

**North Canyon Medical Center, Inc.
Gooding, ID**

Policy # IC-134

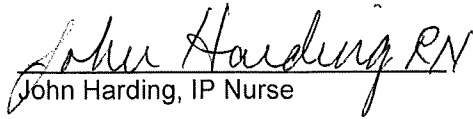
POLICY TITLE: Water Management Program to Reduce the Risk of Legionella Growth

POLICY STATEMENT: It is the policy of North Canyon Medical Center (NCMC) to reduce the risk for healthcare acquired infections in our patient population. Legionella and other waterborne pathogens can cause illness when contaminated water from building water systems is inhaled. A water management program is needed to reduce the risk of illness from these waterborne pathogens.

PROCEDURE:

1. Water stagnation encourages biofilm growth and reduces water temperature and level of disinfectant. Biofilm protects Legionella from heat and disinfectant; provides food and shelter to germs; and grows on any surface that is constantly moist and can last for decades. Identifying areas of stagnation in the water system and implementing procedures for preventing stagnation are essential for reducing the risk for Legionella growth.
 - A. To prevent biofilm growth in patient room showers, the shower head will be allowed to hang straight down after each use to allow for complete drainage of remaining water in the hose.
 - B. The water system in Med/Surg rooms 8 and 9 will be flushed monthly by maintenance staff. Nursing staff will flush the sinks and showers in any room that has not been utilized for more than 30 days by running the water for a minimum of 10 minutes, prior to placing a patient in the room.
2. Water sampling/testing of critical control points will be conducted annually by an outside vendor in October.
 - A. Annual testing critical points:
 1. Air handlers 1 & 2
 2. MRI humidifiers
 3. Water fountains in administration & medical plaza
 4. Med/Surg ice machine
 5. Med/Surg room showers – Rooms 2 and 10
 6. RO water supply at source
 - B. Test results showing a significant increase in heterotrophic plate count, i.e. > 2000 cfu/mL, indicates interventions should be implemented. These interventions may include but are not limited to additional flushing or disinfecting with a sodium hypochlorite solution. Interventions shall be followed with retesting.
 - C. Any test results showing the presence of Legionella will warrant follow up investigation to determine an acceptable resolution.
3. In the event of water service interruption, either internal or external, water pressure changes can cause biofilm to dislodge, colonizing downstream devices.
 - A. When water service is reestablished, flushing of the water system will be performed at the affected area (internal interruption) or the entire delivery system (external interruption) until the water runs clear and air is expelled from the system.
 - B. Additional water testing may be warranted.
4. Patients developing healthcare-associated pneumonia (pneumonia with onset \geq 48 hours after admission) should be tested for Legionnaires' disease.
 - A. Notify provider of suspected healthcare-associated pneumonia.
 - B. Request an order for laboratory tests for identifying Legionnaires' disease.
 - C. The preferred diagnostic tests for Legionnaires' disease are culture of lower respiratory secretions on selective media and the Legionella urinary antigen test.
5. Confirmed cases of Legionnaires' disease require follow up investigation.
 - A. Report the case to South Central Public Health Department or the Epidemiology Program within the Bureau of Communicable Disease Prevention within 1 business day of confirmation of disease.

- B. Perform an environmental assessment to evaluate possible environmental exposures.
- C. Perform environmental sampling as indicated by the environmental assessment.
- D. Identify any other possible cases of Legionnaires' disease and perform testing as indicated.
- E. Work with NCMC leaders to determine how long heightened disease surveillance and environmental sampling should continue to ensure outbreak is over.
- F. Work with water management team to review and possibly revise the water management program, if indicated.


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2/16/18
Date:


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