

CFR 483.65 F441 Infection Control...

Transmittal 52 (issued 9-25-09) with new/revised information was effective on 9-30-09. By now, all providers should have familiarized themselves with the changes in the Interpretive Guidelines and with the new Investigative Protocol.

Added emphasis is being placed on **Infection Prevention**. The Investigative Protocol will be used for all initial and standard surveys to investigate compliance at F441. In addition, this protocol will be used on revisits and complaint surveys, as indicated.

A review of the Infection Prevention and Control Program will be conducted at each survey. Program expectations, including policies and procedures, are delineated in the Interpretive Guidelines and include:

- Program development and oversight.
- Facility policies and procedures: reviewed and revised to conform with current standards of practice.
- Infection Preventionist (program coordinator)-responsibilities.
- Surveillance: on-going systematic collection, analysis, interpretation, and dissemination of data. Program defines how often and by what means data will be collected. Includes MDROs (infection/colonization).
- Documentation-describes types of infection; serves to identify trends.
- Monitoring: Facility monitors practices (e.g., dressing changes, isolation procedures, catheter care, etc.) to ensure consistent implementation of policies and procedures. All residents are monitored for current infections/infection risk.
- Data Analysis: Infections are reviewed frequently enough so that trends/concerns can be identified and addressed in a timely manner.
- Communicable disease reporting.
- Education-staff, residents, visitors-initial, on-going, and task specific.
- Antibiotic review.

Surveillance data will be reviewed-both outcome and process data.

Interviews will be conducted with direct care staff to determine the following:

- Is staff aware of signs and symptoms of infection to report?
- If any residents are on isolation precautions, has staff been instructed on procedures?
- Is staff familiar with when hand hygiene is to be performed?
- How does staff know if a resident is on transmission-based precautions?
- Is staff aware of what actions are required for each type of precaution?

Additional information that providers need to be aware of related to F441 include, but are not limited to, the following:

- (1) Glucometers must be resident specific or must be cleaned and properly disinfected with a bleach solution after each use. (See Morbidity and Mortality Weekly Report 3-11-05.)

- (2) Ensure that OSHA and CDC guidelines are followed related to:
 - Bloodborne Pathogens Standards
 - Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings, 2007
 - Guideline for Preventing the Transmission of M. tuberculosis in Healthcare Settings, 2005
- (3) The facility must provide evidence of a safe water supply if a well is used for daily or emergency provision.