

150. INFECTION CONTROL.

01. Policies and Procedures. Policies and procedures shall be written which govern the prevention, control and investigation of infections. They shall include at least: (1-1-88)

a. Methods of maintaining sanitary conditions in the facility such as: (1-1-88)

i. Handwashing techniques. (1-1-88)

ii. Care of equipment. (1-1-88)

iii. Housekeeping. (1-1-88)

iv. Sterile supply storage areas. (1-1-88)

v. Preparation and storage of food. (1-1-88)

vi. Vermin control. (1-1-88)

vii. Resident care practices, i.e., catheter care, dressings, decubitus care, isolation procedures. (1-1-88)

viii. Needle and syringe management. (1-1-88)

b. Employee infection surveillance and actions. (1-1-88)

c. Isolation procedures. (1-1-88)

d. Specifics for monitoring the course of infections which shall include at a minimum a prepared written quarterly report by the designated surveillance person describing the status of each infection. The report shall include: (1-1-88)

i. Diagnosis. (1-1-88)

ii. Description of the infection. (1-1-88)

iii. Causative organism, if identified. (1-1-88)

iv. Date of onset. (1-1-88)

v. Treatment and date initiated. (1-1-88)

vi. Patient's/resident's progress. (1-1-88)

vii. Control techniques utilized. (1-1-88)

viii. Diagnostic tests employed. (1-1-88)

02. Infection Control Committee. An Infection Control Committee shall be appointed by the administrator which shall: (1-1-88)

- a.** Include the facility medical director, administrator, pharmacist, dietary services supervisor, director of nursing services, housekeeping services representative, and maintenance services representative. (1-1-88)
- b.** Be responsible for development and implementation of infection control policies and procedures including the designation of a facility employee to monitor practices within the facility. (1-1-88)
- c.** Meet as a group no less often than quarterly with documented minutes of meetings maintained showing members present, business addressed and signed and dated by the chairperson. (1-1-88)
- d.** Review policies and procedures as needed but no less often than annually. (1-1-88)
- e.** Review the quarterly report of infections prepared by the designated surveillance officer. (1-1-88)

03. Patient/Resident Protection. There is evidence of infection control, prevention and surveillance in the outcome of care for all patients/residents as demonstrated by: (1-1-88)

- a.** Applied aseptic or isolation techniques by staff. (1-1-88)
- b.** Proper handling of dressings, linens and food, etc., by staff. (1-1-88)
- c.** Exhibited knowledge by staff in controlling transmission of disease. (1-1-88)
- d.** Minimal infection rate in facility. (1-1-88)