

# LOS PINOS FIRE PROTECTION DISTRICT STANDARD OPERATING PROCEDURE



TITLE	NUMBER	EFFECTIVE DATE	REVISION DATE
INFECTION CONTROL – POST RESPONSE (HOUSEKEEPING)	512	December 1 <sup>st</sup> , 2009	

## I. Equipment

### a. Unit – station cleaning and decontamination.

- i. All responders and appropriate support staff will be trained in decontamination procedures as outlined in this policy.
- ii. Appropriate cleaning products for decontamination are provided and should be used according to instructions in all cases.
- iii. Reserve equipment will be maintained to replace grossly contaminated equipment if needed.
- iv. Contaminated equipment and vehicles will be cleaned at the hospital whenever possible.
- v. When gross contamination occurs, the Captain will be notified by the member(s).
- vi. The senior EMS provider in conjunction with the shift Captain will determine the extent of the contamination and determine if the crew has been exposed.
  1. If a crew member has had an exposure, the shift Captain and EMS Director will be notified and appropriate medical treatment and evaluations will be done in accordance with the post exposure procedures outlined in the infection control section.
  2. Vehicles shall not be placed back in service until they have been decontaminated.
  3. The crew will not be placed back in service with contaminated clothing or gear.

## EQUIPMENT/UNIT CLEANING AND DISINFECTION PROCEDURE

Cleaning and disinfection guidelines vary depending upon the medical condition of the patient transported, and the type of contamination, if any. Disinfection procedures are dictated by need.

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If the patient transported has no outward symptoms of infection (e.g., active coughing, or sneezing) and is not a high risk of exposure (e.g., copious amounts of body fluids), disinfection procedures are minimal. If the patient exhibits any signs of being an exposure risk, the guidelines that follow should be used after transport is complete.

## DAILY CLEANING:

The ambulance should be cleaned and inspected daily for visible signs of contamination. Minimally, this should include all patient contact areas, walls, ceilings, and floors. Use any cleaner to remove dirt and gross contaminants; however, the final disinfection of the surfaces should be accomplished using only approved disinfectant.

Remember: Wash first, then disinfect!!!

## THOROUGH CLEANING

When transporting an infectious or high-risk patient, specific procedures should be followed to avoid cross-contamination:

**Disposal:** All disposable biohazardous waste must be properly disposed of in biohazard bags and then in an appropriate biohazardous disposal receptacle at the hospital or station. Sharp items such as needles and vials must be disposed of using a puncture-proof container, and may not be placed in garbage cans.

Gloves shall be worn whenever handling contaminated waste, or whenever cleaning equipment and vehicles which may have been contaminated.

Disinfect by wiping: reusable equipment that will not have invasive or mucous membrane contact (e.g. backboard, stretcher) must be cleaned thoroughly, then wiped down with an approved disinfectant solution. If the equipment will come in contact with a patient's skin or mucous membranes, it must be rinsed thoroughly with clean water after disinfection. If the equipment has moving parts that become contaminated, procedures listed below for disinfecting by soaking should be used. If the moving parts involve biomedical equipment or objects that cannot be soaked, saturation of the area should be performed using the approved disinfectant.

Floor, wall, ceiling, squad bench, and other areas that become grossly soiled should be cleaned and disinfected following the same procedures.

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Gloves must always be worn when performing any disinfecting functions, and proper precautions should be used as indicated by the chemical company's MSDS sheets or packaging label.

Disinfect by soaking: reusable equipment that has or may come in contact with mucous membranes or been used during invasive procedures must be disassembled, cleaned thoroughly, and then placed in an approved detergent disinfectant for the prescribed length of time recommended by the manufacturer.

Bleach soak: Twenty (20) minutes if the item will not come in contact with the patient's mucous membranes. Thirty (30) minutes, if the item will come in contact with the patient's mucous membranes.

Always rinse thoroughly after disinfecting equipment.

Gloves and masks must always be used when performing any disinfecting function using hazardous chemicals, and proper precautions should be used as indicated by the chemical warning labels and MSDS sheets.

Airborne contamination: After removal of the patient, the ambulance must aired for a minimum of ten (10) minutes to allow dispersal of the airborne contaminant. After the unit has been aired, the procedures for disinfection by wiping should be followed for all exposed surfaces. Items contaminated with infective material (e.g. oxygen tubing, mask, etc.) must be treated as biohazard, following the cleaning or disposal procedures previously mentioned in this section.

## UNIT CLEANING / DISINFECTION GUIDE

1. Dispose
  - a. Dispose potentially contaminated materials in a bag, seal and then place in an approved waste container. Sharps such as needles, stylets, and vials should be disposed of in proper sharps containers.
2. Clean and disinfect by wiping
  - a. Item must be cleaned and all debris removed. AFTER initial cleaning, wipe down with cloth soaked in an approved disinfectant. If object will come in contact with patient's mucous membranes, rinse with clean water and allow to air dry, otherwise just air dry. Surface areas of ambulance should be sprayed / wiped with approved disinfectant and allowed to air dry.

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3. Clean and disinfect by soaking
  - a. Item must be thoroughly cleaned with all debris removed, and soaked in detergent disinfectant.
  - b. The product manufacturer's instructions for usage should be followed. After disinfection, items must be rinsed thoroughly.
4. Linens
  - a. Items such as linen that are contaminated will be placed in linen hampers at the hospital for cleaning and decontamination.
  - b. Personal clothing, BP cuffs, etc.,

## CONSUMING ITEMS IN PATIENT CARE AREAS

There will be no eating, drinking, smoking, applying cosmetics, applying lip balm, nor handling of contact lenses in any patient care area. Any infraction of this policy will be dealt with firmly.

It is necessary to isolate the driving compartment from the patient care compartment of the unit.

It is imperative that the driving compartment be kept free from contamination from blood and body fluids. This will allow eating, drinking, applying cosmetics, applying lip balm, handling contact lenses, and like activities to be conducted in the cab.

## DRIVING COMPARTMENT

The cab (driving compartment) of our ambulance units is a separate work area from the patient compartment. Because of this distinction, we must have a separate procedure for appropriate activities in the driving compartment. This distinction is for the safety and welfare of our members, and is designed to prevent the driving compartment from being exposed to bloodborne pathogens.

All contaminated personal protective equipment is to be removed and hands cleaned with appropriate hand sanitizer or alcohol based hand cleaner prior to entry into the driving compartment of the unit.

In the unexpected event the driving compartment may possibly have been exposed to bloodborne pathogens, it is imperative that no eating, drinking, applying cosmetics, application of lip balm, nor handling of contact lenses be done in that work area until it has been thoroughly disinfected.

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All units will be supplied with appropriate sanitizer to thoroughly clean any small accidental contamination. Gross contamination may require a thorough cleaning and disinfection at the station.

It should be made clear that any breach of the above modified procedures may not only jeopardize one's health, but will also subject the member to disciplinary procedures. As this is a change in industry practices, a change in training or behavior will need to occur. To drive this change we must ensure that absolutely no deviations from this policy be made. This must be strictly enforced.

## LAUNDRY

Station One maintains a washer and dryer in the utility room. This is primarily for laundry (sheets, towels, etc). Occasionally personal clothing will become contaminated and need to be laundered. The laundry may be done using the following procedure.

- Washer and dryer must be empty of all other laundry;
- Contaminated laundry shall be placed in the washing machine with laundry detergent and disinfectant. Hot water must be used to help destroy bacteria. Once the wash has been done, a second wash cycle with no laundry, should be run using a 10% bleach solution. All this must be accomplished before other laundry can be put in the washing machine.

Signs will be placed on the washing machine when this process is done.

*Larry Behrens*

Larry Behrens, Fire Chief

December 1<sup>st</sup>, 2009

Date