

Infection Control Policy and Procedure Checklist

Purpose and Intent of 483.80(a)(3)

The purpose of the facility Infection Control Policy and Procedure is to develop guidelines, directions and a solid system to provide a safe, sanitary and comfortable environment and to assist in the prevention of the development and transmission of communicable diseases and infections for quality outcomes. The facility will put into place a system that is based on clinical standards of practice and clinical guidelines, as well as regulatory compliance.

To assure that the individual facility has followed all the required steps for the development and implementation of a comprehensive Infection Control policy in accordance to the new Requirements of Participation (RoP), the following checklist captures specific action items for successful completion. The left column represents the actual Requirements of Participation (RoP) language and the right column indicates specific leadership strategies for successful completion and implementation of the revised RoP. When preparing updated policies and procedures, it is recommended to include actual RoP language as applicable.

Suggested Checklist Program and Policy and Procedure

Regulation	Recommended Actions
<p>F880 §483.80 Infection Control The facility must establish and maintain an infection prevention and control program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of communicable diseases and infections.</p> <p>§483.80(a) Infection prevention and control program. The facility must establish an infection prevention and control program (IPCP) that must include, at a minimum, the following elements:</p> <p>§483.80(a)(1) A system for preventing, identifying, reporting, investigating, and controlling infections and communicable diseases for all residents, staff, volunteers, visitors, and other individuals providing services under a contractual arrangement based upon the facility assessment conducted according to §483.70(e) and following accepted national standards;</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Review, revise and institute an Infection Prevention and Control Policy and Procedure with elements for compliance with F880 <input type="checkbox"/> Update staff education materials for orientation, annual education, and agency staff orientation, as needed. <input type="checkbox"/> Educate all staff and the interdisciplinary team about the Infection Prevention and Control Policy and Procedure



§483.80(a)(2) Written standards, policies, and procedures for the program, which must include, but are not limited to:

- (i) A system of surveillance designed to identify possible communicable diseases or infections before they can spread to other persons in the facility; Effective November 28, 2017
- (ii) When and to whom possible incidents of communicable disease or infections should be reported;
- (iii) Standard and transmission-based precautions to be followed to prevent spread of infections;
- (iv) When and how isolation should be used for a resident; including but not limited to:
 - (A) The type and duration of the isolation, depending upon the infectious agent or organism involved, and
 - (B) A requirement that the isolation should be the least restrictive possible for the resident under the circumstances.
- (v) The circumstances under which 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; and
- (vi) The hand hygiene procedures to be followed by staff involved in direct resident contact

§483.80(a)(4) A system for recording incidents identified under the facility's IPCP and the corrective actions taken by the facility.

§483.80(e) Linens. Personnel must handle, store, process, and transport linens so as to prevent the spread of infection.

§483.80(f) Annual review. The facility will conduct an annual review of its IPCP and update their program, as necessary.

INTENT: The intent of this regulation is to ensure that the facility:

- Develops and implements an ongoing infection prevention and control program (IPCP) to prevent, recognize, and control the onset and spread of infection to the extent possible and reviews and updates the IPCP annually and as necessary. This would include revision of the IPCP as national standards change;
- Establishes facility-wide systems for the prevention, identification, investigation and control of infections of

- Educate residents and resident representatives about the Infection Prevention and Control Policy and Procedure
- Conduct updated training for Infection Preventionist, nursing leaders about supervising and monitoring for compliance with the Infection Prevention and Control Policy and Procedure
- Review the Infection Prevention and Control Policy and Procedure with the Medical Director and Pharmacy Consultant in conjunction with the Quarterly Quality Assurance Committee meeting



<p>residents, staff, and visitors. It must include an ongoing system of surveillance designed to identify possible communicable diseases or infections before they can spread to other persons in the facility and procedures for reporting possible incidents of communicable disease or infections; NOTE: For purposes of this guidance, “staff” includes employees, consultants, contractors, volunteers, caregivers who provide care and services to residents on behalf of the facility, and students in the facility’s nurse aide training programs or from affiliated academic institutions.</p> <ul style="list-style-type: none"> • Develops and implements written policies and procedures for infection control that, at a minimum: <ul style="list-style-type: none"> o Explain how standard precautions and when transmission-based precautions should be utilized, including but not limited to the type and duration of precautions for particular infections or organisms involved and that the precautions should be the least restrictive possible for the resident given the circumstances and the resident’s ability to follow the precautions; Effective November 28, 2017 o Prohibit staff with a communicable disease or infected skin lesions from direct contact with residents or their food, if direct contact will transmit the disease; and o Require staff follow hand hygiene practices consistent with accepted standards of practice. • Requires staff handle, store, process, and transport all linens and laundry in accordance with accepted national standards in order to produce hygienically clean laundry and prevent the spread of infection to the extent possible. 	
<p>§483.80(a)(3) An antibiotic stewardship program that includes antibiotic use protocols and a system to monitor antibiotic use.</p>	<input type="checkbox"/> (See Antibiotic Stewardship Resources)
<p>F882 §483.80(b) Infection Preventionist **To be implemented November 28, 2019 (Phase 3)</p>	
<p>F883 §483.80(d) Influenza and pneumococcal immunizations</p> <p>§483.80(d)(1) Influenza. The facility must develop policies and procedures to ensure that</p> <ul style="list-style-type: none"> (i) Before offering the influenza immunization, each resident or the resident’s representative receives education regarding the benefits and potential side effects of the immunization; (ii) Each resident is offered an influenza immunization October 1 through March 31 annually, unless the 	<input type="checkbox"/> Review, revise and institute Influenza Policy and Procedure for compliance <input type="checkbox"/> Review, revise and institute Pneumococcal Policy and Procedure for compliance



<p>immunization is medically contraindicated or the resident has already been immunized during this time period;</p> <p>(iii) The resident or the resident’s representative has the opportunity to refuse immunization; and</p> <p>(iv) The resident’s medical record includes documentation that indicates, at a minimum, the following:</p> <p style="padding-left: 40px;">(A) That the resident or resident’s representative was provided education regarding the benefits and potential side effects of influenza immunization; and</p> <p style="padding-left: 40px;">(B) That the resident either received the influenza immunization or did not receive the influenza immunization due to medical contraindications or refusal.</p> <p>§483.80(d)(2) Pneumococcal disease.</p> <p>The facility must develop policies and procedures to ensure that</p> <p>(i) Before offering the pneumococcal immunization, each resident or the resident’s representative receives education regarding the benefits and potential side effects of the immunization;</p> <p>(ii) Each resident is offered a pneumococcal immunization, unless the immunization is medically contraindicated or the resident has already been immunized;</p> <p>(iii) The resident or the resident’s representative has the opportunity to refuse immunization; and</p> <p>(iv) The resident’s medical record includes documentation that indicates, at a minimum, the following:</p> <p style="padding-left: 40px;">(A) That the resident or resident’s representative was provided education regarding the benefits and potential side effects of pneumococcal immunization; and</p> <p style="padding-left: 40px;">(B) That the resident either received the pneumococcal immunization or did not receive the pneumococcal immunization due to medical contraindication or refusal.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Update staff education materials for orientation, annual education, and agency staff orientation, as needed. <input type="checkbox"/> Educate all staff and the interdisciplinary team about the Influenza and Pneumococcal Immunization Policy and Procedure <input type="checkbox"/> Educate residents and resident representatives about the Influenza and Pneumococcal Immunization Policy and Procedure <input type="checkbox"/> Conduct updated training for Infection Preventionist, nursing leaders about supervising and monitoring for compliance with the Influenza and Pneumococcal Immunization Policy and Procedure <input type="checkbox"/> Review the Influenza and Pneumococcal Immunization Policy and Procedure with the Medical Director and Pharmacy Consultant in conjunction with the Quarterly Quality Assurance Committee meeting
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<p>F838 §483.70(e) Facility assessment. The facility must conduct and document a facility-wide assessment to determine what resources are necessary to care for its residents competently during both day-to-day operations and emergencies. The facility must review and update that assessment, as necessary, and at least annually. The facility must also review and update this assessment whenever there is, or the facility plans for, any change that would require a substantial modification to any part of this assessment.</p> <ul style="list-style-type: none"> • §483.80(a),(e),(f): The results of the facility assessment must be used, in part, to establish and update the IPCP, its policies and/or protocols to include a system for preventing, identifying, reporting, investigating, and controlling infections and communicable diseases for residents, staff, and visitors. 	<ul style="list-style-type: none"> <input type="checkbox"/> Review the facility Assessment Policy and Procedure to identify that the Facility Assessment will include an assessment of: <ul style="list-style-type: none"> • Risks in the resident population and community • Capacity to provide care for residents with communicable infections • Competency of staff in relation to infection control policy and procedures • Identification of facility trends due to analysis of surveillance data
<p>§483.73 Emergency Preparedness: Including a process facilities are to use to assess and document potential hazards within their areas and the vulnerabilities and challenges which may impact the facility. Additional terms currently used by the industry are all-hazards risk assessments, also referred to as Hazard Vulnerability Assessments (HVAs), or all-hazards self-assessments.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Review approaches to identifying hazards or risks, related to infection control (i.e. communicable diseases and bioterrorism related to infections) that are most likely to have an impact on a healthcare facility and the surrounding community.
<p>F725 §483.35 Nursing Services The facility must have sufficient nursing staff with the appropriate competencies and skills sets to provide nursing and related services to assure resident safety and attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident, as determined by resident assessments and individual plans of care and considering the number, acuity and diagnoses of the facility’s resident population in accordance with the facility assessment.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Review facility policies and procedures and protocols related to staff competencies with skills and services related to Infection Control, for example: <ul style="list-style-type: none"> • Donning and removing PPE • Safe Injection Practice • Antibiotic Stewardship • Disinfection of medical equipment per policy, • Etc.



The below areas serve as a cross reference for facility leaders to conduct addition policy and procedure review across departments to incorporate the changes set forth in **§483.80 Infection Control and §483.80(a) Infection Prevention and Control Program**

This listing is not all encompassing however should serve as a resource for leaders as they update their internal policies, procedures and operational processes.

Cross Reference: (additional areas for review)

- CMS Regulations
- State and Local Regulations
- Employee Orientation
- Antibiotic Stewardship
- Annual Training Requirements
- Emergency Preparedness
- Facility Assessment
- Medical Director
- Practitioner Training
- Pharmacy Consultant Training and Monthly Medication Regimen Review
- Quality Assurance and Performance Improvement
- Staff Competency
- Staff Training and Education

References

CMS State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities, Accessed on August 28, 2017:

- <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Downloads/Advance-Appendix-PP-Including-Phase-2-.pdf>