

Universal /Standard Precautions and Bloodborne Pathogens

A training for Child Care providers

2005



What are Universal/Standard Precautions?

Standard Precautions apply to blood, other body fluids containing blood, semen, and vaginal secretions. Standard Precautions do not apply to feces, nasal secretions, sputum, sweat, tears, urine, saliva and vomit unless these contain visible blood or are likely to contain blood.

Universal (Standard) Precautions:

- MAY include protective barriers such as gloves, gowns, aprons, masks, or protective eyewear, which can reduce the risk of exposure of skin or mucus membranes that could come in contact with materials that may contain blood-borne pathogens while the child care provider is providing first aid or general care.



Transmission Based Precautions:

- are required, in addition to Standard Precautions, where airborne, droplet and contact transmission of infectious organisms may occur. Common transmission based precautions include hand washing, cleaning and sanitation of surfaces.



FOUR WAYS TO SPREAD GERMS (Transmission of Germs)

1. Airborne or respiratory route
2. Direct contact route
3. Fecal-oral route
4. Blood contact route

AIRBORNE OR RESPIRATORY GERMS are spread via droplets through:

- NOSE
- MOUTH
- SINUS
- THROAT
- LUNGS
- CONTAMINATED
TISSUES OR FABRIC

EXAMPLES: TB, Colds,
Chicken Pox



DIRECT CONTACT

GERMS are spread through directly touching an infected area or body fluid such as:

- **SALIVA**
- **MUCUS**
- **EYE DISCHARGE**
- **PUS or WEEPING**

EXAMPLES: Conjunctivitis (pink eye), impetigo, lice, chicken pox



FECAL-ORAL ROUTE **GERMS** are transferred from stool to host via:

HANDS

FOOD

MOUTHED TOYS

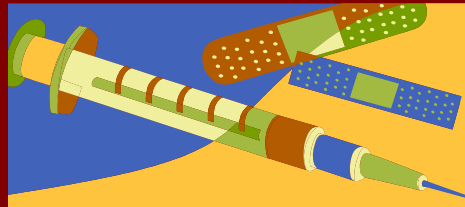
TOILET

DIAPERS, ETC.

EXAMPLES : Hand, foot and mouth
disease
Hepatitis A
Rotavirus



BLOOD CONTACT transmission can occur when individual comes in contact with infected blood or infected body fluids



- **EXAMPLES:** Hepatitis B
Hepatitis C
HIV/AIDS

HEPATITIS B (HBV)

- **Occurs when the HBV virus enters the body, multiplies in the blood and infects the liver**
- **Can result in mild illness or permanent liver damage**
- **Most individuals recover**
- **Death does occur in rare cases due to liver failure**
- **Hepatitis B is the cause of up to 80% liver cancer**

SYMPTOMS OF HEPATITIS B

- Weakness
- Fatigue
- Loss of appetite
- Nausea
- Abdominal pain
- Fever
- Headache
- Occasional yellowing of skin and whites of eyes

HEPATITIS B

- **Individuals may show no symptoms but may infect someone else**
- **There is no cure for Hepatitis B**
- **There is a vaccine available to help prevent Hepatitis B**

HEPATITIS C (HCV)

- **The most common chronic blood-borne infection – modes of transmission include:**
- **Injecting drug use account for 60% of cases**
- **Other modes include sexual exposure**
- **Shared cocaine straws**
- **Occupation**
- **Hemodialysis**
- **Perinatal**

Hepatitis C (HCV) IS NOT SPREAD BY

- Sneezing
- Hugging
- Coughing
- Food or water
- Sharing eating utensils or
- Drinking glasses or casual contact
- There is no vaccine against hepatitis C



HOW HEPATITIS IS SPREAD

- **Infected person to uninfected person during anal, vaginal, oral sexual intercourse**
- **IV drug users that share needles**
- **Tattooing with unspecialized equipment**
- **HBV/HCV Infected mothers passing virus to their unborn child**
- **HBV/HCV Infected mothers passing the virus in breast milk**
- **Blood to Blood transmission thru blood transfusion, breaks in skin or thru mucous membranes**

HIV/AIDS

- **An infection caused by several related retro viruses**
- **HIV attacks T cells whose function is to protect the immune system**
- **Most people with HIV develop antibodies within 6-12 weeks after infection but can still transmit the virus during this “seroconverting” stage**

HIV/AIDS is NOT spread through:

- **Casual contact with infected people**
- **Holding or hugging infected people**
- **Sharing food, utensils, clothing, bed linens, art equipment, (play-dough, clay or water play)**
- **Kissing on the lips or cheeks**
- **Coming into contact with perspiration, tears, vomit, urine, or stool that does not contain visible blood**
- **Shaking hands**
- **Sharing restroom**
- **Bathroom fixtures**
- **Drinking fountains**
- **Mosquitoes**
- **Eating with carriers**

HOW HIV INFECTION IS SPREAD

- **Infected person to uninfected person during unprotected anal, vaginal, or oral sexual intercourse**
- **Infected intravenous drug users when they share needles and syringes contaminated with blood**
- **Women infected with HIV can pass the virus to their unborn child. As the virus can be transmitted through breastfeeding, breastfeeding is NOT recommended to infants of infected mothers**
- **Blood-to blood transmission when the infected blood enters the blood stream by blood transfusion, breaks in the skin, mucous, or needle sticks**

WHAT ARE SOME TASKS IN CHILDCARE THAT MAY POSE A RISK TO INFECTION WITH BLOOD-BORNE INFECTION?

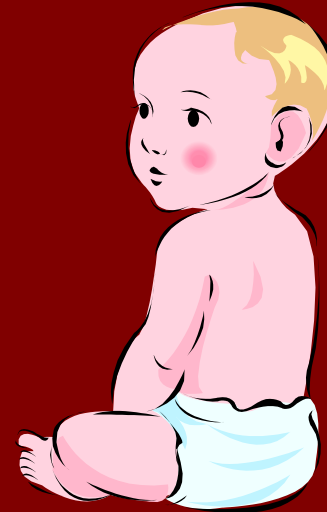
- **Bleeding injuries**
- **Biting**
- **Loose tooth**
- **Changing band-aids or dressings**
- **Handling breast milk**
- **Any task that involves visible blood**
- **Performing CPR**

STANDARD PRECAUTIONS: How to Practice

1. Handwashing
2. Gloves
3. Personal Protective Equipment (PPE)
4. Sanitizing
5. Waste Disposal
6. Immunization

HANDWASHING – WHEN?

- Upon arrival at work
- Before handling food, preparing bottles, feeding children
- After using toilet
- After assisting child using toilet
- After changing diapers
- After contacting child's body fluids, diapers, runny noses, spit, vomit



When to wash your hands (continued)

- **After handling pets or pet objects**
- **After cleaning up a child, bathroom items or toys**
- **Before giving medications to a child or self**
- **After removing gloves used for any purpose**
- **Before going home**



What about Children?

- Upon arrival at daycare
- Before and after eating
- After using toilet or having diaper changed
- After playing on playground
- After handling pets or pet objects
- Before going home



How to wash your hands

- **Use warm running water and a mild liquid soap**
- **Wet hands and apply a small amount (dime or quarter size) of soap**
- **Rub hands vigorously until a soapy lather appears (about 20 seconds)**
- **Make sure to scrub between fingers, under fingernails, tops and palms of hands**

How to wash your hands (continued)

- **Rinse hands under warm running water**
- **Dry hands with a clean, disposable towel**
- **Turn off the faucet using the towel as a barrier between your clean hands and the dirty faucet**
- **Discard the towel in a plastic lined foot pedal operated trash can**

Protection through Gloves

- Offers a barrier to protect skin which may have small cuts or cracks
- Gloves should be disposable and made of Latex, vinyl or heavy-duty rubber
- Gloves can have microscopic holes or tears – **WASH YOUR HANDS AS SOON AS YOU REMOVE THE GLOVES**

When to wear Gloves

- Whenever there is visible blood (first aid, changing bandages)
- When changing diapers, wiping noses, cleaning up vomit or toileting accidents.
- Gloves should be available for whoever wants to wear them for protection.

Remember!

PROPER
HANDWASING IS
THE MOST
EFFECTIVE WAY
OF PROTECTING
YOUR SELF,
YOUR FAMILY
AND THE
CHILDREN
AGAINST
INFECTION



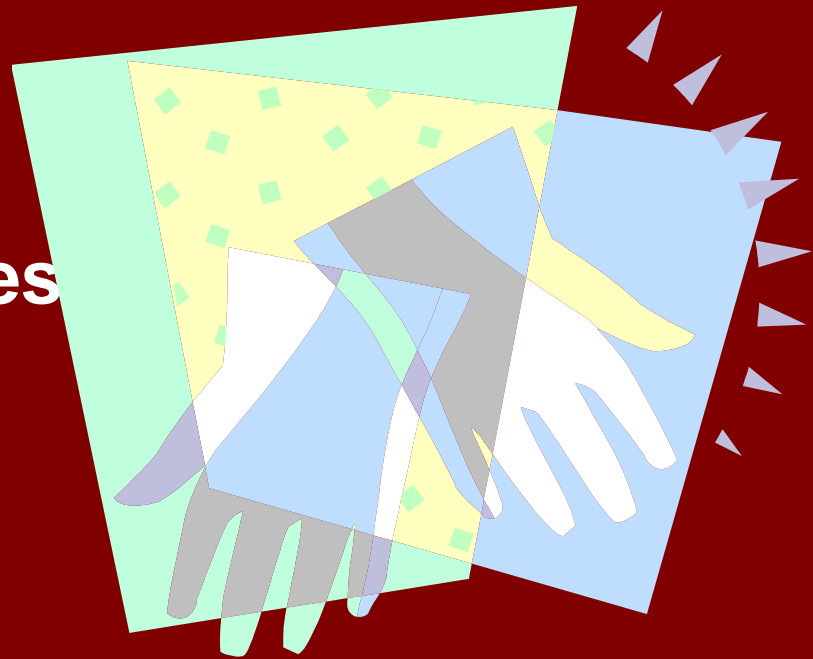
Directions for Gloving

- Only put gloves on clean hand(s)
- Remove by grasping *outside* at wrist, pull inside out; with ungloved hand grasp on *inside* at the wrist and pull inside out over hand



Gloves should be available:

- In each classroom
- At diaper changing area
- With first aid supplies
- On transportation vehicles



SHARPS

- All sharps must be disposed of in a container that is closable, puncture resistant, leak proof and labeled with bio-hazard label
- All needles, broken glass should be discarded into this container



Cleaning and sanitizing procedure for blood/body fluids containing blood

1. Gather all needed equipment – gloves, paper towels, plastic bags, cleaning solution and sanitizing solution
2. Put on disposable gloves
3. Use generous amount of paper towels to soak up the liquid part of the fluid.
4. Wash area with soap and water or other cleaning agent and rinse with water
5. Place the paper towels and gloves in a separate plastic bag, close and tie the bag

Cleaning and Sanitizing procedures (continued)

6. Spray with sanitizing solution, ECDC uses ENDBAC, until glistening wet. Allow to air dry.
7. Wash Hands.
8. Place closed and tied bag in outside trash can at ECDC-ND and at ECDC-SMC it is at the back of the children's bathroom.
9. WASH YOUR HANDS AGAIN.

Cleaning Sanitizing procedures (continued)

- POROUS SURFACES –
Use paper towels to soak up the liquid. Carpets and rugs can be cleaned with standard carpet cleaning chemicals.
 - Either discard or launder other fabrics through the machine alone with laundry detergent, then again using the 10:1 bleach solution to soak the fabric and laundry equipment for at least 2 minutes



Soiled Clothing

- Place child's or staff's soiled clothing in plastic bag and labeled to be washed using proper laundering technique.
- Child's clothing should be sent home with parents.



Be Aware.....

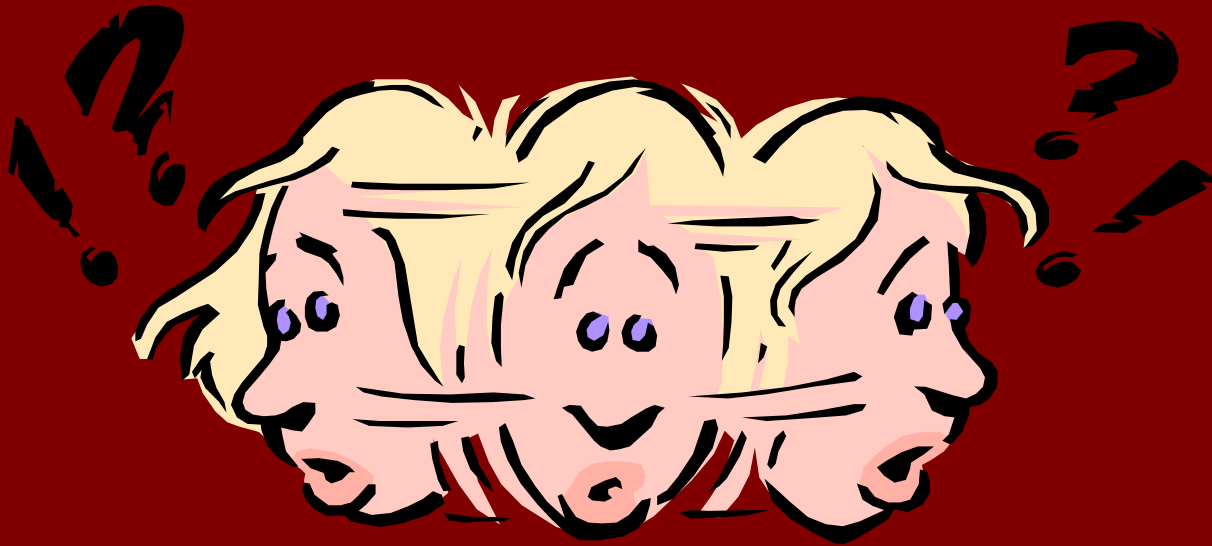
- The use of commercially pre-saturated bleach wipes to sanitize surfaces is not recommended.
 - These wipes have not been tested for effectiveness in sanitizing diaper changing surfaces found in child care
 - The contamination of the wipe during use may not be sufficiently controlled by the bleach solution in the wipe



Who is Responsible

- All ECDC professional staff and paid college students will support children with first aid and in the clean up of any body fluids.
- Volunteers, Practicum Students and Students at ECDC due to lack of pediatric First Aid training will not perform First Aid or clean up any body fluids. Please inform ECDC staff immediately if first aid is needed.

Questions? Please ask an
ECDC program director or
classroom teacher.



THE END

