R9-10-201. Definitions
52. "Infection control risk assessment" means determining the risk for transmission of communicable diseases.
R9-10-203. Administration
C. An administrator shall require that:
2. Hospital policies and procedures for hospital services are established, documented, and implemented that:
f. Cover infection control;
R9-10-229. Infection control.
A. An administrator shall require that:
1. An infection control program that meets the requirements of this Section is established under the direction of an individual qualified according to hospital polices and procedures.
2. There are hospital policies and procedures:
a. To prevent or minimize, identify, report and investigate infections and communicable diseases that include:
i. Isolation a patient;
ii. Sterilizing equipment and supplies
iii. Maintaining and storing sterile equipment and supplies;
iv. Disposing of biohazardous medical waste; and
v. Transporting and processing soiled linens and clothing;
b. That specify communicable disease, medical conditions or criteria that prevent an individual, a personnel member, or a medical staff member from:
i. Working in the hospital
ii. Providing patient care, or
iii. Providing environment services;
c. That establish criteria for determining whether a medical staff member is at an increased risk of exposure to infectious pulmonary tuberculosis based on:
i. The level of risk in the area of the hospital premises where the medical staff member practices, and
ii. The work that the medical staff member performs; and
d. That establish the frequency of tuberculosis screening for an individual determined to be at an increased risk of exposure;
3. An infection control program includes an infection control risk assessment that is reviewed and updated at least every 12 months;
4. A tuberculosis screening is performed as follows:
a. For a personnel member, at least once every 12 months or more frequently if determined by an infection control risk assessment;
b. Except as required in subsection (A)(4)(c), for a medical staff member, at least once every 24 months; and

c. For a medical staff member at an increased risk of exposure based on the criteria in subsection (A)(2)(c), at the frequency required by the hospital’s policies and procedures, but no less frequently than every 24 months;
5. Soiled linen and clothing are:
a. Collected in a manner to minimize or prevent contamination,
b. Bagged at the site of use, and

c. Maintained separate from clean linen and clothing;

6. A personnel member washes hands or uses a hand disinfection product after each patient contact and after handling soiled linen, soiled clothing, or potentially infection material;

7. An infection control program has a procedure for documenting:
   a. The collection and analysis of infection control data;
   b. The actions taken relating to infections and communicable diseases; and
   c. Reports of communicable diseases to the governing authority and state and county health departments;

8. Infection control documents are maintained in the hospital for two years and are provided to the Department for review as soon as possible after a Department request but not more than four hours from the time of the request:

9. An infection control committee is established according to hospital policies and procedures that consists of:
   a. at least one medical staff member;
   b. The individual directing the infection control program; and
   c. Other personnel identified in hospital policies and procedures;

10. The infection control committee:
    a. Develops a plan for preventing, tracking, and controlling infections;
    b. Reviews the type and frequency of infections and develops recommendations for improvement;
    c. Meets and provides a quarterly written report for inclusion by the quality management program; and
    d. Maintains a record of actions taken and minutes of meetings.

B. An administrator shall comply with communicable disease reporting requirements in A.A.C., Title 9 Chapter 6.

Historical Note
Adopted effective February 23, 1979 (Supp. 79-1). Section repealed; new Section made by final rulemaking at 8 A.A.R. 2785, effective October 1, 2002 (Supp. 02-2).

R9-10-503. Personnel

B. All personnel should meet the following requirements:

3. Within the first week of employment, attend orientation that includes:
   d. Basic infection control techniques, including hand washing and prevention of communicable diseases.

R9-10-707. Employee Orientation and Ongoing Training

A. A licensee shall ensure that a new employee completes orientation within 10 days from the starting date of employment that includes:

7. Infection control

B. A licensee shall ensure that each manager and caregiver completes a minimum of six hours of ongoing training every 12 months from the starting date of employment, or for a manager or caregiver hired before the effective date of this Article, every 12 months from the effective date of this Article.

1. The training shall include:
   c. Infection control;

R9-10-811. Hospice Infection Control, Environmental Safety, and Sanitation
A. A hospice licensee shall develop and implement communicable disease and infection control policies and procedures including:
1. Using standard and contact precautions that comply with the control measures in 9 A.A.C. 6, Article 3;
2. Reporting communicable diseases according to 9 A.A.C. 6;
3. For patients receiving inpatient services, isolating a patient who has a communicable disease from other patients;
4. Transporting and processing soiled linens and clothing;
5. Sterilizing equipment and supplies;
6. Maintaining and storing sterile equipment and supplies; and
7. Ensuring that a staff member is free from communicable diseases when providing a hospice service.

B. A hospice licensee shall dispose of biohazardous medical waste according to 18 A.A.C. 13, Article 14.

C. A hospice licensee shall ensure that a reusable item:
1. Is sterilized before the item is assigned to a patient for use,
2. Is assigned to only one patient for continuous personal use, and
3. Is cleaned after each use.

D. A staff member providing hospice services shall wash the staff member's hands and exposed arms with soap and water:
1. Immediately before and after providing hospice services to a patient,
2. After using the toilet, and
3. As often as necessary to remove soil and contamination;

E. A hospice licensee shall ensure that food is free from spoilage, filth, or other contamination and is safe for human consumption when served to a patient by a staff member.

F. A staff member handling food shall:
1. Clean the staff member's hands and forearms as required in subpart 2-301 of the U.S. Food and Drug Administration publication, Food Code: 1999 Recommendations of the U.S. Public Health Service, Food and Drug Administration (1999), as modified and incorporated by reference in A.A.C. R9-8-107; and
2. Keep the staff member's hair from contacting food or food-contact surfaces.

R9-10-917. Infection Control
An administrator shall ensure that:
1. There are policies and procedures:
   a. To prevent or control, identify, report, and investigate infections and communicable diseases including:
      i. Maintaining and storing sterile equipment and supplies;
      ii. Disposing of biohazardous medical waste; and
      iii. Transporting and processing soiled linens and clothing;
   b. That establish work restriction guidelines for a staff member infected or ill with a communicable disease or infected skin lesions;
2. An infection control program is established to prevent the development and transmission of disease and infection including:
   a. Developing a facility-wide plan for preventing, tracking, and controlling communicable diseases and infection;
   b. Reviewing the types, causes, and spread of communicable diseases and infections; and
c. Developing corrective measures for improvement and prevention of additional cases;
3. Soiled linen and clothing are:
a. Collected in a manner to minimize or prevent contamination;
b. Bagged at the site of use; and
c. Maintained separate from clean linen and clothing;
4. Linens are clean before use, without holes and stains, and are not in need of repair;
5. A staff member and a volunteer washes hands or use a hand disinfection product after each resident contact and after handling soiled linen, soiled clothing or potentially infectious material; and
6. Infection control processes, policies, and information are documented and maintained in the nursing care institution for two years and are provided to the Department for review within two hours of the Department's request.