grabbing the strap and pulling upwards and away from head. Do not touch the front of face shield or goggles
  - Wash hands: Perform hand hygiene using hand sanitizer or washing in warm water for 20 seconds

### **COVID-19 SPECIFIC PRECAUTIONS**

CBH is committed to providing a safe and healthy environment for everyone. For the COVID-19 Pandemic, requirements previously stated should be followed, as well as current Maine CDC guidelines.

#### **Facility Care**

- Hand sanitizer will be kept at check-in windows
- Waiting room seating will be kept six feet apart
- Waiting rooms will be kept clear of magazines, toys, etc., that could be handled by clients and spread infectious illness
- Waiting rooms and door handles will be wiped down by staff every two hours
- Bathrooms within CBH's control will be wiped down every two hours

# Cornerstone Behavioral Healthcare

## HS.3A Infection Control

### Definition of “Fully Vaccinated”

Staff are considered “fully vaccinated” when they have received a full COVID-19 vaccine series.

Proof of full vaccination must be submitted to Human Resources (HR), which in turn will store them in a confidential protected file as this is Employee Protected Health Information (PHI).

CBH will utilize CDC’s existing green, yellow, and orange color scheme to communicate current risk levels, which will determine the practice for each office for the week. Current risk level by county can be found here <https://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html>.

### Employees Testing Positive for COVID-19

- Will be required to notify their supervisor, provide documentation of the positive test, and follow Maine CDC guidelines to determine when to return to work

### Employees Known COVID-19 Exposure as defined by Maine CDC

- Will be required to notify their supervisor and follow Maine CDC guidelines to determine when to return to work
- Available earned time may be used

### Employee Preventive Requirements:

- All employees that work face-to-face with clients must be fully vaccinated
- Follow CDC guidelines for current risk level for your area

### Client Screening:

During the COVID-19 emergency, CBH will maximize the use of Telehealth services in all programs. In-person contact with clients will be on an as needed basis.

- All clients will be screened at time of scheduling, and again by phone before entering CBH’s facility on day of appointment. Then temperature will be taken in suite at check-in. If a client’s screening shows any risk, or they refuse to comply with screening, they will not be allowed to enter our facility
- Clients will be required to maintain a six (6) foot separation
- Unless there is an ADA requirement for additional assistance, only the client will be allowed into the office
- All clients that enter CBH’s facility, and anyone required to accompany them, will be required to wear a mask.
- Clients with known exposure to COVID-19 will receive services through Telehealth only and will not be allowed to return to our facility until they satisfy CDC-recommended quarantine and are symptom-free



CEO

11/16/2022

Date