

Infection Control Assessment and Response (ICAR) Tool for General Infection Prevention and Control (IPC) Across Settings

Module 11: Water Exposure Facilitator Guide

Water Exposure: This form is intended to aid an ICAR facilitator in the review of a healthcare facility's infection risks posed by water exposures and related policies (Part A) and guide observations about water exposure risks (Part B). The form is intended for use in acute care facilities, long-term care facilities, and outpatient healthcare facilities. It is not intended for use in hemodialysis facilities; if conducting an assessment of a hemodialysis facility, refer to the resources at: [Audit Tools and Checklists | Dialysis Safety | CDC](#)

NOTE: This module does not apply to assessment of dental water lines.

Part A. Water Exposure Interview Questions

This interview should include the person in charge of Plant Operations or Facility Management

1. Does your facility have a water management program (WMP) to reduce the growth and transmission of *Legionella* and other waterborne pathogens (e.g., *Pseudomonas*, *Acinetobacter*, *Burkholderia*, *Elizabethkingia*, *Stenotrophomonas*, nontuberculous mycobacteria, and fungi)?
 - Yes
 - No
 - Unknown
 - Not Assessed

A water management plan should address additional topics not addressed in this ICAR, including the assessment and assurance of the microbial safety of water within a facility's premise plumbing. Information regarding water management including tools for developing a WMP to ensure the safety of patients, staff and visitors is available at [Reduce Risk from Water | HAI | CDC](#) and includes the following tools and other resources:

- [Healthcare Facility Water Management Program Checklist \(cdc.gov\)](#)
- [Water Infection Control Risk Assessment \(WICRA\) for Healthcare Settings \(cdc.gov\)](#) which may be performed during the initial development of a WMP, and which can be used to evaluate water sources, modes of transmission, patient susceptibility, patient exposure and program preparedness. It may be updated over time and subsequently reused.
- CDC Toolkit: [Developing a Water Management Program to Reduce Legionella Growth and Spread in Buildings.](#)

NOTE: The Centers for Medicare and Medicaid Services (CMS) considers it essential that healthcare facilities have a Water Management Plan, and provides information at [SC17-30.Legionella Risks in Healthcare Revised 6-09-17 \(cms.gov\)](#)

NOTE: CDC guidelines recommend to evaluate possible environmental sources of specimen contamination (e.g., water, laboratory solutions, or reagents) when microbiologic test results (e.g., cultures) appear to be inconsistent with the given clinical context. For more information, see Box 1 of <https://www.cdc.gov/infection-control/hcp/environmental-control/>

NOTE: An essential part of a water management plan includes monitoring water coming into the building (e.g., municipal water line). CDC recommends that healthcare facilities develop an ongoing dialogue with their drinking water provider so that they are aware of changes that may affect the building's water supply.

Source: <https://www.cdc.gov/control-legionella/php/toolkit/wmp-toolkit.html>.

Additional resources for facilities that receive water from private sources (e.g., ground water wells) are available at [Private Water Systems | Private Water Systems | Drinking Water | Healthy Water | CDC](#).

Notes



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Control and Prevention

2. Has a facility water infection control risk assessment been performed to identify potential issues arising from water exposures, e.g., CDC's WICRA?
- Yes
 - No
 - Unknown
 - Not Assessed

CDC Water Infection Control Risk Assessment (WICRA) for Healthcare Settings: <https://www.cdc.gov/healthcare-associated-infections/media/pdfs/water-assessment-tool-508.pdf>

If YES:

2a. When was the last assessment performed (month/year)? _____

2b. What issues, if any, were identified? (Use Notes section if needed)

2c. Have you reviewed and acted upon any of those issues with your WMP team?

- Yes
- No
- Unknown
- Not Assessed

Notes

Water-associated Pathogens

3. Does the facility have a surveillance process to detect healthcare-associated infections attributable to water-associated pathogens?
- Yes
 - No
 - Unknown
 - Not Assessed

If YES:

3a. What water-associated pathogens are routinely included in surveillance plans? (select all that apply)

- Gram-negative bacteria (e.g., *Pseudomonas*, *Burkholderia*)
- Nontuberculous mycobacteria (NTM)
- Legionella*
- Fungi (e.g., *Aspergillus* spp, *Fusarium* spp)
- None of the above
- Unknown
- Not assessed
- Other (specify): _____

"Monitor the incidence of infections that may be related to care provided at the facility and act on the data and use information collected through surveillance to detect transmission of infectious agents in the facility."

Source: <https://www.cdc.gov/infection-control/hcp/core-practices/>

"Establish a surveillance process to detect healthcare-associated Legionnaires' disease. Category IB" Source: <https://www.cdc.gov/infection-control/hcp/environmental-control/>

3b. Does clinical testing of patients/residents for Legionella include a paired lower respiratory culture and urinary antigen test?

- Yes
- No
- Unknown
- Not Assessed

“The preferred diagnostic tests for Legionnaires’ disease are culture of lower respiratory secretions (e.g., sputum, bronchoalveolar lavage) on selective media and the *Legionella* urinary antigen test.”

Sources: <https://www.cdc.gov/investigate-legionella/php/healthcare-resources/testing-collecting-specimens.html>
<https://www.cdc.gov/legionella/php/laboratories>

4. If a single case of **presumptive** healthcare-associated Legionellosis is identified OR ≥ 2 cases of **possible** healthcare-associated Legionellosis are identified, does the facility perform a full investigation for the source of *Legionella* in the facility?

- Yes
- No
- Unknown
- Not Assessed

“CDC recommends that public health officials perform a full investigation for the source of *Legionella* in a facility upon identification of:

- ≥ 1 case of presumptive healthcare-associated Legionnaires’ disease at any time
- ≥ 2 cases of possible healthcare-associated Legionnaires’ disease within 12 months of each other”

Source: <https://www.cdc.gov/investigate-legionella/php/healthcare-resources/planning-investigation.html>

If **YES**:

4a. As part of a full investigation, does the facility perform active surveillance for Legionellosis?

- Yes
- No
- Unknown
- Not Assessed

“Active clinical surveillance is a period of enhanced surveillance during which healthcare facility staff proactively and systematically identify patients with healthcare-associated pneumonia (pneumonia with onset ≥ 48 hours after admission). During this time, they also ensure that clinicians perform *Legionella*-specific testing for each of those patients.”

Source: <https://www.cdc.gov/investigate-legionella/php/healthcare-resources/testing-collecting-specimens.html>

Notes

Measures to Reduce Risk from Water

5. Which of the following strategies to prevent contamination of the patient care supplies due to splashing are practiced? (Select all that apply)

Taps located offset from sink drains

Water discharge points at least 10 inches above the sink bottoms in handwashing sinks

Patient care items located at least 3 feet from sinks or a splash guard in place to prevent items from becoming wet, including in medication preparation areas

Avoidance of faucet aerators in protective environments and transplant units

Daily cleaning and disinfection of adjacent countertops with an EPA-registered disinfectant

Where installed, daily cleaning and disinfection of splash guards with an EPA-registered disinfectant

No strategies practiced

Unknown

Not Assessed

Other (specify): _____

"Patients may be exposed to organisms in drains when water splashes from the drain. Splashes may occur when water flow hits the contaminated drain cover or when a toilet or hopper is flushed. Splashes can lead to dissemination of MDRO-containing droplets, which in turn may contaminate the local environment or the skin of nearby healthcare personnel and patients."

Source: <https://www.cdc.gov/healthcare-associated-infections/php/toolkit/water-management.html>

"Prevent faucets from discharging directly above the drain as this causes splashing (i.e., angle water away from the drain or offset the faucet from the drain). When installing new sinks, consider selecting designs that prevent splashing. (Reference FGI Guideline for Hospitals A2.1-8.4.3.2 (1) a.)

Use sinks in patient care areas with adequate depth and the maximum water flow as regulated to prevent splashing."

Sources: *FGI Guideline for Hospitals A2.1-8.4.3.2 (1) a., b., c. and A2.1-8.4.3.2 (2) (5), (6)*; Gestrich, S. A., Jencson, A. L., Cadnum, J. L., Livingston, S. H., Wilson, B. M., & Donskey, C. J. (2018). A multicenter investigation to characterize the risk for pathogen transmission from healthcare facility sinks. *Infection control and hospital epidemiology*, 39(12), 1467–1469. <https://doi.org/10.1017/ice.2018.191>;

<https://www.cdc.gov/healthcare-associated-infections/php/toolkit/water-management.html>

6. Does the facility take any measures to reduce the development of biofilms in sink drains?

Yes

No

Unknown

Not Assessed

If **YES**:

6a. What measures are taken? (select all that apply)

Daily cleaning and disinfection of sinks with an EPA-registered disinfectant

Application of an EPA-registered disinfectant with label claim against biofilms

Staff education to avoid discarding patient waste and/or nutritive fluids down sinks

Unknown

Not assessed

Other (specify): _____

"Clean and disinfect sinks and wash basins on a regular basis by using an EPA-registered product as set by facility policies."

Source: <https://www.cdc.gov/infection-control/hcp/environmental-control/>

"Do not discard patient waste down sinks and minimize discarding liquid nutritional supplements or other beverages down sinks or toilets."

Source: <https://www.cdc.gov/healthcare-associated-infections/php/toolkit/water-management.html>

7. Are all **toilets** in patient/resident rooms located in restrooms with doors that can be closed when flushed?

Yes

No

Unknown

Not Assessed

If **NO**:

7a. Are toilets that are not located in restrooms equipped with flush covers?

Yes

No

Unknown

Not Assessed

8. Are all **hoppers** located in soiled utility rooms with doors that are closed during flushing?

- Yes
- No
- Unknown
- Not Assessed

*If **NO**:*

8a. Are hoppers that are not located in soiled utility rooms equipped with flush covers?

- Yes
- No
- Unknown
- Not Assessed

“Install and utilize hopper and toilet covers. These covers should be closed before flushing. If such covers are not available or are prohibited due to local plumbing or building code, close any door that separates the hopper or toilet from other patient care areas before flushing to contain any resulting environmental contamination.”
Source: <https://www.cdc.gov/healthcare-associated-infections/php/toolkit/water-management.html>

9. Does the facility have a policy that assigns responsibility for routine flushing of all eye wash stations to prevent stagnation of water in the systems?

- Yes
- No
- Unknown
- Not Assessed

“Eyewash station manufacturer instructions provide direction on how often and how long to activate specific plumbed systems to reduce microbial contamination and generally reference the American National Standards Institute (ANSI) standard Z358.1-2014. Self-contained eyewash units must be maintained and employers should consult the manufacturer’s instructions for maintenance procedures. This includes flushing the system and using only solutions appropriate for flushing eyes.”
Source: <https://www.osha.gov/sites/default/files/publications/OSHA3818.pdf>

10. Is ice distributed to patients/residents in care areas?

- Yes
- No
- Unknown
- Not Assessed

*If **YES**:*

10a. What method does the facility use to distribute ice to patients/residents? (Select all that apply)

- Ice chests
- Ice machines
- Neither
- Unknown
- Not Assessed

Notes

IF ICE CHESTS ARE USED:

10b. Does the facility: (Select all that apply)

- Perform routine cleaning and disinfection of ice chests
- Maintain a log of cleaning
- Ensure ice chest doors are kept closed except when removing ice
- Limit access to the ice chest
- Store the ice scoop outside the chest on a chain short enough so that it does not touch the floor, or on a clean, hard surface when not in use

- Unknown
- None of the above
- Not Assessed
- Other (specify):

“Do not handle ice directly by hand, and wash hands before obtaining ice. Category II
Use a smooth-surface ice scoop to dispense ice. Category II
Keep the ice scoop on a chain short enough such that the scoop cannot touch the floor, or keep the scoop on a clean, hard surface when not in use. Category II
Do not store the ice scoop in the ice bin. Category II
Limit access to ice-storage chests and keep the container doors closed except when removing ice. Category II
Clean, disinfect, and maintain ice-storage chests on a regular basis. Follow the manufacturer’s instructions for cleaning. Category II”
Source: <https://www.cdc.gov/infection-control/hcp/environmental-control>

IF ICE MACHINES ARE USED:

10c. Does the facility (Select all that apply)

- Perform routine cleaning and disinfection following manufacturer’s instructions for use (IFU) using an EPA-registered disinfectant suitable for use on ice machines
- Maintain a log of preventive maintenance
- If IFUs are not available, perform a process involving disassembly, cleaning with detergent, rinsing, inspection and repair, sanitizing with sodium hypochlorite solution, re-flushing and drying
- Disconnect ice machines before planned water disruptions
- Flush and clean ice machines and dispensers before use if they were not disconnected before a water disruption

- Unknown
- None of the above
- Not Assessed
- Other (specify):

“Use a smooth-surface ice scoop to dispense ice.” Category II
Keep the ice scoop on a chain short enough the scoop cannot touch the floor, or keep the scoop on a clean, hard surface when not in use. Category II
Do not store the ice scoop in the ice bin. Category II
Do not store pharmaceuticals or medical solutions on ice intended for consumption; use sterile ice to keep medical solutions cold, or use equipment specifically manufactured for this purpose. Category IB
Machines that dispense ice are preferred to those that require ice to be removed from bins or chests with a scoop. Category II
Use an EPA-registered disinfectant suitable for use on ice machines, dispensers, or storage chests in accordance with label instructions. Category II
If instructions and EPA-registered disinfectants suitable for use on ice machines are not available, use a general cleaning/disinfecting regimen as outlined in [Box 12](#). Category II
Flush and clean the ice machines and dispensers if they have not been disconnected before anticipated lengthy water disruptions. Category II
Install proper air gaps where the condensate lines meet the waste lines.”
Source: <https://www.cdc.gov/infection-control/hcp/environmental-control>

11. Is ice used to chill vaccines or medical solutions (e.g., vaccines prior to injection, ice used in bronchoscopy procedures)?

- Yes
- No
- Unknown
- Not Assessed

Ice should not be used to maintain the pharmaceutical cold chain. Specific recommendations regarding refrigeration of vaccines are available in the Vaccine Preventable Disease Pink Book.
Source: <https://www.cdc.gov/pinkbook/hcp/table-of-contents/index.html>
“Do not store pharmaceuticals or medical solutions on ice intended for consumption; use sterile ice to keep medical solutions cold, or use equipment specifically manufactured for this purpose.”
Source: <https://www.cdc.gov/infection-control/hcp/environmental-control/>

12. Does the facility provide any services involving: (select all that apply)

- Communal showers
- Whirlpool tubs
- Born hydrotherapy
- Birthing tubs
- Unknown
- None of these services provided
- Not assessed

IF COMMUNAL SHOWERS ARE USED:

12a. Is all equipment used in the shower non-porous?

- Yes
- No
- Unknown
- Not Assessed

12b. Is equipment (i.e., shower chairs) cleaned and disinfected between each patient/resident?

- Yes
- No
- Unknown
- Not Assessed

12c. Is there a system to help HCP recognize that equipment is clean and ready to use?

- Yes, please describe: _____
- No
- Unknown
- Not Assessed

IF WHIRLPOOL, HYDROTHERAPY, OR BIRTHING TUBS ARE USED:

12d. Which of the following policies are in place (select all that apply)?

- Routine cleaning and disinfection with an EPA registered product according to manufacturer's instructions for use (IFU) (between patients if device is not too large to be drained)
- Monitoring to ensure maintenance of minimal disinfectant levels
- Deferral of patients with draining wounds or fecal incontinence from hydrotherapy tanks too large to be drained and cleaned between uses
- No policies in place
- Unknown
- Not Assessed
- Other (specify): _____

Potential routes of infection caused by contaminated water include accidental ingestion of the water, breathing sprays and aerosols from the water, and allowing wounds to come in direct contact with the water. Source: <https://www.cdc.gov/investigate-legionella/php/healthcare-resources/control-measures.html>

Further details for cleaning/disinfection can be found in Recommendation D.X of [Guidelines for Environmental Infection Control in Health-Care Facilities \(cdc.gov\)](#) (Recommendations D.X.A-H)

Notes

Decorative Water Features and Aquariums

13. Are decorative water features located inside the facility?

- Yes, please describe where they are located: _____
No
Unknown
Not Assessed

13a. If ***decorative water features*** are located inside the facility, do written procedures include: (select all that apply)

- Routine disinfection of water
Residual disinfectant monitoring
Visual monitoring of water clarity
Maintenance log of monitoring and cleaning/disinfection
No procedure in place
Unknown
Not Assessed
Other (specify): _____

“Avoid placing decorative fountains and fish tanks in patient-care areas; ensure disinfection and fountain maintenance if decorative fountains are used in the public areas of the healthcare facility. Category IB”

Source: <https://www.cdc.gov/infection-control/hcp/environmental-control/>

14. Are fish tanks or aquariums located within the healthcare facility?

- Yes
No
Unknown
Not Assessed

14a. If ***fish tanks or aquariums*** are located within the facility, do written protocols include: (select all that apply)

- Routine cleaning schedules
Cleaning tasks performed by nonpatient-care personnel (i.e., EVS personnel that clean patient or resident rooms do NOT clean the aquarium)
No protocol in place
Unknown
Not Assessed
Other (specify): _____

“Avoid placing decorative fountains and fish tanks in patient-care areas. Category IB”

“Establish a facility policy for regular cleaning of fish tanks... and assign this cleaning task to a nonpatient-care staff member; avoid splashing tank water. Category II”

Source: <https://www.cdc.gov/infection-control/hcp/environmental-control/>

Notes

Patient Care Activities Using Water

15. Which of the following is a part of the policy and practice for usage of small-volume medication nebulizers? (Select all that apply)

- Clean and disinfect nebulizer, with sterile water rinse*, between treatments for same patient use
- Nebulizers must go through the high-level disinfection (HLD) or sterilization process before being used on a subsequent patient
- Only use sterile water to dissolve medications
- Add medication to the nebulizer source in an aseptic manner
- Unknown
- No policy or practice in place
- Not Assessed
- Other (specify): _____

"Small-volume medication nebulizers: in-line and hand-held nebulizers:

- a. Between treatments on the same patient clean, disinfect, rinse with sterile water (if rinsing is needed), and dry small-volume in-line or hand-held medication nebulizers. Category IB
- b. Use only sterile fluid for nebulization and dispense the fluid into the nebulizer aseptically. Category IA
- c. Whenever possible, use aerosolized medications in single-dose vials. If multidose medication vials are used, follow manufacturers' instructions for handling, storing, and dispensing the medications. Category IB"

Source: <https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5303a1.htm>

*"Preferentially use sterile water for rinsing nebulization devices and other semicritical respiratory-care equipment after they have been cleaned or disinfected. If this is not feasible, rinse the device with filtered water (i.e., water that has been through a 0.2µ filter) or tap water, and then rinse with isopropyl alcohol and dry with forced air or in a drying cabinet. Category IB"

Source: <https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5303a1.htm>

16. Are reservoir-type humidifiers used in any locations of the healthcare facility?

- Yes
- No
- Unknown
- Not Assessed

Reservoir-type humidifiers are not allowed in health-care facilities as per American Institute of Architects guidelines and many state codes.

"Do not use large-volume room air humidifiers that create aerosols unless these are subjected to cleaning and high-level disinfection daily and filled with distilled water. Category IB"

Source: <https://www.cdc.gov/infection-control/hcp/environmental-control/>

"Do not use large-volume room-air humidifiers that create aerosols (e.g., by venturi principle, ultrasound, or spinning disk) and thus are really nebulizers, unless they can be sterilized or subjected to high-level disinfection at least daily and filled only with sterile water. Category II"

Source: <https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5303a1.htm>

Notes

Vulnerable Populations

17. Does the facility have protective environments (PE) or transplant units?

- Yes
- No
- Unknown
- Not Assessed

If YES:

17a. Are shower heads and tap aerators used in the PE or transplant unit disinfected monthly with a chlorine-based EPA-registered product or a chlorine bleach solution (500-615 ppm (1:100 v/v dilution)?

- Yes
- No
- Unknown
- Not Assessed

Regarding Protective Environments and Transplant Units: "In areas with patients at risk, when Legionella spp. are not detectable in unit water, remove, clean, and disinfect shower heads and tap aerators monthly by using a chlorine-based, EPA-registered product. If an EPA-registered chlorine disinfectant is not available, use a chlorine bleach solution (500-615 ppm [1:100v/v dilution])."

Source: <https://www.cdc.gov/infection-control/hcp/environmental-control/>

Notes

Water Disruption

18. Is there a protocol in place for addressing the infection prevention issues for *planned* water disruption?

- Yes
- No
- Unknown
- Not Assessed

If **YES**:

18a. What elements are included in the protocol? (Select all that apply)

- Conduct an infection control risk assessment including water-associated pathogens
- Measures to alert HCP and patients of the water disruption (e.g., signage)
- Disconnection of ice machines for disruption anticipated to be >8 hours
- None of the above
- Unknown
- Not Assessed
- Other (specify): _____

A specific ICRA is available for this purpose via open access, see: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9149880/>. "Use of an infection-control risk assessment is strongly supported before the start of these (construction, demolition, renovation and repairs of health-care facilities) or any other activities expected to generate dust or water aerosols"

Source: <https://www.cdc.gov/infection-control/hcp/environmental-control/>

"Remediation Strategies for Distribution System Repair or Emergencies:

- a. Whenever possible, disconnect the ice machine before planned water disruptions. Category II B.
- b. Prepare a contingency plan to estimate water demands for the entire facility in advance of significant water disruptions (i.e., those expected to result in extensive and heavy microbial or chemical contamination of the potable water), sewage intrusion, or flooding.713, 719 Category IC (JCAHO: EC 1.4)
- c. When a significant water disruption or an emergency occurs, adhere to any advisory to boil water issued by the municipal water utility.642 Category IB, IC (Municipal order)
 1. Alert patients, families, staff, and visitors not to consume water from drinking fountains, ice, or drinks made from municipal tap water, while the advisory is in effect, unless the water has been disinfected (e.g., by bringing to a rolling boil for ≥1 minute).642 Category IB, IC (Municipal order)
 2. After the advisory is lifted, run faucets and drinking fountains at full flow for ≥5 minutes, or use high-temperature water flushing or chlorination.642, 661 Category IC, II (Municipal order; ASHRAE 12:2000)"

Source: Additional information on addressing water disruptions may be found in Section D.III. of [Guidelines for Environmental Infection Control in Health-Care Facilities \(cdc.gov\)](https://www.cdc.gov/infection-control/hcp/environmental-control/)

"Establish a multidisciplinary team that includes infection-control staff to coordinate demolition, construction, and renovation projects and consider proactive preventive measures at the inception." Category IB

Source: <https://www.cdc.gov/infection-control/hcp/environmental-control/>

19. Is there a protocol in place to respond to an *unplanned* water disruption?

- Yes
- No
- Unknown
- Not Assessed

IF YES:

19a. What elements are included in this protocol: (select all that apply)

- Identification of alternate water sources (e.g., 24- hour supply of emergency water)
- Measures to alert HCP and patients to conserve water (e.g., signage)
- Measures to limit water for critical functions
- Specific dialysis water needs
- Measures to safely restore water services
- Post boil advisory or water disruption surveillance for waterborne disease
- None of the above
- Unknown
- Not Assessed
- Other (specify): _____

“Remediation Strategies for Distribution System Repair or Emergencies:

- a. Whenever possible, disconnect the ice machine before planned water disruptions. Category II B.
- b. Prepare a contingency plan to estimate water demands for the entire facility in advance of significant water disruptions (i.e., those expected to result in extensive and heavy microbial or chemical contamination of the potable water), sewage intrusion, or flooding.713, 719 Category IC (JCAHO: EC 1.4)
- c. When a significant water disruption or an emergency occurs, adhere to any advisory to boil water issued by the municipal water utility.642 Category IB, IC (Municipal order)
 - 1. Alert patients, families, staff, and visitors not to consume water from drinking fountains, ice, or drinks made from municipal tap water, while the advisory is in effect, unless the water has been disinfected (e.g., by bringing to a rolling boil for ≥1 minute).642 Category IB, IC (Municipal order)
 - 2. After the advisory is lifted, run faucets and drinking fountains at full flow for ≥5 minutes, or use high-temperature water flushing or chlorination.642, 661 Category IC, II (Municipal order; ASHRAE 12:2000)”
- d. Maintain a high level of surveillance for waterborne disease among patients after a boil water advisory is lifted. Category II”

Source: Additional information on addressing water disruptions may be found in Section D.III. of [Guidelines for Environmental Infection Control in Health-Care Facilities \(cdc.gov\)](#)

For more information see: <https://www.cdc.gov/water-emergency/hcp/toolkit/index.html>

Notes

Water Intrusion

20. Does the facility have a plan to respond to *internal* (e.g., construction damage) disasters resulting in water intrusion?

- Yes
- No
- Unknown
- Not Assessed

IF YES:

20a. How are patients/residents protected from risks due to water intrusion from internal sources?

- Pre-construction/renovation Infection Control Risk Assessment with necessary precautions identified and undertaken
- Staff educated to report water intrusion (e.g., soiled ceiling tiles), and leaks, as infection risks to patients
- Monitoring for water intrusion as a part of scheduled facility or infection control rounds, especially in high-risk patient areas
- Development of water-damage management plan due to sudden and extreme water intrusion (e.g., burst pipes, runaway condensation)
- Unknown
- None of the above
- Not Assessed
- Other (specify): _____

“Implement facility management procedures to manage a sewage system failure or flooding (e.g., arranging with other health-care facilities for temporary transfer of patients or provision of services), and establish communications with the local municipal water utility and the local health department to ensure that advisories are received in a timely manner upon release. (JCAHO: EC 1.4; Municipal order)”

“Regardless of the original source of water damage (e.g., flooding versus water leaks from point-of use fixtures or roofs), remove wet, absorbent structural items (e.g., carpeting, wallboard, and wallpaper) and cloth furnishings if they cannot be easily and thoroughly cleaned and dried within 72 hours (e.g., moisture content $\leq 20\%$ as determined by moisture meter readings); replace with new materials as soon as the underlying structure is declared by the facility engineer to be thoroughly dry.” Category IB

Source: <https://www.cdc.gov/infection-control/hcp/environmental-control/>

21. Does the facility have a plan to respond to *external disasters* (e.g., natural disaster, flooding) resulting in water intrusion?

Yes

No

Unknown

Not Assessed

For more information see: <https://www.cdc.gov/water-emergency/hcp/toolkit/index.html>

“Implement facility management procedures to manage a sewage system failure or flooding (e.g., arranging with other health-care facilities for temporary transfer of patients or provision of services), and establish communications with the local municipal water utility and the local health department to ensure that advisories are received in a timely manner upon release. (JCAHO: EC 1.4; Municipal order)

Implement infection-control measures during sewage intrusion, flooding, or other water-related emergencies.

1. Relocate patients and clean or sterilize supplies from affected areas. Category I”

“If hard-surface equipment, floors, and walls remain in good repair, ensure that these are dry within 72-hours; clean with detergent according to standard cleaning procedures. Category II.

Clean wood furniture and materials (if still in good repair); allow them to dry thoroughly before restoring varnish or other surface coatings. Category II.”

“Regardless of the original source of water damage (e.g., flooding versus water leaks from point-of use fixtures or roofs), remove wet, absorbent structural items (e.g., carpeting, wallboard, and wallpaper) and cloth furnishings if they cannot be easily and thoroughly cleaned and dried within 72 hours (e.g., moisture content $\leq 20\%$ as determined by moisture meter readings); replace with new materials as soon as the underlying structure is declared by the facility engineer to be thoroughly dry.” Category IB

Source: <https://www.cdc.gov/infection-control/hcp/environmental-control/>

Notes

Part B. Water Exposure Observations:

This portion of the tool is intended for the direct observation of water exposure practices. Ideally at least three patient care areas are observed.

Location/Unit 1: _____

Ice machine

Ice chest room

1. Is the ice dispenser area uncluttered, clean, and free of signs of rodents or insects?

Yes

No

Not observed but endorsed by frontline staff

Not observed and not endorsed by frontline staff

Medication Preparation area

2. Are patient care supplies protected from splashing (e.g., via splashguards or distance)?

Yes

No

Not observed but endorsed by frontline staff

Not observed and not endorsed by frontline staff

3. When taps are running, do countertops and care supplies remain free from splashing?

Yes

No

Not observed but endorsed by frontline staff

Not observed and not endorsed by frontline staff

4. Are faucets offset from drains?

Yes

No

Not observed but endorsed by frontline staff

Not observed and not endorsed by frontline staff

Soiled Utility Room

5. Do all hoppers have a cover that can be closed before flushing?

Yes

No

Not observed but endorsed by frontline staff

Not observed and not endorsed by frontline staff

6. Does the door to the soiled utility remain closed when hoppers are flushed?

Yes

No

Not observed but endorsed by frontline staff

Not observed and not endorsed by frontline staff

Communal Shower Room

Communal showers are not used, skip to "Patients or Resident Rooms"

7. Are shower chairs constructed of non-porous materials?

Yes

No

Not observed but endorsed by frontline staff

Not observed and not endorsed by frontline staff

8. Are shower trolleys and mats stored in a manner that allows for drying of all surfaces?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff

Patient or Resident Rooms

9. Do sinks have drains offset from faucet stream?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff

10. Are patient care supplies protected from splashing (e.g., via splashguards or distance)?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff

11. Is toilet equipped with a lid?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff

12. Is there any evidence of water intrusion in patient room, especially under patient sinks or around fold commodes?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff

13. *If a ventilator is in use:* Are water traps on ventilator circuits below the level of the patient?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff
- No ventilator in use

14. *If a ventilator is in use:* Are circuits kept closed during disconnection?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff
- No ventilator in use

Notes

Location/Unit 2: _____

Ice machine

Ice chest room

1. Is the ice dispenser area uncluttered, clean, and free of signs of rodents or insects?
 - Yes
 - No
 - Not observed but endorsed by frontline staff
 - Not observed and not endorsed by frontline staff

Medication Preparation area

2. Are patient care supplies protected from splashing (e.g., via splashguards or distance)?
 - Yes
 - No
 - Not observed but endorsed by frontline staff
 - Not observed and not endorsed by frontline staff
3. When taps are running, do countertops and care supplies remain free from splashing?
 - Yes
 - No
 - Not observed but endorsed by frontline staff
 - Not observed and not endorsed by frontline staff
4. Are faucets offset from drains?
 - Yes
 - No
 - Not observed but endorsed by frontline staff
 - Not observed and not endorsed by frontline staff

Soiled Utility Room

5. Do all hoppers have a cover that can be closed before flushing?
 - Yes
 - No
 - Not observed but endorsed by frontline staff
 - Not observed and not endorsed by frontline staff
6. Does the door to the soiled utility remain closed when hoppers are flushed?
 - Yes
 - No
 - Not observed but endorsed by frontline staff
 - Not observed and not endorsed by frontline staff

Communal Shower Room

Communal showers are not used, skip to "Patients or Resident Rooms"

7. Are shower chairs constructed of non-porous materials?
 - Yes
 - No
 - Not observed but endorsed by frontline staff
 - Not observed and not endorsed by frontline staff

8. Are shower trolleys and mats stored in a manner that allows for drying of all surfaces?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff

Patient or Resident Rooms

9. Do sinks have drains offset from faucet stream?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff

10. Are patient care supplies protected from splashing (e.g., via splashguards or distance)?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff

11. Is toilet equipped with a lid?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff

12. Is there any evidence of water intrusion in patient room, especially under patient sinks or around fold commodes?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff

13. *If a ventilator is in use:* Are water traps on ventilator circuits below the level of the patient?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff
- No ventilator in use

14. *If a ventilator is in use:* Are circuits kept closed during disconnection?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff
- No ventilator in use

Notes

Location/Unit 3: _____

Ice machine

Ice chest room

1. Is the ice dispenser area uncluttered, clean, and free of signs of rodents or insects?
 - Yes
 - No
 - Not observed but endorsed by frontline staff
 - Not observed and not endorsed by frontline staff

Medication Preparation area

2. Are patient care supplies protected from splashing (e.g., via splashguards or distance)?
 - Yes
 - No
 - Not observed but endorsed by frontline staff
 - Not observed and not endorsed by frontline staff
3. When taps are running, do countertops and care supplies remain free from splashing?
 - Yes
 - No
 - Not observed but endorsed by frontline staff
 - Not observed and not endorsed by frontline staff
4. Are faucets offset from drains?
 - Yes
 - No
 - Not observed but endorsed by frontline staff
 - Not observed and not endorsed by frontline staff

Soiled Utility Room

5. Do all hoppers have a cover that can be closed before flushing?
 - Yes
 - No
 - Not observed but endorsed by frontline staff
 - Not observed and not endorsed by frontline staff
6. Does the door to the soiled utility remain closed when hoppers are flushed?
 - Yes
 - No
 - Not observed but endorsed by frontline staff
 - Not observed and not endorsed by frontline staff

Communal Shower Room

Communal showers are not used, skip to "Patients or Resident Rooms"

7. Are shower chairs constructed of non-porous materials?
 - Yes
 - No
 - Not observed but endorsed by frontline staff
 - Not observed and not endorsed by frontline staff

8. Are shower trolleys and mats stored in a manner that allows for drying of all surfaces?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff

Patient or Resident Rooms

9. Do sinks have drains offset from faucet stream?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff

10. Are patient care supplies protected from splashing (e.g., via splashguards or distance)?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff

11. Is toilet equipped with a lid?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff

12. Is there any evidence of water intrusion in patient room, especially under patient sinks or around fold commodes?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff

13. *If a ventilator is in use:* Are water traps on ventilator circuits below the level of the patient?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff
- No ventilator in use

14. *If a ventilator is in use:* Are circuits kept closed during disconnection?

- Yes
- No
- Not observed but endorsed by frontline staff
- Not observed and not endorsed by frontline staff
- No ventilator in use

Notes