1	10A NCAC 130	G .1701 is adopted under temporary procedures with changes as follows:	
2			
3		SECTION .1700 - INFECTION PREVENTION AND CONTROL	
4			
5	10A NCAC 13	G .1701 INFECTION PREVENTION AND CONTROL PROGRAM	
6	(a) In accordan	ace with Rule 13G .1211 of this Subchapter and G.S. 131D-4.4A(b)(1), the facility shall establish and	
7	implement a comprehensive infection prevention and control program (IPCP) consistent with the federal Centers for		
8	Disease Control and Prevention (CDC) <u>published</u> 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	(e) (b) The faci	lity shall assure the following policies and procedures are established and implemented consistent with	
13	the federal CDC	E <u>published</u> guidelines on infection control and addresses at least the following:	
14	(1)	Standard and transmission-based precautions, for which guidance can be found on the CDC website	
15		at https://www.cdc.gov/infectioncontrol/basics, including:	
16		(A) respiratory hygiene and cough etiquette;	
17		(B) environmental cleaning and disinfection;	
18		(C) reprocessing and disinfection of reusable resident medical equipment;	
19		(D) hand hygiene;	
20		(E) accessibility and proper use of personal protective equipment (PPE);	
21		(F) types of transmission-based precautions and when each type is indicated, including contact	
22		precautions, droplet precautions, and airborne precautions:	
23	(2)	When and how to report to the local health department when there is a suspected or confirmed	
24		reportable communicable disease case or condition, or communicable disease outbreak in	
25		accordance with Rule 13G .1702 of this Section:	
26	(3)	Resident care when there is suspected or confirmed communicable disease in the facility, including,	
27		when indicated, isolation of infected residents, limiting or stopping group activities and communal	
28		dining, and based on the mode of transmission, use of source control as tolerated by the residents.	
29		Source control includes the use of face coverings for residents when the mode of transmission is	
30		through a respiratory pathogen:	
31	(4)	Procedures for screening visitors to the facility and criteria for restricting visitors who exhibit signs	
32		of illness, as well as posting signage for visitors regarding screening and restriction procedures;	
33	(5)	Procedures for screening facility staff and criteria for restricting staff who exhibit signs of illness	
34		from working;	
35	(6)	Procedures and strategies for addressing staffing issues and ensuring staffing to meet the needs of	
36		the residents during a communicable disease outbreak:	
37	(7)	The annual review of the facility's IPCP and update of the IPCP as necessary; and	

1	(8)	a process for updating policies and procedures to reflect guidelines and recommendations by the	
2		CDC, local health department, and North Carolina Department of Health and Human Services	
3		(NCDHHS) during a public health emergency as declared by the United States and that applies to	
4		North Carolina or a public health emergency declared by the State of North Carolina.	
5	(c) When a comm	nunicable disease outbreak has been identified at the facility or there is an emerging infectious disease	
6	threat, the facility shall ensure implementation of the facility's IPCP, related policies and procedures, and published		
7	guidance issued	by the CDC; however, if guidance or directives specific to the communicable disease outbreak or	
8	emerging infectious disease threat have been issued by the NCDHHS or local health department, the specific guidance		
9	or directives shall be implemented by the facility.		
10	(d) In accordance	e with Rule 13G .1211 of this Subchapter, the facility shall ensure all staff are trained within 30 days	
11	of hire and annually on the policies and procedures listed in Subparagraphs (e)(1) (b)(1) through (5) of this Rule		
12	Training on Parts $\frac{(e)(1)(D)}{(b)(1)(D)}$ and (E) of this Rule shall include hands-on demonstration by a trained instructo		
13	and return demonstration by the staff person.		
14	(e) The facility shall ensure that, prior to administration, all staff responsible for administering tests to residents for		
15	the diagnosis of a communicable disease or condition shall be trained on the proper use of testing devices and material		
16	consistent with manufacturer's specifications.		
17	(f) The facility shall ensure staff employed in a management or supervisory role in the facility are trained within 30		
18	days of hire and annually on the policies and procedures listed in Subparagraphs (e)(1) (b)(1) through (6) of this Rule		
19	(g) The policies and procedures listed in Paragraph (e) (b) of this Rule shall be maintained in the facility and accessible		
20	to staff working at the facility.		
21	(h) The facility shall ensure that the IPCP is incorporated into the facility's emergency preparedness disaster plan and		
22	updated as needed to shall address any emerging infectious disease threats to protect the residents during a shelter-in-		
23	place or emergency evacuation event.		
24			
25	History Note:	Authority G.S. 131D-2.16; 131D-4.4A; 131D-4.5; 143B-165;	
26		Emergency Adoption Eff. October 23, 2020; <u>2020;</u>	
27		Temporary Adoption Eff. December 30, 2020.	