

Requirements for Long-Term Care Facilities

483.80 Infection Control (updated September 14, 2021)

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:			
Component	Yes	No	Resources
A system of surveillance designed to identify possible communicable diseases or infections before they can spread to others in the facility.			<ul style="list-style-type: none"> • Infection Prevention and Control Guidelines, Minnesota Department of Health (MDH) • Healthcare-Associated Infections Prevention Toolkits, Centers for Disease Control and Prevention (CDC) • Tips for Applying CDC’s Infection Surveillance Guidance in Long-term Care Facilities, MDH • Tracking Infections in Long-term Care Facilities in National Healthcare Safety Network (NHSN), CDC • Infection Surveillance Definition Worksheet, MDH • Infection and Antibiotic Use Tracking Tool, MDH • Reportable Diseases in Minnesota, MDH • Electronic Disease Reporting MDH • Guideline for Disinfection and Sterilization in Health Care Facilities, CDC • 2007 Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Health Care Settings, CDC • Guidelines for Environmental Infection Control in Health Care Facilities, CDC • Management of Multidrug-Resistant Organisms In Healthcare Settings, CDC • Guideline for Hand Hygiene in Health Care Settings, CDC
When and to whom possible incidents of communicable disease or infections should be reported.			
Standard and transmission-based precautions to be followed to prevent spread of infections.			
When and how isolation should be used for a resident, including but not limited to: <ul style="list-style-type: none"> • The type and duration of the isolation, depending upon the infectious agent or organism involved. • A requirement that the isolation should be the least restrictive possible for the resident under the circumstances. • The circumstances under which the facility must prohibit employees with a communicable disease or infected 			

<p>skin lesions from direct contact with the resident or their food.</p> <ul style="list-style-type: none"> The hand hygiene procedures to be followed by staff involved in direct resident contact. 			<ul style="list-style-type: none"> Hand Hygiene for Health Professionals, MDH The Core Elements for Antibiotic Stewardship in Nursing Homes, CDC Checklist of Core Elements of Antibiotic Stewardship in Nursing Homes, CDC
An antibiotic stewardship program that includes antibiotic use protocols and a system to monitor antibiotic use.			<ul style="list-style-type: none"> Creating a Culture to Improve Antibiotic Stewardship in Nursing Homes, CDC
A system for recording incidents identified under the facility's IPCP and the corrective actions taken by the facility.			<ul style="list-style-type: none"> Toolkit to Improve Antibiotic Use in Long-Term Care, Agency for Healthcare Research and Quality (AHRQ) Antimicrobial Guide, AHRQ Minnesota Antimicrobial Stewardship Program Toolkit for Long-term Care Facilities, MDH Wisconsin Healthcare Associated Infections in Long Term Care, Wisconsin Department of Health Services (DHS)

Infection Preventionist

The facility must designate one or more individuals as the infection preventionist(s) (IPs) who are responsible for the facility's IPCP. The IP must:

Component	Yes	No	Resources
Have primary professional training in nursing, medical technology, microbiology, epidemiology or another related field.			
Be qualified by education, training, experience or certification.			
Work at least part-time at the facility.			
Have completed specialized training in infection prevention and control.			<ul style="list-style-type: none"> Nursing Home Infection Preventionist Training Course, CDC Infection Preventionist Starter Kit, DHS

IP Participation on Quality Assessment and Assurance Committee

Component	Yes	No	Resources
The individual designated as the IP must be a member of the facility's quality assessment and assurance committee and report to the committee on the IPCP on a regular basis.			

Influenza Immunizations

The facility must develop policies and procedures to ensure that:

Component	Yes	No	Resources
Before offering the influenza immunization, each resident or the resident representative receives education regarding the benefits and potential side effects of the immunization.			<ul style="list-style-type: none"> • Influenza Toolkit for Long-Term Care, CDC • Recommended Immunization Schedule for Adults, CDC • Vaccine Protocols, MDH • COVID-19 Vaccine Phases and Planning, MDH • Immunization Info for Families and Providers, Michigan Department of Health and Human Services (MDHHS) • Influenza and Pneumococcal Immunization Toolkit (All-Settings), Superior Health Quality Alliance (Superior Health)
Each resident is offered an influenza immunization October 1 through March 31 annually, unless the immunization is medically contraindicated or the resident has already been immunized during this time period.			
The resident or the resident's representative has the opportunity to refuse immunization.			
The resident's medical record includes documentation that indicates, at a minimum: <ul style="list-style-type: none"> • That the resident or resident's representative was provided education regarding the benefits and potential side effect of influenza immunization. 			

<ul style="list-style-type: none"> That the resident either received the influenza immunization or did not receive the immunization due to medical contraindications or refusal. 			
Pneumococcal Disease			
The facility must develop policies and procedures to ensure that:			
Component	Yes	No	Resources
Before offering the pneumococcal immunization, each resident or the resident representative receives education regarding the benefits and potential side effects of the immunization			<ul style="list-style-type: none"> Adult Immunization Schedule by Vaccine and Age Group, CDC Vaccine Protocols, MDH Influenza and Pneumococcal Immunization Toolkit (All-Settings), Superior Health
Each resident is offered a pneumococcal immunization unless the immunization is medically contraindicated or the resident has already been immunized.			
The resident or the resident's representative has the opportunity to refuse immunization.			
<p>The resident's medical record includes documentation that indicates, at a minimum:</p> <ul style="list-style-type: none"> That the resident or resident's representative was provided education regarding the benefits and potential side effect of pneumococcal immunization. That the resident either received the pneumococcal immunization or did not receive the immunization due to medical contraindications or refusal. 			

COVID-19 Immunizations

The facility must develop and implement policies and procedures to ensure all the following:

Component	Yes	No	Resources
Before offering COVID-19 vaccine, all staff members are provided with education regarding the benefits and risks and potential side effects associated with the vaccine.			<ul style="list-style-type: none"> • What to Expect after Getting a COVID-19 Vaccine, CDC • Benefits of Getting a COVID-19 Vaccine, CDC • Global Information About Pfizer-BioNTech COVID-19 Vaccine, Pfizer-BioNTech • Moderna COVID-19 Vaccine, U.S. Food & Drug Administration (FDA) • Janssen COVID-19 Vaccine, FDA
Before offering COVID-19 vaccine, each resident or the resident representative receives education regarding the benefits and risks and potential side effects associated with the COVID-19 vaccine.			<ul style="list-style-type: none"> • What to Expect after Getting a COVID-19 Vaccine, CDC • Benefits of Getting a COVID-19 Vaccine, CDC • Global Information About Pfizer-BioNTech COVID-19 Vaccine, Pfizer-BioNTech • Moderna COVID-19 Vaccine, FDA • Janssen COVID-19 Vaccine, FDA
In situations where COVID-19 vaccination requires multiple doses, the resident, resident representative or staff member is provided with current information regarding those additional doses, including any changes in the benefits or risks and potential side effects associated with the COVID-19 vaccine, before requesting consent for administration of any additional doses.			
The resident, resident representative or staff member has the opportunity to accept or refuse a COVID-19 vaccine, and change their decision.			

<p>The resident's medical record includes documentation that indicates, at a minimum, the following:</p> <ul style="list-style-type: none"> a) That the resident or resident representative was provided education regarding the benefits and potential risks associated with COVID-19 vaccine, and b) Each dose of COVID-19 vaccine administered to the resident or c) If the resident did not receive the COVID-19 vaccine due to medical contraindications or refusal. 			
<p>The facility maintains documentation related to staff COVID-19 vaccination that includes at a minimum, the following:</p> <ul style="list-style-type: none"> a) That staff were provided education regarding the benefits and potential risks associated with COVID-19 vaccine. b) Staff were offered the COVID-19 vaccine or information on obtaining COVID-19 vaccine and c) The COVID-19 vaccine status of staff and related information as indicated by the CDC's NHSN. 			

Linens			
Component	Yes	No	Resources
Personnel must handle, store, process and transport linens so as to prevent the spread of infection.			<ul style="list-style-type: none"> Lessons in Linen: Following Aseptic Technique in the Laundry Department, Infection Control Today®
Annual Review			
Component	Yes	No	Resources
The facility will conduct an annual review of its IPCP program and update their program as necessary.			

COVID-19 Reporting

Component	Yes	No	Resources
<p>The facility must electronically report information about COVID-19 in a standardized format specified by the Secretary. This report must include but is not limited to:</p> <ol style="list-style-type: none"> 1. Suspected and confirmed COVID-19 infections among residents and staff, including residents previously treated for COVID-19. 2. Total deaths and COVID-19 deaths among residents and staff. 3. Personal protective equipment and hand hygiene supplies in the facility. 4. Ventilator capacity and supplies in the facility. 5. Resident beds and census. 6. Access to COVID-19 testing while the resident is in the facility. 7. Staffing shortages. 8. The COVID-19 vaccine status of residents and staff, including total numbers of residents and staff, numbers of residents and staff vaccinated, numbers of each dose of COVID-19 vaccine received and COVID-19 vaccination adverse events. 9. Therapeutics administered to residents for treatment of COVID-19. 			<ul style="list-style-type: none"> • NHSN Long-Term Care Facilities COVID-19 Module, CDC

<p>Provide the information specified at a frequency specified by the Secretary, but no less than weekly to the CDC's NHSN.</p>			<ul style="list-style-type: none"> • NHSN Long-Term Care Facilities COVID-19 Module, CDC
<p>Inform residents, their representatives and families of those residing in facilities by 5 p.m. the next calendar day following the occurrence of either a single confirmed infection of COVID-19, or three or more residents or staff with new-onset of respiratory symptoms occurring within 72 hours of each other. This information must:</p> <ol style="list-style-type: none"> i. Not include personally identifiable information; ii. Include information on mitigating actions implemented to prevent or reduce the risk of transmission, including if normal operations of the facility will be altered; and iii. Include any cumulative updates for residents, their representatives and families at least weekly or by 5 p.m. the next calendar day following the subsequent occurrence of either: Each time a confirmed infection of COVID-19 is identified, or whenever three or more residents or staff with new onset of respiratory symptoms occur within 72 hours of each other. 			

COVID-19 Testing

The long-term care (LTC) facility must test residents and facility staff, including individuals providing services under arrangement and volunteers, for COVID-19. At a minimum, for all residents and facility staff, including individuals providing services under arrangement and volunteers, the LTC facility must:

Component	Yes	No	Resources
<p>Conduct testing based on parameters set forth by the Secretary, including but not limited to:</p> <ul style="list-style-type: none"> i. Testing frequency; ii. The identification of any individual specified in this paragraph diagnosed with COVID-19 in the facility; iii. The identification of any individual specified in this paragraph with symptoms consistent with COVID-19 or with known or suspected exposure to COVID-19; iv. The criteria for conducting testing of asymptomatic individuals specified in this paragraph, such as the positivity rate of COVID-19 in a county; v. The response time for test results; and vi. (vi) Other factors specified by the Secretary that help identify and prevent the transmission of COVID-19. 			<ul style="list-style-type: none"> • Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes, CDC • Long-Term Care Testing: COVID-19, MDH • Guidance to Protect Residents of Long-Term Care Facilities, MDH • COVID-19: Nursing Homes, DHS
<p>Conduct testing in a manner that is consistent with current standards of practice for conducting COVID-19 tests.</p>			

<p>For each instance of testing:</p> <ul style="list-style-type: none"> i. Document that testing was completed and the results of each staff test; and ii. Document in the resident records that testing was offered, completed (as appropriate to the resident's testing status), and the results of each test. 			
<p>Upon the identification of an individual specified in this paragraph with symptoms consistent with COVID-19, or who tests positive for COVID-19, take actions to prevent the transmission of COVID-19.</p>			
<p>Have procedures for addressing residents and staff, including individuals providing services under arrangement and volunteers, who refuse testing or are unable to be tested.</p>			
<p>When necessary, such as in emergencies due to testing supply shortages, contact state and local health departments to assist in testing efforts, such as obtaining testing supplies or processing test results.</p>			