

9. Health Related for SCAN Staff and Clients

PROCESS:

The health of clients and staff of SCAN is of prime importance. Therefore, all SCAN staff shall comply with the health procedures of the agency. It is essential that all staff know what to do in the case of medical emergencies, accidents or injuries, contagious exposure, blood borne pathogens or other emergencies which may endanger the health of staff and clients.

A. Contagious Illness

SCAN realizes that staff with contagious temporary illnesses, such as colds and other viruses, need to continue with normal life activities, including working. However, SCAN also seeks to maintain a healthy workplace for our clients and staff. In deciding whether a staff or client with an apparently short-term contagious illness may continue to work or visit, supervisors must confirm that the individual has been fever, diarrhea and vomiting free for 24 hours. If a staff disputes SCAN's determination that a risk exists, the employee must submit a statement from his or her attending health care provider that the staff's continued presence poses no risk to themselves, other employees or clients. SCAN staff are urged to contact Human Resources with questions about the possible contagious nature of another employee's temporary illness.

B. Communicable Diseases including Pandemic Influenza

- 1) Because of potential exposure to communicable diseases, staff will follow standard precautions. Examples of some of the most communicable diseases include measles, influenza, viral hepatitis -A, viral hepatitis – B, HIV, AIDS-related complex, and tuberculosis (TB).
- 2) All staff are encouraged to wash their hands often and thoroughly. All direct service staff are required to wash their hands at the beginning and end of each visit. Cough etiquette instructions will be given to all staff and should be followed in office and in -home visits.
- 3) SCAN staff are to ensure routine cleaning of items that frequently come into contact by clients.
- 4) When staff are alerted to an illness of a service participant, the SCAN staff and their supervisor will consult the Communicable Disease Guideline Chart for Child Care Providers to determine signs/symptoms, service restrictions, control measures, and contagion period. The chart is available through the Indiana FSSA Office of Early Childhood & Out of School Learning at <https://www.in.gov/fssa/files/Communicable%20disease%20chart%202017.pdf>
The chart will be posted throughout the agency as appropriate.
- 5) SCAN will provide respiratory masks to clients who visit in the offices and show symptoms of flu and/or colds or respiratory disease. Respiratory masks are also available for staff who choose to wear them in homes where these same respiratory diseases may be.
- 6) Staff will receive education on the signs and symptoms of influenza, modes of transmission, hand hygiene, cough/sneeze etiquette, and when to stay home when you are ill by the Nurse Consultant or the Emergency Management Team.

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- 7) Any staff member who has been exposed to a communicable disease or exhibit signs or symptoms after exposure must report that immediately to his/her Supervisor and to the Human Resource Department, who will send the staff member to the appropriate Occupational Health provider in the region for an examination.
- 8) If there is any chance of exposure to a potentially serious disease or Pandemic Influenza, all prudent steps will be taken by the agency to prevent the spread of the disease. The Emergency Management Team, and Parkview Nurse Consultant will function as the Pandemic Flu Team.
- 9) The Parkview Nurse Consultant will function as the communication link between the CEO, the appropriate County Board of Health, Center for Disease Control and any other local Flu governmental management Team.
- 10) During a Pandemic Flu, the Emergency Management Team (see Standard Operation Procedures section 8 & 12) will convene to determine:
 - a. if a shutdown or services or offices is necessary (see Standard Operation Procedures 9, 12 & 13),
 - b. the procedures for notification of staff and clientele,
 - c. restrictions of potentially exposed staff and clientele,
 - d. accommodations for special needs (including pregnant and immune-compromised) staff and clientele,
 - e. flexible work sites or hours,
 - f. community and site-specific containment or quarantines and
 - g. sufficient infection control supplies are obtained.
- 11) Community containment or quarantines may be directed by the Health Commissioners within SCAN's service areas. The CEO and the Nurse Consultant will function as the points of contact for the Health Commissioners. The Chief Operations Officer will arrange for protections and/or security of the facilities.
- 12) All general information regarding the SCAN's Pandemic emergency response will be delivered to external funding sources and organizations (media, DCS, Hospital systems, and emergency responders) by the Marketing/Community Relations department spokesperson.
- 13) Communication with staff, clients and vendors regarding SCAN's pandemic status will be done in a timely and consistent way. This includes providing messages on answering machines at offices, notifying trainees and other visitors for meetings at offices, and ensuring Supervisors are consistently notifying clients of any changes in procedures which may affect their services.
- 14) Each office location must have sufficient infection control supplies which include hand antibacterial soap and sanitizer, tissues, trash cans with liners, respiratory masks, bottled water, bodily spill response kits, toilet paper, paper towels, bleach and other disinfectant, and garbage bags. Emergency supplies of bottled water, flashlights, batteries and portable radios may also be maintained. The Facilities department will maintain a list of all suppliers and critical supplies.
- 15) An interruption of business to affected clients or areas may occur if there is a contagious disease (for example, active Tuberculosis) or Pandemic Flu in the household or in the office where potentially exposed clients visit. It is the expectation that staff will continue to provide referrals to help the family and

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problem solve by phone and other indirect means. High risk situation contacts must be approved by the nurse consultant or appropriate Administrator. Supervisors are responsible for tracking cancellations due to flu-like or other contagious diseases and department leaders will monitor and review any billing exemption or adjustment processes as needed with guidance from the CEO.

C. Medical Emergency/Accident

1) Medical Emergency on Premises

- a) Notify the closest person to dial 911 and then notify the Receptionist that a call has been made. Ambulance service may be dispatched with the consent of the person who needs assistance. If the individual is not conscious or able to give his/her consent, then an ambulance will be dispatched.
- b) Administer First Aid or utilize the AED as indicated and available by staff trained in First Aid/CPR until emergency response personnel have arrived.
- c) The staff with the medical emergency will be sent to the nearest hospital of their choice if they do not utilize an ambulance service.
- d) The staff who was involved MUST fill out an Accident/Injury Report and submit it to the Human Resource Department; and the HR Dept. will submit a copy to the CEO. If the staff cannot complete the report, the supervisor who responded to the initial request will complete the report until the staff is able to complete one.
- e) The highest-ranking Supervisory staff (in the absence of Supervisory staff, the highest-ranking staff person) available on the premises will be in charge and assign staff as necessary including "crowd control" until assistance arrives.

2) Accident on Premises

- a) A management Team member will determine steps such as First Aid/CPR, use of the AED or calling 911.
- b) Notify the Receptionist to contact HR and the staff's Supervisor, Manager or Administrator (or if none of them is available, another Supervisor) immediately.
- c) The Supervisor will notify the CEO and the Administrator of the Program involved in the Incident.
- d) The HR Department will send the injured staff to the appropriate occupational health service provider.
- e) The most senior staff available on the premises will be in charge and assign staff as necessary including "crowd control".
- a) The staff who was involved MUST fill out an Accident/Injury Report and submit it to Human Resources who will submit a copy to the CEO. If the staff cannot complete the report, the supervisor who responded to the initial request will complete the report until the staff is able to complete one.

3) Injury, accident or medical emergency in the field or off premises

- b) If necessary, the staff should contact 911 for assistance, or seek emergency medical care from the nearest hospital.
- c) The staff should notify their supervisor or another member of management if the supervisor is not available.
- d) The supervisor should notify HR Department and the CEO.

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- e) the HR administrator who will send the injured staff to the appropriate occupational service provider.
 - f) Within 24 hours the staff involved in the injury, accident or medical emergency MUST fill out an Incident Report and submit it to Human Resources who will submit a copy to the CEO. If the staff cannot complete the report, the supervisor who responded to the initial request will complete the report until the staff is able to complete one.
- D. Work-Related Injury or Illness for Staff
- 1) A work injury is any injury, including occupational disease and other work-connected disability, which arises out of and in the course of employment.
 - 2) A day of disability (lost time) is any day on which a staff is unable, due to a work-related injury or illness, to perform effectively throughout a full shift the essential functions of his/her regularly established job which is open and available to him/her.
 - 3) In order to comply with both Workers' Compensation and OSHA regulations, certain forms must be completed, and procedures and time guidelines followed.
 - 4) Staff will be notified during orientation and throughout their employment that injuries occurring in the course of regular employment must be immediately reported to their Supervisor and Human Resources.
 - 5) Emergency first aid treatment will be given by a staff member certified in First Aid/CPR or through use of the AED. It will be the duty of the staff member providing first aid or CPR to determine whether further medical treatment is warranted.
 - 6) **Completion of the Accident/Injury Report Form is required in these cases and is to be forwarded to the Human Resource Department within 24 hours of injury, when possible.**
 - 7) The following staff must be found physically fit by an agency-designated physician before being allowed to return to work:
 - a) All staff returning to work after absence for work-related accident or injury.
 - b) The Human Resource Department, at its discretion, may require a physical examination for anyone who has been absent from work with any illness, injury, disability, or contagious disease, regardless of cause.
 - c) Staff returning to work after drug or alcohol abuse rehabilitation.
 - d) The staff may be placed on the Modified Duty Program.
 - 8) Data provided on the Accident/Injury Report Form is required for the completion of other reports and forms for Workers' Compensation. The basic information is to be supplied by the staff who sustained the injury, in his or her own handwriting, describing the events and conditions contributing to the injury. The staff's Supervisor must also complete a section of the form which describes the accident investigation and what has been done to prevent other similar injuries occurring. The form must then be forwarded to the Human Resource Department.
 - 9) An on-site staff fatality must be reported immediately to the CEO, and the Program Administrator of the appropriate department, who will then notify the staff's Supervisor and the Human Resource Department and to the Police Department where the death occurred. The reporting person must follow up by completing the Accident/Injury Report Form, which should be reviewed and signed by the staff's Supervisor and forwarded to the Human Resource Department

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- E. When Administrative/Management Back Up is needed for a client or staff who is experiencing a medical emergency or for an unresponsive person:
- a. Find the nearest phone and call the front desk or page/request "Management Back-Up to (location)",
 - b. Call 911 if situation warrants professional assistance from paramedics, firemen, police, etc.
 - c. Continue to monitor situation and respond based on training (CPR, CPI, etc.)
 - d. Follow directive of management staff, and law enforcement.
 - e. After the incident, the management lead will assign follow-up paperwork, such as unusual occurrence reports, etc.
 - f. After the immediate threat is over, the CEO, if not on scene, should be contacted.
- F. Blood or Other Body Fluid Spills in Office Locations
- All SCAN staff will follow Universal Precautions when exposed to all human blood and certain human body fluids (for example, vomit, urine, saliva, etc.) to prevent bloodborne pathogens, such as HIV, and HBV in the offices. This applies to clients in the offices as well as SCAN staff.
- 1) When cleaning the spill, staff will wear personal protective equipment, which will include gloves, eyewear or other protective face masks. In addition, plastic aprons or shoe covers may be worn as well. These items are available from Facilities' staff.
 - 2) Staff will utilize the Red Z (or similar product) Fluid Control Solidifier Kits that are available in the kitchen at all SCAN offices. These kits include the Red Z or similar product, plastic, disposable spill pans, gloves, and an appropriately labeled biohazard red disposable bag.
 - 3) Body spill cleaning procedure:
 - a. First, minimize traffic in the spill area. Post signage or traffic cones as necessary.
 - b. Put on personal protective equipment (PPE) including at a minimum, gloves and eyewear.
 - c. Contain and absorb the spill with the solidifier or with paper towels. All materials, including the solidifier waste or paper towels are to be placed in the red biohazard bag.
 - d. Using disinfectant, clean the spill site of all visible blood or bodily fluids.
 - e. For Fort Wayne Main Street Office: The bodily spill vacuum should be used for large clean-ups of bodily fluid. The bodily spill vacuum is stored in the Car Seat/Boiler Room and is labeled as the "Bodily Spill Vacuum". When done with the vacuum, remove the bag from the vacuum and dispose in the biohazard bag. A new bag should be installed after use so that the vacuum is ready for the next use.
 - f. Decontaminate any reusable items with disinfectant.
 - g. Remove and dispose of plastic gloves.
 - h. Place biohazard bag in garbage bag and take garbage bag immediately to dumpster for disposal.
 - i. Staff and clients should wash hands according to proper hand washing methods posted in rest rooms.

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- 4) Any Exposure Incident (regardless of location) needs to be reported immediately to HR. An Exposure Incident means a specific eye, mouth, other mucous membrane, non-intact skin or parenteral (occurring via other means outside of the gastrointestinal tract) contact with blood or other potentially infectious materials that results from the performance of a staff's duties. SCAN will make available to staff with an incident exposure a medical evaluation which may include testing for exposure to HBV or HIV, as well as a hepatitis B vaccine and vaccination series, and a post exposure evaluation. This will be of no cost to the staff and made available to the staff at a reasonable time and place.
- 5) Universal Precautions training will be provided during WEEE training.
- 6) All sharps (for examples, hypodermic syringes used for injecting insulin) disposals are done in the nurses' office where there is a red container marked for biohazard disposals. Sharps should never be disposed of in the regular trash as this poses an unfair risk of blood borne pathogen exposure from needle puncture on others. DO NOT flush used needles or syringes down the toilet. The nurses will dispose of biohazard materials in the proper manner per OSHA regulations when container is no more than $\frac{3}{4}$ full.

G. Pests

To prevent the transmission of pests including Bed Bugs, fleas, lice, etc. in staff homes and in SCAN offices:

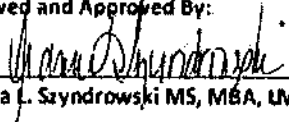
- 1) During new staff orientation, Staff will receive bed bug spray, and laundry bag. These items should be carried by staff in their vehicles at all times to reduce the risk of bringing unwanted pests into their home or back to the office. Staff will follow all Bed Bug/Pest training steps to ensure, to the best of their ability, that insect pests are not brought in the SCAN buildings and/or the staff's homes. The agency will provide refills and/or replacements as needed.
- 2) Containment procedures:
 - a) If a bug is found in a SCAN office building (on a staff's person, in their vehicles or on the items used in a home visit) staff should not kill the bug, but rather, should try and trap it in scotch tape, a tightly sealed plastic bag or a jar so the bug can be identified.
 - b) Notify the Facilities Supervisor and/or Chief Operations Officer immediately if a bug is found and get the bug to them (IIT Supervisor if no one from Facilities is available). Let Facilities know the exact location the bug was found. If after hours, instead notify the evening Supervisor on staff who will contact appropriate Manager or Administrator.
 - c) Facilities will isolate that location and the area surrounding that location. If after hours, the evening Supervisor has access to a kit so that the affected area can be sealed off.
 - d) Facilities will contact appropriate pest Management Control personnel to arrange for verification tests to be conducted and fumigation treatment to be done.
 - e) Exposed staff should check their shoes and clothing for signs of bugs or eggs. If you are concerned you may have picked up bed bugs or fleas, take off your clothes in a protected area such as in the office or your garage, place them in a plastic bag, tightly sealed (knotted more than once) and leave that way for 14.

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days. An alternative treatment is to put the clothing directly in a dryer and heat on the highest setting for 30 minutes. This should kill bugs and eggs.

- f) If bed bugs (not other pests) are found in the staff person's home, and staff person has been in a home with confirmed bed bugs within a week of exposure, SCAN will reimburse the staff member for an exterminator in an amount not to exceed \$650.00 per occurrence, per year. The staff person will also receive three days of paid time off to address the bed bug issue in their home.
- H. SCAN, Inc. is a smoke/tobacco-free environment.
- 1) No smoking will be permitted in SCAN, Inc. facilities. This includes cigarettes, e-cigs, vapes and chewing tobacco products.
 - 2) The outside smoking designated areas must be at least 20 feet from any entrance per local statutes. Please be courteous and use cigarette butt receptacles if provided.
- I. SCAN requires an on-hire and annual Tuberculosis (TB) tests for all staff.
- 1) New hires will receive their initial TB tests at Parkview Occupational Health. All new Staff will receive a tuberculosis test, which will be paid for by SCAN. Staff who test positive or who have tested positive or who have tested positive in the past will receive a chest X-ray, which will also be paid for by SCAN. All current staff will be re-tested annually.
 - 2) The TB tests are due on the month or month thereafter of the staff's anniversary hire date. Human Resources will send each staff a reminder of the due date for the TB test.
 - 3) TB tests for staff, whose home office is the Fort Wayne office, are made available at SCAN, Inc. every other month by the Parkview Community Health Nurse. If a staff misses their test, then they must go to Parkview Occupational Health for the test. The staff must get a form from HR prior to going to Parkview Occupational Health.
 - 4) Tests administered at SCAN will be read at SCAN 24 hours after the test by the nurse. Tests administered by Occupational Health will need to be read/checked by Occupational Health. This is at no cost to the staff, however, if the staff fails to return to get the test read, they may be responsible for the cost of a subsequent test.

Reviewed and Approved By:


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Date