

# Incorporating Infection Control Micro-Learn Training Resources

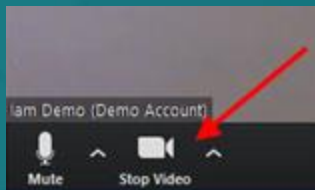
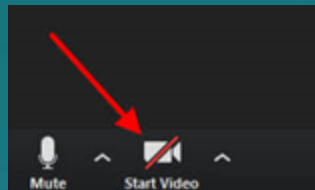
## *IPC & Addressing Blood Exposure*



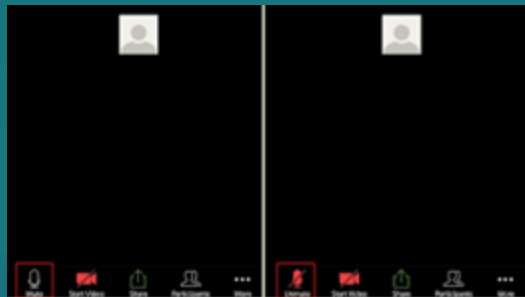
# Recording

Please note that today's session will be recorded for educational and quality improvement purposes.

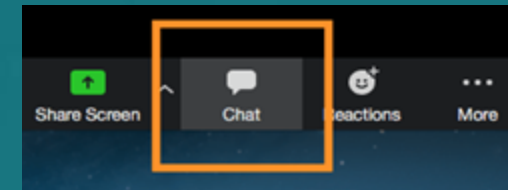
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Please mute your microphone when you are not speaking.



Please enter your name, organization, and tribal affiliations (if any) in the chat.



# Welcome!

## Agenda

1. Overview & Introduction
2. Lecture
3. Resource Sharing
4. Open Floor
5. Closing

## Objectives

1. Explain benefits of using the PFL Infection Control micro-learn training resources with staff at your Urban Indian Organization.
2. Increase awareness of available infection control micro-learn resources.
3. Discuss and outline the Blood Micro-Learn, including incorporating it at Urban Indian Organizations.
4. Summarize relevant CDC core IPC practices related to bloodborne pathogens.

## Survey

Scan the QR code on today's slides to complete a survey about today's event. We value your feedback!

Scan Me!



# NCUIH

NATIONAL COUNCIL *of* URBAN INDIAN HEALTH

The National Council of Urban Indian Health (NCUIH) is the national non-profit organization devoted to the support and development of quality, accessible, and culturally-competent health and public health services for American Indians and Alaska Natives (AI/ANs) living in urban areas.

NCUIH is a national representative of the 41 Title V Urban Indian Organizations (UIOs) under the Indian Health Service (IHS) in the Indian Health Care Improvement Act (IHCIA). NCUIH strives to improve the health of the over 70% of the AI/AN population that lives in urban areas, supported by quality health care centers.

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# Land Acknowledgement

The National Council of Urban Indian Health (NCUIH) recognizes its presence and work within a larger framework of historical and contemporary relationships with Tribes and communities across the United States. NCUIH acknowledges that our national office and nearby activities are situated on the traditional homelands of many Native nations. Some of the communities in the surrounding area include the Piscataway, Pamunkey, Nentego, Mattaponi, Chickahominy, Monacan, and Powhatan peoples. These lands have deep historical, cultural, and spiritual significance to Native peoples.

NCUIH acknowledges that it operates near numerous Tribal Nations and urban Native communities across the country. Our work touches the lives of Native people from diverse Tribal backgrounds, and we are committed to honoring and respecting the unique cultural and historical connections that exist within these communities.

NCUIH is dedicated to promoting the health, well-being, and self-determination of urban Native American communities across the United States. We take our role of supporting these communities seriously and pledge to continue working towards a future of health equity, cultural preservation, and mutual respect.

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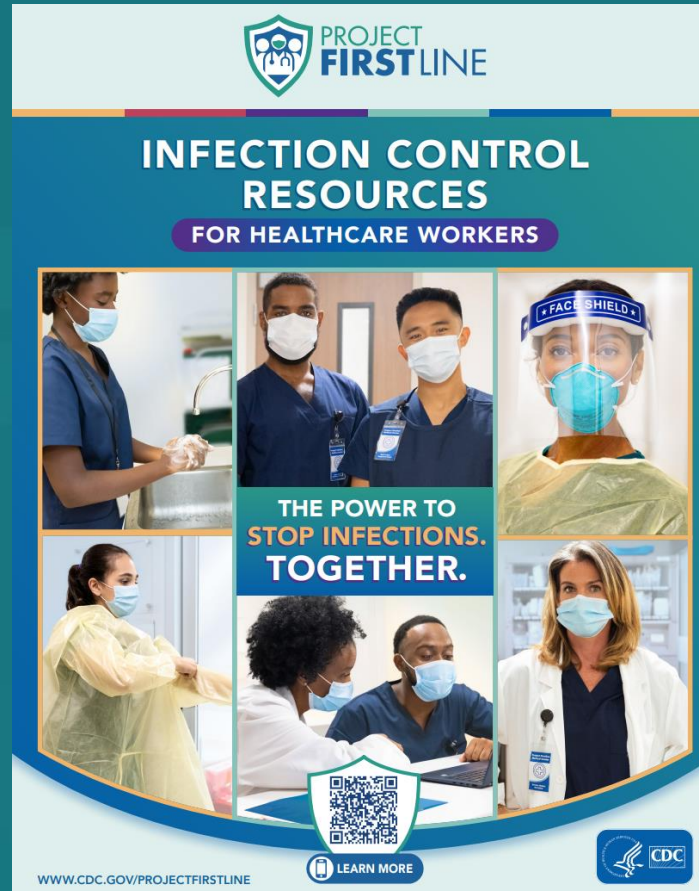
# About Project Firstline

## Acknowledgment

Project Firstline is a national collaborative led by the U.S. Centers for Disease Control and Prevention (Centers for Disease Control and Prevention) to provide infection control training and education to frontline healthcare workers and public health personnel.<sup>1</sup>

*NCUIH is proud to partner with Project Firstline, as supported through Cooperative Agreement Centers for Disease Control and Prevention-RFA-OT18-1802 as well as Centers for Disease Control and Prevention-RFA-CK20-2003. Centers for Disease Control and Prevention is an agency within the Department of Health and Human Services (HHS). The contents of this program do not necessarily represent the policies of Centers for Disease Control and Prevention or HHS and should not be considered an endorsement by the Federal Government.*

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Project Firstline provides innovative and accessible infection control education for frontline healthcare workers so that they can protect their patients, their coworkers, and themselves from infectious disease threats in healthcare.<sup>1</sup>

As a collaborative, Project Firstline brings together more than 75 healthcare, academic, and public health partners to reach a wide range of healthcare audiences and settings across the country.<sup>1</sup>

1. Centers for Disease Control and Prevention. About Project Firstline. Updated September 14, 2022. Accessed May 16, 2023. <https://www.cdc.gov/infectioncontrol/projectfirstline/about.html>.  
2. Centers for Disease Control and Prevention. Infection Control Resources for Healthcare Workers. Updated September 30, 2022. Accessed May 16, 2023. [https://www.cdc.gov/infectioncontrol/pdf/projectfirstline/PFL\\_Brand\\_Poster\\_Noninteractive-508.pdf](https://www.cdc.gov/infectioncontrol/pdf/projectfirstline/PFL_Brand_Poster_Noninteractive-508.pdf).



# Lecture

Shay L. Drummond, MPH, RN, CIC, FAPIC  
*Infection Preventionist Nurse Consultant and PFL ELC Team  
Lead, Centers for Disease Control and Prevention*

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# Presenter



Shay Drummond is Project Firstline's infection control subject matter expert. Prior to joining Project Firstline Shay was an Infection Preventionist Quality Management Consultant for the VA Healthcare System and has front-line nursing experience in disease surveillance, outbreak response and public health.

**Shay L. Drummond, MPH, RN,  
CIC, FAPIC**

*Infection Preventionist Nurse  
Consultant and PFL ELC Team  
Lead, Centers for Disease Control  
and Prevention*

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# National Council of Urban Indian Health How to Use a Micro-Learn

Featuring:  
Blood Borne Pathogens

**Shay L. Drummond MPH BSN CIC FAPIC**  
**May 29, 2024**



# Agenda

What are blood borne pathogens?  
Introduction to Micro-learns  
Infection control actions to take to avoid  
exposure to bloodborne pathogens  
Bringing it together



# Learning Objectives

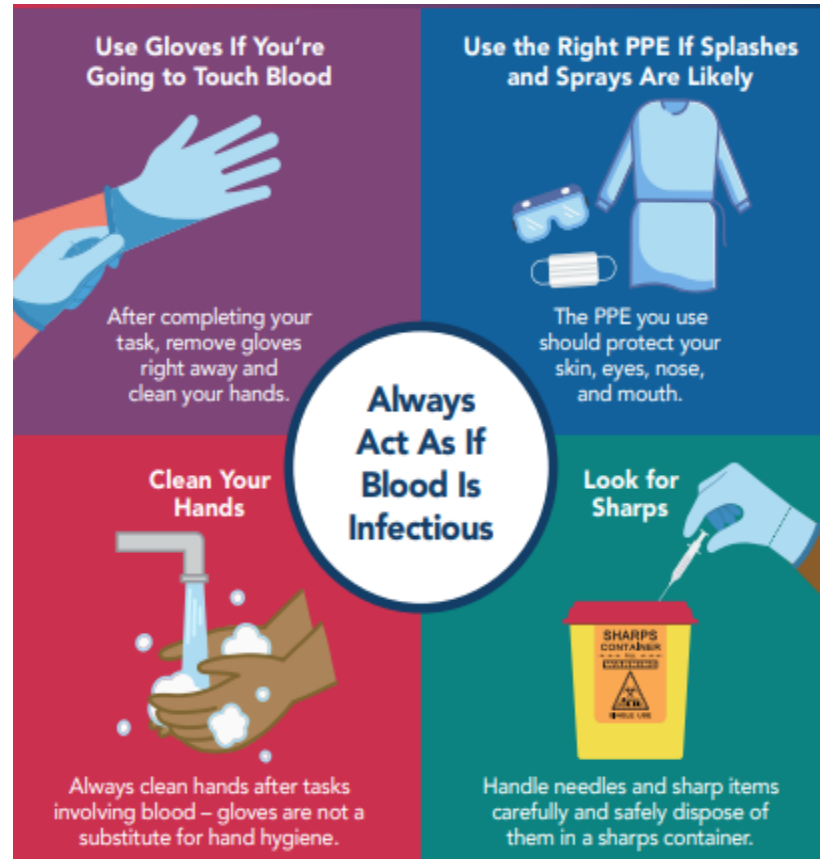
1. Understand Occupational Safety and Health Administration Bloodborne Pathogen Standard
2. Understand how to use a micro-learn
3. Learn how to recognize risk the risk of bloodborne pathogens
4. Demonstrate infection control actions that you can take when you see blood to keep yourself and your patients



# OSHA Bloodborne Pathogens Standard 29CFR1910.1030

- OSHA's Bloodborne Pathogens Standard ([29 CFR 1910.1030](#)) as amended pursuant to the [2000 Needlestick Safety and Prevention Act](#), is a regulation that prescribes safeguards to protect workers against health hazards related to bloodborne pathogens. It has provisions for exposure control plans, engineering and work practice controls, hepatitis B vaccinations, hazard communication and training, and recordkeeping. The standard imposes requirements on employers of workers who may be exposed to blood or other potentially infectious materials such as certain tissues and body fluids.

# What are Micro-learns?



- Micro-learns are a series of guided infection control discussions that provide brief, on-the-job educational opportunities
- Each micro-learn focuses on a single infection control topic and connects infection control concepts to immediate, practical value.
- Healthcare workers can easily apply the key points to their daily work and perform the recommended actions to keep germs from spreading.

# About the Micro-Learns

Each micro-learn package includes an adaptable discussion guide for the facilitator and one job aid.



**Discussion Guide.** The discussion guide is not a script. Facilitators are encouraged to adapt the guide for their audience by incorporating relevant and practical questions and ideas. For instance, facilitators can connect the content to the audience's job duties, facility-specific cases or issues, resources and points of contact, or other information.



**Job Aid.** The one-page, visual job aid helps to reinforce the key messages of the micro-learn. Facilitators are encouraged to make the job aid available after the micro-learn session, such as in digital or hard copy form.



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# Step 1: Start with the Basic Topic Information: Blood

**Always  
Act As If  
Blood Is Infectious**

- Always assume blood is infectious. People who are infected with bloodborne pathogens don't always have symptoms, but their blood and some body fluids still have virus in them.
- The pathogens in blood that are the most concerning infection risks in health care are HIV, hepatitis B, and hepatitis C.

## Step 2: Introduce the Topic

- Bloodborne pathogens can be spread when infected blood enters the body.
- Examples:
  - From a needlestick
  - Through breaks or cracks in the skin, or
  - By splashes or sprays to the eyes, nose, or mouth





## Step 3: Expand on the Topic

### What to do when.....

- Always assume blood is infectious - infection control actions for blood focus on preventing infected blood from entering the body and limiting its spread in the environment and between people.
- Don't touch blood without gloves on.
- When you see blood, look for sharps.
- If you see sharps, safely dispose of them in a sharp's container.



## Step 3: Expand on the Topic

- If you're approaching a place where a procedure was done, be careful handling drapes, linens, or other items that might be hiding a needle or other used sharps.
- When you're using sharps, plan a head. Pick one location to keep sharps in before you start a procedure so you can keep track of them and know where to find the sharps containers to dispose of them safely as soon as you're finished.



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## Step 3: Expand on the Topic

### Use the Right PPE

- Look around your environment and think about what type of PPE you need for the situation. The PPE you use should protect your skin, eyes, nose, and mouth.
- After completing your task, remove gloves right away and clean your hands. Gloves are not a substitute for hand hygiene.

Use the Right PPE If Splashes and Sprays Are Likely



The PPE you use should protect your skin, eyes, nose, and mouth.

## Step 3: Expand on the Topic

# Clean Your Hands

## Alcohol-based Hand Sanitizer

- Preferred way to clean hands when they aren't visibly dirty
- More effective at killing potentially deadly germs on hands than soap
- Less irritating to skin than soap and water

## Soap and Water

- When hands are visibly soiled
- Before eating
- Before feeding a patient or resident
- After using the restroom
- After assisting with toileting
- After caring for a person who has or might have infectious diarrhea



## Step 3: Expand on the Topic Look for Sharps

- Dispose of Sharps with Care
- Be responsible for the device you use
- Activate safety features after use
- Dispose of devices in rigid sharps containers; do not overfill containers
- Keep fingers away from the opening of sharps containers



## Step 4: Wrap Up and Reinforce - Discussion




- Find out how your team feels about the topic by asking:
- What do you usually do when you see blood? Do you worry that you might catch something? When might you call for help or assistance?
- Do you have all the tools and information you need to do your job safely?
- As a team, how can we help each other take the right infection control actions when we see blood to keep germs from spreading?

# Step 4: Wrap Up and Reinforce - Key Takeaways


Always assume blood is infectious

Don't touch blood without gloves on



## GERMS CAN LIVE IN BLOOD.

**WHERE IS THE RISK?**  
Know where germs live to stop spread and protect patients



- Viruses like HIV, hepatitis B, and hepatitis C can spread in healthcare when contaminated blood is on a sharp item.
- If that item causes a cut or break in someone else's skin (e.g., an accidental needlestick), germs can spread to that person and cause a new infection.
- Reusing needles or syringes is especially risky because germs in the blood can spread from one person to another.
- Blood in the environment – like on linens or a device – grows bacteria and spreads via touch or devices.

**Germ**s That Can Live in Blood




- HIV
- Hepatitis B
- Hepatitis C
- Bacteria (when outside the body)

**Healthcare Tasks Involving Blood**

- Putting in an IV
- Giving an injection
- Surgery and procedures
- Changing soiled laundry

**Infection Control Actions to Reduce Risk**

- Hand hygiene
- Use of personal protective equipment (gloves, gowns, eye protection)
- Safe injections
- Cleaning and disinfection
- Textile management

   [WWW.CDC.GOV/PROJECTFIRSTLINE](http://WWW.CDC.GOV/PROJECTFIRSTLINE)

# What To Do If You Have an Exposure

1. Clean the entry site

2. Report incident to your supervisor

3. Immediately seek medical treatment

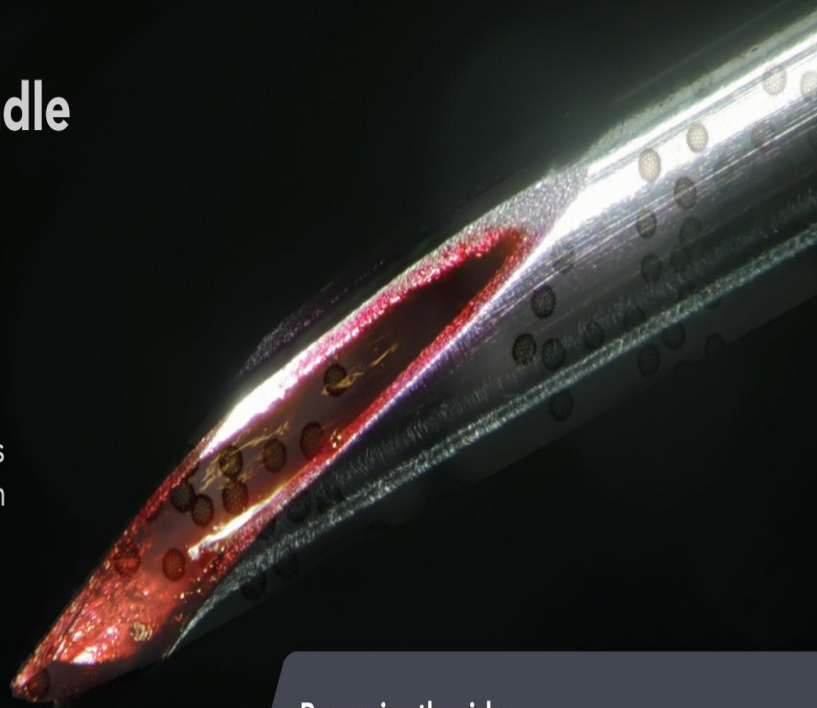




# Questions?

**Do you handle  
needles at  
work?**

Needlestick accidents  
are the most common  
way that bloodborne  
viruses are spread in  
healthcare.



**Recognize the risks.  
Take action to stop the spread of germs.**

**Learn more at [CDC.GOV/PROJECTFIRSTLINE](https://www.cdc.gov/projectfirstline)**

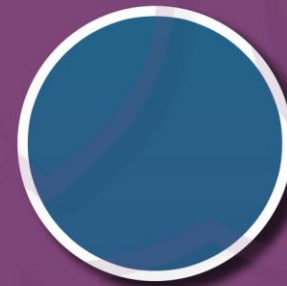


U.S. Department of  
Health and Human Services  
Centers for Disease  
Control and Prevention



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# Resources

- Learn Where Germs Live in Health Care  
[Learn Where Germs Live in Health Care | Project Firstline | Infection Control | CDC](#)
- Germs Live in the Blood  
[Germs can live in blood \(cdc.gov\)](#)
- Recognize Infection Risks in Health Care  
<https://www.cdc.gov/infectioncontrol/projectfirstline/healthcare/recognize-risks.html>
- Blood Micro-Learn:  
[Micro-Learns-Blood-508.pdf \(cdc.gov\)](#)
- CDC Core Practices  
[CDC's Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings | Infection Control | CDC](#)
- CDC Sharps Safety Program  
[Sharps Safety Program Resources | Infection Control | CDC](#)
- [CDC - Bloodborne Infectious Diseases - Stop Sticks : Message & Question Center - NORA](#)
- OSHA  
[Bloodborne Pathogens - Overview | Occupational Safety and Health Administration \(osha.gov\)](#)

# How to Get Involved and Provide Feedback



- Project Firstline on CDC.gov:
- <https://www.cdc.gov/infectioncontrol/ProjectFirstline/index.html>



- CDC's Project Firstline on Facebook:
- <https://www.facebook.com/CDCProjectFirstline>



- CDC's Project Firstline on Twitter:
- [https://twitter.com/CDC\\_Firstline](https://twitter.com/CDC_Firstline)



- Project Firstline *Inside Infection Control* on YouTube:
- <https://www.youtube.com/playlist?list=PLvrp9iOILTQZQGtDnSDGViKDdRtlc13VX>

- Project Firstline feedback form:  
<https://www.cdc.gov/infectioncontrol/pdf/projectfirstline/TTK-ParticipantFeedback-508.pdf>



- To sign up for Project Firstline e-mails, click here:  
[https://tools.cdc.gov/campaignproxyservice/subscriptions.aspx?topic\\_id=USCDC\\_2104](https://tools.cdc.gov/campaignproxyservice/subscriptions.aspx?topic_id=USCDC_2104)



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# Resource Sharing

*NCUIH IPC Team*

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# NACCHO IPC Summit

*National Association of City and County Health  
Officials Infection Control Summit in Chicago*

*5/7/24-5/9/24*

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PASSPORT TO IPC

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# Blood Micro-Learn - Spanish



## Microaprendizajes de control de infecciones

### Guía del usuario



#### Acerca de los microaprendizajes

Los *microaprendizajes de control de infecciones* del Proyecto Firstline son una serie de discusiones guiadas sobre el control de infecciones que brindan oportunidades educativas breves en el trabajo. Cada microaprendizaje se centra en un solo tema de control de infecciones y conecta los conceptos de control de infecciones con un valor práctico e inmediato. Los trabajadores de la salud pueden aplicar fácilmente los puntos clave a su trabajo diario y realizar las acciones recomendadas para evitar la propagación de microbios.

#### Uso de los microaprendizajes

Los microaprendizajes pueden incorporarse a oportunidades existentes en las que se encuentran grupos de trabajadores de la salud, como reuniones cortas ("huddles") previas al turno o reuniones de equipo. Las sesiones deben ser dirigidas o facilitadas por un miembro del equipo con experiencia en control de infecciones.

Centers for Disease Control and Prevention. Microaprendizajes de control de infecciones: Guía del usuario. Accessed May 15, 2024.

<https://www.cdc.gov/infectioncontrol/projectfirstline/es/pdf/Micro-Learns-Blood-ES-508.pdf>

## ¿Qué debe hacer si observa sangre?

Use guantes si va a tocar sangre



Después de completar su tarea, quítese los guantes de inmediato y lávese las manos.

Use el EPP adecuado si es probable que se produzcan salpicaduras y aerosoles



El EPP que use debe proteger la piel, los ojos, la nariz y la boca.

**Actúe siempre como si la sangre fuera infecciosa**

Límpiese las manos



Lávese las manos después de completar tareas con sangre – los guantes no son sustitutos a la higiene de manos.

Busque objetos cortopunzantes



Manipule las agujas y los objetos cortopunzantes con cuidado y deséchelos de forma segura en un contenedor para objetos cortopunzantes.

Aprenda más

Los microbios pueden vivir en la sangre: <https://bit.ly/3r1Z6Jw>  
One and Only Campaign (English Only): <https://bit.ly/3QAS6w6>



## Cleaning vs. Disinfecting – What's the Difference?

**Cleaning** removes the visible dirt, dust, spills, smears, and grime, as well as some germs, from surfaces. This is accomplished by washing the surface using a cleaning product and water. Cleaning products include liquid soap, enzymatic cleaners, and detergents. High-touch surfaces should be cleaned regularly. Some examples of high-touch surfaces include tables, door handles, and keyboards.

**Disinfecting** kills germs on surfaces or objects. This is accomplished by cleaning an area with soap, water, or any additional detergent; then using an EPA-registered household disinfectant. Disinfectants are only for disinfecting after cleaning and are not substitutes for cleaning unless they are a combined detergent-disinfectant product. For effective use of the disinfecting product, follow the instructions on the label.

**PPE** should be worn while cleaning or disinfecting, such as wearing disposable gloves. Additional personal protective equipment might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash.

**Please note, these checklists are intended to be samples.**

### Daily Cleaning Procedures

Area	Frequency	Process	Initials
<b>Toys</b>	After each use and at least daily or when a toy or equipment becomes soiled with dirt or bodily fluid, including saliva. <b>Note:</b> Any toys that cannot be properly cleaned and disinfected (eg books, stuffed animals) should be removed.	Clean and disinfect	
<b>Exam rooms</b>	After each patient/case At least twice per day	Clean and disinfect: • high-touch and low-touch surfaces and floors	
<b>Waiting/ Admission</b>	Daily and as needed	Clean and disinfect: • high-touch and low-touch surfaces and floors	
<b>Medication Preparation Area</b>	Between uses	Clean and disinfect: • countertops • portable carts used to transport or prepare medications	
<b>Minor operative procedure rooms</b>	Before and after every procedure	Clean and disinfect: • any surface visibly soiled with blood or bodily fluids • high-touch surfaces in the procedure room • floors in the procedure room	

### End of Day Cleaning Procedures

Area	Process	Initials
<b>Toys</b>	Clean and disinfect	
<b>Exam rooms</b>	Clean and disinfect entire floor and low touch surfaces	
<b>Waiting/Admission</b>	Clean and disinfect: • High-touch and low-touch surfaces and floors	
<b>Medication Preparation Area</b>	Clean and disinfect: • countertops • portable carts used to transport or prepare medications	
<b>Minor operative procedure rooms</b>	Clean and disinfect: • high-touch and low-touch surfaces • scrub/sluice areas • the entire floor	

# Cleaning and Disinfection Checklist

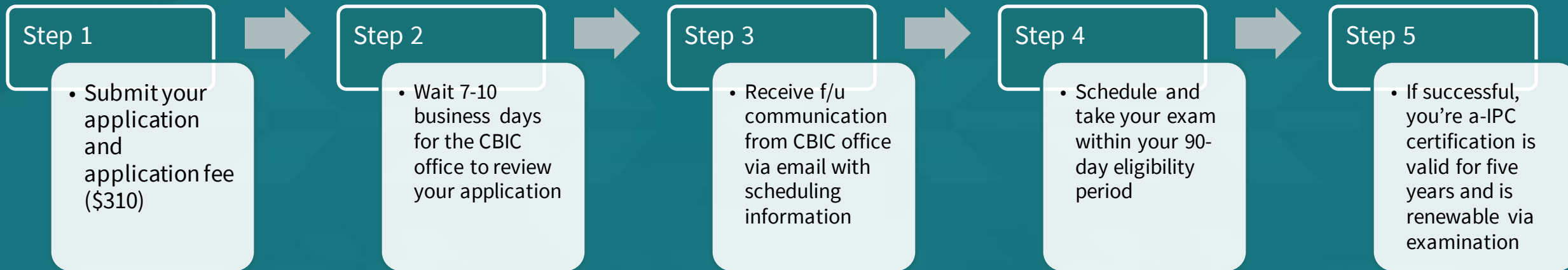
*American Academy of Pediatrics*

*Available in Spanish too*

American Academy of Pediatrics. AAP Infection Control Activities: Project Firstline. Accessed May 15, 2024.

[https://downloads.aap.org/AAP/PDF/Project\\_Firstline\\_Cleaning\\_and\\_Disinfecting\\_Checklist.pdf](https://downloads.aap.org/AAP/PDF/Project_Firstline_Cleaning_and_Disinfecting_Checklist.pdf)

# Associate – Infection Prevention and Control (a-IPC™) Certification



*No eligibility requirements to apply*



# TRANSPORTATION IPC CHECKLIST FOR UIOS



## BEFORE TRIP

Monitor both your client's and your own health and symptoms. If you're feeling sick, follow your facility protocol.

Replenish supplies (alcohol-based hand sanitizer, PPE, cleaners, and disinfectant).

Clean and disinfect high-touch surfaces such as seat belts, door handles, and steering wheel.

You and the client should use hand sanitizer when getting in the vehicle.

## DURING TRIP

Wear masks and sit as far apart as possible if the client has respiratory symptoms.

When possible and appropriate, improve ventilation, for example, open the windows.

**Safety Tips**  
Read and follow the disinfectant label. Wear gloves when you clean. Keep your hands and vehicle clean.

Refer to your facility protocol for additional guidance.

## AFTER TRIP

You and the client should use hand sanitizer when getting out of the vehicle.

If you suspect any IPC concerns or become symptomatic, inform your supervisor and follow protocols.

Clean and disinfect the vehicle upon arrival at the final location. Be cautious of anything that may have been left behind.

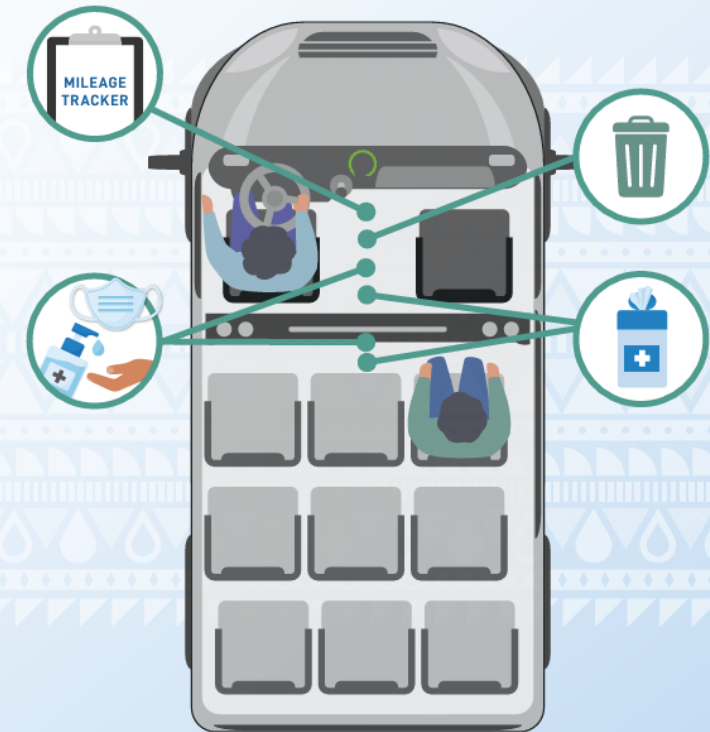
Want more information? Reach out to your supervisor or scan the QR code:



# New Graphic!

## LEAD BY EXAMPLE

Clean, Disinfect and Cruise with Confidence



# Open Floor

Please feel free to ask questions or share any final thoughts!

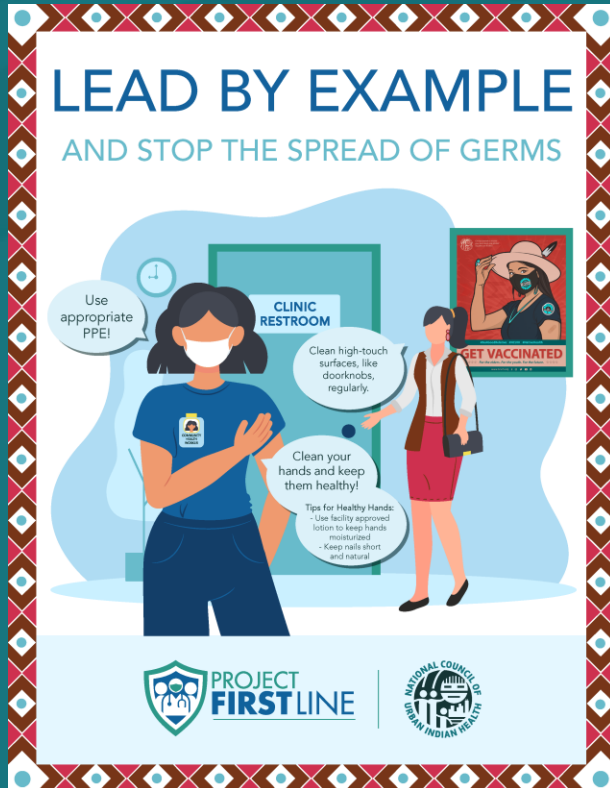
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# Reminders

Thank you all for attending today's session!

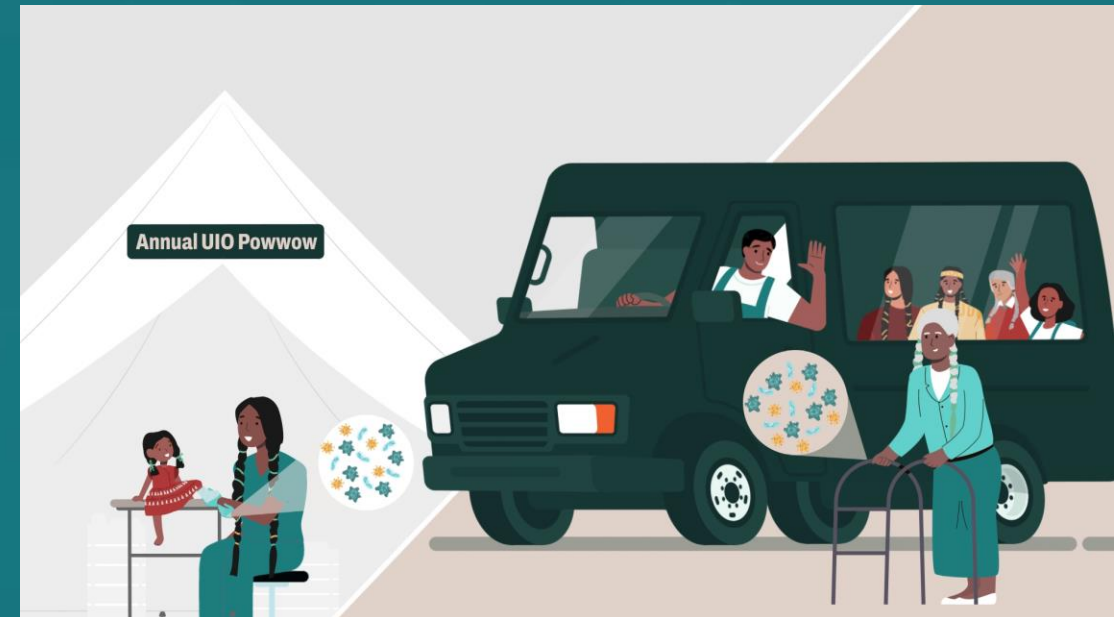
Watch our video reminding healthcare warriors about hand cleaning protocols!



Have you checked out this graphic?

Download it so you can print it out for your UIO!

<https://ncuih.org/public-health/infection-prevention-control/>



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# Upcoming Events

## Interested in attending more NCUIH events?

Visit <https://live-ncuih.pantheonsite.io/events/> to learn about more upcoming events, such as:

- *5/30/24: Unveiling Strategies into Behavioral Health Financing: A Collaborative Review*
- *6/5/24: Prevention Perspectives: Substance Misuse and Overdose Among Urban Native Populations*
- *6/13/24: Vax Chat 2024: Lessons Learned in Vaccine Equity Source*

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# Thank You!

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on today's event by  
scanning the QR code or  
using the link in the chat.

*This information will also be  
shared via email.*



# References

1. American Academy of Pediatrics. AAP Infection Control Activities: Project Firstline. Accessed May 15, 2024. [https://downloads.aap.org/AAP/PDF/Project\\_Firstline\\_Cleaning\\_and\\_Disinfecting\\_Checklist.pdf](https://downloads.aap.org/AAP/PDF/Project_Firstline_Cleaning_and_Disinfecting_Checklist.pdf)
2. Centers for Disease Control and Prevention. About Project Firstline. Updated September 14, 2022. Accessed May 16, 2023. <https://www.cdc.gov/infectioncontrol/projectfirstline/about.html>.
3. Centers for Disease Control and Prevention. Infection Control Resources for Healthcare Workers. Updated September 30, 2022. Accessed May 16, 2023. [https://www.cdc.gov/infectioncontrol/pdf/projectfirstline/PFL\\_Brand\\_Poster\\_Noninteractive-508.pdf](https://www.cdc.gov/infectioncontrol/pdf/projectfirstline/PFL_Brand_Poster_Noninteractive-508.pdf).
4. Centers for Disease Control and Prevention. Microaprendizajes de control de infecciones: Guía del usuario. Accessed May 15, 2024. <https://www.cdc.gov/infectioncontrol/projectfirstline/es/pdf/Micro-Learns-Blood-ES-508.pdf>
5. Certification Board of Infection Control and Epidemiology, Inc. a-IPC™ (Associate - Infection Prevention and Control). Accessed May 15, 2024. <https://www.cbic.org/CBIC/Get-Certified/Get-Started/a-IPC.htm>
6. National Council of Urban Indian Health. Transportation IPC Checklist for UIOs. Accessed May 15, 2024. <https://ncuih.org/wp-content/uploads/IPC-Transport-Checklist-NCUIH-D430-V4F.pdf>

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