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## *Top Ten Survey Deficiencies*

**(TIP TOPIC: Disinfecting Common Equipment)**

### **EPIC Tip Sheet**

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*This tip sheet provides information on the impact of **disinfecting common equipment** in infection control deficiencies cited by the Arizona Department of Health in annual, complaint and special infection control surveys conducted from January 2018-summer 2020. This guide offers basic information on deficiency examples, potential corrective actions and preventive measures a facility can take to avoid future deficiencies. Additional resources are also provided.*

#### **CMS Deficiency – F880 Infection Control**

- **§483.80 Infection Control**

The regulation F880 requires that nursing facilities establish and maintain “*an infection prevention and control program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of communicable diseases and infections.*”

**The requirements for the Infection Prevention and Control Program (IPCP) include:**

- A system for prevention, identification, reporting, investigation and control of infections and communicable diseases. The system must apply to all residents, staff (including those providing services via contract), visitors and volunteers in the facility as well. The system should be based on the Facility Assessment and follow nationally accepted standards.
- The IPCP must include written standards, policies and procedures for elements of the program including surveillance, reporting potential incidents, standard and transmission-based precautions, isolation, prohibition of employees from direct contact with residents or their food under certain circumstances and hand hygiene. Many of these areas are frequently cited on surveys. Facility staff often fail to follow procedures appropriately, indicating a need for additional focus in these areas through competencies and training.
- A system for recording incidents identified under the IPCP and corrective actions taken by the facility. Deficient practices have been identified in this area when facilities have not completed line listings or tracked GI breakouts in facilities.
- The IPCP must also address how staff handle/store/process and transport linens. The IPCP must be reviewed and updated annually, or as needed.

#### **Examples of Deficiencies Cited for Disinfecting Common Equipment Issues:**

Multiple facilities were cited for failure to disinfect common equipment in between resident use both on regular units and on quarantine isolation units.

*The Disaster Ready Emergency Preparedness Infection Control (DR EPIC) program provides education and technical assistance for skilled nursing providers throughout the state. Individual providers will need to exercise their independent discretion in how to apply this information and technical assistance to the unique operation of each facility. For that reason, a facility's exercise of its professional judgment and due diligence in utilizing the program for infection control and risk management practices is solely within the facility's control for which it is entirely responsible.*

- Glucose meters were not disinfected between each resident use (by far the most common deficiency in this category)
- Hoyer lifts were not disinfected between each resident use
- Pill splitters were not sanitized prior to cutting pills during a medication pass
- Gait belts were not disinfected between each resident use
- Scissors were not disinfected between use during treatment procedures

**Corrective Action/Best Practices to Consider:**

- Consider that any equipment used for individual residents must be cleaned and sanitized if utilized with more than one resident
- Develop and implement policies and procedures related to disinfecting shared equipment.
- Use manufacturer's guidelines for each piece of equipment (glucometers, lifts, gait belts etc.) when creating your policies and procedures
- Consider having individual glucose meters for each resident with no sharing
- Consider having individual gait belts for each resident. Sanitize after no longer needed or discard if a disposable gait belt
- For medication passes it's important to ensure that nurses are not interrupted and have the time necessary to avoid making errors
  - Educate all staff as to the importance of not interrupting nurses during medication passes
  - Consider having CNAs and other staff use the "STOP n WATCH" tool from the Interact program to avoid interruptions (see resources below)
- Use competency check lists to ensure staff are able to perform necessary tasks
- Monitor and re-assess competencies frequently

**Resources:**

- Blood glucose monitoring guidelines from the CDC.  
<https://www.cdc.gov/injectionsafety/blood-glucose-monitoring.html>
- Slide presentation on breaking the chain of infection  
<https://www.metastar.com/wp-content/uploads/2016/10/Breaking-the-Chain-of-Infection-Prevention-of-HAI.1-F.pdf>
- Interact Stop and Watch tool – from med-pass.  
<https://www.med-pass.com/stop-and-watch-early-warning-tool-2-books-per-pack-50-slips-per-book.html>
- Guide for use of lifts and slings – check pages 14-15 for cleaning and sanitizing guidelines.  
<https://www.fda.gov/files/medical%20devices/published/Patient-Lifts-Safety-Guide.pdf>
- Additional DR EPIC resources (videos, FAQs, Helpline email and phone number)
  - If you have additional questions:
    - Send an email to the Emergency Preparedness Infection Control (EPIC) at [EPIC@AZHCA.org](mailto:EPIC@AZHCA.org), or leave a message at 602-241-4644
    - Visit the EPIC Web Resource Pages at [epic.disasterreadyaz.org](http://epic.disasterreadyaz.org)

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