

8:43D-15.3 General infection control policies and procedures

(a) Written policies and procedures shall be established and implemented regarding infection prevention and control, including, but not limited to, policies and procedures for the following:

1. In accordance with Chapter II, New Jersey State Sanitary Code, Communicable Diseases, at N.J.A.C. 8:57, a system for investigating, reporting, and evaluating the occurrence of all infections or diseases which are reportable or conditions which may be related to activities and procedures of the facility, and maintaining records for all residents or personnel having these infections, diseases, or conditions;
2. Infection control in accordance with Occupational Safety and Health Administration Publication "29 CFR 1910030 Pathogens" as amended and supplemented, incorporated herein by reference;
3. Exclusion from work, and authorization to return to work, for personnel with communicable diseases;
4. Surveillance techniques to minimize sources and transmission of infection;
5. Techniques to be used during each resident contact, including handwashing before and after caring for a resident;
6. Protocols for identification of residents with communicable diseases and age specific education of residents regarding the prevention and spread of communicable diseases;
7. Sterilization, disinfection, and cleaning practices and techniques used in the facility, including, but not limited to, the following:
 - i. Care of utensils, instruments, solutions, dressings, articles, and surfaces;
 - ii. Selection, storage, use, and disposition of disposable and nondisposable resident care items. Disposable items shall not be reused;
 - iii. Methods to ensure that sterilized materials are packaged, labeled, processed, transported, and stored to maintain sterility and to permit identification of expiration dates; and
 - iv. Care of urinary catheters, intravenous catheters, respiratory therapy equipment, and other devices and equipment that provide a portal of entry for pathogenic microorganisms; and
8. Used needles and syringes shall be disposed of in accordance with N.J.S.A. 2A:170-25.17 and N.J.A.C. 8:43E, and amendments thereto, and shall be placed in puncture-resistant containers prior to disposal.

8:43D-15.4 Employee health and resident policies and procedures for infection prevention and control

(a) Tuberculosis screening: The facility shall establish policies and procedures for the detection and control of the transmission of *M. tuberculosis* that includes, but is not limited to, developing a tuberculosis Exposure Control Plan ("TB plan"), according to the guidelines set forth in "Guidelines for Preventing the Transmission of *Mycobacterium tuberculosis* in Health-Care Facilities, 1994." MMWR. October 28, 1994, volume 43, Number RR-13, p. I-132, pursuant to the Occupational Safety and Health Act (OSH Act) of 1970, incorporated herein by reference as supplemented and amended.

1. Newly hired employees: The facility shall identify a new employee's baseline status of exposure to *M. tuberculosis*. The facility shall administer a two-step Mantoux tuberculin skin test, using five tuberculin units of purified protein derivative, upon the employment of full- and part-time employees, volunteer staff, and primary care providers, either salaried by the facility or with clinical privileges to provide medical care at the facility.

i. Employees with a "negative" (<10 mm of induration or < five mm of induration if the individual is immunosuppressed) result following the first Mantoux skin test are administered a second test in one to three weeks.

ii. Employees with a "positive" (>10 mm of induration or > five mm of induration if the individual is immunosuppressed) result following either the first or second test are referred for a medical evaluation to determine whether there is evidence of latent tuberculosis infection or active tuberculosis disease.

(1) The medical evaluation shall include, but is not limited to, a chest X-ray.

(2) The facility shall permit employees with positive Mantoux test results to begin working after the employee has submitted written medical clearance to the facility.

2. Exceptions to the requirements in (a)1 above are as follows:

i. Employees who provide documentation of negative results of a Mantoux skin test performed within the 12 months preceding the start of employment shall receive only one Mantoux skin test upon hire.

ii. Employees who provide documentation of positive Mantoux skin test results shall be exempt from screening.

iii. Employees who provide documentation of having received and completed appropriate medical treatment for active tuberculosis disease or latent tuberculosis infection shall be exempt from screening.

3. Periodic screening of personnel: The facility shall establish policies and procedures for the periodic screening of *M. tuberculosis* in eligible personnel, including, but not limited to:

i. Testing: The facility shall administer a Mantoux skin test to all tuberculin-negative employees annually at minimum. Frequency of testing shall be determined by the level of risk assigned by the facility's TB plan; and

ii. Recordkeeping:

(1) The facility shall maintain records of employee Mantoux test results.

(2) The facility shall submit the results of employee Mantoux tuberculin testing bi-annually to the New Jersey Department of Health and Senior Services, on forms provided by the Department, at the address listed below.

(b) Further information: Questions regarding tuberculosis control may be directed to:

New Jersey Department of Health and Senior Services
Tuberculosis Program
PO Box 369
Trenton, New Jersey 08625-0369
(609) 588-7522

(c) All personnel, both directly employed and under contract to provide direct care to patients, shall be given a rubella screening test using the rubella hemagglutination inhibition test or other rubella screening test. The only exceptions are personnel who can document seropositivity from a previous rubella screening test or who can document inoculation with rubella vaccine, or when medically contraindicated. Volunteers are not subject to the rubella screening test.

1. The pediatric community transitional home shall inform each person in writing of the results of his or her rubella screening test.

2. The pediatric community transitional home shall maintain a list identifying the name of each person who is seronegative and unvaccinated to rubella.

3. The pediatric community transitional home shall offer rubella vaccination to all employees, contract personnel and volunteers.

(d) All personnel, both directly employed and under contract to provide direct care to patients, who were born in 1957 or later shall be given a rubeola (measles) screening test using the hemagglutination inhibition test or other rubeola screening test. The only exceptions are personnel who can document receipt of live measles vaccine on or after their first birthday, primary care provider-diagnosed measles, or serologic evidence of immunity. Volunteers are not subject to the rubeola screening test.

1. The pediatric community transitional home shall ensure that all personnel, both directly employed and under contract to provide direct care to patients, who cannot provide serologic evidence of immunity are offered rubella and rubeola vaccination.

2. The pediatric community transitional home shall offer rubeola vaccination to all employees, contract personnel and volunteers.

(e) If a communicable disease prevents the employee from working for a period of more than three days, a primary care provider's statement approving the employee's return shall be required prior to the employee's return to work.

(f) The facility shall develop and implement procedures for the care of employees who become ill while at work or who have a work-related accident and volunteers who became ill or have an accident while volunteering their time.

(g) The facility shall maintain listings of all residents and personnel who have reportable infections, disease, or conditions.

(h) High-level disinfection techniques shall be used for all reusable respiratory therapy equipment and instruments that touch mucous membranes.

(i) Disinfection procedures for items that come in contact with bedpans, sinks, and toilets shall conform to facility established protocols for cleaning and disinfection.

(j) All residents shall be provided with an opportunity to wash their hands before each meal and shall be encouraged to do so. Staff shall wash their hands before each meal and before assisting residents in eating.

(k) Personnel who have had contact with resident excretions, secretions, or blood, whether directly or indirectly, in activities such as performing a physical examination, providing catheter care, and emptying bedpans, shall wash their hands with soap and warm water for between 10 and 30 seconds or use other effective sanitation techniques immediately after such contact.

(l) Equipment and supplies used for sterilization, disinfection, and decontamination purposes shall be maintained according to manufacturers' specifications.

(m) The facility shall maintain records documenting contagious diseases contracted by employees during employment, as specified at N.J.A.C. 8:57-1.3(a) and (b).

(n) Employees as well as volunteers who have signs or symptoms of a communicable disease shall not be permitted to perform functions that expose residents to risk of transmission of the disease.