March 17, 2015

Dear Colleague:

The Pennsylvania Department of Human Services (Department) has recently identified serious infection control breaches in several personal care homes related to the improper use and sharing of diabetic testing supplies. These breaches likely resulted in a large outbreak of Hepatitis B in one facility resulting in tragic resident outcomes and dire consequences for the facility operator.

Please take this opportunity to comprehensively review infection control best practices and your responsibilities as an employer and care provider to prevent transmission of infectious diseases.

State and federal regulations and national guidelines exist to protect your residents, staff and you. As you know, the Department specifically prohibits the use of shared blood glucose testing and insulin administration equipment and supplies under section 85(a) (relating to sanitary conditions) in the personal care home and assisted living residence regulations to prevent the spread of blood-borne disease.

Practices in accordance with these requirements must be part of an overall infection control plan, and are vital to preventing the spread of potentially-deadly blood borne illnesses such as Hepatitis B and C (HBV/HCV), and the Human Immunodeficiency Virus (HIV).

Specifically, we require that each individual who uses insulin or has other blood glucose testing needs have his or her own glucometer, lancets, lancet device, test strips, insulin vial or pen, and syringes, and that there may be no sharing of these supplies or equipment. In practice, the Department has observed significant challenges in ensuring that diabetic supplies are not shared.

Consistent with Centers for Disease Control (CDC) recommendations, single-use, disposable supplies should be used (e.g., single-use, auto-disabling fingerstick devices) whenever possible. When single-use supplies are not available, be sure that individuals have their own devices (e.g., glucometer) for their exclusive use. Empower residents to verify their ownership of the glucometer before use. Insulin pens and multi-dose insulin vials must also be dedicated to individual residents and used and stored with extreme caution to prevent cross-contamination and inadvertent sharing.
As you can imagine, the personal impact of contracting these serious diseases cannot be overstated, and the public health and regulatory consequences of spreading disease due to complacency in blood glucose testing and insulin administration practices can be profound. For this reason, you are again asked to immediately review practices to ensure that supplies, equipment or medications are never shared by multiple residents.

Naturally, your medication administration staff are an important link in any comprehensive infection control program. Conduct a refresher training for all staff who administer medications with an emphasis on these specific issues. You must convey the importance of sanitary practices to them in strongest possible terms, with methods for supervisory staff to check their practices, and immediate consequences for staff who violate policies. Understand that nothing can be taken for granted in this regard.

Nonetheless, in previous investigations, the Department has identified and cited repeated violations related to shared blood glucose testing supplies within weeks of the discovery of original violations, and within days of staff retraining. This underscores the importance of going beyond staff re-training to comprehensively review your infection control plans and implement systems changes to safeguard against individual error.

Honestly evaluate your facility’s description of services to ensure that you can safely serve people with blood testing and insulin administration needs. If you identify an infection control breach now or in the future, please immediately notify your regional Bureau of Human Services Licensing Office.

Enclosed are some references to make your blood glucose testing and insulin administration program safer. As previously noted, these recommendations are one part of a comprehensive infection control plan. You are encouraged to review infection control best practices and your obligation to provide a safe work environment under OSHA’s bloodborne pathogen standard. We plan to provide statewide provider training on this topic in the near future. Please feel free to contact your regional Bureau of Human Services Licensing Office with any questions.

Sincerely,

Matthew J. Jones

Matthew J. Jones
Director
The following tips are offered as steps for reducing the risk of spreading blood-borne pathogens such as Hepatitis B and C (HBV/HCB), and Human Immunodeficiency Virus (HIV) during blood glucose testing and insulin administration. This is by no means a comprehensive list, and facilities are encouraged to seek every possible method for safe and sterile use of these products.

- Establish a procedure for routinely reviewing and updating your infection control plan with the best available evidence.
- Establish a policy in accordance with these and other safety procedures and educate all staff who administer medication, emphasizing the potentially deadly consequences of straying from the procedures. Document all initial trainings and subsequent refreshers.
- Regularly supervise medication administration staff during blood glucose testing and insulin administration to ensure accuracy and adherence to sanitary practices. Routinely document these competency assessments.
- Practice universal infection control precautions with any invasive procedure regardless of the known health status of the resident. This includes hand-washing and putting on new gloves before assisting each resident.
- Ensure that each resident has his or her own working glucometer, lancets, lancet device, test strips, syringes, and insulin vial or pen.
- Ensure that medication ordering procedures do not allow a resident to run out of medication.
- Establish procedures to immediately notify an appropriate administrator if a resident’s device needs to be replaced or is out of his/her medication supply. The administrator should collaborate with the resident’s healthcare provider to safely resolve the situation. Sharing a device is never the solution.
- Store each resident’s supplies and equipment in a separate, clearly-marked container. Label glucometers and lancet devices with the resident’s name and/or photograph. If a photograph is used, it should not interfere with routine cleaning of the device.
- Remove only one set of supplies from the storage area at a time, and double check that those supplies correspond to the resident who is being tested or injected. Empower the resident by having him or her identify the name on the equipment as his or her own.
- Never share the use of a glucometer, lancet device, syringe or insulin supply with multiple residents for any reason.
- Monitor glucometer use by comparing meter histories with recorded blood glucose levels to ensure that inadvertent sharing has not occurred.
• Discuss the advantages of Hepatitis B vaccination for all residents, especially those who undergo regular invasive procedures, with the residents and their health care providers.
• Review and comply with OSHA Bloodborne Pathogen Standard. Offer HBV vaccinations to all employees who complete these procedures or otherwise come in contact with body fluids and record their acceptance or denial.
• Immediately report any instance of sharing of blood glucose testing or insulin administration supplies or equipment to your regional licensing office so that an appropriate public health investigation can be initiated. Only through such an investigation can the spread of disease be confirmed or ruled out, and appropriate treatment be provided.

http://www.cdc.gov/injectionsafety/blood-glucose-monitoring.html
http://www.cdc.gov/injectionsafety/providers/blood-glucose-monitoring_faq.html
http://www.cdc.gov/injectionsafety/Fingerstick-DevicesBGM.html
http://www.cdc.gov/injectionsafety/clinical-reminders/insulin-pens.html