



Legislative Endorsement

Bill No.	Bill Title	Sponsor(s)	Committee	Legislative history
S 1476	An Act to improve infection control within long-term care facilities	Sen. Montigny	Public Health	Hearing:

Endorsed by 32 members of Dignity Alliance Massachusetts including:

<ul style="list-style-type: none"> • Boston Center for Independent Living • Center for Living and Work, Inc. • COP Amputee Association –COPAA • Disability Policy Consortium • Disability Resource Center • Easterseals Massachusetts • John Ford, Esq. • Lachan Farrow, MD • Judi Fonsh, LCSW, MSW • Wynn Gerhard 	<ul style="list-style-type: none"> • Pamela Goodwin • Greater Boston Chapter of United Spinal Association • Fred Gross • Jerry Halberstadt, Stop Bullying Coalition • Sandy Hovey • Anne Johansen • James Lomastro, PhD • Paul J. Lanzikos 	<ul style="list-style-type: none"> • Massachusetts Advocates for Nursing Home Reform, Arlene Germain, Policy Director • Massachusetts Aging and Mental Health Coalition • Massachusetts Law Reform Institute • MetroWest Center for Independent Living, Paul Spooner, Executive Director • Richard T. Moore • Sandy Alissa Novack, MSW, MBA • SeniorCare, Scott Trenti, CEO
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<https://malegislature.gov/Bills/192/S1476>

SECTION 1. Notwithstanding any general or special law to the contrary, the department of public health shall promulgate regulations to ensure each long-term care facility, licensed pursuant to section 71 of chapter 111, establishes and maintains an infection prevention and control program designed to provide a safe, sanitary, and comfortable environment and to help prevent the development and transmission of communicable diseases and infections. Said regulations shall include, but not be limited to, the following:

(a) Infection prevention and control program. Each facility must establish an infection prevention and control program that must include, at a minimum, the following elements:

(1) A system for preventing, identifying, reporting, investigating, and controlling infections and communicable diseases for all residents, staff, volunteers, visitors, and other individuals providing services under a contractual arrangement.

(2) Written standards, policies, and procedures for the program, which must include, but are not limited to:

(i) A system of surveillance designed to identify possible communicable diseases or infections before they can spread to other persons in the facility;

(ii) When and to whom possible incidents of communicable disease or infections should be reported;

(iii) Standard and transmission-based precautions to be followed to prevent spread of infections;

(iv) When and how isolation should be used for a resident; including but not limited to:

- (A) The type and duration of the isolation, depending upon the infectious agent or organism involved, and
- (B) A requirement that the isolation should be the least restrictive possible for the resident under the circumstances.
- (v) The circumstances under which the facility must prohibit employees with a communicable disease or infected skin lesions from direct contact with residents or their food, if direct contact will transmit the disease; and
- (vi) The hand hygiene procedures to be followed by staff involved in direct resident contact.
- (3) An antibiotic stewardship program that includes antibiotic use protocols and a system to monitor antibiotic use.
- (4) A system for recording incidents identified under the facility's infection prevention and control program and the corrective actions taken by the facility.
- (b) Infection preventionist. The facility must designate one or more individuals as the infection preventionist who are responsible for the facility's infection prevention and control plan. The infection preventionist must:
 - (1) Have primary professional training in nursing, medical technology, microbiology, epidemiology, or other related healthcare field;
 - (2) Be qualified by education, training, experience or certification;
 - (3) Work full-time at the facility; and
 - (4) Have completed specialized training in infection prevention and control.
- (c) Infection prevention training for staff and volunteers. The individual designated as the infection preventionist, or at least one of the individuals if there is more than one infection preventionist, must provide orientation and annual in-service training to all staff, including temporary staff and volunteers, on infection control policies and procedures. The infection preventionist shall document the date and time of said training for each staff person and report to the department not less than once per calendar year.

SECTION 2. The department shall promulgate regulations pursuant to this Act no later than 180 days from passage.