

## **ARCHDIOCESE OF INDIANAPOLIS**

### **Safety and Loss Control News**

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Prepared by Gallagher Bassett Services, Inc.

# Basic Hygiene Guidelines for the Prevention of Staph Infections in Schools

Staphylococcus aureus, more commonly known as "staph" are bacteria found on the skin or in the nose of healthy people. Approximately 25 percent to 30 percent of the populations carry the bacteria without becoming ill. Staph can cause minor skin infections (e.g., pustules, small boils) that can be treated without antibiotics. However, on occasion, staph bacteria can cause much more serious skin infections, as well as bloodstream infections, pneumonia, etc.

Over the past several years, treatment of some staph infections has become problematic because the bacteria have become resistant to various antibiotics.

Methicillin-resistant *Staphylococcus aureus* (MRSA) is a type of staph that is resistant to some antibiotics, including the antibiotic methicillin. Infections caused by MRSA historically have been associated with ill persons in health-care institutions. However, MRSA has now emerged as a common cause of skin and soft tissue infections that may occur in previously healthy adults and children who have not had prior contact with healthcare settings. This type of MRSA infection is known as community-associated MRSA or CA-MRSA.

CA-MRSA can be transmitted from person to person through close contact. Risk factors associated with the spread of MRSA include direct skinto-skin contact with infected persons, sharing contaminated personal items such as towels, razors, soap and clothing, inadequate personal hygiene, direct contact with contaminated environmental surfaces, and living in crowded settings.

CA-MRSA infections are treatable; early recognition and good medical management including, as needed, surgical drainage, and proper antibiotic prescribing and usage, help to ensure prompt resolution of infections. staff, students and parents understand what to do to prevent infection. The following control measures are prudent in reducing the likelihood of spreading skin infections at school.

### Hand Hygiene

Students, faculty and staff should be instructed on the correct technique for hand washing, including the importance of washing hands before eating or preparing food, after touching any skin lesions ("sores") and wounds or clothing contaminated by drainage from lesions and wounds, and after using the toilet. Instructions should include the following:

- Turn on faucet and wet hands with running water.
- Apply soap and spread across all surfaces of hands.
- Scrub all surfaces of hands, including between each finger, for at least 20 seconds (saying the alphabet slowly will take at least 20 seconds).
- Rinse hands under running water.
- Dry hands with paper towels or air dryers.
- If available, use a paper towel to turn off faucet handles.

#### General Hygiene

Be sure to practice and follow general hygienic measures, including:

- Keep your hands clean by washing thoroughly with soap and water. Use an alcohol hand gel when soap and water are not available.
- Avoid sharing eating and drinking utensils.
- Avoid sharing unwashed towels, washcloths, clothing or uniforms.

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With this information in mind, it is important that

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# **Removing Snow Safely**

Winter snow showers and storms make it necessary to clear walkways and parking lots to ensure that pedestrians and drivers are able to maneuver safely along these areas. The following tips will help parish personnel to remove snow safely.

### Snow Shoveling

If the area of snow to be cleared is small, or if a snow thrower is not available, someone will have to shovel it by hand. Only someone who is in good physical condition and general health should do this work.

First, the person shoveling should mentally divide the area into sections and clear one part, then the rest before going on to the next section. Whenever the snow begins to feel especially heavy, the shoveler should take a rest break. Persons shoveling snow should keep the following information in mind:

- Wet snow is much heavier than dry snow—govern the rate of shoveling accordingly.
- Push or sweep as much of the snow as possible.
- If an icy crust has formed on top of several inches of snow, shovel the snow in layers.
- Make use of small quantities of rock salt or other icemelting materials to make the job as easy as possible.
- Dress warmly while shoveling snow because cold itself can pose a strain on the body's circulation. Don't bundle up so heavily however, that movement is difficult.
- Don't shovel snow right after eating or drinking alcohol, and don't smoke right before, during or after shoveling snow.
- If chest pain, weakness or other signs of physical stress occur, stop shoveling at once and seek medical attention.

### Snow Throwers

All snow throwers are potentially dangerous. Their large, exposed mechanism, which is designed to dig into the snow, is difficult to guard. However, with proper handling, snow throwers offer a service that is safer than the back breaking, heart-straining shoveling method. Safer snow throwers have guards on drive chains, pulleys and belts.

The auger at the front of the snow thrower presents the greatest hazard. Some also have an additional auger for extra throwing power. These, along with moving gears, drive chains, and belts can be sources of danger to anyone tampering with a snow thrower when it is running. Injuries usually occur when the operator attempts to clear off debris

while the motor is running.

Although snow throwers can handle dry, powdered snow with little difficulty, their performance in wet, sticky snow is not as effective. Wet snow tends to clog the blades and vanes, and often jams and sticks in the chute. Snow throwers are also capable of picking up and even throwing ice, stones and other hard objects.

The following safety suggestions for snow thrower operations are recommended by the Outdoor Power Equipment Institute. Protect yourself and others by following these safety tips:

- Read the Operator's Manual.
- Do not allow children to operate this machine, nor allow adults to operate it without proper instructions.
- Keep all persons a safe distance away.
- Disengage all clutches, and shift into neutral before starting the motor.
- Keep hands, feet, and clothing away from power-driven parts.
- Never place a hand inside the discharge chute or even near its outside edge with the engine running.
- Know the controls and how to stop the engine or how to take the unit out of gear quickly.
- Disengage power and stop the motor before cleaning the discharge, removing obstacles, making adjustments, or when leaving the operating position.
- Exercise caution to avoid slipping or falling, especially when operating the machine in reverse.
- Never direct discharge at bystanders, nor allow anyone in front of the machine—debris may be hidden in the snow.

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# **Cold Weather Hazards**

Maintaining parish grounds during the winter months requires many tasks that must be conducted outdoors in extremely cold weather conditions. Low temperatures combined with snow and ice can present physical hazards to maintenance personnel if precautions for working in these conditions are not taken.

Most cold weather injuries affect extremities such as hands, feet, fingers or toes. Extremities are most often affected by cold weather because they are relatively far away from the

core or center of the body. Due to their distance from the body's core, they do not receive as much blood flow as other parts of the body. Extremities are also thinner than other body parts and because of this, lose heat faster.

Cold weather injuries do not necessarily occur only in freezing temperatures. Cold weather injuries are known to occur even when temperatures range from 40 to 60 degrees Fahrenheit. The two factors responsible for causing injuries when temperatures are above freezing are wind chill and dampness.

A wind chill factor is the effect of moving air in cold weather. Moving air removes heat faster than air that is still. Thus, wind chill makes the overall temperature feel colder than it actually is. Wet, damp weather conditions contribute

to injury because the presence of water removes heat 240 times faster than air.

### Cold Weather Injuries and First Aid

### Trench Foot

Trench foot is a condition that affects the feet. When feet are exposed to cold water for an extended period of time, they become cold and numb. When feet are removed from the exposure and brought back to normal temperature, blisters may develop that become red and feel hot.

First aid procedures for trench foot include: elevate the feet and gradually warm them; do not break the blisters; and seek medical care as soon as possible.

### Chilblains

Chilblains occur on areas of exposed skin and are red in color, swollen, and feel itchy, hot and tender. Chilblains can occur almost anywhere on the body and are caused by prolonged exposure to cold weather. They are a chronic condition and can reoccur.

> To treat chilblains, cover the affected area(s) and seek medical care as soon as possible.

### Hypothermia

Hypothermia is a cooling of the entire body that can be fatal. The first symptoms of hypothermia include severe, uncontrollable shivering, followed by numbness, drowsiness and difficulty performing simple tasks. As hypothermia progresses, shivering subsides and the victim's breathing and pulse rate begin to slow. Eyesight then begins to fail and the victim becomes uncoordinated, leading to unconsciousness.

If hypothermia is suspected, move the victim to a warm environment and seek medical care immediately.

### **Frostbite**

Frostbite occurs when temperatures are below freezing and portions of the body actually freeze. Ice crystals form inside the victim's skin and destroy tissues, killing the affected part of the body. Frostbite most commonly occurs on the cheeks, ears, fingers and toes.

Seek medical care immediately for frostbite. Move the victim to a warm environment and begin warming the affected areas. When treating frostbite, do not rub the injured area. This could cause severe damage to the affected tissue.



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If there are any subjects you would like to see addressed in this newsletter, or questions about a topic presented, please contact Mr. Brad Bohler, Gallagher Bassett Services, Inc., Two Pierce Place, Itasca, IL 60143, Telephone: 630-285-3571, Email: Brad\_Bohler@gbtpa.com.

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### **Basic Hygiene Guidelines for Preventing Staph Infections**

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- Avoid sharing personal items (e.g., deodorant, razors).
- Change socks and underwear daily.
- Wash bed linens and pajamas regularly, at least once a week if feasible.
- Wash soiled bed linens and clothes with hot water and laundry detergent. Drying clothes in a hot dryer, rather than air-drying, also helps kill bacteria in clothes.
- Bathe or shower with soap each day.
- Bathe or shower with soap after every sports practice or competition.
- Keep cuts and abrasions clean and covered with clean, dry bandages until healed.
- Follow your health care provider's instructions on proper care of wounds.
- Avoid contact with other people's wounds or material contaminated by wounds.

#### Hygiene for Sports Participants

In addition to the previously mentioned recommendations, sports participants should be provided these recommendations:

- Do not share towels, clothing or uniforms.
- Don't store wet, dirty clothing in lockers.
- Avoid sharing personal equipment.
- Keep equipment clean. Follow coach's directions about cleaning the equipment.
- Keep cuts, abrasions and wounds covered with clean, dry bandages. Persons with draining wounds or infections are not allowed to participate in practices or games until the wound has stopped draining.
- Report any cuts, abrasions or wounds to the coach and school nurse.

#### Additional Measures

If multiple cases of *Staphylococcus aureus* infection are identified in a school, students and their parents, faculty and staff should be provided information about what *Staphylococcal aureus* is, how it is spread, and how staph infections can be prevented. The local health department may need to implement more stringent requirements during an outbreak.

-Information excerpted from the Illinois Department of Public Health, "Guidance for Schools and Student Athletes about Community-Associated Staphylococcus Aureus (CA-MRSA) Infections" and the Centers for Disease Control and Prevention (CDC).