Kansas
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Each nursing facility shall establish and maintain an infection control program designed to provide a safe, sanitary, and comfortable environment for residents and to prevent the development and transmission of disease and infection.
(a) Each facility shall establish an infection control program under which the facility meets the following requirements:
(1) Prevents, controls, and investigates infections in the facility;
(2) develops and implements policies and procedures that require all employees to adhere to universal precautions to prevent the spread of blood-borne infectious diseases based on “universal precautions for prevention of transmission of human immunodeficiency virus, hepatitis B virus, and other blood borne pathogens in health-care settings,” as published in the morbidity and mortality weekly report, June 24, 1988, vol. 37 no. 24 and “CDC guidelines for handwashing and hospital environmental control, effective as published in November, 1985, are hereby adopted by reference;
(3) develops and implements policies and procedures related to isolation of residents with suspected or diagnosed communicable diseases based on the centers for disease control “guideline for isolation precautions in hospitals,” as published in January, 1996, which is hereby adopted by reference;
(4) develops policies and procedures related to employee health based on the centers for disease control “guideline for infection control in hospital personnel,” as published in August, 1983, which is hereby adopted by reference;
(5) assures that at least one private room that is well ventilated and contains a separate toilet facility is designated for isolation of a resident with an infectious disease requiring a private room. The facility shall develop a policy for transfer of any resident occupying the designated private room to allow placement of a resident with an infectious disease requiring isolation in the private room designated as an isolation room;
(6) includes in the orientation of new employees and periodic employees in-service information on exposure control and infection control in a health care setting; and
(7) maintains a record of incidents and corrective actions related to infection that is reviewed and acted upon by the quality assessment and assurance committee.
(b) Preventing the spread of infection.
(1) When a physician or licensed nurse determines that a resident requires isolation to prevent the spread of infection, the facility shall isolate the resident according to the policies and procedures developed.
(2) The facility shall prohibit employees with a communicable disease or infected skin lesions from coming in direct contact with residents, any resident’s food, or resident care equipment until the condition is resolved.
(3) Tuberculosis skin testing shall be administered to each new resident and employee as soon as residency or employment begins, unless the resident or employee has documentation of a previous significant reaction. Each facility shall follow the centers for disease control recommendations for “prevention and control of tuberculosis in facilities providing long-term care to the elderly,” as published in morbidity and mortality weekly report, July 13, 1990.
(4) Staff shall wash their hands after each direct resident contact for which handwashing is indicated by the centers for disease control guideline for “handwashing and hospital
environmental control,” as published in November 1985, which is hereby adopted by reference.
(c) Linens and resident clothing.
(1) The facility shall handle soiled linen and soiled resident clothing as little as possible and with
minimum agitation to prevent gross microbial contamination of air and of persons handling the
items.
(2) The facility shall place all soiled linen and resident clothing in bags or in carts immediately at
the location where they were used. The facility shall not sort and pre-rinse linen and resident
clothing in resident-care areas.
(3) The facility shall deposit and transport linen and resident clothing soiled with blood or body
fluids in bags that prevent leakage.
(4) The facility shall wash linen with detergent in water of at least 160° F. The facility shall
follow the manufacturers’ operating directions for washing equipment.
(5) The facility may choose to wash linens and soiled resident clothing in water at less than 160°
F if the following conditions are met:
(A) Temperature sensors and gauges capable of monitoring water temperatures to ensure that the
wash water does not fall below 72° F are installed on each washing machine.
(B) The chemicals used for low temperature washing emulsify in 70°F water.
(C) The supplier of the chemical specifies low-temperature wash formulas in writing for the
machines used in the facility.
(D) Charts providing specific information concerning the formulas to be used for each machine
are posted in an area accessible to staff.
(E) The facility ensures that laundry staff receives in-service training by the chemical supplier on
a routine basis, regarding chemical usage and monitoring of wash operations.
(F) Maintenance staff monitors chemical usage and wash water temperatures at least daily to
ensure conformance with the chemical supplier’s instructions.
(6) The facility shall use methods for transport and storing of clean linen that will ensure the
cleanliness of the linens.
21, 1997; amended October 8, 1999.)