The Centers for Medicare and Medicaid Services (CMS) has released a new rule which specifically addresses the evolving needs of Infection Prevention and Control Program (IPCP) in Long-Term Care Facilities (LTCFs). This rule, which is named the Medicare and Medicaid Programs; Reform of Requirements for Long-Term Care Facilities, is scheduled for implementation on November 28, 2016 and components will be phased in through three unique stages, the last completing in November 2019. Here are a few highlights of the new rule that impact the IPCP that nursing leaders must be aware of:

- Facilities must develop an Infection Prevention and Control Program that includes an Antibiotic Stewardship Program and designate at least one Infection Preventionist.
- The Infection Prevention and Control Officer (IPCO) must conduct an annual facility assessment specific to Infection Prevention and Control. The IPCO is not required to be a registered nurse. The individual must have specific training in infection prevention and control beyond their professional degree.
- The IPCO must participate on the QAA Committee.
- The IPCP must include a focus on prevention of the transmission of communicable diseases as well as infections. These efforts should focus on all residents, staff, Volunteers, visitors, and other individuals providing services under a contractual arrangement.
- The IPCP must have written policies and procedures and surveillance systems in place to identify possible communicable diseases or infections before they can spread to other persons in the facility.
- Staff must be thoroughly trained in the IPCP.
- The Infection Prevention and Control Officer just received specialized training in infection prevention and control beyond their initial professional degree. Their primary responsibility should be the administration of the infection prevention and control program.
- Based on the needs of the IPCP, the facility must determine the resources it needs to devote to its infection control program.

As identified in the newly released rule, CMS is ensuring that all residents and patients in LTCFs benefit from a comprehensive and well-resourced Infection Prevention and Control Program. While resources are in many instances a struggle in LTCFs, it is important to have strategic conversations with Executive Leadership regarding the necessary resources for implementation of the Infection Prevention and Control Program based on the facility’s needs assessment.
To learn more about NADONA's Infection Preventionist Board Certification, please visit: https://www.nadona.org/product/infection-prev-ip-bc-certification/. NADONA also offers a host of continuing education

Author:

J. Hudson Garrett Jr., PhD, MSN, MPH, FNP-BC, PLNC, VA-BC, GDCN, IP-BC, CDONA, FACDONA
Chief Clinical Officer
Editor-In-Chief
The Director: Journal of the National Association of Directors of Nursing Administration/LTC
Master Trainer/NADONA
Global Chief Clinical Officer
Pentax Medical