

Leamington Mennonite Home
Long Term Care

**INFECTION CONTROL
POLICY AND PROCEDURE**

CATEGORY: Disease-Specific Precautions	SUBJECT: HIV Management	SECTION: H POLICY: 7
DATE: January 11, 2024	Administrator's Signature: _____ <i>J. M.</i>	
REVISION DATES:	IPAC Lead's Signature: _____ <i>L. Coppola, RN.</i>	

HIV MANAGEMENT

POLICY:

To prevent the transmission of HIV to residents and staff. HIV is transmitted through blood, semen, vaginal secretions and bodily fluids. Common risk factors are: exposure to infected blood by transfusion, needlestick injury or IV drug use, and sexual contact with and infected person.

PROCEDURE:

- 1) If the resident is a known HIV carrier or the disease has progressed to AIDS, there will be an individualized evaluation performed by the multidisciplinary team consisting of the Medical Director, the DNPC and the IPAC Lead. At the completion of this evaluation the necessary precautions will be put in place. A private room is preferable but if not possible, the resident should be placed with someone who is at very low risk for infection.
- 2) The Registered Staff are to place out *Just the Facts Worksheet: HIV* for PSW staff and email the fact sheet to department leaders to relay to their staff.
- 3) Routine practices help to prevent the spread of HIV. Routine practices must be followed if bodily fluids, i.e. blood is present during care. Wash hands prior to donning gloves and after glove use.
- 4) Never re-cap needles. If injections are required, the Registered Staff will bring the sharps container with them for needle disposal.
- 5) Dietary – no special precautions are needed.
- 6) Laundry & Housekeeping – precautions will be determined after the multidisciplinary team evaluation is completed.
- 7) The resident should be bathed last and the tub purged after the bath per routine practices.

- 8) If resident is transferred to another facility, make sure to inform transferring service and Infection Control at receiving facility.