Dialysis Assessment and Response Tool (DART) for Infection Prevention and Control

Routine Environmental Cleaning and Disinfection

This form is intended to aid a DART facilitator in the review of a dialysis facility's routine environmental cleaning and disinfection practices (Part A). Additionally, questions are included to guide observations of facility/healthcare personnel (HCP) practices (Part B) and audits of hemodialysis station routine disinfection (Part C).

Unless otherwise specified, questions and responses in this module address environmental cleaning and disinfection practices while the clinic is open and active clinical care is being provided, not contracted cleaning staff practices after hours. Environmental cleaning and disinfection of the dialysis stations between patients is typically done by Technicians (patient care technicians [PCTs], certified clinical hemodialysis technicians [CCHTs], certified hemodialysis technologists/technicians [CHTs]), or registered nurses (RNs) within the facility. Outpatient dialysis facilities may not have environmental services (EVS) staff available to help with cleaning and disinfection during the treatment day. After hours, when patients are no longer receiving treatments, contracted cleaning staff or EVS may enter the facility to do general cleaning. These contracted staff will typically clean high-touch surfaces, sweep and mop floors, and clean restrooms; they will not clean or disinfect dialysis equipment or dialysis stations.

Part A. Routine Environmental Cleaning and Disinfection Interview Questions

1. Who is primarily responsible for cleaning and disinfecting the patient station between patients?

- ◯ EVS Personnel
- ◯ Registered Nurses
- ◯ Technicians (PCTs, CCHTs, CHTs) or Licensed Vocational Nurses/Licensed Practical Nurses (LPNs/LVNs)
- ◯ Unknown
- ◯ Not assessed
- ◯ Other (*specify*): _____

2. Who is primarily responsible for cleaning and disinfecting the portable equipment (e.g., wheelchairs, patient lifts, oxygen concentrators, IV poles, thermometers, pH meters, glucometers) between patients?

- ◯ EVS Personnel
- ◯ Registered Nurses
- ◯ Technicians (PCTs, CCHTs, CHTs) or LPNs/LVNs
- ◯ Unknown
- ◯ Not assessed
- ◯ Other (*specify*): _____

3. Is there a process to indicate when a dialysis station and portable equipment have been cleaned and disinfected?

- ◯ Yes
- ◯ No
- ◯ Unknown
- ◯ Not assessed

If YES:

3a. Describe the process.

Rationale:

"Clean and disinfect the dialysis station (e.g., chairs, beds, tables, machines) between patients.

- Give special attention to cleaning control panels on the dialysis machines and other surfaces that are frequently touched and potentially contaminated with patients' blood." (pg 21)

"Establish written protocols for cleaning and disinfecting surfaces and equipment in the dialysis unit, including careful mechanical cleaning before any disinfection process. If the manufacturer has provided instructions on sterilization or disinfection of the item, these instructions should be followed." (pg 22)

"After each patient treatment, clean environmental surfaces at the dialysis station, including the dialysis bed or chair, countertops, and external surfaces of the dialysis machine, including containers associated with the prime waste." (pg 22)

"Between uses of medical equipment (e.g., scissors, hemostats, clamps, stethoscopes, blood pressure cuffs), clean and apply a hospital disinfectant (i.e., low-level disinfection); if the item is visibly contaminated with blood, use a tuberculocidal disinfectant (i.e., intermediate-level disinfection)." (pg 22)

Source: Recommendations for Preventing Transmission of Infections Among Chronic Hemodialysis Patients: https://www.cdc.gov/mmwr/PDF/rr/rr5005.pdf

4. How often are high-touch environmental surfaces in the facility cleaned and disinfected (e.g., patient scale)? (*select all that apply*)

- ☐ Daily
- ☐ More than daily
- ☐ Less than daily
- ☐ Unknown
- ☐ Not assessed
- ☐ Other (*specify*): _____

Rationale:

"…high-touch housekeeping surfaces in patient care areas (e.g., doorknobs, bedrails, light switches, wall areas around the toilet in the patient's room, and the edges of privacy curtains) should be cleaned and/or disinfected more frequently than surfaces with minimal hand contact."

Source: Guideline for Environmental Infection Control in Health-Care Facilities, pg 89: https://www.cdc.gov/infection-control/media/pdfs/Guideline-Environmental-H.pdf

"Clearly define responsibilities for the cleaning and disinfection of noncritical equipment, shared medical equipment, and other electronics (e.g., ICU monitors, ventilator surfaces, bar code scanners, point-of-care devices, mobile workstations, code carts, airway boxes).

1. Make sure that staff involved in cleaning and disinfection are aware of their responsibilities and are appropriately trained to fulfill them.
2. Make sure that cleaning and disinfection supplies are easily accessible (e.g., cleaning cart and patient care areas are adequately stocked)."

Source: https://www.cdc.gov/healthcare-associated-infections/hcp/infection-control/?CDC_AAref_Val=https://www.cdc.gov/hai/prevent/environment/surfaces.html

"A facility should establish written protocols for cleaning and disinfecting surfaces and equipment, including careful mechanical cleaning before any disinfection process."

Source: CMS Interpretive Guidance, pg 16: https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/downloads/esrdpgmguidance.pdf

5. Is there a process for selecting products used by the facility for cleaning and disinfection?

- ◯ Yes
- ◯ No
- ◯ Unknown
- ◯ Not assessed

If YES:

5a. Describe the factors considered when selecting products (e.g., efficacy against common pathogens, compatibility with surfaces):

Rationale:

"Select EPA-registered disinfectants that have microbiocidal activity against the pathogens most likely to contaminate the patient-care environment."

Source: https://www.cdc.gov/infection-control/hcp/core-practices/index.html

Factors to consider when selecting products include, but are not limited to:

- "Select proper disinfectant(s) and determine correct dilution(s) for routine use.

- Use only Environmental Protection Agency (EPA)-registered hospital disinfectants.
  - EPA-registered hospital disinfectants have label instructions explaining how they should be used in healthcare settings.
  - EPA-registered sodium hypochlorite or other products for healthcare settings are available and are preferred over household bleach products that are not EPA-registered for disinfection of surfaces.
- Low-level vs. intermediate-level disinfection:
  - Routine disinfection of environmental surfaces can be accomplished using a low-level disinfectant (any EPA-registered hospital disinfectant)."
  - "Intermediate-level disinfectants are sufficiently potent to inactivate mycobacteria and have a tuberculocidal label claim, whereas low-level disinfectants are not strong enough to inactivate these bacteria.
  - For convenience, consider selecting and routinely using hospital disinfectants that are tuberculocidal or have label claims of activity against hepatitis B virus (HBV) and human immunodeficiency virus (HIV). These products may be used to perform routine and intermediate-level disinfection."

Source: Environmental Surface Disinfection in Dialysis Facilities: Notes for Clinical Managers: https://www.cdc.gov/dialysis-safety/media/pdfs/env-notes-508.pdf

- EPA has lists of products that are registered against common pathogens (e.g,. List B are products registered with EPA for claims against Mycobacterium tuberculosis)
  - Ease of use (e.g., shorter contact times, one-step cleaner/disinfectants, mixing and dilution not required)
  - Compatibility with environmental surfaces and manufacturer's instructions for use (MIFUs) for specific instruments or equipment
  - Safety

Source: How to Read a Disinfectant Label: https://www.cdc.gov/project-firstline/hcp/training/infographic-disinfect-label.html

6. Is mixing and diluting of cleaning and disinfection products performed by HCP?

- ◯ Yes (e.g. bleach water, automatic mixing dispensers)
- ◯ No, facility uses ready-to-use wipes/spray
- ◯ Unknown
- ◯ Not assessed

If YES:

6a. Who is primarily responsible for mixing and diluting?

- ◯ EVS staff
- ◯ Nursing staff
- ◯ Technicians (PCTs, CCHTs, CHTs) or LPNs/LVNs
- ◯ Biomed technicians
- ◯ Unknown
- ◯ Not assessed
- ◯ Other (*specify*): _____

6b. Describe the procedure/process for mixing and diluting.
Note: Description should include PPE worn by the individual who performs the process, containers used to store the mixed solution(s), how the containers are labeled, how the mixed solution is stored and for how long, how automatic mixing equipment is recalibrated (if used), and how the dilution is verified to be the correct concentration.

Rationale:

Note: Most dialysis facilities will use bleach manually mixed with water by HCP for cleaning/disinfection.

"Select proper disinfectant(s) and determine correct dilution(s) for routine use.

- Use only Environmental Protection Agency (EPA)-registered hospital disinfectants.
  - EPA-registered hospital disinfectants have label instructions explaining how they should be used in healthcare settings.
  - EPA-registered sodium hypochlorite or other products for healthcare settings are available and are preferred over household bleach products that are not EPA-registered for disinfection of surfaces."

"Identify and instruct staff on the correct dilution of the disinfectant agent.

- Read the label carefully and follow the manufacturer's label instructions for proper dilution of the disinfectant. Note, label-specified dilutions for EPA-registered sodium hypochlorite (i.e., bleach) products might not necessarily conform to a 1:100 or 1:10 dilution. The manufacturer's instructions are specific to the product and should be followed. Some products do not require preparation or dilution and are sold as "ready to use".
- Products with tuberculocidal, HBV, and HIV label claims will also have instructions for cleaning blood spills.

Establish procedure for disinfecting dialysis station between patients.

- Identify responsible staff."
- "Determine staff personal protective equipment (PPE) needs based on disinfectant product labels."

"Ensure that staff have access to proper supplies, which should include:

- Leak-proof disposal containers;
- Gloves;
- Other appropriate PPE based on product label instructions;
- Properly diluted EPA-registered hospital disinfectants for routine/intermediate-level disinfection; and
- Wipes, cloths, spray bottles and/or buckets"

Source: Environmental Surface Disinfection in Dialysis Facilities: Notes for Clinical Managers: https://www.cdc.gov/dialysis-safety/media/pdfs/env-notes-508.pdf

"The Pesticide Product and Label System (PPLS) provides a collection of pesticide product labels (Adobe PDF format) that have been accepted by EPA under Section 3 of the Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA)."

7. Describe the facility process/procedure for cleaning and disinfecting priming buckets, waste handling option (WHO) ports, or other waste handling technology.

Rationale:

"Clean and disinfect the dialysis station (e.g., chairs, beds, tables, machines) between patients.

- Give special attention to cleaning control panels on the dialysis machines and other surfaces that are frequently touched and potentially contaminated with patients' blood.
- Discard all fluid and clean and disinfect all surfaces and containers associated with the prime waste (including buckets attached to the machines)."

Source: Recommendations for Preventing Transmission of Infections Among Chronic Hemodialysis Patients, pg 21: RR5005 front cover-Cont Ed-web.p65

"Establish procedure for cleaning and disinfection of priming buckets.

- Process should include emptying, cleaning, (e.g., if blood is present), disinfection, and air-drying of bucket.
- Disinfected prime buckets should be dry before reattaching to machine or use."

Source: Environmental Surface Disinfection in Dialysis Facilities: Notes for Clinical Managers, pg 2: https://www.cdc.gov/dialysis-safety/media/pdfs/env-notes-508.pdf

A waste handling option (WHO) port is a feature of some hemodialysis machines that is designed to dispose of any saline that is flushed through the dialyzer before the machine is used for a patient. If used, the facility should follow the machine manufacturer's instructions.

Source: *Checklist:* Dialysis Station Routine Disinfection, page 2: https://www.cdc.gov/dialysis-safety/media/pdfs/Env-checklist-508.pdf

"Clean and reprocess (disinfect or sterilize) reusable medical equipment (e.g., blood glucose meters and other point-of-care devices, blood pressure cuffs, oximeter probes, surgical instruments, endoscopes) prior to use on another patient or when soiled.

Consult and adhere to manufacturers' instructions for reprocessing."

Source: CDC's Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings, 5f: https://www.cdc.gov/infection-control/hcp/core-practices/index.html

8. Does the facility use cleaning staff to perform general facility cleaning after hours (e.g., mopping floors, emptying non-clinical trash containers)?

- ◯ Yes
- ◯ No
- ◯ Unknown
- ◯ Not assessed

If YES:

8a. Describe what cleaning activities this staff perform and the products they use.

Part B. Routine Environmental Cleaning and Disinfection – Facility-level Observations

Ideally, at least two observations of different staff (1 observation each) within the facility are completed for the questions in this section. If direct observations cannot be gathered, then information can be obtained by asking staff for input when they are not providing direct patient care.

Note: Review the labels for all products used for routine cleaning and disinfection of environmental surfaces and non-critical patient care equipment for the following information before continuing:

- If blood or body fluids are present, is a pre-cleaning step required?
- What is the application and contact time?

Location of Observation #1: _____

Role of Staff Observed: _____

1. Where are the following located?

a. Routine cleaning and disinfection products/supplies?

- ◯ Dedicated area on treatment floor
- ◯ Storage area away from treatment floor
- ◯ Not observed, but endorsed by staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

a1. Are they easily accessible for HCP?

- ◯ Yes
- ◯ No
- ◯ Not assessed

a2. Are they adequately stocked?

- ◯ Yes
- ◯ No
- ◯ Not assessed

b. Blood spill supplies (e.g. proper disinfectant and/or spill kit)?

- ◯ Dedicated area on treatment floor
- ◯ Storage area away from treatment floor
- ◯ Not observed, but endorsed by staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

b1. Are they easily accessible for HCP?

- ◯ Yes
- ◯ No
- ◯ Not assessed

b2. Are they adequately stocked?

- ◯ Yes
- ◯ No
- ◯ Not assessed

Rationale:

"Make sure that cleaning and disinfection supplies are easily accessible (e.g., cleaning cart and patient care areas are adequately stocked)."

Source: Considerations for Reducing Risk: Surfaces in Healthcare Facilities: https://www.cdc.gov/healthcare-associated-infections/hcp/infection-control/

2. Do HCP wear appropriate PPE to prevent exposure to chemicals when performing cleaning and disinfection activities?

- ◯ Yes
- ◯ No
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

Rationale:

"Consult the products' material safety data sheets (MSDS) to determine appropriate precautions to prevent hazardous conditions during product application. Personal protective equipment (PPE) used during cleaning and housekeeping procedures should be appropriate to the task."

Source: Guideline for Environmental Infection Control in Health-Care Facilities, pg 89: https://www.cdc.gov/infection-control/media/pdfs/Guideline-Environmental-H.pdf

3. Do HCP change gloves and perform hand hygiene whenever gloves become visibly soiled or when moving from a soiled to a clean task (e.g., after touching the wall box or its components, after cleaning a blood spill)?

- ◯ Yes
- ◯ No
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

Rationale:

"Hands always should be washed after gloves are removed and between patient contacts, as well as after touching blood, body fluids, secretions, excretions, and contaminated items."

Source: Recommendations for Preventing Transmission of Infections Among Chronic Hemodialysis Patients, pg 19: https://www.cdc.gov/mmwr/PDF/rr/rr5005.pdf

4. Can staff tell you the cleaning/disinfection product contact times?

- ◯ Yes
- ◯ No
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

Rationale:

"Cleaning and disinfection products should be used according to the manufacturer's instructions. This typically includes using mechanical action for cleaning steps and, for disinfectants, making sure the surface remains wet for the recommended contact time."

Sources:

Environmental Cleaning and Disinfection: Principles of Infection Transmission and the Role of the Environment: https://www.cdc.gov/infection-control/media/pdfs/Strive-EC101-508.pdf

Cleaning and Disinfection Strategies for Non-Critical Surfaces and Equipment: https://www.cdc.gov/infection-control/media/pdfs/strive-ec102-508.pdf

5. Are containers of cleaning and disinfection products only accessed with clean wipes or cloths (e.g., only clean cloths dipped in buckets of cleaning solution)?

- ◯ Yes
- ◯ No
- ◯ Not applicable – facility uses ready-to-use wipes/spray
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

Rationale:

"Ensure staff have been properly trained on: dialysis station cleaning/disinfection protocol; how to prepare the appropriate "use-dilution" of the disinfectant; application of sufficient disinfectant to achieve visibly wet surfaces per the product label; proper use of PPE (e.g., gloves, gown); and management of routine disinfection vs. surfaces with visible soil or blood."

Source: Environmental Surface Disinfection in Dialysis Facilities: Notes for Clinical Managers, pg 2: https://www.cdc.gov/dialysis-safety/media/pdfs/env-notes-508.pdf

6. Is reusable, non-critical patient care equipment cleaned and disinfected before use on another patient (e.g., thermometers, conductivity meters, stethoscopes)?

- ◯ Yes
- ◯ No
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

Rationale:

"Establish procedure for cleaning and disinfection of reusable supplies."

Source: Environmental Surface Disinfection in Dialysis Facilities: Notes for Clinical Managers, pg 2: https://www.cdc.gov/dialysis-safety/media/pdfs/env-notes-508.pdf

7. For clamps used in the facility assess the following (e.g., fistula/graft clamps, line clamps, hemostats):

7a. Cleaning step: If blood is present on the clamp(s) after use on a patient, is it cleaned according to facility policy and cleaning product MIFU?

- ◯ Yes
- ◯ No
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

7b. Disinfection step: Are the clamps submerged completely in disinfection solution for the proper amount of time according to the MIFU and facility policy?

- ◯ Yes
- ◯ No
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

8. After cleaning and disinfecting, is shared patient care equipment, such as fistula clamps or machine wands, stored in a dedicated clean area?

- ◯ Yes
- ◯ No
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

Rationale:

Note: Wand assemblies are intended to be used with hemodialysis machines to provide a fluid pathway for the bicarbonate and acidified concentrates provided in jugs during treatment and/or the cleaning solution during the disinfection process. After completion of the dialysis treatment, gauze and pressure for an extended period of time are often required to stop bleeding from the patient's access site. Fistula clamps provide consistent pressure to the fistula/graft access site without the need for the patient or staff to hold the site until clotting is achieved. Most dialysis facilities will put used fistula clamps in a bucket of mixed bleach water as part of their cleaning/disinfection process.

"Between uses of medical equipment (e.g., scissors, hemostats, clamps, stethoscopes, blood pressure cuffs), clean and apply a hospital disinfectant (i.e., low-level disinfection); if the item is visibly contaminated with blood, use a tuberculocidal disinfectant (i.e., intermediate-level disinfection)."
Source: Recommendations for Preventing Transmission of Infections Among Chronic Hemodialysis Patients, pg 22: https://www.cdc.gov/mmwr/PDF/rr/rr5005.pdf

9. Does the facility have shared computer terminals between patient stations?

- ◯ Yes
- ◯ No
- ◯ Not assessed

If YES:

9a. If asked, can HCP describe when the computer terminals should be cleaned/disinfected?

- ◯ Yes
- ◯ No
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

Rationale:

"For equipment such as computer touchscreens and keyboards, check with the manufacturer for instructions and compatibility of equipment with disinfecting agent."

Source: Environmental Surface Disinfection in Dialysis Facilities: Notes for Clinical Managers, pg 2: https://www.cdc.gov/dialysis-safety/media/pdfs/env-notes-508.pdf

Part B. Routine Environmental Cleaning and Disinfection – Facility-level Observations #2

Ideally, at least two observations of different staff (1 observation each) within the facility are completed for the questions in this section. If direct observations cannot be gathered, then information can be obtained by asking staff for input when they are not providing direct patient care.

Note: Review the labels for all products used for routine cleaning and disinfection of environmental surfaces and non-critical patient care equipment for the following information before continuing:

- If blood or body fluids are present, is a pre-cleaning step required?
- What is the application and contact time?

Location of Observation #2: _____

Role of Staff Observed: _____

1. Where are the following located?

a. Routine cleaning and disinfection products/supplies?

- ◯ Dedicated area on treatment floor
- ◯ Storage area away from treatment floor
- ◯ Not observed, but endorsed by staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

a1. Are they easily accessible for HCP?

- ◯ Yes
- ◯ No
- ◯ Not assessed

a2. Are they adequately stocked?

- ◯ Yes
- ◯ No
- ◯ Not assessed

b. Blood spill supplies (e.g. proper disinfectant and/or spill kit)?

- ◯ Dedicated area on treatment floor
- ◯ Storage area away from treatment floor
- ◯ Not observed, but endorsed by staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

b1. Are they easily accessible for HCP?

- ◯ Yes
- ◯ No
- ◯ Not assessed

b2. Are they adequately stocked?

- ◯ Yes
- ◯ No
- ◯ Not assessed

Rationale:

"Make sure that cleaning and disinfection supplies are easily accessible (e.g., cleaning cart and patient care areas are adequately stocked)."

Source: Considerations for Reducing Risk: Surfaces in Healthcare Facilities: https://www.cdc.gov/healthcare-associated-infections/hcp/infection-control/

2. Do HCP wear appropriate PPE to prevent exposure to chemicals when performing cleaning and disinfection activities?

- ◯ Yes
- ◯ No
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

Rationale:

"Consult the products' material safety data sheets (MSDS) to determine appropriate precautions to prevent hazardous conditions during product application. Personal protective equipment (PPE) used during cleaning and housekeeping procedures should be appropriate to the task."

Source: Guideline for Environmental Infection Control in Health-Care Facilities, pg 89: https://www.cdc.gov/infection-control/media/pdfs/Strive-EC101-508.pdf

3. Do HCP change gloves and perform hand hygiene whenever gloves become visibly soiled or when moving from a soiled to a clean task (e.g., after touching the wall box or its components, after cleaning a blood spill)?

- ◯ Yes
- ◯ No
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

Rationale:

"Hands always should be washed after gloves are removed and between patient contacts, as well as after touching blood, body fluids, secretions, excretions, and contaminated items."

Source: Recommendations for Preventing Transmission of Infections Among Chronic Hemodialysis Patients, pg 19: https://www.cdc.gov/mmwr/PDF/rr/rr5005.pdf

4. Can staff tell you the cleaning/disinfection product contact times?

- ◯ Yes
- ◯ No
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

Rationale:

"Cleaning and disinfection products should be used according to the manufacturer's instructions. This typically includes using mechanical action for cleaning steps and, for disinfectants, making sure the surface remains wet for the recommended contact time."

Sources:

Environmental Cleaning and Disinfection: Principles of Infection Transmission and the Role of the Environment: https://www.cdc.gov/infection-control/media/pdfs/IPC-mod4-EVS-508.pdf

Cleaning and Disinfection Strategies for Non-Critical Surfaces and Equipment: https://www.cdc.gov/infection-control/media/pdfs/strive-ec102-508.pdf

5. Are containers of cleaning and disinfection products only accessed with clean wipes or cloths (e.g., only clean cloths dipped in buckets of cleaning solution)?

- ◯ Yes
- ◯ No
- ◯ Not applicable – facility uses ready-to-use wipes/spray
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

Rationale:

"Ensure staff have been properly trained on: dialysis station cleaning/disinfection protocol; how to prepare the appropriate "use-dilution" of the disinfectant; application of sufficient disinfectant to achieve visibly wet surfaces per the product label; proper use of PPE (e.g., gloves, gown); and management of routine disinfection vs. surfaces with visible soil or blood."

Source: Environmental Surface Disinfection in Dialysis Facilities: Notes for Clinical Managers, pg 2: https://www.cdc.gov/dialysis-safety/media/pdfs/env-notes-508.pdf

6. Is reusable, non-critical patient care equipment cleaned and disinfected before use on another patient (e.g., thermometers, conductivity meters, stethoscopes)?

- ◯ Yes
- ◯ No
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

Rationale:

"Establish procedure for cleaning and disinfection of reusable supplies."

Source: Environmental Surface Disinfection in Dialysis Facilities: Notes for Clinical Managers, pg 2: https://www.cdc.gov/dialysis-safety/media/pdfs/env-notes-508.pdf

7. For clamps used in the facility assess the following (e.g., fistula/graft clamps, line clamps, hemostats):

7a. Cleaning step: If blood is present on the clamp(s) after use on a patient, is it cleaned according to facility policy and cleaning product MIFU?

- ◯ Yes
- ◯ No
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

7b. Disinfection step: Are the clamps submerged completely in disinfection solution for the proper amount of time according to the MIFU and facility policy?

- ◯ Yes
- ◯ No
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

8. After cleaning and disinfecting, is shared patient care equipment, such as fistula clamps or machine wands, stored in a dedicated clean area?

- ◯ Yes
- ◯ No
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

Rationale:

Note: Wand assemblies are intended to be used with hemodialysis machines to provide a fluid pathway for the bicarbonate and acidified concentrates provided in jugs during treatment and/or the cleaning solution during the disinfection process. After completion of the dialysis treatment, gauze and pressure for an extended period of time are often required to stop bleeding from the patient's access site. Fistula clamps provide consistent pressure to the fistula/graft access site without the need for the patient or staff to hold the site until clotting is achieved. Most dialysis facilities will put used fistula clamps in a bucket of mixed bleach water as part of their cleaning/disinfection process.

"Between uses of medical equipment (e.g., scissors, hemostats, clamps, stethoscopes, blood pressure cuffs), clean and apply a hospital disinfectant (i.e., low-level disinfection); if the item is visibly contaminated with blood, use a tuberculocidal disinfectant (i.e., intermediate-level disinfection)."

Source: Recommendations for Preventing Transmission of Infections Among Chronic Hemodialysis Patients, pg 22: https://www.cdc.gov/mmwr/PDF/rr/rr5005.pdf

9. Does the facility have shared computer terminals between patient stations?

- ◯ Yes
- ◯ No
- ◯ Not assessed

If YES:

9a. If asked, can HCP describe when the computer terminals should be cleaned/disinfected?

- ◯ Yes
- ◯ No
- ◯ Not observed, but endorsed by frontline staff
- ◯ Not observed, not endorsed by staff
- ◯ Not assessed

Rationale:

"For equipment such as computer touchscreens and keyboards, check with the manufacturer for instructions and compatibility of equipment with disinfecting agent."

Source: Environmental Surface Disinfection in Dialysis Facilities: Notes for Clinical Managers, pg 2: https://www.cdc.gov/dialysis-safety/media/pdfs/env-notes-508.pdf

Part C. Routine Environmental Cleaning and Disinfection – Staff-level Observations of Hemodialysis Station Routine Disinfection

Ideally, complete 5 audits of staff performing hemodialysis station routine disinfection within the facility using the audit tool in this section. Audit tools are not fillable and can be accessed below or at this link: https://www.cdc.gov/dialysis-safety/media/pdfs/dialysis-station-disinfect-tool-508.pdf

*Facility Name:*_____ *Observer:*_____

*Date:*_____ *Day: M W F Tu Th Sa* *Shift: 1st 2nd 3rd 4th* *Start time:*_____*AM / PM*

Audit Tool: Hemodialysis station routine disinfection observations*

(Use a "√" if action performed correctly, a "Φ" if not performed/ performed incorrectly. If not observed, leave blank. All applicable actions within a row must have "√" for the procedure to be counted as successful.")

*This audit tool applies when there is no visible soil on surfaces at the dialysis station. If visible blood or other soil is present, surfaces must be cleaned prior to disinfection.

Discipline	All supplies removed from station and prime bucket emptied	Gloves removed, hand hygiene performed	Station is empty before disinfection initiated**	New clean gloves worn	Disinfectant applied to all surfaces and prime bucket	All surfaces are wet with disinfectant	All surfaces allowed to dry	Gloves removed, hand hygiene performed	No supplies or patient brought to station until disinfection complete

Discipline: **P**=physician, **N**=nurse, **T**=technician, **S**=student, **O**=other

Duration of observation period: _____

Number of procedures performed correctly = _____

Total number of procedures observed during audit = _____

ADDITIONAL COMMENTS/OBSERVATIONS:

** Ensure the patient has left the dialysis station before disinfection is initiated.