

POLICIES AND PROCEDURES MANUAL

KEYSTONE COMMUNITY RESOURCES, INC.

KEYSTONE INDEPENDENT LIVING, INC.



Policy Title:
Hepatitis B Virus (HBV)

Chapter:

Effective Date:
7/1/1992

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Policy Number:

Executive Director

SCOPE:

- Chapter 6400 – Community Homes For Individuals With Mental Retardation

INTRODUCTION:

1. Hepatitis B Virus (HBV) is systemic illness causing inflammation of the liver. A Hepatitis B carrier is a person who has not developed antibodies against HBV and remains infectious to others indefinitely. In most cases however, the presence of the virus is only temporary and antibodies develop which prevent further infection.
2. Surveys have identified a prevalence of HBV infection in certain groups who are considered to be at increased risk of acquiring Hepatitis b. Those groups include residents and staff in facilities for persons with mental retardation.
3. Hepatitis B virus can be transmitted directly from person to person, or indirectly from person to environment (utensil or toothbrush) to person. Clearly then, certain forms of behavior; biting and scratching, sharing toilet articles, or exposure to menstrual blood can be prime source of transmission.
4. Current thinking indicates that Hepatitis B is not spread through the following: drinking fountains, swimming pools, toilet seats, common school contact, social contact in workshops, coughing, sneezing or contact with the urine and feces of infected persons. The casual and brief contact which occurs within community facilities such as social clubs, theater, public transportation systems and restaurants does not increase the risk of catching Hepatitis B above that of the general population.
5. The control of Hepatitis b in settings where HBV carriers interact involves a strategy that includes; education, personal and environmental hygiene measures, screening and vaccination.
6. Keystone fosters a positive educational environment by providing necessary information and education to residents and their families, employees and volunteers. Notices, written information, and in-services sessions will be conducted periodically utilizing medical professionals.
7. Persons can reduce the risk of exposure to HBV if hygiene recommendations are implemented. These include: emphasis on clean environment and careful personal hygiene. Careful hand washing is the single most important personal hygiene practice.

8. General measures to prevent possible transmission include:
 - Personal items, such as towels, toothbrushes, scissors, nail clippers, razors, and soap should not be shared. Scrupulous personal hygiene must be followed by both residents and staff.
 - Careful hand-washing, using plenty of soap and water shall be carried out, especially after contact with blood or saliva.
 - If a HBV carrier bites another person, the area of the bite should be thoroughly cleansed with soap and water and person's physician contacted to consult about the possibility of infection.
 - Open skin lesions that might ooze serum or might provide a portal of entry for the virus are covered. Efforts should be used to minimize chapping when possible.
 - Items soiled by blood or saliva of the carrier are thoroughly cleaned with detergent and water or discarded. Blood-soiled items such as: sanitary napkin should be sealed in bags as an appropriate protection.
 - No specific procedures need to be observed for the disposal of feces, soiled diapers, bedding, etc. from HBsAG positive individuals. Blood contaminated objects should be disinfected without damaging the contaminated surface. The most commonly suggested disinfectant is a solution of sodium hypochlorite (household bleach) at a recommended strength of one quarter cup of bleach per gallon of water. The solution should be made fresh daily and used to clean areas that have been soiled with blood or saliva.
 - Disposable gloves will be worn when handling items soiled with blood and when caring for oozing skin lesions.
 - Disposable needles and syringes should be used when injections must be given or blood drawn, and care taken to avoid accidental puncture when disposing of needles.
9. Routine cleaning of dishes, eating utensils, toilet facilities, swimming pools, and water fountains is adequate to eliminate the risk of disease transmission. Dishes and eating utensils may be washed in a dishwasher or by hand at normal water temperatures (120 degrees Fahrenheit) without the use of any special disinfectant. They do not need to be washed separately. Disposable gloves should be used if dishes are soiled with blood or saliva.
10. Automatic washers and dryers can be used. Laundry can also be handled as usual; although, items contaminated with blood should be handled with gloves.
11. HBV carriers who do not practice appropriate hygiene should not assist in preparing or serving food. HBV carriers can prepare and handle food without risk of transmission to food consumers provided the food handler understands that blood is potentially infectious and takes appropriate precautions when a bleeding incident occurs. Although, food itself is not a factor in the spread of HBV, mouth-to-mouth sharing of food can be and should be prohibited as should sucking on other objects (pencils, toys, etc.) that may be contaminated.

DISCUSSION: