

10A NCAC 13G .1701 is proposed for adoption under emergency procedures as follows:

SECTION .1700 - INFECTION PREVENTION AND CONTROL

10A NCAC 13G .1701 INFECTION PREVENTION AND CONTROL PROGRAM

(a) In accordance with Rule 13G .1211 of this Subchapter and G.S. 131D-4.4A(b)(1), the facility shall establish and implement a comprehensive infection prevention and control program (IPCP) consistent with the federal Centers for Disease Control and Prevention (CDC) guidelines on infection prevention and control.

(b) The facility shall ensure implementation of the facility's IPCP, related policies and procedures, and guidance or directives issued by the CDC, the local health department, and/or the North Carolina Department of Health and Human Services.

(c) The facility shall assure the following policies and procedures are established and implemented consistent with the federal CDC guidelines on infection control and addresses at least the following:

(1) Standard and transmission-based precautions, for which guidance can be found on the CDC website at <https://www.cdc.gov/infectioncontrol/basics>, including:

(A) respiratory hygiene and cough etiquette;

(B) environmental cleaning and disinfection;

(C) reprocessing and disinfection of reusable resident medical equipment;

(D) hand hygiene;

(E) accessibility and proper use of personal protective equipment (PPE);

(F) types of transmission-based precautions and when each type is indicated, including contact precautions, droplet precautions, and airborne precautions;

(2) When and how to report to the local health department when there is a suspected or confirmed reportable communicable disease case or condition, or communicable disease outbreak in accordance with Rule 13G .1702 of this Section:

(3) Resident care when there is suspected or confirmed communicable disease in the facility, including, when indicated, isolation of infected residents, limiting or stopping group activities and communal dining, and based on the mode of transmission, use of source control by the residents. Source control includes the use of face coverings for residents when the mode of transmission is through a respiratory pathogen;

(4) Procedures for screening visitors to the facility and criteria for restricting visitors who exhibit signs of illness, as well as posting signage for visitors regarding screening and restriction procedures;

(5) Procedures for screening facility staff and criteria for restricting staff who exhibit signs of illness from working;

(6) Procedures and strategies for addressing staffing issues and ensuring staffing to meet the needs of the residents during a communicable disease outbreak;

(7) The annual review of the facility's IPCP and update of the IPCP as necessary; and

(8) a process for updating policies and procedures to reflect guidelines and recommendations by the CDC, local health department, and North Carolina Department of Health and Human Services during a public health emergency as declared by the United States and that applies to North Carolina or a public health emergency declared by the State of North Carolina.

(d) In accordance with Rule 13G .1211 of this Subchapter, the facility shall ensure all staff are trained within 30 days of hire and annually on the policies and procedures listed in Subparagraphs (c)(1) through (5) of this Rule. Training on Parts (c)(1)(D) and (E) of this Rule shall include hands-on demonstration by a trained instructor and return demonstration by the staff person.

(e) The facility shall ensure that, prior to administration, all staff responsible for administering tests to residents for the diagnosis of a communicable disease or condition shall be trained on the proper use of testing devices and materials consistent with manufacturer's specifications.

(f) The facility shall ensure staff employed in a management or supervisory role in the facility are trained within 30 days of hire and annually on the policies and procedures listed in Subparagraphs (c)(1) through (6) of this Rule.

(g) The policies and procedures listed in Paragraph (c) of this Rule shall be maintained in the facility and accessible to staff working at the facility.

(h) The facility shall ensure that the IPCP is incorporated into the facility's emergency preparedness disaster plan and updated as needed to address any emerging infectious disease threats to protect the residents during a shelter-in-place or emergency evacuation event.

*History Note: Authority G.S. 131D-2.16; G.S. 131D-4.4A; 131D-4.5; G.S. 143B-165;
Emergency Adoption Eff. Six business days from Codifier approval.*