RCS CCRSS Infection Prevention and Control Assessment (IPC) Pathway

RCS staff will use the IPC Pathway or Tool to evaluate the provider compliance with IPC practices. You are required to submit the Tool or Pathway with your working papers. Assess elements through a combination of observations, interviews and record review throughout the visit.

This Assessment refers to the Safe Start for Long Term Care (LTC) Recommendations and Requirements for CCRSS. In preparation for this visit, print out or have access to the most updated Safe Start Plan. Safe Start Plan.

The IPC Assessment includes a review of CDC / DOH strategies for the prevention and spread of communicable diseases in LTC settings.

A. Testing, Reporting, and Screening
B. Visitation
C. Personal Protective Equipment (PPE)
D. Infection Control and Prevention, Policies and Procedures
E. Group Activities and Communal Dining
F. Cohorting and Dedicated Staff

Offsite Preparation, identify the following:

☐ Complaint Investigator / Evaluator reviewed the Governor’s Proclamations and Emergency Rules. Link to the Waiver Tracker (click on program, then waiver tracker).

Determined COVID-19 or communicable disease outbreak present in home: ☐ Yes ☐ No
   • If outbreak, contacted / collaborated with the DOH and/or Local Health Jurisdiction (LHJ): ☐ Yes ☐ No

Community Transmission Rate . Link for COVID Data Tracker.

PPE / source control plan for onsite visit: ☐ Yes ☐ No

Upon entrance, identify / observe the following:

Identify Provider staff / visitor screening process: ☐ Yes ☐ No

Active or Suspected COVID-19 / communicable disease present in home: ☐ Yes ☐ No

Staff and client wearing source control: ☐ Yes ☐ No

Any Aerosol Generating Procedures (AGP) (when there is substantial to high COVID-19 community transmission): ☐ Yes ☐ No

If yes, who / where:
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<tr>
<th>PROVIDER NAME</th>
<th>CERTIFICATION NUMBER</th>
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<tr>
<th>COMPLAINT INVESTIGATOR’S / EVALUATOR’S NAME</th>
<th>DATE(S)</th>
<th>□ Evaluation</th>
<th>□ Complaint Investigation</th>
<th>INTAKE NUMBER</th>
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### Infection Control Instructions

- Check Yes, No, or N/A on this Pathway. If No is checked, document findings in the notes section and/or on the IPC Assessment notes form 00-413a.

### Definitions

- "Source Control" is defined as the use of well-fitted cloth masks, facemasks, or respirators to cover a person’s mouth and nose to prevent the spread of respiratory illnesses.
- "Cohorting" is defined as grouping of individuals with the same condition in the same location / area. Goal is to minimize interaction of infections individuals.
- "Aerosol Generating Procedures" (AGP) is defined as some procedures performed on residents are more likely to generate higher concentrations of infectious respiratory aerosols than coughing, sneezing, talking, or breathing. These AGPs potentially put healthcare staff and others at an increased risk for pathogen exposure and infection. Commonly performed AGPs are BiPAP’s and C-PAP’s.

### Resource Links

- [https://www.doh.wa.gov/Emergencies/Coronavirus](https://www.doh.wa.gov/Emergencies/Coronavirus)
- Washington Department of Health Dashboard
- Washington State Local Health Departments and Districts
- ALTSA Provider / Administrator Letters

### Yes | No | N/A | A. Testing, Screening, and Reporting

#### Testing

- Access to adequate COVID-19 testing for all client and staff.
  - Working with local and state public health to coordinate testing based on (CDC, DOH, and local guidance) guidance if needed.

- Outbreak testing of all staff and clients will occur when the definition of an outbreak is met. Outbreak is defined as:
  - ≥ 1 long term care facilities and agencies-acquired COVID-19 infection in a client.
  - ≥ 2 COVID-19 infections in HCWs who were on-site in the long-term care facility or agency at any time during their infectious period OR during their exposure period and has no other known or more likely exposure source.

#### Screening

- Communicates information about known or suspected COVID-19 to appropriate personnel (e.g., transport personnel, receiving facility) before transferring them to healthcare facilities.

- Notifies the Local Health Jurisdiction (LHJ) when cases of COVID-19 are identified.

#### Reporting

- Active screening of all (clients, staff, visitors, personnel) who enters or resides in the home for signs and symptoms of COVID-19.
  - Screen clients daily,
  - Temperature checks,
### Evaluation

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<th>NOTES</th>
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### Complaint Investigation

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- Questionnaire about symptoms and potential exposure
- Signs and symptoms of COVID-19
- Maintain log for 30 days

### B. Visitation

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- Provides accommodations to allow visitations for all clients regardless of vaccinations status.
  - Follows State or LHJ guidance if stricter visitation guidance.
  - RESOURCE: Refer to the Safe Start Plan for indoor and outdoor visitation requirements; and how to determine visitation status for unvaccinated clients [here](#).

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  - Follows State or LHJ guidance if stricter visitation guidance.
  - RESOURCE: Refer to the Safe Start Plan for indoor and outdoor visitation requirements; and how to determine visitation status for unvaccinated clients [here](#).

- Provides immediate access or contact to Developmental Disability Ombuds and/or Regional Long-Term Care Ombuds.

- Follows guidance for Medically Necessary Providers, Services, Health Care Workers and Non-Healthcare Personnel:
  - May enter after active screening. If showing signs or symptoms or exposed, subject to a work exclusion.
  - Wear appropriate source control and social distance as much as possible.

- Adheres to visitation guidance during an outbreak.
  - Refer to the Safe Start Plan for outbreak visitation and non-healthcare personnel guidance for each setting.
  - RESOURCE: Refer to the Safe Start Plan for outbreak visitation guidance for each setting [here](#).

### C. Personal Protection Equipment (PPE)

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- Evaluates PPE supplies / disinfectants / cleaning supplies.
  - Determines PPE needed in each home for clients, staff and visitors.
  - Disinfectants for frequent cleaning of high-touch surfaces, shared client care equipment /areas, and after visitation.
### D. Infection Control Standards, Policies and Procedures

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<td>Provides notification and signage as needed for:</td>
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<td>• Visitors notified about potential COVID-19 exposure during outbreak.</td>
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<td>• LHJ notified when clients / staff test positive.</td>
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<td>• Notification for visitors and clients of the Governor’s Proclamation.</td>
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<td>• Notification of the visitor log and vaccination requirements for visitation.</td>
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<td>Observes proper hand hygiene, face covering or masks (covering mouth and nose), use of eye protection when required, social distancing at least six feet between persons, cleaning and disinfecting and appropriate staff use of PPE.</td>
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<td>☐</td>
<td>• Staff encourages and educates clients to maintain good infection prevention strategies at all times.</td>
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<td>If COVID-19 is suspected, an N95 or higher-level respirator is used. If an N95 is not available, the home shows an effort to obtain PPE.</td>
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<td>Established policies and procedures for:</td>
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<td>☐</td>
<td>• Visitation.</td>
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<td>• Screening, new clients and transfers of clients.</td>
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<td>• Infection Control Plan.</td>
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<td>• A plan outlining cohorting and other infection control measures.</td>
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<td>• Respiratory Protection Program per Chapter 296-842, Respirators (fit tested N95 respirators, training and medical clearance to wear an N95 respirator).</td>
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<td>LTC setting follows the requirements for “worker” vaccination, exemption, and accommodations - <a href="https://www.doh.wa.gov/PreparingForCOVID19/Compliance/Procl2115.html">COVID-19 Vaccinations Requirement Proclamation 21-15</a></td>
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<td>Provide education and/or training about the following:</td>
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<td>• Educates staff, clients and/or representatives on screening, precautions, hand hygiene and PPE.</td>
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<td>• Educates clients on importance of continuing precautions and screening when staff are not present.</td>
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<td>• COVID-19 (e.g., symptoms, how it is transmitted).</td>
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<td>Follows DOH guidance to prevent transmission during AGPs and other uncontrolled respiratory secretions.</td>
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<td>Yes</td>
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<td>F. Group Activities and Communal Dining</td>
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<td>- Provides 24/7 services:</td>
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<td>- Vaccinated and unvaccinated clients will not participate in group activities until they have discontinued Transmission-Based Precautions.</td>
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<td>- If vaccination status not determined, follow infection prevention and control practices.</td>
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<td>- Provides less than 24/7 services:</td>
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<td>- Discourages positive or suspected COVID-19 positive clients from participating in activities.</td>
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<td>- Encourages clients who remain unvaccinated to practice social distancing and wear face masks.</td>
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<tr>
<th>Yes</th>
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<th>G. Cohorting and Dedicated Staff</th>
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<td>- Displays effective cohorting of clients, if possible.</td>
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<td>- Collaborates with DOH or the LHJ to conduct an outbreak investigation.</td>
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<td>- Dedicates a space for cohorting and managing care for clients with COVID-19 or if unable to cohort clients, have a plan.</td>
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Other Requirements to Consider
- Reporting to CRU requirements (Refer to the Program specific guidebook).
- Refer to the Infection Prevention and Control Assessment Standard Operating Procedures.
- Reference the RCS Field Staff Guidance.