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## *Top Ten Survey Deficiencies*

**(TIP TOPIC: Management for Water-borne Pathogens)**

### **EPIC Tip Sheet**

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*This tip sheet provides information on the impact of **water management programs** 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 at 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 be able to do this for all residents, staff (including those providing services via contract), visitors and volunteers in the facility as well and 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 what are frequently cited on survey since 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 Infection Prevention and Control Program must be reviewed and updated annually and as needed.

*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.*

### **Examples of Deficiencies Cited for Water Management:**

Multiple facilities were cited for failure to have water management programs for Legionnaires' or other water-borne pathogens.

- Several facilities had heard of the requirement but had not developed or implemented such a program.
- Several facilities had developed a policy for water management but had not implemented the program.
- Several facilities had contacted outside industrial hygiene companies, but actual water testing had not yet occurred.

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

- Develop a water management plan (WMP) in compliance with CMS QSO Memo regarding Legionnaires' Disease (*see resource below*).
- Familiarize yourself with the materials on the EPIC website regarding water management (*see resource below*).
- Evaluate water piping systems and eliminate dead legs where water may sit for prolonged periods before mixing with delivered water. For example, a drinking fountain that has been taken out of service may serve as a dead leg for water to stagnate.
- Health care settings are notorious for low water turnover, which results in chlorine in the standing water losing its potency. Without new chlorinated water being pulled through the system, stagnation occurs. Periodically thoroughly flush all plumbing supply fixtures. Don't forget to flush water through infrequently utilized fixtures (*e.g., safety showers, eye wash stations*).
- Clean and maintain cooling tower systems regularly. Periodic physical removal of scale/slime buildup and use of a biocide are recommended.
- Use sterile water to fill and/or clean respiratory devices (*e.g., humidifiers, nebulizers*). Isopropyl alcohol may also be used for cleaning and disinfecting these items followed by thorough drying.
- Clean/disinfect on a regular basis all mechanical devices that are connected to a water source and that may be prone to the accumulation of dirt, scale or biological material. Examples include sink aerators, humidifiers, decorative fountains, shower heads, mister system heads, etc.
- Contract a third party industrial hygiene firm to perform periodic testing within facilities to help monitor for the presence of *Legionella* bacteria in your water systems.

### **Resources:**

- [CMS QSO Memo regarding Legionnaires' Disease](#)
- [EPIC Website – water and Legionnaires' disease resources](#)
- [Legionellosis Investigation Form, Arizona Department of Health Services](#)
- [View the IAQTV video "Legionnaires' Disease: What You Need to Know"](#)
- [View the IAQTV video on Legionella & Monitoring Building Water](#)

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