

SECTION 7B: PREVENTIVE EDUCATION AND CLINICAL SAFETY	POLICY: 7B.8
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PURPOSE:

- To educate staff in the proper methods of bag technique.
- To reduce the transmission of microorganisms brought into a patient's home or transferred from one home to another by way of supply bags and the items they contain.
- To ensure vital signs equipment utilized by Agency staff is routinely calibrated and replaced as necessary to ensure accurate recordings of client clinical data.

BAG REQUIREMENTS:

- Leak proof
- Washable
- Should contain an outside pocket to carry hand hygiene supplies (alcohol-based hand rub) and surface barriers.
- Bag must contain one side to be designated as the "clean" side and another side to be designated as the "dirty" side.
 - The "clean" side must be closeable.
 - Properly cleaned vitals equipment is to be stored on the clean side of the bag.
 - Paperwork, folders, and other items not used for patient care should be stored on the dirty side.

POLICY:

- Supply bags that carry vitals sign equipment, tablets, iPads, phones, notebooks, PPE, and other supplies into the patient's home must be cleaned (interior and exterior) when:
 - Visibly soiled.
 - Minimally monthly when a surface barrier is routinely used; or
 - Minimally weekly for the exterior and monthly for the interior when a surface barrier is not routinely used.
- The supply bag should be transported in a clean area of the car preferably the trunk.

Policies & Procedures



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IN-HOME PROCEDURE:

- Place the hand-carried bag on a clean, hard, dry surface. If there is no clean, hard, and dry surface available, hang bag on a nearby door handle.
- A disposable and impermeable barrier should be placed between the bag and surface. The ideal surface barrier would be a water-resistant material such as wax paper, plastic bag, waterproof changing table liner or poly-backed towel.
 - **Nurse bags should be kept closed, when possible**, especially when there are pets, pests (roaches, ants, etc.) and or young children present.
 - **Never place the bag on the floor.**
 - Newspaper, paper towels or paper hand napkins should be avoided as they may wick moisture or liquid present which can transmit organisms.
 - Choose a size that will minimally protect the full bottom surface of the bag and shoulder straps if applicable.
- Once bag placement and barrier are established, nurse should:
 - Perform hand hygiene. Before entering the bag, hands must be decontaminated by using an alcohol-based hand rub.
 - Remove the supplies from the bag and place them on a clean, dry surface or on the surface barrier as needed.
 - Do not reenter the bag with gloves on. Remove the gloves if worn, perform hand hygiene, and then reenter the bag.
 - After use, clean all equipment that had direct patient or environmental contact with disinfectant wipe and allow items to air dry on waterproof barrier prior to returning to clean side of nursing bag.
 - Remove PPE if worn and perform hand hygiene.
- A nurse bag should not be brought into the home if:
 - The patient is known to be colonized or infected with a multi-drug resistant organism such as C. Diff or COVID

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- The patient is on transmission-based precautions
- The home environment is infested with bedbugs or other pests
- The home environment is grossly contaminated with human or pet excrement

DECONTAMINATING AND CLEANING SUPPLY BAG:

- Select a large surface area that is suitable for cleaning and disinfecting (i.e., non-wood surface) the interior and exterior of the bag and emptying the bag’s contents.
- Clean and disinfect the selected surface with a disinfectant and allow the surface to remain wet for the contact time recommended by the manufacturer for a low-level disinfection.
- Place the nursing bag on the cleaned surface.
- Remove all contents from the interior of the bag and place the contents on the cleaned surface.
- Turn the bag upside down and shake the bag to remove any loose contents in a trash container.
- Visually inspect the interior and exterior of the bag for tears, cracks, and excess wear, and replace the bag as needed.
- Handwipe the nursing bag’s interior surfaces with a “moist” disinfectant wipe wearing gloves (if recommended by the manufacturer) to remove any surface dirt adhering to the interior of the bag. Allow the bag’s interior surfaces to remain wet for the contact time recommended by the manufacturer for a low-level disinfection.
- Remove any surface dirt adhering to the exterior of the nursing bag by
 - Hand wiping the rolling or hand-carried bag’s exterior surfaces with a “moist” disinfectant wipe for the contact time recommended by the manufacturer for low-level disinfection; or
 - Machine washing the hand-carried bag (i.e., duffel-style bag) in a washing machine and drying in a dryer or allowing it to air dry.
- Clean and disinfect the vital sign equipment (i.e., stethoscope, thermometer, pulse oximeter, sphygmomanometer) and electronic equipment used during patient care (i.e., laptop computer, cell phone). Allow the surface to remain wet for the contact time recommended by the manufacturer for a low-level disinfection.

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- Remove the gloves and perform hand hygiene.
- Check the expiration dates on all medical supplies, blood tubes, and hand hygiene products, and discard as needed. Replace the supplies back into the cleaned nursing bag.
- Check the supply stock to assure that all necessary equipment, supplies, and hand hygiene products are available and restock the bag's contents as needed.
- Replace vital sign equipment into the nursing bag.

EQUIPMENT MAINTENANCE:

- Agency staff shall routinely inspect their personal vital signs equipment (i.e., stethoscope, thermometer, pulse oximeter, sphygmomanometer) for signs of deterioration & excess wear (e.g. cracks, tears, peeling, illegible labels, etc.) and replace equipment as appropriate.
- Agency staff shall have their pulse oximeter, thermometer, and sphygmomanometer inspected/calibrated (or replaced) no less than annually, or more often as necessary/desired, to ensure each device is obtaining accurate readings.
- Infusion pumps and other medical equipment placed in the patient's home are provided by the client's attending specialty pharmacy and accompanied by the manufacturer's instructions where available / needed.
 - The ongoing maintenance, testing, calibration, inspection, and replacement of this equipment is the responsibility of the supplier / medical equipment company providing such equipment.
- Helms Home Care, LLC staff are trained in the use and safety features of IV pumps and other medical equipment prior to providing care, treatment and/or services.
 - Agency staff members shall contact a Clinical Supervisor and/or the equipment supplier immediately if they have questions or are unclear regarding the proper use of or troubleshooting of medical equipment in the home.
- Patients / Caregivers are instructed in the use, including troubleshooting and safety features of any medical equipment available and applicable to the care plan.