

## 22-B3267. MRSA INFECTION PREVENTION.

3267.1 Each nursing facility shall have written infection prevention and control policies and procedures.

3267.2 Each nursing facility shall identify MRSA colonized patients in an intensive care unit or other at-risk unit.

3267.3 Each patient colonized or infected with MRSA shall be isolated in an appropriate manner consistent with guidelines for best practices. A patient who is infected or colonized shall be permitted to participate in group activities provided that any draining wounds are covered, bodily fluids are contained, and the patient is observed to have proper hygiene practices.

3267.4 Each nursing facility shall adhere to hand hygiene best practices to ensure, through education and monitoring, that healthcare personnel properly cleanse hands between patient care activities.

3267.5 Each nursing facility shall monitor trends in the incidence of MRSA in the nursing facility over time and enhance infection control interventions if rates do not decrease.

3267.6 Each nursing facility shall maintain a mechanism for identifying a MRSA patient who is readmitted to the nursing facility (i.e. flagging).

3267.7 Each nursing facility shall have a worker education requirement regarding modes of transmission, use of personal protective equipment, disinfection policies and procedures, and other preventive measures in accordance with current CDC guidelines on the use of "Standard Precautions" and "Transmission-Based Precautions".

STATUTORY AUTHORITY: Unless otherwise noted, the authority for this chapter is §5 of the Health-Care and Community Residence Facility, Hospice and Home Care Licensure Act of 1983, D.C. Law 5-48, D.C. Official Code § 44-504 (2001); [D.C. Code §§ 7-131](#); 44-501, Mayor's Order 98-137

SOURCE: Final Rulemaking published at 56 DCR 848, 850 (January 23, 2009).

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