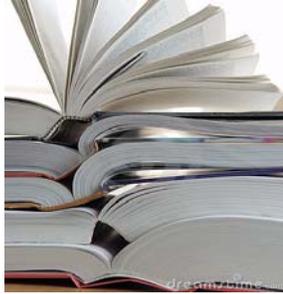


Long Term Care Infection Control Regulations



Long Term Care Infection Control Regulations

Hellen Adrian, RN, FANIII

MO State Training Coordinator
Department of Health & Senior Services
Division of Regulation & Licensure
Section for Long Term Care Regulation – Training Unit
3418 Knipp Dr, Suite F, P. O. Box 570
Jefferson City, MO 65102
Hellen.Adrian@health.mo.gov
573/526-7886

LTC Infection Control Regulations Learning Objectives

1. Discuss regulations and interpretive guidelines that pertain to infection control in the *State Operations Manual (SOM)*.
2. Review the regulations in the *Missouri Division of Regulation and Licensure, Section for Long-Term Care Regulation, Licensure Regulations Manual*.
3. Use the state and federal regulations to assist you with better infection control practices and to achieve better survey results.

Long Term Care Infection Control Regulations

- Which regulations apply to my home?
- Where do I look to find the regulations?



LTC Infection Control Regulations **F441**

- January 1, 2013 – March 31, 2013 (3 mo.)
- Cited 72 times
- Second only to F281 professional standards (cited 94 times)

Long Term Care Infection Control Regulations



Surveying Infection Control

- Determine whether facility has an effective program to:
 - Identify
 - Investigate
 - Control &
 - Prevent infection.

Surveying Infection Control

- Apply current IC standards & practices to determine causes & means of transmission for infections or potential infections.

Surveying Infection Control

- | | |
|--------------------------|---|
| • Hand washing | • Proper use of disinfectants, antiseptics & germicides, in accordance with manufacturer's instructions |
| • Respiratory protection | |
| • Linen handling | |
| • Housekeeping | |
| • Needle & hazardous | |
| • Waste disposal | • Other IC strategies |

Surveying Infection Control

- How does facility control spread of infection by visitors?
- What are IC policies for those with tuberculosis (TB), AIDS, hepatitis B or hepatitis C?

Surveying Infection Control

- Are Standard Precautions practiced?
- Are residents isolated only to degree needed, in least restrictive way possible?
- Do staff know & follow facility policy & protocol on hand washing?

Surveying Infection Control

- Do staff conduct risk assessment for occurrence of communicable disease for residents & staff
- What measures are in place to prevent communicable disease outbreaks (TB, scabies, flu, methycillin-resistant *Staphylococcus aureus*, etc.)

Surveying Infection Control

- Procedures to inform & involve local or state epidemiologist as necessary
 - scabies

General Tour of Facility

- Cleanliness & environment
- Use of personal protective equipment
- Hand washing
 - Stations include soap & towels
- Linen handling
 - Clean: covered storage
 - Soiled: closed containers, off floor

General Tour of Facility

- Appropriate storage of supplies:
 - Clean: utility room separate from soiled utility room, with no direct connection
 - Clean: hand-washing station & work counter
 - Soiled: clinical sink, hand-washing station, work counter, separate covered containers for soiled linen & waste
- Isolation technique, as necessary
- Correct handling of infectious waste

Errors in Infection Control Technique

- **During the survey:**
 - If failures to follow standard technique are noted:
 - Verify system in place to monitor infection control practices of staff
 - Ask direct caregiver staff what they do & whom they notify when signs of infection are noted.

Long Term Care Challenges

(Current standards for prevention available –
standards guide our practice)

- | | |
|------------------------|---|
| • Intravenous therapy | • Pressure sores |
| • Indwelling catheters | • Bladder and bowel incontinence |
| • Tracheostomy care | • Factors which compromise a resident's resistance to infection |
| • Stoma care | |
| • Respiratory care | |
| • Immunosuppression | |

Current standards address measures for prevention of infections associated with:

- Other non-treatment examples:
 - Nursing assistant observed walking down the hall with soiled linen clutched to his/her chest area and not in a bag.
 - Isolation linen not noted as such.

Flu & Pneumonia Immunizations

- Have immunizations have been offered to all residents?
- Interview:
 - Administrator
 - Director of nursing
 - Medical director
- Review clinical record to determine compliance.

Air Movement

- Air flow should be from “clean to less clean”
- Air flow from rooms with contamination or odor problems exhausted to outside
- Vents clean & free from dust & soil

Pressure Ulcer

- Was standard of practice technique used during dressing changes?
 - Hand washing/glove use?
 - Correct handling of scissors, dressings, tape, etc.?
 - Correct disposal of soiled dressing?

Pressure Ulcer

- Was treatment current?
 - Did staff technique follow standard of practice?
- Potential for cross-contamination present?
 - Was drainage present?
 - Color
 - Odor
 - Amount

Urinary Tract Infection

- Do staff provide:
 - Proper peri-care?
 - Linen changes to prevent residents sitting or lying in soiled linens?

Urinary Tract Infection

- Catheter care & handling
 - Catheter necessary by medical diagnosis?
 - Standards of practice followed in transfer to prevent backflow of urine?

Surveying Infection Control

- Written procedures for hand washing & cleanliness of whirlpools, paraffin baths, moist hot pack units
- Procedures for soiled linen removal & storage
- Pest control program

Kitchen & Food Service

- Food handling:
 - Safety precautions
- Food preparation:
 - Area cleanliness maintained?
 - Pest management systems in place?

Kitchen & Food Service

- Food storage:
 - Correct holding temperatures?
- Hazard analysis & critical control point:
 - Observe for correct technique
- Dishwasher:
 - Correct water temperature maintained?
- Wash & rinse sinks:
 - Correct wash & sanitizing agents?

Infection through Linens

- Do staff know & follow facility policy for handling linen?
- Linens processed, transported, stored & handled properly?
- Contact between clean & soiled linen?

Infection through Linens

- Soiled linen storage areas well ventilated & maintained?
- Staff understand isolation linen handling precautions?

Linen Handling by Staff

- Surveyor observations should include:
 - Hand washing when required?
 - Linens held away from clothing?
 - Linen bags closed?
 - Linen hampers covered?
 - Clean linens covered?

Linen Handling by Laundry

- Surveyor observations should include:
 - Is hazardous waste identified?
 - Do staff wear protective clothing?
 - Is water temperature or bleach rinse sufficient to provide disinfection?
 - Do staff understand standard precautions?

LTC Infection Control Regulation

- Federal Regulation – F441
- §483.65 Infection Control
- Revised October 2010
- The facility must establish and maintain an Infection Control Program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of disease and infection.

LTC Infection Control Regulation

- **§483.65(a) Infection Control Program**
- The facility must establish an Infection Control Program under which it:
 - (1) Investigates, controls, and prevents infections in the facility;
 - (2) Decides what procedures, such as isolation, should be applied to an individual resident; and
 - (3) Maintains a record of incidents and corrective actions related to infections.

Long Term Care Infection Control Regulation

- **§483.65(b) Preventing Spread of Infection**
 - (1) When the Infection Control Program determines that a resident needs isolation to prevent the spread of infection, the facility must isolate the resident.

Long Term Care Infection Control Regulation

(2) The facility must prohibit employees with a communicable disease or infected skin lesions from direct contact with residents or their food, if direct contact will transmit the disease.

Long Term Care Infection Control Regulation

(3) The facility must require staff to wash their hands after each direct resident contact for which hand washing is indicated by accepted professional practice.

Long Term Care Infection Control Regulation

- **§483.65(c) Linens**
- Personnel must handle, store, process and transport linens so as to prevent the spread of infection.

F441

- Intent
- Definitions
- Overview – Infections
 - Significant source of morbidity and mortality
 - Accounts for up to half of NH to hospital transfers
 - Estimated cost in \$ 673 million to \$2 billion
 - Note: It is important that all IC practices reflect current CDC guidelines.

F441

- Investigative protocol
 - Compliance
 - Additional tags to investigate
 - Deficiency categorization

Long Term Care Infection Control Regulation F441



Long Term Care Infection Control



Long Term Care Infection Control Regulation



CMS Scope and Severity

CMS SCOPE AND SEVERITY			
IMMEDIATE JEOPARDY to resident health or safety	PoC Required: Cat. 3 Optional: Cat. 1 Optional: Cat. 2	PoC Required: Cat. 3 Optional: Cat. 1 Optional: Cat. 2	PoC Required: Cat. 3 Optional: Cat. 2 Optional: Cat. 1
ACTUAL HARM that is not immediate jeopardy	PoC Required: Cat. 2 Optional: Cat. 1	PoC Required: Cat. 2 Optional: Cat. 1	PoC Required: Cat. 2 Optional: Cat. 1 Optional: Temp. Mgmt.
NO ACTUAL HARM with POTENTIAL FOR MORE THAN MINIMAL HARM that is not immediately jeopardy	PoC Required: Cat. 1 Optional: Cat. 2	PoC Required: Cat. 1 Optional: Cat. 2	PoC Required: Cat. 2 Optional: Cat. 2
NO ACTUAL HARM with POTENTIAL FOR MINIMAL HARM	No Plan of Correction No Remedies Commitment to Correct Not on HCFA-2567	PoC	PoC
	ISOLATED A	PATTERN B	WIDESPREAD C

■ Substandard Care -- if F221 - 225, F240 - 258, F309 - 334
■ Substantial Compliance

Remedy Category 1 Directed Plan of Correction; State Monitor; and/or Directed In-Service Training	Remedy Category 2 Denial of Payment for New Admissions; Denial of Payment for All Individuals Impaired by CMS; and/or Civil Money Penalties \$50 - \$1,000/day; \$10,000/instance	Remedy Category 3 Temporary Management; Termination Optional: Civil Money Penalties \$1,050 - \$10,000/day
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Long Term Care Infection Control Regulation

Standard Precautions

- ### Long Term Care Infection Control Regulation
- F329 -- Unnecessary drugs – includes proper use of antibiotic therapy;
 - F334 – Influenza and Pneumonia Immunizations;
 - F371 – Sanitary conditions – food handling, storage, and delivery.

Long Term Care Infection Control Regulation

In Missouri, all LTC Facilities must screen for TB all:

- Employees
- Volunteers
- Residents for TB

- ### LTC Infection Control Regulation
- You may locate the *State Operations Manual (SOM)* at the following web address:
 - http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/som107_appendixtoc.pdf - choose appendix P for the Survey Protocol for Long Term Care Facilities
 - Choose Appendix PP for the Regulations and Interpretive Guidelines for Long Term Care Facilities.

- ### LTC Infection Control Regulation
- You may locate the state regulation manual at the following web addresses:
 - <http://health.mo.gov/seniors/nursinghomes/pdf/LicensureRegulationsManual.pdf> or;
 - <http://www.sos.mo.gov/>.

LTC Infection Control Regulation

- Missouri Sanitation Requirements for all long-term care facilities may be found at the following website:
- <http://www.sos.mo.gov/adrules/csr/current/19csr/19c30-87.pdf>
- The food and drug code referenced in these regulations may be found at the following website:
 - <http://www.fda.gov/Food/GuidanceRegulation/RetailFoodProtection/FoodCode/ucm2016793.htm>

Additional Resources

- You may find other resources that include the *Infection Control Guidelines for Long-Term Care Facilities (2005)* at the following website:
 - <http://health.mo.gov/seniors/nursinghomes/lawsregs.php#Mans>

Hand Washing Guidance

- You will find guidance from the CDC for hand washing at the following website:
<http://www.cdc.gov/handhygiene/>.
- And in the Morbidity and Mortality Weekly Report
Recommendations and Reports October 25, 2002 / Vol. 51 / No. RR-16
- <http://www.cdc.gov/mmwr/PDF/rr/rr5116.pdf>