

Mental Health/Psychiatry

Ref:(a) APIC, Infection Control and Applied Epidemiology Principles and Practice, Mosley, 1996

These policies have been established to provide a workable guide for hospital staff for the prevention, detection, and control of infections acquired in the mental health setting.

Definitions.

- Nosocomial Infection. A nosocomial infection in the Mental Health facility is any infection, or infestation, preventable or non-preventable, which occurred or to which the patient was exposed because of facility related care delivery, or which the medical physician determines to be hospital acquired or nosocomial.
- Community Acquired Infection. A community acquired infection in the Mental Health facility is any infection or infestation which was present or incubating, or which the patient was exposed prior to or at the time of admission, on an outing or leave of absence or which the medical physician determines to be community acquired, including those which are chronic, recurrent or the result of non-compliance with medical therapy.

Infection Control Practices.

- Staff:
 - Hands are to be washed before and after patient contact, and before performing any invasive procedures.
 - Personnel will follow “Universal/Standard Precautions” to prevent and minimize exposure to blood and body fluids.
 - Personal protective equipment (PPE) will be readily available and worn for protection when indicated.
 - Personnel will be responsible for teaching patients to wash their hands before meals and after toileting, and to cover their nose and mouth when coughing and sneezing.
 - Personnel will ensure a clean and neat patient care environment.
 - Eating and drinking are not allowed in patient care areas.
 - All sinks will have a functional soap dispenser with soap and paper towels. Areas without adequate handwashing facilities will have Hibistat towellettes or an appropriate alternative.
 - Trends and problems identified will be reported to the Infection Control Department.
- Employee Health:
 - Employees with signs/symptoms of infection (i.e., skin lesions, diarrhea, URI) must report to their supervisor. The supervisor will refer them to Occupational Health for appropriate action.
 - In the event of inadvertent exposure to patients with a communicable disease or an occupational injury (i.e., needlestick), the employee will report this to their supervisor and will be referred to Occupational Health for treatment and follow-up as soon as possible.
- Personal Hygiene:
 - All personnel will maintain a high-level of personal cleanliness.
 - Uniform or civilian attire worn on the job will be maintained in a neat and clean manner.

- In-service Education:
 - All personnel will participate in in-service education and will be trained in mandatory OSHA, JCAHO training requirements.

Isolation.

- General Information:
 - Because of the potential for incubating an undiagnosed infection, all patients shall be considered as potentially infectious from the day of admission to the day of discharge. “Universal/Standard Precautions” will be followed on all patients.
 - Personnel will wear gloves for contact with blood, body fluids, non-intact skin, mucous membranes, open wounds, or drainage.
 - Isolation will be followed in accordance with the Infection Control Manual. A copy of this manual is maintained in all patient care areas. Questions regarding isolation should be directed to the Infection Control Department.
 - Communicable diseases identified will be reported to the Preventive Medicine Department.

Patient Care Equipment.

- Disposable items are utilized as much as possible. Items are marked with the patients name and discarded upon their discharge.
- Sterile packs and trays are not processed or stored on-site. They are obtained on an as-needed basis from CPD.
- Clean/sterile supplies are stored in a dry, clean area away from contaminated areas or supplies. Supplies should not be stored on the floor. Shelves should be elevated at least 8-10 inches off the floor and 18-20 inches from the ceiling.

General Policies.

- Needles, syringes, and sharps are to be disposed of uncapped and uncut into puncture resistant sharps containers in accordance with hospital policy. Sharps containers will be conveniently located.
- Staff will report promptly (ASAP) all occupational injuries or infectious exposures to Occupational Health for treatment and follow-up.
- Soiled linen will be placed in an impervious linen bag to contain used/soiled linen.
- Regulated medical waste will be disposed of in accordance with hospital policy. Refer to the Infection Control Manual.
- Refrigerators will have thermometers for proper temperature control. Temperatures are checked daily. Biological refrigerators should be checked every shift. Food, biologicals and specimens will be separated.
- Patients will be observed for appropriateness in the use of the washer and dryer when laundering their clothes. Washer and dryers will be cleaned on an as-needed basis.

Housekeeping.

- Housekeeping is the responsibility of staff personnel if the area is not covered under the housekeeping contract. Any EPA approved hospital grade disinfectant may be used for environmental cleaning.

- Floors and other horizontal surfaces will be cleaned daily with an EPA approved hospital grade disinfectant.
- All blood and body fluid spills will be cleaned promptly with a bleach (1:10) solution or an EPA approved disinfectant. Gloves and appropriate protective equipment will be worn.
- Questions or concerns should be referred to the Infection Control Department.