## PHYSICAL THERAPY DEPARTMENT POLICY AND PROCEDURE

| INFECTION CONTROL POLICY | Policy No.: | 600 |
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|  | Revised: | June 2021 |
|  | Supersedes: | June 2018 |
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PURPOSE: To prevent the spread of communicable diseases and/or infection within the hospital.

POLICY: The PT Department will follow Infection Control policies developed and distributed through the Infection Control Policy and Procedure Manual (available on the Intranet under Policies and Procedures, listing by department, Infection Control) and all current Expected Practices (EP) for all procedures which require the use of infection prevention and control practices and use of chemical disinfectants for infection prevention and control. The PT department will align practices to support the Infection Control Policy No. IC 100 (Attachment A). If a question arises on best practice for appropriate infection control, the Director of Infection Control will be consulted.

Current expected practices: Refer to current Expected Practices (EP) posted in the DHS Share point accessible from the Rancho intranet -> DHS Home page-> COVID-19 Resources, Testing, Vaccine \& Mandates photo link -> Expected Practices link as well as the Rancho Sharepoint -> Coronavirus COVID-19 photo link-> Guidelines \& Resources. These sites provide the most up to date guidelines, recommendations and expected practices for management of the COVID-19 pandemic,

## PROCEDURE:

To prevent the spread of communicable diseases and/or infection within the hospital, all patients known or suspected to be infectious will be managed following the Infection Control policies IC 103A (Attachment B) and IC 103B (Attachment C) and IC 103C (attachment D). However, all patients should be treated as potentially infectious with universal precautions observed including effective hand hygiene performed before and after contact. All personnel must follow routine precautionary measures to eliminate the spread of infection. Infection control practices may be updated as needed via Expected Practices (EPs). Staff are to ensure they are following the most current EPs as emerging information is available to ensure safety of staff, patients and visitors.

The following are guidelines:
A. Hand hygiene procedures will be conducted by all persons before and after contact with all patients, and after use of restrooms. Gloves should be worn if contact with blood or body fluids from any patient is anticipated. Hands

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hygiene will be performed after removal of gloves.
B. Gown, mask and face shield/goggles are available in all patient areas for use when designated as appropriate or recommended Personal Protective Equipment (PPE) in the most current EP (see note above to access current EPs) .
C. All reusable equipment will be wiped clean with a hospital-approved disinfectant after each patient use. Equipment may also be wiped down with a hospital approved disinfectant on-grounds or off-grounds during home visits or community outings.
D. Appropriate isolation measures will be used when indicated, as outlined in the most current EP or in the Departmental Policy and Procedure No. 607.1, "Procedure for Infection Control for Isolation Cases", and in the Infection Control Manual located on the Intranet.
E. Therapy items that require laundering and are not appropriate for industrial laundering service will be washed in the washers located in JPI or the outpatient area. These items might include but are not limited to; cushion covers, alter G shorts, hot pack covers etc. The laundering process will follow infection control processes outlined in Infection Prevention and Control Manual in the policy entitled "Washer/Dryer".

1. The procedure is for the therapy staff member to run an empty load of wash with 1 ounce of bleach, set on high load (water level) and hot water setting following the bulk wash.
2. The therapy staff member will document the process on the log form maintained in the laundry room.

In addition to departmental procedures, the policies and procedures as outlined in the Infection Control Manual and the Blood-borne Pathogen Exposure Control Plan, distributed by the Infection Control Department will be routinely followed by all personnel.

Current expected practices: Due to rapidly emerging evidence and the need to be able to provide rapid updates on infection control practices across the organization, the use of Expected Practices has been implemented. These are accessible to all on the sharepoint sites for DHS and Rancho as follows: Refer to current Expected Practices (EP) posted in the DHS Share point accessible from the Rancho intranet -> DHS Home page-> COVID-19 Resources, Testing, Vaccine \& Mandates photo link -> Expected Practices link as well as the Rancho Sharepoint -> Coronavirus COVID-19 photo link-> Guidelines \& Resources. These sites provide the most up to date guidelines,

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