

September 2020 Bloodborne (BBP) Pathogens Education: Narration script

Title page

Welcome to the September 2020 bloodborne pathogens education, we're glad you're here! If you have audio capability, you can listen to the narration, but audio is not required to complete this module. When you're ready to begin, select "click here" at the bottom of the page. If you are using a mobile device, you may swipe this page to the left to continue.

Topics covered in this course

Before we review the topics, let's review a few navigation tips so that you have a great experience exploring the content pages. There are navigation buttons provided at the bottom of the page for backward and forward movement. Also, a pause button is provided to pause the narration. If you are using a mobile device, you may swipe a page left to go forward and swipe right to go backward, unless otherwise instructed. A copy of the narration can be accessed by selecting the "Click here to access the narration script" button. Now, let's review the topics.

The following topics will be covered in this course:

- OSHA BBP Standard
- Novant Health Exposure and Control plan
- Epidemiology, symptoms and transmission of BBP disease
- Hepatitis B vaccine
- Engineering, work practice and personal protection equipment (PPE)
- Housekeeping, laundry, signs and labels
- Tasks that may lead to exposure
- Exposure to:
 - BBFE
 - Actions to take and explanations
 - Post-exposure evaluation

On the following page, we'll begin by reviewing OSHA standards regarding bloodborne pathogens

Setting the standards

In order to protect team members against exposure to bloodborne pathogens, OSHA (Occupational Safety and Health Administration) created specific regulations known as the Bloodborne Pathogen Standard (BBP).

Novant Health's Exposure Control Plan

To comply with OSHA and the Bloodborne Pathogen Standard, Novant Health has a written exposure control plan (located on the I-Connect homepage under "Policies & procedures").

Key components of our Novant Health Exposure Control Plan:

- Standard Precautions AKA Universal Precautions
- Standard Precautions are the minimum infection prevention practices that apply to all patient care, regardless of suspected or confirmed infection status of the patient, in any setting where health care is delivered.

BBP defined

Bloodborne pathogens (BBPs) are germs carried by blood, body fluids and other potentially infectious material (OPIM) that can cause disease.

OPIM (Other potentially infectious material)

OPIM can include:

- Breast milk, semen and vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, amniotic fluid, saliva in dental procedures.
- Saliva, urine, feces, sweat, tears, respiratory/nasal secretions, vomitus and gastric fluids can NOT transmit HIV or Hepatitis UNLESS they contain visible blood

How is a BBP transmitted?

The following are transmission routes for bloodborne pathogens:

- Percutaneous injuries such as needle sticks and puncture wounds
- Tasks and other activities that could result in a splash or splatter of blood to eyes or other mucous membranes
Non-intact skin

The most common BBP exposure in health care is a needle stick.

Common bloodborne pathogens

Click on each disease listed below to see more details about the symptoms:

HIV is the virus that causes Acquired Immunodeficiency Syndrome (AIDS)

- Symptoms include:
- Flu-like symptoms
- Fever
- Diarrhea
- Fatigue
- Swollen lymph nodes
- Night sweats

The Hepatitis B virus poses the greatest risk to healthcare workers after exposure. It may cause severe illness, liver damage, and death.

Symptoms Include:

- Fatigue
- Jaundice
- Abnormal liver tests
- Nausea
- Abdominal pain
- Loss of appetite

Did you know that hepatitis B virus can live up to seven days at room temperature on an environmental surface in dried blood?

The Hepatitis C virus is recognized as a significant BBP risk to healthcare workers.

Symptoms include:

- Anorexia
- Vague abdominal discomfort
- Nausea
- Vomiting
- Jaundice

Hepatitis B vaccination – key things to know

- Cost - Protect yourself against hepatitis B by participating in the free vaccination program.
- Safety and efficacy - The hepatitis B vaccination is a non-infectious vaccine prepared from recombinant yeast cultures, rather than human blood or plasma. There is no risk of contamination from other bloodborne pathogens nor is there any chance of developing HBV from the vaccine.
- Method of administration - Hepatitis B vaccination is a series intramuscular injections.

Hepatitis B vaccination – *continued*

- Benefit of vaccination - The majority of those vaccinated will develop immunity to the hepatitis B virus.
- Availability - Every job category in Novant Health is offered the Hepatitis B vaccine. You can accept the vaccine at any time, even if you have declined this offer in the past.
- Declination - In the event you decline, a declination form must be completed.

Additional resources:

- Visit OSHA website for the Fact Sheet
- Contact EOH for more information

Engineering and work practice controls

Engineering controls and work practices are designed to eliminate or reduce the risk of exposure to the lowest feasible extent by using a device or design that isolates or removes the bloodborne hazard or modifies the way a risky practice or procedure is performed.

Select each item listed below to view more details:

Engineering controls (this list is not all inclusive):

- Hand hygiene facilities (i.e. sinks)
- Sharps Safety devices
- Sharps containers – easily accessible and located close to the area of use
- Needleless IV systems
- Sheathed or retractable needles, non-breakable plastic vacuum and capillary tubes
- Biosafety cabinets/hoods used in the laboratory
- Regulated waste containers that are closeable, leak proof and identified with a biohazard label
- Transport containers
- Specimen transport bags
- Biohazard labeled instrument containers with latches to prevent spills and splashes

Work practice controls (this list is not all inclusive):

- Perform hand hygiene as soon as possible after glove removal or contact with body fluids
- All PPE removed as soon as possible after leaving work area and placed in designated container for storage, decontamination or disposal
- Safe handling and disposal of sharps in sharps containers appropriately:
- Used needles and sharps shall not be sheared, bent, broken, recapped or resheathed by hand. If recapping is unavoidable, use single handed technique or device designed for this purpose
- Use approved safety sharp devices and always activate the safety mechanism
- Change sharps containers as indicated by facility procedure, do not attempt to overfill containers
- Do not eat, drink, apply cosmetics, smoke, or handle contact lenses in work areas where blood exposure could occur

Work restrictions:

Employees with exudative lesions, weeping dermatitis, or any condition which prevents them from washing their hands (e.g., casts, splints) are prohibited from all direct patient care and from handling patient care equipment until the condition resolves.

Personal protective equipment (PPE)

- PPE is special clothing or equipment worn by a team member for protection against a potential hazard:
 - PPE is donned when exposure to blood/body fluids is anticipated based on task being performed
 - Use of PPE when engineering and work practice controls cannot eliminate the risk
- PPE must be provided by the employer at no cost and available in appropriate sizes.
- PPE includes, but is not limited to: gloves, gowns, face shields, masks, eye protection and resuscitation bags.

Personal protective equipment (PPE) – *continued*

- "Appropriate" PPE does not permit blood or OPIMs (Other potentially infectious material) to pass through to, or reach the employee's work clothes, street clothes, undergarments, skin, eyes, mouth or mucous membranes under normal conditions and for the duration of its use.
- If a team member's uniform becomes contaminated with blood or OPIM (Other potentially infectious material) during work, refer to the work attire policy for proper laundering, replacement or disposal

Personal protective equipment (PPE) – *continued*

- Refer to the work attire policy
- There are certain pieces of PPE that may be reused. These items must be cleaned and disinfected according to manufacturer recommendations.
- Check with your department leader on what is appropriate for reuse. (Examples: goggles, utility gloves, etc.)

Personal protective equipment (PPE) – *continued*

Remember these key points:

- Keep PPE in all departments/units where exposure may occur
- Remove PPE (immediately or as soon as possible) if it has been penetrated by blood or body substances
- Remove all PPE prior to leaving the work area
- Perform proper hand hygiene after removing PPE

Safe handling-disposal tips:

Place in appropriate container for disposal for:

- Trash
- Biohazard container if saturated with blood or OPIM (other potentially infectious material)

Requirements for housekeeping

- Keep a clean and sanitary work environment to prevent contact with blood or OPIM (Other potentially infectious material)
- Determine and implement an appropriate written schedule for cleaning and methods of decontamination
- All equipment, environmental and work surfaces are to be cleaned with an EPA (Environmental Protection Agency) approved disinfectant
- Appropriate PPE will be worn when cleaning or disinfecting

Laundry – standard precautions

In accordance with Standard Precautions, all used laundry is handled and treated as contaminated.

This includes the following practices:

- Handle soiled linen as little as possible
- Bag soiled linen at the site of use
- Place wet contaminated laundry in leak-proof, labeled or color-coded containers before transport. Use (specify either red bags or bags marked with the biohazard symbol) for this purpose.
- Wear appropriate PPE while handling soiled linen
- Do not drag bagged soiled linen on the floor

Hazard communication:

The universal biohazard symbol is used to identify biohazardous materials. Team members should place biohazardous materials or other potentially infectious materials (OPIM) in containers marked with the biohazard symbol.

Biohazard labels will:

- Be fluorescent orange or orange-red with lettering or symbols in a contrasting color
- Contain the biohazard symbol or the word “Biohazard”

All containers of regulated waste, refrigerators and freezers containing blood or other potentially infectious material and other containers used to store, transport or ship blood or other potentially infectious material shall be clearly labeled with the international biohazard symbol or placed in a red container.

See Infectious or Regulated Medical Waste policy

Exposure determination

- All employees who hold positions determined to have occupational exposure (reasonably anticipated contact with body fluids resulting from performance of duties) are entitled to the protection of this standard.
- Each Department Director/Manager reviews all his/her department's job classifications and determines if there are employees who may have occupational exposure. IP is consulted as necessary.
- Category I or category II is assigned to the position:
 - Category I: Task and/or activity that is reasonably anticipated to result exposure to blood or OPIM.
 - Category II: Task and/or activity that is NOT reasonably anticipated to result in exposure to blood or OPIM.

Inadvertent/Suspected exposures

- An exposure that occurs despite trying to use all engineering controls and workplace controls.
- A potential exposure may occur when a team member has contact with blood or other body fluids while working.
- Exposure may occur by:
 - Needle stick, puncture or cut
 - Contact inside of mouth, inside of eyes, inside of nose
 - Open wounds or broken skin

Acute care team members

Steps to follow for a suspected exposure:

1. Immediately wash the affected area with soap and water. If eye splash, go the nearest eyewash station or sink and flush the affected eye(s) with water for 5 minutes.
2. Notify your immediate supervisor and/or nursing supervisor and follow your location's process to report a blood and body fluid exposure (BBFE).
3. Print the 'Leader and Employee BBFE handouts' to determine if a true BBFE occurred.
4. Report exposure to Care Connections at 336-231-0933 **BEFORE** entering a BBFE standing order set.
5. Draw SOURCE patient labs.
6. Enter iVOS/Ventiv injury report so that labs are covered on the source patient under Workers Compensation.

Ambulatory care team members

Steps to follow for a suspected BBFEs:

1. Immediately wash the affected area with soap and water. If eye splash, go the nearest eyewash station or sink and flush the affected eye(s) with water for 5 minutes.
2. Notify your immediate supervisor and/or nursing supervisor and follow your location's process to report a blood and body fluid exposure (BBFE).
3. Ask the SOURCE patient to remain at your clinic.

4. Print the 'Leader and Employee BBFE handouts' to determine if a true BBFE occurred.
5. Call Care Connections at 336-231-0933.
6. Follow Care Connections instructions to draw SOURCE patient labs.
7. Enter iVOS/Ventiv injury report so that labs are covered on the source patient under Workers Compensation.

Post-exposure follow-up action items

- Identify route of exposure.
- Document circumstances of exposure.
- Source patient testing (Unless already known) specifically HIV, Hepatitis B and Hepatitis C testing results.
- Offer team member baseline testing.
- Perform post-exposure prophylaxis.
- Provide counseling and evaluation of reported illnesses.
- The employer shall obtain and provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation.

Additional notes regarding BBFEs include:

- Only call Care Connections once per BBFE to avoid increased cost and confusion.
- Care Connections is only for reporting BBFEs and notification of source patient rapid HIV results.
- EOH is responsible for post-exposure management.
- A list of outlying clinics that cannot use the system-wide BBFE process can be found on the EOH main page on I-Connect.

Resources/Post-test

If you have questions about the content or BBP- related practices, contact your unit leader or the house supervisor. If they are not available, use the following resources:

- For BBP resources and EOH contact info, click the blood drop tab on the far right of the I-connect homepage.
- Contact the Employee Occupational Health (EOH) team.
- Call Care Connections with 24/7 availability at 336-231-0933 for assistance with BBP questions
- Contact the Infection Prevention team.

Quiz time!

You must score 80% on the following quiz to complete this education. DO NOT skip any questions or the course will not complete.

Course completion

Congratulations! You have completed your 2020 BBP education requirement. Your completion acknowledges that you will appropriately apply the information shared in this course in your job duties.

If you have questions, please follow up with your leader.

Close the browser window displaying this course to move it to your completed transcript.