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Policy Area Infection Prevention  
Applicability UNC Medical Center

## Rehabilitation Center

### I. Description

Describes the Infection Prevention policies and practices followed for patients receiving care in the Rehabilitation Center

### II. Rationale

The Rehabilitation Center is a specialized unit designed for the rehabilitation of patients by a multidisciplinary team. Progress toward rehabilitation can be greatly impacted by healthcare-associated infections. The following guidelines are provided in order to prevent infections for patients, as well as rehabilitation personnel.

### III. Policy

#### A. Personnel

- Personnel
  - a. Personnel must adhere to guidelines established by the Occupational Health Service (OHS) (see Infection Prevention policy: [Infection Prevention and Screening Program: Occupational Health Service](#)).
  - b. Personnel should adhere to the following Infection Prevention policies where applicable:
    - i. [Infection Prevention Guidelines for Adult and Pediatric Inpatient Care](#)
    - ii. [Infection Prevention Guidelines for Perioperative Services](#)
    - iii. [Isolations Precautions](#)

- iv. [Tuberculosis Control Plan](#)
  - v. [The Prevention of Intravascular Catheter-Related Infections](#)
  - vi. [Guidelines for Disposal of Regulated Medical Waste](#)
  - vii. [Environmental Services](#)
  - viii. [Respiratory Care Department](#)
  - ix. [High-Level Disinfection - Medical Reprocessing of Reusable Semi-Critical Medical Devices](#)
  - x. [Sterilization of Reusable Patient-Care Items](#)
- c. Personnel will comply with the Infection Prevention policy: [Hand Hygiene and Use of Antiseptics for Skin Preparation](#).
  - d. Personnel must be familiar with the Infection Prevention policy: [Exposure Control Plan for Bloodborne Pathogens](#).

## B. Patients

1. Patients with healing or manageable wounds may be admitted to the Rehabilitation Center. Patients able to manage their wounds themselves should be instructed in the proper aseptic or clean technique for wound management and hand hygiene by the nursing staff.
2. Patients with an indwelling urinary catheter are at risk for urinary tract infections. These patients should be managed following guidelines provided in the Infection Prevention policy: [Infection Prevention Guidelines for Adult and Pediatric Inpatient Care](#) and the Nursing policy: [Urinary Drainage Devices: Indwelling and External Catheters](#)
3. Rehabilitation Center patients are educated on both Clean and Aseptic Technique for self-catheterization. Clean technique is used for patient home self-catheterization but **aseptic technique is encouraged while patients are in the hospital to minimize the risk of infection.**
4. The Rehabilitation Center is not designed to accommodate patients who require Airborne Precautions. However, if the need arises, the guidelines provided in the Infection Prevention policy: [Isolation Precautions](#) policy must be followed until the patient can be transferred to an appropriate unit with an airborne infection isolation room (AIIR)
5. For patients requiring Contact, Enteric, or Droplet Precautions, the Medical Director and Nursing Supervisor should assess whether the patient should be admitted to or remain in the Rehabilitation Center. An Infection Preventionist (IP) may be consulted for assistance as needed.
  - a. Patients who require Contact Precautions because of infection/colonization with multi-drug resistant organisms (MDROs) often receive rehabilitation services. These patients should be managed per the Infection Prevention policy: [Isolation Precautions](#). Patients on Contact Precautions may use the Rehab Gym with other patients as long as:

- i. Patients are not having nausea/vomiting due to an infectious process
- ii. Patients are not incontinent of stool
- iii. All wounds are covered and drainage is contained
- iv. Environmental cleaning with an EPA-registered disinfectant (e.g., Sani-Cloths, Metriguard) is performed upon completion of therapy in the gym.
- v. Refer to the Infection Prevention policy: [Isolation Precautions](#) for guidelines for therapeutic activities with patients on Contact Precautions.

b. Refer to the Infection Prevention policy: [Isolation Precautions](#), and attachment [Management of Herpes Zoster](#) for guidance on patients with Herpes Zoster (Shingles).

c. Enteric Precautions are followed for persons with gastroenteritis caused by *C. difficile*, norovirus, or rotavirus.

- Refer to the Infection Prevention policy: [Isolation Precautions](#) for guidelines for therapeutic activities with patients on Enteric Precautions.

d. Patients on Enteric Precautions for *C. difficile* may use a private treatment room on the Rehab unit ONLY provided:

- i. Patients have been asymptomatic (no loose stools) for 48 hours
- ii. Patients are continent of stool (diapered patients are not considered continent)
- iii. Patients don a clean hospital gown, clean clothes, or a clean hospital gown over their clothing prior to leaving their room
- iv. Patients perform hand hygiene with soap and water prior to leaving their room
- v. An Enteric Contact precautions sign is placed outside the room during therapy and until terminal cleaning with a sporicidal (i.e., bleach) is completed after therapy
- vi. HCPs working with the patient wear a clean isolation gown and gloves. Ideally, upon completing therapy, the HCP will discard the contaminated isolation gown and gloves, perform hand hygiene with soap and water, and don clean gown and gloves before returning patient to their room. After returning the patient to their room, HCPs will discard gown and gloves and perform hand hygiene with soap and water.
- vii. After therapy is completed, Environmental Services should then be notified to perform a terminal clean with a sporicidal (i.e., bleach) of the room.

- e. Patients on Enteric Contact Precautions for *C. difficile* may use the Rehab Gym provided:
  - i. Patients have **completed** initial antibiotic treatment for *C. difficile*
  - ii. Patients are asymptomatic and continent of stool (diapered patients are not considered continent)
  - iii. Patients don a clean hospital gown, clean clothes, or a clean hospital gown over their clothing prior to leaving their room
  - iv. Patients perform hand hygiene with soap and water prior to leaving their room
  - v. HCPs working with the patient wear a clean isolation gown and gloves. Ideally, upon completing therapy, the HCP will discard the contaminated isolation gown and gloves, perform hand hygiene with soap and water, and don clean gown and gloves before returning patient to their room. After returning the patient to their room, HCPs will discard gown and gloves and perform hand hygiene with soap and water
  - vi. After therapy is completed, the HCP will clean all surfaces in the room or items in the environment with bleach (e.g., bleach Super Sani-Cloth or 1:10 bleach solution).

f. When two or more patients or staff have gastroenteritis (vomiting  $\geq 2$  times and/or diarrhea with  $\geq 2$  loose stools in a 24-hour period with or without fever and abdominal pain), the Infection Preventionist should be consulted. Refer to the Infection Prevention policy: [Isolation Precautions](#), and attachment: [Infection Control Recommendations for Multiple Patients/Healthcare Personnel with Signs/Symptoms of Gastroenteritis](#).

- 6. Family members often participate in the rehabilitation program. Persons with communicable diseases should not visit patients. Visitors, including children, are monitored by Rehabilitation Center staff and are excluded if there is evidence of a communicable disease (e.g., upper respiratory infection, herpes zoster, diarrhea, and conjunctivitis).
- 7. The following infection prevention measures are used for spinal cord injury patients on Contact Precautions during Rehabilitation Group Therapy:
  - a. Spinal cord patients on Contact Precautions will clean their hands before going to group therapy and be escorted to and from the group therapy room by health care personnel (HCP).
  - b. HCP will ensure that patients do not come in direct contact with one another or share the same equipment during the session.
  - c. Shared equipment is cleaned with an EPA-registered disinfectant (e.g., MetriGuard, Sani-Cloth) between each patient per manufacturer's instructions for use.
  - d. HCP perform hand hygiene before and after direct patient contact.

## C. Equipment

1. Cleaning of equipment and shared patient items should be performed per the guidelines in the Infection Prevention policy: [Infection Prevention Guidelines for Adult and Pediatric Inpatient Care](#).
  - Rugs used for balance training may be used only in the gym (not in inpatient rooms) and should be cleaned after each use with an accelerated hydrogen peroxide spray. The rug should be vacuumed on a routine basis and stored in a designated Rehab closet. Patients should wear new, clean socks prior to using the rug.
2. The OT/PT Department maintains the gym area. Guidelines are provided in the Infection Prevention policy: [Rehabilitation Therapies](#).
3. Occupational Therapy maintains the kitchen area. Guidelines are provided in the Infection Prevention policy: [Rehabilitation Therapies](#).

## D. Use of the Dining/Activity Room

The UNC Rehabilitation Center's Dining/Activity Room is designed to be the central gathering place where patients have the opportunity to gather and socialize and practice skills learned during their rehabilitation program. The Dining/Activity Room may be used for food preparation, patient group meals, and other social functions. Infection Prevention measures are necessary to prevent the spread of communicable diseases.

1. Patients will perform hand hygiene before entering the Dining Room. Staff will instruct and/or assist patients with appropriate hand hygiene.
2. Food Storage should occur per the Infection Prevention policy: [Infection Prevention Guidelines for Adult and Pediatric Inpatient Care](#).
3. The Dining Room refrigerator should be routinely cleaned (e.g. weekly) and when visibly soiled.
4. Staff will instruct patients not to share food/beverages from their plates/cups.
5. In the event of a patient/staff outbreak of vomiting and/or diarrhea, the Dining Room will be closed for meal preparation and eating activities until the last symptomatic patient has been asymptomatic for at least 48 hours and the area has been cleaned with a sporicidal agent (e.g., bleach) by Environmental Services. An outbreak will be defined as two or more patients/staff members experiencing two or more episodes of either vomiting or diarrhea in a 24-hour period.
6. The Rehabilitation Center will follow the Infection Prevention policy: [Guidelines for Infection Prevention in Nutrition and Food Services](#).

## E. Transitional Living Apartment (TLA)

The Transitional Living Apartment simulates a home-like environment where patients have the opportunity to practice basic and instrumental skills of daily living under the safety and guidance

of rehabilitation staff. The TLA includes a bedroom area, utility closet, bathroom, kitchen and dining area. The TLA is equipped with a washer and dryer. Infection Prevention measures are needed to prevent the spread of communicable diseases.

1. Staff will screen the caregiver for any communicable diseases following the Patient Care policy [Hospital Visitation](#). Caregivers should be asymptomatic for at least 48 hours prior to rooming with the patient. Should they report or demonstrate any communicable disease symptoms while rooming with the patient, the caregiver should not continue to visit with the patient.
2. Nursing staff will teach the caregiver hand hygiene and respiratory hygiene/cough etiquette.
3. Patients on Contact Precautions should use the TLA as the last patient of the day and the TLA should be terminally cleaned after their use.

## F. Implementation

Implementation of this policy is the responsibility of the Medical Director and the leadership of the Rehabilitation Unit Interdisciplinary Team.

## IV. References

APIC. APIC Text of Infection Prevention and Epidemiology, 4th edition, Chapter 67. Washington, DC; Association for Professionals in Infection Prevention and Epidemiology, 2020.

## V. Related Policies

[Infection Prevention policy: Environmental Services](#)

[Infection Prevention policy: Exposure Control Plan for Bloodborne Pathogens](#)

[Infection Prevention policy: Guidelines for Disposal of Regulated Medical Waste](#)

[Infection Prevention policy: Guidelines for Infection Prevention in Nutrition and Food Services](#)

[Infection Prevention policy: Hand Hygiene and Use of Antiseptics for Skin Preparation](#)

[Infection Prevention policy: High-Level Disinfection - Medical Reprocessing of Reusable Semi-Critical Medical Devices](#)

[Infection Prevention policy: Infection Prevention and Screening Program: Occupational Health Service](#)

[Infection Prevention policy: Infection Prevention Guidelines for Adult and Pediatric Inpatient Care](#)

[Infection Prevention policy: Infection Prevention Guidelines for Perioperative Services](#)

[Infection Prevention policy: Isolations Precautions](#)

[Infection Prevention policy: Rehabilitation Therapies](#)

[Infection Prevention policy: Respiratory Care Department](#)

[Infection Prevention policy: Sterilization of Reusable Patient-Care Items](#)

[Infection Prevention policy: The Prevention of Intravascular Catheter-Related Infections](#)

[Infection Prevention policy: Tuberculosis Control Plan](#)

[Nursing policy: Urinary Drainage Devices: Indwelling and External Catheters](#)

[Patient Care policy: Hospital Visitation](#)

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## Attachments

[Isolation Precautions: IC Recommendations for Multiple Patients\\_HCP with Signs\\_Symptoms of Gastroenteritis .pdf](#)

[Isolation Precautions: Management of Herpes Zoster .pdf](#)

## Approval Signatures

**Step Description**

**Approver**

**Date**

Policy Stat Administrator

Kimberly Novak-Jones: Nurse  
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10/2021

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10/2021

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10/2021