National Hospice and Palliative Care Organization

Survey Readiness Initiative



Medicare Hospice Conditions of Participation (CoPs) Compliance Guide for Hospice Providers January 2015

Sec. 418.60 Condition of Participation: Infection Control

Key points

- The hospice must develop, maintain, and document a successful infection control program that
 protects patients, families, visitors, and hospice staff by preventing and controlling infections and
 communicable diseases.
- An infection control program include these three standards:



• Prevention:

- The hospice must follow accepted standards of practice to prevent the transmission of infections and communicable diseases, including the use of standard precautions.
- Standard Precautions combines major features of Universal Precautions (UP) and Body Substance Isolation (BSI) and is based on the principle that all blood, body fluids, secretions, excretions except sweat, broken skin, and mucous membranes may contain transmissible infectious agents. Standard Precautions includes a group of infection prevention practices that apply to all patients, regardless of suspected or confirmed infection status, in any setting in which healthcare is delivered. These include: hand hygiene; use of gloves, gown, mask, eye protection, or face shield, depending on the anticipated exposure; and safe injection practices.¹
- Additional resources for hand hygiene include:
 - CDC Guideline for Hand Hygiene in Health-Care Settings

¹ Excerpt from the <u>Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings 2007.</u> PDF (1.33MB / 219 pages), Centers for Disease Control.

Control:

- The hospice must sustain a coordinated agency-wide program for the surveillance, identification, prevention, control, and investigation of infectious and communicable diseases that—
- Is an essential part of the hospice's quality assessment and performance improvement program; and
- o Includes a process for identifying infectious and communicable disease problems
- Includes a plan for implementing the proper actions that are expected to result in improvement and disease prevention.

• Education:

- The hospice must provide infection control education to hospice staff, contracted providers, patients, and family members and other caregivers.
- o Education for hospice staff must be documented.

Compliance suggestions for hospice providers

- Review and revise current control program policy/procedure to include regulatory language at least annually.
 - Ensure that you have an adequate policy/procedure for infection control and management of a hospice staff's bag/ items that they take into each patient's home.
 - Review and revise *M. tuberculosis* testing and prevention policies and procedures.
- Utilize patient/family education materials about infection prevention and control in the inpatient and home settings.
- Review and revise current infection control data collection tools.
 - Suggestions for data capture:
 - Collect data about the occurrence of patient and hospice staff infections.
 - Analyze data to determine correlations.
 - Track infection occurrence for patient's transferring from inpatient to home settings and vice versa.
- Monitor infection control information for your state on your Department of Health's website. This information will keep you informed regarding possible infection trends in your service area.
- Educate hospice staff about all new and revised policies/procedures, processes, and performance improvement projects.
- Consider adopting an annual infection control education update for your direct patient care staff.
- Promote infection prevention and control within the hospice organization.
 - Display infection prevention and control posters.
 - Support health promotion activities for hospice staff.

o Encourage hospice staff to obtain flu shots during flu season.

Resources

- Guidelines for Preventing the Transmission of *M. tuberculosis* in Health-Care Settings, 2005 (CDC)
- Infection Control in Healthcare Settings (CDC)
- **★** Please note that hospice providers need to comply with the most stringent regulatory requirements. (federal or state)

References

Part II - Department of Health and Human Services, Centers for Medicare & Medicaid Services

42 CFR Part 418. Medicare and Medicaid Programs: Hospice Conditions of Participation; last update
2013

Visit http://www.gpo.gov/fdsys/browse/collectionCfr.action?collectionCode=CFR to check for the most recent updates).