

WAC 246-330-176 Infection control program. The purpose of this section is to identify and reduce the risk of acquiring and transmitting infections and communicable diseases between patients, staff, medical staff, and visitors.

An ambulatory surgical facility must:

(1) Develop, implement and maintain a written infection control and surveillance program;

(2) Designate staff to:

(a) Manage the activities of the infection control program;

(b) Assure the infection control program conforms with patient care and safety policies and procedures; and

(c) Provide consultation on the infection control program, policies and procedures throughout the entire facility.

(3) Ensure staff managing the infection control program have:

(a) A minimum of two years experience in a health related field; and

(b) Training in the principles and practices of infection control;

(4) Develop and implement infection control policies and procedures consistent with the guidelines of the centers for disease control and prevention (CDC);

(5) Assure the infection control policies and procedures address, but are not limited to the following:

(a) Routine surveillance, outbreak investigations and interventions including pathogen distributions and antimicrobial susceptibility profiles consistent with the 2006 CDC health care infection control practices advisory committee guideline, *Management of Multidrug-Resistant Organisms in Healthcare Settings*;

(b) Patient care practices in all clinical care areas;

(c) Receipt, use, disposal, sterilizing, processing, or reuse of equipment to prevent disease transmission;

(d) Preventing cross contamination of soiled and clean items during sorting, processing, transporting, and storage;

(e) Environmental management and housekeeping functions;

(f) Approving and properly using disinfectants, equipment, and sanitation procedures;

(g) Cleaning areas used for surgical procedures before, between, and after use;

(h) Facility-wide daily and periodic cleaning;

(i) Occupational health consistent with current practice;

(j) Clothing;

(k) Traffic patterns;

(l) Antisepsis;

(m) Handwashing;

(n) Scrub technique and surgical preparation;

(o) Biohazardous waste management according to applicable federal, state, and local regulations;

(p) Barrier, transmission and isolation precautions; and

(q) Pharmacy and therapeutics.

(6) Establish and implement a plan for:

(a) Reporting communicable diseases including cluster or outbreaks of postoperative infections according to chapter 246-100 WAC; and

(b) Surveying and investigating communicable disease occurrences in the ambulatory surgical facility consistent with chapter 246-100 WAC; and

(c) Collecting, measuring and assessing data on infection rates, pathogen distributions and antimicrobial susceptibility profiles.

[Statutory Authority: Chapter 70.230 RCW. WSR 09-09-032, § 246-330-176, filed 4/7/09, effective 5/8/09.]