

PROVIDER NAME		CERTIFICATION NUMBER	
COMPLAINT INVESTIGATOR'S / EVALUATOR'S NAME	DATE(S)	<input type="checkbox"/> Evaluation	INTAKE NUMBER
		<input type="checkbox"/> Complaint Investigation	



AGING AND LONG-TERM SUPPORT ADMINISTRATION (ALTA)
 RESIDENTIAL CARE SERVICES (RCS)
 CERTIFIED COMMUNITY RESIDENTIAL SERVICES AND SUPPORTS (CCRSS)

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.

The IPC Assessment includes a review of strategies for the preventions and spread of communicable diseases in LTC settings.

- | | | |
|---|---|--|
| A. Hand hygiene | D. Appropriate client placement (isolation) | G. Safe injection practices |
| B. Use of Personal Protective Equipment (PPE) | E. Clean and disinfect care equipment and environment | H. Safe handling of needles and sharps |
| C. Respiratory hygiene / cough etiquette | F. Safely handle textiles and laundry | |

Offsite Preparation:

Identify and review National and State IPC standards, rules, and definitions applicable to the setting:

- | | | |
|---|---|--|
| <input type="checkbox"/> Standard Precautions | <input type="checkbox"/> Centers for Disease Control (CDC) Return to Work Guidance for Healthcare Workers | <input type="checkbox"/> Outbreak definition |
| <input type="checkbox"/> Respiratory Protection Program | <input type="checkbox"/> Washington State Department of Health (DOH) COVID-19 Guidance | <input type="checkbox"/> CDC COVID-19 Guidance |

Determine communicable disease outbreak in home: Yes No

PPE / source control plan for on-site visit: None needed Source control / eye protection, if indicated Full PPE with Fit Tested N95 Respirator

COVID-19 specific investigation:

- Community Transmission Rate High in past two weeks. [COVID Data Tracker](#)
- Communal setting or the multi-family home guidance, dependent on which is more appropriate to the specific client's situation and home

Upon entrance, identify / observe the following:

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

Staff and client wearing source control: Yes No (Note: staff are required to wear source control under the [Secretary of Health, Order 20-03 Statewide Face Coverings.pdf](#), clients can be encouraged but are not required to wear source control when around others.

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

If yes, who / where:

- Process to ensure everyone is aware of recommended IPC practices in the setting.
- Process to make everyone entering the facility aware of recommended actions to prevent transmission to others if they have any of the following three criteria:
 - 1) A positive viral test for SARS-CoV-2;
 - 2) Symptoms of COVID-19; or
 - 3) Close contact with someone with SARS-CoV-2 infection (for clients and visitors) or a higher-risk exposure (for healthcare personnel (HCP)).

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Infection Control Instructions			
<ul style="list-style-type: none"> • 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 <u>00-413A</u>. • For Supported Living and State Operated Living Alternatives (SOLA) LTC settings, this pathway refers to how the service provider complies with IPC guidelines. For example, <ul style="list-style-type: none"> ○ Staff: The long-term care worker (LTCW) is required to follow standard IPC guidance for Healthcare Personnel (HCP). ○ Clients: The service provider should be educating and encouraging clients to follow IPC recommended practices to prevent and recognize infection. • General: The provider is required to ensure everyone is aware of recommended IPC practices in the facility. 			
Definitions			
<ul style="list-style-type: none"> • “Source Control” is defined as the use of well-fitted masks, facemasks, or respirators to cover a person’s mouth and nose to prevent the spread of respiratory illnesses. Clients and visitors may wear cloth masks for source control. LTCW are not allowed to wear cloth masks for source control. LTCW must wear a medical grade procedure mask. Anyone may wear a higher-level mask such as a respirator or KN95 mask for source control if desired. Source Control can be used by LTCW for an entire shift unless they become soiled, damaged, or hard to breathe through. Once removed for any reason, masks should be discarded. • “Eye Protection” are goggles or a face shield that covers the front and sides of the face. • “Cohorting” is defined as grouping of individuals with the same condition in the same location / area. The Goal is to minimize interaction of infections individuals. • “Aerosol Generating Procedures” (AGP) 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 bi-level positive airway pressure (BiPAP or BPAP) and continuous positive airway pressure (CPAP). 			
Resource Links			
<ul style="list-style-type: none"> • Washington State Local Health Departments and Districts • AL TSA Provider / Administrator Letters • Definitions: HC-Outbreak-Definition.pdf (cste.org); FLU Outbreak definition 			
COVID-19 Guidance Documents			
<ul style="list-style-type: none"> • CDC Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic • DOH Interim Recommendations for SARS-CoV-2 Infection Prevention and Control in Healthcare Settings • Secretary of Health Order 20-03 Statewide Face Coverings.pdf (wa.gov) • CDC Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2 			

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Yes	No	N/A	A. Testing, Notification, and Routine IPC Practices during COVID-19 Pandemic				
Testing							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Access to adequate COVID-19 testing for all client and staff. <ul style="list-style-type: none"> Working with local and state public health to coordinate testing based on (CDC, DOH, and local guidance) if needed. 				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Testing of all staff and clients will occur when the definition of an outbreak is met. COVID-19 Outbreak is defined as: <ul style="list-style-type: none"> 1 long term care facilities and agencies-acquired COVID-19 infection in a client. ≥ 3 suspect, probable, or confirmed COVID-19 case in HCP with epi-linkage AND no other more likely sources of exposure for at least one of the cases 				
Notification							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Communicates information about known or suspected COVID-19 to appropriate personnel (e.g., transport personnel, receiving facility) before transferring them to healthcare facilities.				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Notifies the Local Health Jurisdiction (LHJ) when cases of COVID-19 are identified. NOTE: CCRSS LTC settings are <u>not required</u> to report outbreaks and cases but are asked to do so.				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clients, staff, and visitors notified of COVID-19 cases in the setting and about potential COVID-19 exposure during outbreak.				
Routine IPC Practices during COVID-19 Pandemic							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Return to Work Guidance. Follows CDC Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2. <input type="checkbox"/> Self-Screening and Monitoring. Instructs HCP (including consultant personnel) to regularly monitor themselves for fever and symptoms of respiratory infection, as a part of routine practice. <input type="checkbox"/> Vaccines. Encourage everyone to remain up to date with all recommended COVID-19 vaccine doses. <ul style="list-style-type: none"> Offers HCP, clients, and visitors resources and counsel about the importance of receiving the COVID-19 vaccine. Encourages everyone to remain up to date with all recommended COVID-19 vaccine doses. <u>Group Homes and Training Homes</u> <input type="checkbox"/> Source Control is worn by everyone in a facility, even if they do not have symptoms of COVID-19. <input type="checkbox"/> Eye Protection is worn by HCP for all client care encounters when Community Transmission Levels are high.				

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<input type="checkbox"/>		<input type="checkbox"/> Established Process to Identify and Manage Individuals with Suspected or Confirmed SARS-CoV-2 Infection: <ul style="list-style-type: none"> • Ensure everyone is aware of recommended IPC practices in the facility. <ul style="list-style-type: none"> ○ Post visual alerts (e.g., signs, posters) at the entrance and in strategic places (e.g., common areas). These alerts should include instructions about current IPC recommendations (e.g., when to use source control and perform hand hygiene). Dating these alerts can let help ensure people know that they reflect current recommendations. <input type="checkbox"/> Established process to make everyone entering the facility aware of recommended actions to prevent transmission to others if they have any of the following three criteria: <ol style="list-style-type: none"> 1) A positive viral test for SARS-CoV-2; 2) Symptoms of COVID-19; or 3) Close contact with someone with SARS-CoV-2 infection (for patients and visitors) or a higher-risk exposure (for healthcare personnel (HCP)). <ul style="list-style-type: none"> ○ For example: <ul style="list-style-type: none"> ○ Instruct HCP to report any of the three above criteria to occupational health or another point of contact designated by the facility so these HCP can be properly managed. ○ Provide guidance (e.g., posted signs at entrances, instructions when scheduling appointments) about recommended actions for patients and visitors who have any of the above three criteria. 	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> SL and SOLA settings. Follow the same guidance as Group Homes and Group Training Homes with the following adjustments: <ul style="list-style-type: none"> ○ Visual Alerts and ensuring staff know actions to prevent transmission to others if they have any of the three criteria noted above occurs at the agency level daily prior to the start of work. There is no requirement to post alerts in a private client home. ○ Providers should regularly educate clients regarding self and visitor screening for signs and symptoms of COVID-19 and recommended actions to prevent the spread of COVID-19 if meeting any of the 3 criteria: <ol style="list-style-type: none"> 1) A positive viral test for SARS-CoV-2; 2) Symptoms of COVID-19; or 3) Close contact with someone with SARS-CoV-2 infection (for patients and visitors) or a higher-risk exposure (for healthcare personnel (HCP)). ○ Source Control and Eye Protection must be worn by LTCW as indicated under Group and Group Training Homes. Providers should advise, educate and encourage clients and visitors to wear masks. <input type="checkbox"/> Supported Living providers will continue to educate and encourage clients to follow CDC guidance found in the communal setting guidance or the multi-family home guidance , dependent on which is more appropriate to the specific client's situation and home.	

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<p>Communal Setting Guidance: Prevention Actions to Use at All COVID-19 Community Levels. In addition to basic health and hygiene practices, like handwashing, CDC recommends some prevention actions at all COVID-19 Community Levels, which include:</p> <ul style="list-style-type: none"> • Staying up to date with COVID-19 vaccines • Improving ventilation • Getting tested for COVID-19 if needed • Following recommendations for what to do if you have been exposed • Staying home if you have suspected or confirmed COVID-19 • Seeking treatment if you have COVID-19 and are at high risk of getting very sick • Avoiding contact with people who have suspected or confirmed COVID-19 <p>Multifamily Home Guidance includes personal prevention practices to reduce COVID-19: Social distancing; using masks; frequent handwashing with soap and water or hand sanitizing when handwashing with soap and water is not possible; cough etiquette; staying home when sick; and environmental cleaning and disinfection.</p> <ul style="list-style-type: none"> • Develop a plan. During an infectious disease outbreak, such as the current outbreak of COVID-19, property owners, administrators, and operators should prepare to identify residents at increased risk of severe COVID-19 illness, collaborate with their local health departments, and protect their employees' health and safety. 			
NOTES			
Yes	No	N/A	B. Visitation
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Provides accommodations to allow visitations for all clients regardless of vaccinations status. <ul style="list-style-type: none"> • Follows Local Health Jurisdiction (LHJ) guidance if stricter visitation guidance during outbreak. • If visiting a COVID-19 positive client, provides materials to visitors to educate on the risk of visiting a COVID-19 unit offer them PPE, and provide basic instruction on use. • Ensure visitors adhere to core principles of infection control including masking and maintaining six feet of physical distance when physical distancing is feasible and will not interfere with provision of care.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Provides immediate access or contact to Developmental Disability Ombuds and/or Regional Long-Term Care Ombuds.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Follows guidance found in the communal setting guidance or the multi-family home guidance, dependent on which is more appropriate to the specific client's situation and home. Listed under Routine IPC Practices During COVID-19 Pandemic.

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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Adheres to visitation guidance during an outbreak refer to DOH Interim Recommendations for SARS-CoV-2 Infection Prevention and Control in Healthcare Settings. <input type="checkbox"/> Shares visitor guidance for those with COVID-19 infection <input type="checkbox"/> Visitors who are not moderately to severely immunocompromised and have recently had mild to moderate SARS-CoV-2 infection do not visit until: <ul style="list-style-type: none"> o Symptoms improve with no fever in the last 24 hours and no fever reducing medication AND o 10 days from onset of symptoms or positive test if asymptomatic OR o Seven (7) days from onset of symptoms with a negative SARS-CoV-2 antigen test collected within 48 hours. <input type="checkbox"/> Visitors who have had close contact (defined as within six feet for 15 cumulative minutes in 24 hours) should not visit until: <ul style="list-style-type: none"> o 10 days from last date of close contact OR o Seven (7) days from last date of close contact with a negative SARS-CoV-2 antigen or Nucleic Acid Amplification test (NAAT) tests, such as a Polymerase Chain Reaction (PCR) tests, collected on exposure Day 1 (but not within 24 hours from exposure), 3, and 5. <input type="checkbox"/> Providers do not need to verify visitor vaccination status, test status, severity of disease, or immunological status.		
NOTES					
Yes	No	N/A	C. IPC Supplies: Personal Protection Equipment (PPE), Cleaning, and Hand Hygiene Supplies and Use		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ask the provider how they determine there are adequate: <ul style="list-style-type: none"> <input type="checkbox"/> PPE supplies in each home for clients, staff, and visitors <input type="checkbox"/> EPA registered disinfectants for frequent cleaning of high-touch surfaces, shared client care equipment /areas, and after visitation <input type="checkbox"/> Alcohol-based hand rub and appropriate hand hygiene products available for clients, staff, and visitors. <input type="checkbox"/> Tissues and waste receptacles for respiratory etiquette <input type="checkbox"/> Staff are following training related to hand hygiene, cough etiquette, PPE use, laundry, safe sharps, and injection practice 		
NOTES					

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Yes	No	N/A	D. Infection Control Standards, Policies and Procedures
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Observe staff are following standard precautions:</p> <input type="checkbox"/> Proper hand hygiene – technique, timing before and after care, availability of alcohol-based hand rub (AHBR) or sink with soap and water <input type="checkbox"/> Appropriate staff use of PPE <input type="checkbox"/> Respiratory hygiene / cough etiquette (availability of tissues, trash, covering cough and sneezes) <input type="checkbox"/> Client placement (isolation) if needed <input type="checkbox"/> Cleaning and disinfecting care equipment and environment (technique, timing, and product use) <input type="checkbox"/> Safe laundry and textile handling <input type="checkbox"/> Safe injection practice <input type="checkbox"/> Sharps safety
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Staff are following COVID-19 Guidance: face covering or masks (covering mouth and nose), use of eye protection when required. Staff encourages and educates clients to maintain good infection prevention strategies at all times.</p>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>If COVID-19 is suspected, an N95 or higher-level respirator is used along with gown, gloves, face shield or goggles.</p> <ul style="list-style-type: none"> If PPE is not available, the home shows diligence and effort to obtain PPE.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Review:</p> <input type="checkbox"/> Written Infection Control policies and procedures to prevent the spread of infection. <ul style="list-style-type: none"> Standard Precautions (see list under Observations) Transmission-based precautions Reference to National, state and/or local standards Outbreak management <ul style="list-style-type: none"> Steps to take for infectious disease outbreak including reporting, cohorting, isolation, use of PPE How IPC information / plan will be shared with clients, staff, visitors <input type="checkbox"/> Respiratory Protection Program per Chapter 296-842, Respirators (fit tested N95 respirators, training, and medical clearance to wear an N95 respirator). <input type="checkbox"/> Sick Leave Policies. <ul style="list-style-type: none"> The facility has a process to manage HCP with fever and symptoms of COVID-19 and other respiratory infections. The facility has sick leave policies that are non-punitive, flexible, and consistent with public health policies that allow ill HCP to stay home. <input type="checkbox"/> Contingency Staffing Plan identifies the minimum staffing needs and prioritizes critical and non-essential services based on residents' health status, functional limitations, disabilities, and essential facility operations. The staffing plan includes strategies for collaborating with local and regional planning and response groups to address widespread healthcare staffing shortages during a crisis.

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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Provides education and/or training about the following: <ul style="list-style-type: none"> Educates staff, clients and/or representatives on COVID-19 symptoms, precautions, hand hygiene and PPE and standard precautions. Educates staff on IPC policy and recommended IPC practices in the facility. Educates clients on importance of COVID-19 (e.g., symptoms, how it is transmitted), precautions and IPC prevention measures taken in the home, including when staff are not present. 				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Follows DOH guidance to prevent transmission during AGPs and other uncontrolled respiratory secretions.				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Uses telemedicine when possible if client is unable to attend in person care				
NOTES							
Yes	No	N/A	E. Group Activities and Communal Dining				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Group Activities and Communal Dining: <ul style="list-style-type: none"> Provides 24/7 services: <ul style="list-style-type: none"> Clients will not participate in group activities until they have discontinued Transmission-Based Precautions for SARS-CoV-2 illness. Provides less than 24/7 services: <ul style="list-style-type: none"> Discourages positive or suspected COVID-19 positive clients from participating in activities. Encourages clients to practice social distancing and wear face masks. 				
Yes	No	N/A	F. Cohorting and Dedicated Staff				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Displays effective cohorting of clients, if possible. <ul style="list-style-type: none"> Collaborates with DOH or the LHJ to conduct an outbreak investigation. Dedicates a space for isolation and/or cohorting and managing care for clients with COVID-19 or if unable to cohort clients, have a plan. 				
NOTES							
Other Requirements to Consider							
<ul style="list-style-type: none"> Reporting to CRU as requested by RCS. Refer to the RCS Infection Prevention and Control Assessment Standard Operating Procedures. Reference the RCS Field Staff Guidance. 							

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Compliance Decision			
Regulatory Requirement		Met	Not Met
WAC 388-101D-0060 Policies and procedures. (1) The service provider must develop, implement, and train staff on policies and procedures to address what staff must do: (e) In emergent situations that may pose a danger or risk to the client or others, such as in the event of death or serious injury to a client; (g) Related to emergency response plans for natural or other disasters;		<input type="checkbox"/>	<input type="checkbox"/>
WAC 388-101D-0170 Physical and safety requirements. (2) The service provider must ensure that the following home safety requirements are met for each client unless otherwise specified in the client's individual support plan: (a) A safe and healthy environment;		<input type="checkbox"/>	<input type="checkbox"/>
WAC 388-101D-0125 Client rights. (5) The right to be free from harm, including unnecessary physical restraint, isolation, excessive medication, abuse, neglect, abandonment, and financial exploitation;		<input type="checkbox"/>	<input type="checkbox"/>
WAC 388-101D-0145 Client services. Service providers must provide each client instruction and/or support to the degree the individual support plan identifies the service provider as responsible. Instruction and/or support to the client may include but are not limited to the following categories: (4) Health and safety activities;		<input type="checkbox"/>	<input type="checkbox"/>
WAC 388-101-3020 Compliance. The service provider must be in compliance with: (5) Other relevant federal, state and local laws, requirements, and ordinances. (Has written Respiratory Protection Program and records for training, medical clearance approval and fit testing per Chapter 296-842 WAC Respirators.)		<input type="checkbox"/>	<input type="checkbox"/>