§ 131D-4.4A. Adult care home infection prevention requirements.

(a) As used in this section, "adult care home staff" means any employee of an adult care home.

(b) In order to prevent transmission of infectious diseases, each adult care home shall do all of the following:

(1) Implement written infection prevention and control policies and procedures that are based on accepted national standards consistent with the federal Centers for Disease Control and Prevention guidelines on infection control, which shall be maintained in the facility and accessible to adult care home staff working at the facility. The policies and procedures shall address at least all of the following:

a. Proper disposal of single-use equipment used to puncture skin, mucous membranes, and other tissues, and proper disinfection of reusable resident care items that are used for multiple residents.

b. Sanitation of rooms and equipment, including cleaning procedures, agents, and schedules.

c. Accessibility of infection control devices and supplies.

d. Blood and bodily fluid precautions.

e. Procedures to be followed when adult care home staff is exposed to blood or other body fluids of another person in a manner that poses a significant risk of transmission of HIV, hepatitis B, hepatitis C, or other bloodborne pathogens.

f. Procedures to prohibit adult care home staff with exudative lesions or weeping dermatitis from engaging in direct resident care that involves the potential for contact between the resident, equipment, or devices and the lesion or dermatitis until the condition resolves.

g. Standard and transmission-based precautions, including the following:

1. Respiratory hygiene and cough etiquette.
2. Environmental cleaning and disinfection.
3. Reprocessing and disinfection of reusable resident devices.
4. Hand hygiene.
5. Accessibility and proper use of personal protective equipment.
6. Types of transmission-based precautions and when each type is indicated, including contact precautions, droplet precautions, and airborne precautions.

h. In accordance with the public health laws of North Carolina, when and how to report to the local health department a suspected or confirmed, reportable communicable disease case or condition, or a communicable disease outbreak.

i. Procedures for ensuring that residents, representatives of residents, and adult care home staff are informed of the following without disclosing any personally identifiable information of the facility's residents or staff:

1. The existence of a communicable disease outbreak within 24 hours following confirmation of the outbreak by the local health department.
2. When the communicable disease outbreak has resolved.
3. Any changes to facility operations during the communicable disease outbreak, such as visitation policy changes.

j. Measures the facility should consider for specific types of communicable disease outbreaks in order to prevent the spread of illness, such as:
    1. Isolating infected residents.
    2. Limiting or stopping group activities and communal dining.
    3. Limiting or restricting outside visitation to the facility.
    4. Screening staff, residents, and visitors for signs of illness.
    5. Using source control as tolerated by the residents.

k. Strategies for addressing potential staffing issues and ensuring adequate staffing is available to meet the needs of the residents during a communicable disease outbreak.

(2) Require and monitor compliance with the facility's infection prevention and control policies and procedures.

(3) Update the infection prevention and control policies and procedures as necessary to maintain consistency with accepted national standards in infection prevention and control.

(4) Designate one on-site staff member for each noncontiguous facility who is knowledgeable about the federal Centers for Disease Control and Prevention guidelines on infection control to direct the facility's infection control activities and ensure that all adult care home staff is trained in the facility's written infection prevention and control policies and procedures developed pursuant to subdivision (b)(1) of this section within 30 days after hire and annually thereafter. Any nonsupervisory staff member designated to direct the facility's infection control activities shall complete the infection control course developed by the Department pursuant to G.S. 131D-4.5C.

(5) When a communicable disease outbreak has been identified at a facility or there is an emerging infectious disease threat, the facility shall ensure implementation of the facility's infection control and prevention policies and procedures developed pursuant to subdivision (b)(1) of this section; provided, however, that if guidance or directives specific to a communicable disease outbreak or emerging infectious disease threat have been issued in writing by the Department or local health department, the Department's or local health department's specific guidance or directives shall be implemented by the facility. (2011-99, s. 3; 2021-180, s. 9E.7(a); 2021-189, s. 3.2(a).)