

1 10A NCAC 13G .1701 is adopted under temporary procedures with changes as follows:

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3 **SECTION .1700 - INFECTION PREVENTION AND CONTROL**

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5 **10A NCAC 13G .1701 INFECTION PREVENTION AND CONTROL PROGRAM**

6 (a) In accordance with Rule ~~13G .1211~~ .1211(a)(4) of this Subchapter and G.S. 131D-4.4A(b)(1), the facility shall  
7 establish and implement a ~~comprehensive~~ an infection prevention and control program (IPCP) consistent with the  
8 federal Centers for Disease Control and Prevention (CDC) published guidelines on infection prevention and control.

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

12 ~~(b)~~ (b) The facility shall assure the following policies and procedures are established and implemented consistent with  
13 the federal CDC published guidelines ~~guidelines~~, which are hereby incorporated by reference including subsequent  
14 amendments and editions, on infection control that are accessible at no charge online at  
15 <https://www.cdc.gov/infectioncontrol>, ~~on infection control~~ and addresses ~~at least~~ the following:

- 16 (1) Standard and transmission-based precautions, for which guidance can be found on the CDC website  
17 at <https://www.cdc.gov/infectioncontrol/basics>, including:
- 18 (A) respiratory hygiene and cough etiquette;
  - 19 (B) environmental cleaning and disinfection;
  - 20 (C) reprocessing and disinfection of reusable resident medical equipment;
  - 21 (D) hand hygiene;
  - 22 (E) accessibility and proper use of personal protective equipment (PPE); and
  - 23 (F) types of transmission-based precautions and when each type is indicated, including contact  
24 precautions, droplet precautions, and airborne precautions:
- 25 (2) When and how to report to the local health department when there is a suspected or confirmed  
26 reportable communicable disease case or condition, or communicable disease outbreak in  
27 accordance with Rule ~~13G~~ .1702 of this Section:
- 28 (3) Resident care when there is suspected or confirmed communicable disease in the facility, including,  
29 when indicated, isolation of infected residents, limiting or stopping group activities and communal  
30 dining, and based on the mode of transmission, use of source control as tolerated by the residents.  
31 Source control includes the use of face coverings for residents when the mode of transmission is  
32 through a respiratory pathogen:
- 33 (4) Procedures for screening visitors to the facility and criteria for restricting visitors who exhibit signs  
34 of illness, as well as posting signage for visitors regarding screening and restriction procedures;
- 35 (5) Procedures for screening facility staff and criteria for restricting staff who exhibit signs of illness  
36 from working;

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

3 (7) The annual review and update of the facility's IPCP to be consistent with published CDC guidance  
4 on infection control; and update of the IPCP as necessary; and

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

9 (c) When a communicable disease outbreak has been identified at the facility or there is an emerging infectious disease  
10 threat, the facility shall ensure implementation of the facility's IPCP, related policies and procedures, and published  
11 guidance issued by the CDC; however, if guidance or directives specific to the communicable disease outbreak or  
12 emerging infectious disease threat have been issued in writing by the NCDHHS or local health department, the specific  
13 guidance or directives shall be implemented by the facility.

14 (d) In accordance with Rule ~~13G~~ .1211 of this Subchapter, the facility shall ensure all staff are trained within 30 days  
15 of hire and annually on the policies and procedures listed in Subparagraphs ~~(e)(1)~~ (b)(1) through (5) of this Rule.  
16 Training on Parts ~~(e)(1)(D)~~ (b)(1)(D) and (E) of this Rule shall include hands-on demonstration by ~~a trained an~~  
17 instructor who is a licensed health professional and return demonstration by the staff person.

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

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

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

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

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29 *History Note: Authority G.S. 131D-2.16; 131D-4.4A; ~~131D-4.5~~; 143B-165;*

30 *Emergency Adoption Eff. October 23, ~~2020~~; 2020;*

31 *Temporary Adoption Eff. December 30, 2020.*