

THE ADVISOR

MONTHLY COMPLIANCE COMMUNICATOR

How to Clean and Disinfect Environmental Surfaces in Healthcare Settings

Environmental surfaces are the surfaces of equipment, chairs, furniture, walls, and flooring. It is essential that they are cleaned and disinfected between each patient or on a routine basis.

Environmental surfaces, also categorized as clinical contact or housekeeping surfaces, are all considered non-critical surfaces.

Environmental surfaces do not contact patients directly; however, they can become contaminated during patient care. Environmental surfaces have not been associated directly with disease transmission but can serve as reservoirs of microbial contamination.

Clinical Contact Surfaces

The first category of an environmental surface, which is called a clinical contact surface, are those surfaces that are directly touched by contaminated gloves, instruments, or devices. These surfaces can become contaminated with patient blood or body fluids from spray or splatter that is generated during procedures. These surfaces can then contaminate other instruments, devices, hands, or gloves. A few examples of clinical contact surfaces are door handles, light switches, drawer handles, countertops, pens, computer keyboards, and computer mouse.

Housekeeping Surfaces

Housekeeping surfaces are the second category of environmental surfaces. These surfaces are not directly touched when providing care to a patient and have a minimum risk for disease transmission. Examples of housekeeping surfaces are floors, walls, and sinks. Most of these surfaces can be cleaned using detergent and water or you may use an EPA registered hospital disinfectant/detergent. They should be cleaned on a regular basis. Each facility should implement a cleaning schedule.

How to Manage Surfaces

Managing clinical contact surfaces is accomplished either with surface barriers or cleaning and

Newsletter Content

[How to Clean and Disinfect Environmental Surfaces in Healthcare Settings](#)

[You Have a Disaster Recovery Plan, Now What?](#)

[It's Your Call](#)

[Why Healthcare Workers Face the Highest Rates of Workplace Injuries and How Ergonomics Can Help](#)

[OSHA Heat Standard: What Medical and Dental Offices Need to Know](#)

disinfecting. Some facilities use a combination of the two. There are many options available for barriers and disinfectants. Each facility should determine which products work best and what protocols work best for the practice.

Surface barriers are recommended on those difficult to clean surfaces. Barriers boost safety of the employee and efficiency; it takes less time to prepare for the next patient and reduces the exposure to chemicals to the employee. Surface barriers are available in different sizes for almost any surface. They can be plastic wraps, bags, tubing, plastic-backed paper, or other materials. Once the barrier is removed from the surface, the surface should be examined to see if it became contaminated. If the surface doesn't become contaminated, a new barrier can be placed. If the surface is contaminated, the surface needs to be cleaned and disinfected before a new barrier is placed. All surfaces covered with a barrier should be cleaned at the beginning of the day and at the end of the day.

Cleaning and Disinfecting Methods

There are two ways to clean and disinfect surfaces: the spray-wipe-spray method or wipe-discard-wipe. An EPA registered hospital-level disinfectant with tuberculocidal claims should be used. Each method begins with donning the appropriate personal protective equipment (PPE), such as utility gloves, masks, eyewear, and protective jackets. Always follow manufacturer's instructions for use on the disinfectant's recommended PPE.

When spray-wipe-spray is used, put on appropriate PPE and determine the surfaces that need to be cleaned and disinfected. When the disinfectant used must be prepared, ensure that it is prepared correctly according to the disinfectant's label instructions. The label instructions state information on dilution, shelf life, use life, and expiration date. When the disinfectant comes prepared, always follow label instructions for use.

Spray-wipe-spray Method

The following is a step-by-step guide on how to utilize the spray-wipe-spray method:

1. Spray the surface with a cleaning agent: some EPA registered hospital disinfectants can be used to preclean the surface. Follow instructions for use. The instructions will state if it can be used as a cleaning agent.
2. Wipe the surfaces with paper towels: this is to clean the surfaces of all blood, debris, and body fluids.
3. Spray the surfaces with an EPA hospital disinfectant with tuberculocidal claims.
4. Allow the surface to remain wet for the contact time of the disinfectant (found on the instructions), meeting the tuberculocidal claim if the surface had blood present.
5. Wipe the surfaces dry after the contact time has been satisfied.

Wipe-discard-wipe Method

For the wipe-discard-wipe method, follow these steps:

1. Follow label instructions: ensure the wipe is also a cleaning agent.
2. Wipe the surfaces to be cleaned, follow label instructions on the number of wipes used. Some wipes are effective on a limited surface area. Use the appropriate number of wipes to preclean the surfaces of all blood, debris, and body fluids.
3. Discard the wipes used.

4. Saturate the surfaces with another wipe(s), follow instructions on the number of wipes to be used.
5. Allow the surfaces to remain wet for the contact time of the disinfectant, meeting the tuberculocidal claim if the surface had blood present.
6. Wipe the surface dry after satisfying the contact time.

Consult the equipment manufacturer prior to cleaning and disinfecting to understand which chemicals (disinfectants) are compatible with the equipment. This will preserve the life of the equipment. Remember to always follow the label instructions on disinfectants and wear appropriate PPE. Ensuring these are followed will reduce the risk of disease transmission in the healthcare facility.

You Have a Disaster Recovery Plan, Now What?

Creating a Disaster Recovery Plan (DRP) is a significant achievement for any organization, especially for those handling sensitive data such as healthcare providers. However, having a plan is only the beginning. Ensuring the plan's effectiveness and compliance with HIPAA regulations requires ongoing actions and detailed attention.

Regular Testing and Updates

- **Scheduled Testing:** A DRP must be regularly tested to ensure its viability. HIPAA mandates periodic testing, at least annually, but more frequent testing is advisable. This can include both tabletop exercises such as a walk-through of the facility where personnel discuss their roles and comprehensive drills that simulate real disaster scenarios. Testing helps identify any weaknesses or gaps in the plan and provides an opportunity to train staff on their roles during an actual disaster.
- **Variety of Scenarios:** Tests should cover a range of potential disaster scenarios, from natural disasters like floods and earthquakes to cyberattacks and hardware failures. This variety guarantees that the plan is robust and comprehensive.
- **Post-Test Analysis:** After each test, conduct a thorough debriefing session to analyze the results. Document what worked well and what did not. Use these findings to update and improve the DRP. This continuous improvement process is crucial for maintaining an effective and reliable recovery plan.

Staff Training and Awareness

- **Regular Training Sessions:** All employees should be trained on the DRP. This includes understanding their specific roles and responsibilities during a disaster. Training should be conducted regularly and include new hires as part of their onboarding process.
- **Clear Communication Channels:** Confirm that communication channels are well-defined and tested. In the event of a disaster, quick and efficient communication is critical. Employees should know whom to contact and how to proceed if normal communication methods are disrupted.

- **Emergency Contact Information:** Maintain an up-to-date list of emergency contacts, including internal team members and external partners like data recovery services and hardware suppliers. This information should be readily accessible both on-site and off-site.

Data Backup and Encryption

- **Regular Backups:** HIPAA requires regular data backups to ensure the availability of electronic protected health information (ePHI). Implement automated backup processes to minimize human error. These backups should be stored both on-site and off-site to protect against local disasters.
- **Encryption:** Make certain that all backed-up data is encrypted. Encryption protects ePHI from unauthorized access during both storage and transmission. Verify that encryption protocols comply with HIPAA requirements.
- **Backup Testing:** Regularly test backup restoration processes to ensure data integrity and accessibility. It's not enough to simply back up data; you must be able to restore it quickly and accurately when needed.

Documentation and Compliance

- **Comprehensive Documentation:** Maintain detailed documentation of the DRP, including all tests, training sessions, and updates. This documentation is essential for demonstrating compliance with HIPAA requirements.
- **Policy Reviews:** Regularly review and update all policies and procedures related to disaster recovery and data protection. Make sure that they align with current HIPAA regulations and industry best practices.
- **Audit Preparedness:** Be prepared for HIPAA audits by maintaining organized records and documentation. Regular internal audits can help identify compliance issues before they become problems.

A Disaster Recovery Plan is a dynamic document that requires ongoing attention and refinement. Through regular testing, continuous training, diligent risk management, and comprehensive documentation, healthcare organizations can ensure they are well-prepared to protect sensitive data and maintain compliance with HIPAA regulations in the face of any disaster.

It's Your Call – August 2024

HIPAA: Why is regular testing of a Disaster Recovery Plan important?

Regular testing ensures the plan's effectiveness, identifies weaknesses, and trains staff in their roles during a disaster. HIPAA mandates at least annual testing, but more frequent tests are advisable for optimal preparedness.

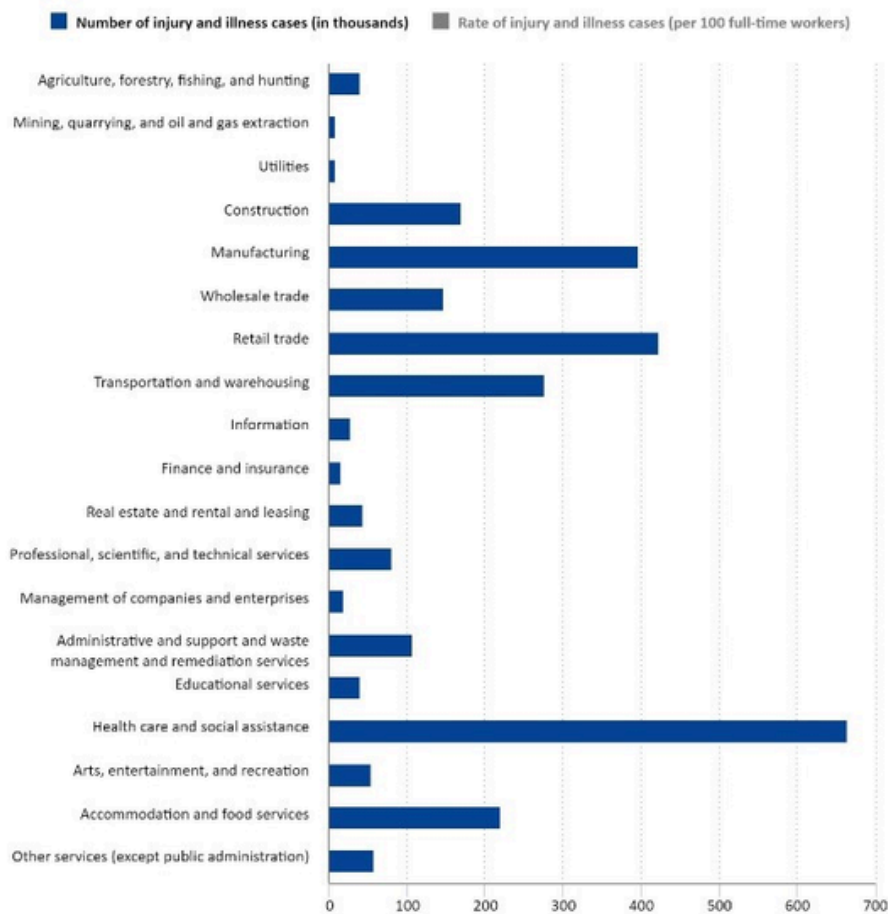
OSHA: Does OSHA enforce ergonomics in the workplace?

Under OSHA's General Duty Clause, employers must keep their workplaces free from recognized serious ergonomic hazards. When appropriate, OSHA will conduct inspections for ergonomic hazards, issue citations under the General Duty Clause, and issue ergonomic hazard alert letters: <https://www.osha.gov/ergonomics/faqs>.

Why Healthcare Workers Face the Highest Rates of Workplace Injuries and How Ergonomics Can Help

When thinking about the risk of injury on the job, what industry takes the top spot for rates of injury? One may be surprised to learn that healthcare workers experience the highest injury rates of any industry. This statistic is alarming: Those who dedicate their lives to caring for others suffer more on-the-job injuries than any other sector.

Number and rate of nonfatal work injuries and illnesses in private industries, 2022



Source: U.S. Bureau of Labor Statistics.



Why are so many healthcare professionals suffering from workplace injuries? Given their expertise in the body and its mechanics, one might assume they would be adept at safeguarding themselves. However, the situation is far more complex. Workplace injuries typically arise from cumulative trauma, repetitive strain, or overuse rather than isolated incidents. Joints are particularly vulnerable due to their constant use.

Injuries can have various symptoms, including discomfort, soreness, and pain. However, experiencing these symptoms does not always mean you have an injury. Muscle aches and soreness are common after exercise, mainly if you are not used to the activity. These symptoms subside with rest or adaptation to the activity.

In contrast, symptoms that persist, including numbness, tingling, dysfunction, disrupted sleep, or interference with daily activities, are the body's signals to pay attention.

Common risk factors among the medical and dental community include:

- Heavy or frequent lifting
- Pushing
- Pulling
- Carrying
- Awkward postures
- Hand-intensive work
- Repetitive motions

How do ergonomics come into play with workplace injuries? Ergonomics is all about designing the work to fit the worker, not the other way around. By examining each task, ergonomics can lessen incident rates by adjusting the work appropriately.

Here are a few simple examples:

- Raise/lower the workstation
- Raise/lower the worker
- Raise/lower/tilt your computer monitors
- Adjust the chair
- Replace the chair

Common Risk Factors

Lifting heavy objects increases the risk of injury. Strain on the back when lifting something heavy can cause stress and damage the structures of your spine. Interestingly, even repetitive lifting of lightweight objects can be equally hazardous due to muscle fatigue.

Lifting while reaching can also pose risks. This position moves the body from its normal central or neutral posture, which is the strongest position, making injury more likely.

Working at a low position can be awkward, and bending, kneeling, or squatting can be uncomfortable. Raising work to a more comfortable height or using a low stool can allow an employee to be closer to the work level. Even using long-handled tools is an option. Be creative; if there is difficulty, brainstorm ideas to help eliminate the hazard causing the pain!

Things that reduce repetitive motions include:

- Arrange work to avoid unnecessary reaching/bending
- Use machinery
- Spread work out during the day
- Take breaks
- Stretch
- Rotate tasks with co-workers
- Change hands or motions frequently

When are symptoms severe enough to need attention?

- Pain is persistent, severe, or worsening
- Pain radiates (spreads or "travels" down an arm or leg)
- Symptoms include numbness or tingling
- Symptoms prevent sleep at night

What can be done about injuries?

1. Eliminate the hazard when possible.
2. Education
 - a. Learning about the injury can help devise ways to prevent them
3. Add ergonomic equipment or tools to reduce the hazard
4. Reduce the time employees are exposed to a risk
 - a. Task rotation
 - b. Staff rotation
 - c. Breaks
5. Another option is Ergonomic PPE: We are all familiar with Personal Protective Equipment in healthcare, including masks and gloves to protect against bloodborne pathogens, but there is also Ergonomic PPE. Examples include:
 - a. Using padding to reduce direct contact with hard or sharp surfaces
 - b. Wearing thermal gloves to help with cold conditions while maintaining the ability to grasp items easily
 - c. Wearing non-slip shoes to prevent falls

Simple Computer Adjustments:

- Raise, lower, or tilt the screen for neck comfort, or add something underneath if the screen is not height adjustable, such as boxes, books, or reams of paper. Ideally, employees want to be able to look straight ahead and have their eyes land at the top one-third of the screen. This will enable them to use their eyes to look down, not the neck. Of course, this is all adjustable according to their eyesight.
- If the chair is adjustable, make sure it is comfortable. Ensure the chair has good lumbar support and armrests support the arms.
- If the feet do not touch the ground, consider adjusting the chair or adding a footrest.
- For those who primarily work from a laptop, adding external devices such as a keyboard, mouse, and laptop riser will help them achieve some of the same good postures.

Think outside the box and look at ways to increase your comfort and decrease pain. The high injury rates in healthcare reveal a significant issue that must be addressed. Employers must invest in creating a safer, more ergonomic workspace that both protects employees and ensures quality patient care.

OSHA Heat Standard: What Medical and Dental Offices Need to Know

As temperatures rose this summer and heat waves hit the country, the Occupational Safety and Health Administration (OSHA) has implemented a new heat standard for employers. This standard aims to safeguard workers across various industries from heat-related injury and illness. As a result of this standard, medical and dental offices have important obligations to consider ensuring staff's health and safety.

The new OSHA heat standard addresses the risks associated with working in high-temperature environments. While traditionally focused on industries like construction and agriculture, OSHA's expanded guidelines now encompass indoor environments where heat stress can also be a significant concern. This includes dental and medical offices, where staff often work in controlled environments but may still be exposed to heat-related hazards.

The key components medical and dental offices should focus on are listed below with some practical suggestions on how to implement the procedures:

- A heat stress prevention program is required, and for the healthcare industry this means developing and maintaining procedures to identify and mitigate heat stress risks. These protocols include monitoring indoor temperatures, proper ventilation, frequent breaks, and providing access to cool water.
 - Encourage staff to drink water regularly throughout the day. Providing access to water in a way that allows employees to stay hydrated can help mitigate heat stress.
 - Design work schedules to include regular breaks. Short, frequent breaks in a cooler area can help reduce the risk of heat-related illnesses.
- Employers must provide training to their employees on recognizing signs of heat stress and how to prevent heat stress. They should be able to recognize symptoms such as dizziness, nausea, and excessive sweating, and know how to respond effectively.
 - Make sure all team members are aware of the signs of heat stress and the steps to take if they or a colleague exhibit symptoms.
 - Ensure that all staff are familiar with the procedures for handling heat stress emergencies, including first aid and when to seek medical attention.
- Healthcare offices are required to monitor indoor temperatures regularly and make adjustments to maintain a safe working environment.
 - Practically, the office can evaluate the temperature and ventilation in the office. Ensure that air conditioning and ventilation systems are functioning at an optimal level. If temperatures rise significantly, consider using portable fans, if that does not create an additional hazard, or adjusting the thermostat.
- Employers must establish and communicate clear emergency response plans for heat-related incidents. In a dental or medical office, this includes having protocols in place for immediate first aid and medical response if an employee shows signs of heat exhaustion or heat stroke.

The new OSHA heat standard represents an important shift towards greater protection for workers in various environments, including healthcare offices. By adopting the necessary preventive measures and creating a well-structured heat stress prevention program, dental and medical practices can ensure a safer and healthier workplace for their staff. Embracing these guidelines not only enhances compliance with regulatory standards but also promotes overall employee well-being and productivity.

Download our heat illness prevention guide, as seen below: [Heat Illness Prevention Guide](#).

HEAT ILLNESS PREVENTION GUIDE

Every year, millions of workers are exposed to hot work environments, and thousands suffer from heat-related illnesses. Even those accustomed to the heat must stay alert, as its impact can differ from person to person.

This guide will help you recognize the factors that could increase your risk of heat illness.* Elements such as your work environment, clothing, tasks, health conditions, medications, and physical traits can all contribute to a heightened risk of heat-related issues.

WORK RISK FACTORS

Environmental factors that increase your risk of heat injury and illness:

- High temperature or humidity
- Heat from hot sources (radiant heat), such as furnaces
- Limited movement of cool air
- Direct sun exposure



The nature of your work can increase your vulnerability to heat-related illness:

- Level of physical activity/exertion
- Clothing or protective gear that limits your body's ability to cool itself
- Inadequate rest breaks
- Inadequate acclimatization



PHYSICAL & BEHAVIORAL RISK FACTORS

Some physical characteristics may dehydrate you more quickly and reduce your body's ability to cool:

- Age (60 years and older)
- Physical fitness
- Pregnancy
- Acclimatization level (i.e., whether you've developed a tolerance to the working temperature)



What you put into your body can lead to dehydration:

- Alcohol use
- Use of illicit drugs
- Lower intake of water



PERSONAL RISK FACTORS

Some health conditions can impair your ability to sense or respond to changes in temperature:

- Diabetes
- High blood pressure
- Heart disease
- Kidney disease
- Mental health conditions
- Respiratory diseases, like asthma or COPD



Some medications can decrease your ability to feel hot and impair your body's ability to sweat, making it harder to cool down:

- Antihistamines
- Blood pressure medications
- Diuretics
- Muscle relaxants
- Sedatives



SAFETY TIPS



Heat-related injuries and illnesses can be prevented. Follow these tips to stay safe while working:

- Stay hydrated
- Rest in air-conditioned or cool, shaded areas
- Wear loose-fitting, light-colored clothing in breathable fabrics to help your body cool efficiently
- Upon returning to work after time off or during hot weather, slowly ease back into your usual workload
- Learn the symptoms of heat-related illnesses:
 - Abnormal thinking or behavior
 - Slurred speech
 - Excessive sweating or hot, dry skin
 - Elevated body temperature
 - Headache or nausea
 - Weakness/dizziness
- Check on your coworkers. If someone shows signs of heat illness, cool them down with water or ice and stay with them until help arrives
- When in doubt, don't hesitate to call 911!

*This is not a comprehensive list. Many factors can make you susceptible to heat illness. Sources: OSHA: www.osha.gov/heat-exposure/NIOSH; "Heat Stress Risk Factors" and the CDC: www.cdc.gov/niosh/topics/heatstress/recommendations.html

THE ADVISOR

MONTHLY COMPLIANCE COMMUNICATOR

PRINT

SIGNATURE

DATE

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____
15. _____
16. _____
17. _____
18. _____
19. _____
20. _____
21. _____
22. _____
23. _____
24. _____
25. _____

Instructions

Print and post newsletter in office for staff review. Each member should sign this form when completed. Keep on file as proof of training on these topics.

Newsletter Content

How to Clean and Disinfect Environmental Surfaces in Healthcare Settings

You Have a Disaster Recovery Plan, Now What?

It's Your Call

Why Healthcare Workers Face the Highest Rates of Workplace Injuries and How Ergonomics Can Help

OSHA Heat Standard: What Medical and Dental Offices Need to Know



Need to contact us? Scan the QR code for all the ways to get in touch!