

3701-17-62

**Changes in residents' health status; incidents; infection control; tuberculosis control plan.**

(A) In the event of a significant adverse change in residents' health status, the residential care facility shall do all of the following:

- (1) Take immediate and proper steps to see that the resident receives necessary intervention including, if needed, medical attention or transfer to an appropriate medical facility;
- (2) Make a notation of the change in health status and any intervention taken in the resident's record;
- (3) Provide pertinent resident information to the person providing the intervention as soon as possible; and
- (4) Notify the sponsor unless the resident refuses or requests otherwise.

(B) As used in this paragraph, "incident" means any accident or episode involving a resident, staff member, or other individual in a residential care facility which presents a risk to the health, safety, or well-being of a resident. In the event of an incident, the facility shall do both of the following:

- (1) Take immediate and proper steps to see that the resident or residents involved receive necessary intervention including, if needed, medical attention or transfer to an appropriate medical facility; and
- (2) Investigate the incident and document the incident and the investigation. The facility shall maintain an incident log separate from the resident record which shall be accessible to the director and shall contain the time, place, and date of the occurrence; a general description of the incident; and the care provided or action taken. The facility shall maintain a notation about the incident in the resident's record.

(C) Each residential care facility shall establish and implement appropriate written policies and procedures to control the development and transmission of infections and diseases which, at minimum, shall provide for the following:

- (1) Individuals working in the facility shall wash their hands vigorously for ten to fifteen seconds before beginning work and upon completing work, before and after eating, after using the bathroom, after covering their mouth when sneezing and coughing, before and after providing personal care services or skilled nursing care, when there has been contact with body substances, after

contact with contaminated materials, before handling food, and at other appropriate times;

- (2) If the residential care facility provides any laundering services, the facility shall keep clean and soiled linen separate. Soiled laundry shall be handled as little as possible. Laundry that is wet or soiled with body substances shall be placed in moisture-resistant bags which are secured or tied to prevent spillage. Laundry staff shall wear moisture-resistant gloves, suitable for sorting and handling soiled laundry, and a moisture-resistant gown or sleeved plastic apron if soiling of staff members' clothing is likely. The facility shall use laundry cycles according to the washer and detergent manufacturers' recommendations. Protective clothing shall be removed before handling clean laundry;
- (3) Individuals providing personal care services or skilled nursing care that may result in exposure to body substances, shall wear disposable vinyl or latex gloves as a protective barrier and shall remove and dispose of the used gloves and wash hands before contact with another resident. If exposed to body substances, the individual who has been exposed shall wash his or her hands and other exposed skin surfaces immediately and thoroughly with soap and water. The facility shall provide follow-up consistent with the guidelines issued by the U.S. centers for disease control and prevention for the prevention of transmission of human immunodeficiency virus and hepatitis B virus to health-care and public-safety workers in effect at the time. Individuals providing personal care services or skilled nursing care shall wash their hands before and after providing the services or care even if they used gloves;
- (4) Place disposable articles, other than sharp items, contaminated with body substances in a container impervious to moisture and manage them in a fashion consistent with Chapter 3734. of the Revised Code. Reusable items contaminated with body substances shall be bagged, then sent for decontamination;
- (5) Wear a moisture-resistant gown or other appropriate protective clothing if soiling of clothing with body substances is likely;
- (6) Wear a mask and protective eye wear if splashing of body substances is likely or if a procedure that may create an aerosol is being performed;
- (7) Ensure that all hypodermic needles, syringes, lancets, razor blades and similar sharp wastes are disposed of by placing them in rigid, tightly closed puncture-resistant containers before they are transported off the premises of

the facility, in a manner consistent with Chapter 3734. of the Revised Code. The residential care facility shall provide instructions to residents who use sharps on the proper techniques for disposing of them.

For the purposes of this paragraph, "body substance" means blood, semen, vaginal secretions, feces, urine, wound drainage, emesis, and any other body fluids that have visible blood in them.

(D) Each residential care facility shall develop and follow a tuberculosis control plan that is based on the home's assessment of the facility. The control and assessment shall be consistent with the United States centers for disease control and prevention "Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health Care Settings, 2005," MMWR 2005, Volume 54, No. RR-17. The home shall retain documentation evidencing compliance with this paragraph and shall furnish such documentation to the director upon request.

Effective:

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Certification

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Date

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