

BLOOD GLUCOSE MONITORING UPDATE FOR PROVIDERS

The Division continues to identify infection control breaches during blood glucose monitoring while performing inspections. When this occurs, the Division must contact the Healthcare Acquired Infection team within the Virginia Department of Health for assessment, guidance and training, and possible testing of residents and staff. This process can be emotionally distressing for all involved and can result in extra expense for the resident and potentially the facility, in addition to the risk of infection from exposure to disease.

In our continued efforts to improve practice in the state to protect vulnerable residents and staff in our facilities, we are issuing this guidance for providers. Please ensure that you are compliant with these practices immediately if you have not already done so. Your infection control policies and procedures should be updated to incorporate these guidelines. Inspectors will be citing violations identified during inspections for non-compliance in any of these areas beginning January 1, 2015.

- To ensure that everyone is clear on current acceptable practice, we are re-issuing the guidance from the CDC. In summary, ***the only time multiuse fingerstick devices may be used is if the resident is totally independent in all aspects of BGM and no assistance is provided by staff. In all other situations single use, auto-retractable disposable fingerstick devices must be used.*** The current CDC recommendations were incorporated verbatim into the registered medication aide curriculum in May 2013.
- Any multi-use fingerstick device (penlet) used by ***independent*** residents should be clearly labeled with the resident's name. All glucometers in the facility should be labeled with resident names in addition to the name labels on the outside of the kits. In other words, each piece of resident equipment including the storage case must be labeled with a resident name.
- "Whenever possible, blood glucose meters should **not** be shared. If they must be shared, the device should be cleaned and disinfected after every use, per manufacturer's instructions. If the manufacturer does not specify

how the device should be cleaned and disinfected then it should not be shared.” (Copied from <http://www.cdc.gov/injectionsafety/blood-glucose-monitoring.html>, 10/10/14) It is important to note that soap and water do not disinfect; either an approved EPA disinfectant or a 1:10 bleach solution prepared daily may be used to disinfect glucometers.

Additionally, OSHA regulations require employers to have a bloodborne pathogen exposure control plan (all ALFs fall under this federal regulation) which includes safety controls for equipment such as needles and sharps. Every ALF administrator should review this regulation to ensure current compliance. OSHA regulations and related material can be found on the government website at the following address: www.osha.gov/SLTC/bloodbornepathogens/index.html

We have attached the original CDC guidance and the information for obtaining single use, auto-retractable disposable fingerstick devices for Medicaid recipients and residents with other insurance for your convenience. Please visit the public website for additional information that we've posted for your reference. You may contact your inspector or our medical health consultants for any questions and concerns you might have.

Thank you for your prompt attention to this matter.

Lynne Williams, Division Director

Division of Licensing Programs

Virginia Department of Social Services