

Standard PCI.07.01

The hospital provides resources and equipment to protect staff, health care practitioners, patients, and visitors from biological, physical, and chemical hazards, and these are readily available for use.

Intent of PCI.07.01

Hand hygiene (such as the use of sanitizers), barrier techniques (such as the use of personal protective equipment), and disinfecting agents are fundamental tools for proper infection prevention and control and thus need to be available at any site of care at which they could be needed, including laboratories, other areas where specimens are handled, and laundry facilities. Staff and health care practitioners must use appropriate personal protective equipment when indicated, in accordance with laws and regulations and applicable infection control guidelines, and use appropriate hand hygiene methods when indicated. Examples include wearing gloves and a face shield when suctioning a patient, or using gloves, gown, face shield, and appropriate face masks such as N95 or powered air-purifying respirators (PAPRs) for patients in isolation due to a communicable disease and performing hand hygiene prior to and after provision of patient care.

The hospital identifies those situations in which personal protective equipment such as respirators, masks, eye protection, gowns, or gloves are required for protection against biological hazards, including high-risk pathogens that require special isolation precautions such as N95 masks, PAPRs, or higher-level protective gowns; provides the needed equipment; and trains staff and health care practitioners in their correct use. Liquid soap and water, alcohol-based hand sanitizers, and other appropriate disinfectants are in areas where handwashing and hand-disinfecting procedures are required. When personal protective equipment is required, it is readily available for use. It is important to follow guidelines for ensuring that liquid soap dispensers are thoroughly and properly cleaned before refilling. Staff are educated in proper handwashing, hand-disinfection, and surface-disinfection procedures and proper use of personal protective equipment. Patients and visitors are also educated on proper hand-disinfecting procedures and when they are required to use personal protective equipment; for example, when visiting a family member in contact isolation or when a patient on airborne precautions is being transported through the organization.

Measurable Elements of PCI.07.01

1. The hospital identifies situations in which personal protective equipment is required.
2. The hospital ensures that appropriate personal protective equipment and hand hygiene agents are readily available when needed. (*See also* IPSCG.05.00, MEs 1 and 2; FMS.09.01, ME 1)
3. Staff are trained and correctly use personal protective equipment in each identified situation.
4. The hospital implements environmental disinfecting procedures for areas and situations in the hospital identified as at risk for infection transmission.
5. Liquid soap and running water, hand disinfectants, and single-use towels are provided in areas where handwashing and hand-disinfecting procedures are required, and hand air dryers are not used in patient care areas. (*See also* IPSCG.05.00, MEs 1 and 2)
6. Patients and visitors are educated on when they are required to disinfect their hands, when transmission based precautions such as isolation precaution must be followed, and how to correctly use personal protective equipment when applicable. (*See also* IPSCG.05.00, MEs 1 and 2)

Standard PCI.07.02

The hospital implements processes to support preparedness for epidemiologically significant infectious diseases or special pathogens.

Intent of PCI.07.02

High-consequence infectious diseases or special pathogens are novel and reemerging infectious diseases or pathogens that are highly transmissible from person to person (or have an unknown mode of transmission) and have the potential for epidemic or pandemic with high morbidity and mortality. This standard is about highly significant emerging diseases such as COVID-19. The management of these diseases or pathogens requires prompt identification, implementation of infection control activities (for example, timely reporting and information sharing, isolation, special personal protective equipment, a biocontainment unit), and action for public health preparedness to prevent community transmission and social disruption. Examples of high-consequence infectious diseases or special pathogens include Middle East respiratory syndrome (MERS), severe acute respiratory syndrome (SARS), COVID-19, measles, monkeypox, smallpox, novel or new mutation of influenza, and Ebola or other viral hemorrhagic fever diseases.

It is particularly important to educate staff on early recognition, including those nonclinical staff who have first contact with patients, such as registration clerks. Simply knowing that a communicable disease may be spreading is not enough. If staff are not trained to recognize the signs and symptoms and to act early, the extent of exposure and the risks of spreading the infection significantly increase. Early recognition is particularly important at a patient's first point of entry into the hospital, such as the emergency department or the outpatient clinics.

Measurable Elements for PCI.07.02

1. ④ The hospital implements protocols for high-consequence infectious diseases or special pathogens, that are readily available for use at the point of care and address the following:
 - Procedures for screening at the points of entry to the hospital for respiratory symptoms, fever, rash, and travel history to identify or initiate evaluation for high-consequence diseases or special pathogens. (*See also* FMS.09.01, ME 3) **Note:** Points of entry may include the emergency department, urgent care, and ambulatory clinics.
 - Patient isolation procedures
 - Procedures for informing public health authorities and key hospital staff
 - Procedures for required personal protective equipment and proper donning and doffing techniques
 - Infection control procedures to support continued and safe provision of care while the patient is in isolation and to reduce exposure among staff, patients, and visitors
 - Procedures for waste management and cleaning and disinfecting patient care spaces, surfaces, and equipment
2. The hospital implements education and training and assesses competencies for the staff who will implement protocols for high-consequence diseases or special pathogens.
3. The hospital coordinates with transportation services and local public health authorities to implement criteria and procedures for transferring patients to facilities with a higher level of care.
4. ④ The hospital has written policies and procedures for monitoring and managing staff who have been occupationally exposed or are suspected of having been exposed to a high-consequence infectious agent or special pathogen.
5. The hospital response to high-impact pathogens includes a plan for vaccination of all staff, leaders, and health care practitioners when applicable. (*See also* SQE.02.01, ME 2)

Quality Improvement and Program Education

Standard PCI.08.00

The infection prevention and control process is integrated with the hospital's overall program for quality and patient safety, using data and measures that are epidemiologically important to the hospital.