



Accreditation Program: Behavioral Health Care  
Infection Prevention and Control

**Standard IC.01.01.01**

The organization identifies the individual(s) responsible for managing infection prevention and control.

**Elements of Performance for IC.01.01.01**

3. The organization assigns responsibility for the management of infection prevention and control activities.  
Note: The assigned individual need not be a nurse or other medical practitioner.

**A****Standard IC.01.02.01**

Organization leaders allocate needed resources for infection prevention and control activities.

**Elements of Performance for IC.01.02.01**

2. For 24-hour care settings: The organization arranges for laboratory services when needed to prevent the spread of infection within the organization.  
Note: The role taken by the behavioral health care organization in coordinating laboratory services will depend on the services provided. In many cases, the behavioral health care organization can refer the individual served only to a licensed independent practitioner who is qualified to order laboratory testing. In some cases, the organization may have a licensed independent practitioner on staff who is qualified to order laboratory testing, or it may have arrangements in place for sending laboratory tests out.
3. The organization provides staff and individuals served with supplies to support infection prevention and control activities.  
Note: Examples of such supplies may include liquid hand sanitizers, gloves, tissue, and cleaning supplies. The organization's infection control activities apply only to those locations where care, treatment, or services are provided; the organization is not required to provide supplies for use outside of these locations.

**A****A****Standard IC.01.03.01**

The organization identifies risks for acquiring and spreading infections.

**Rationale for IC.01.03.01**

Before developing its infection prevention and control activities, the behavioral health care organization needs to consider the risks of infections that are most likely to affect the individuals it serves. Understanding the risks will help the organization to better determine the most effective actions it can take to prevent infections. Effective prevention can minimize risks to individuals served and reduce the need to implement infection control activities that may be more resource intensive.

**Elements of Performance for IC.01.03.01**

1. The organization identifies infection risks based on its setting and population served.  
Note: The risk of infection will vary across behavioral health care settings. For example, infection risks in group homes, day treatment programs, and couples counseling will vary by hours of contact, number of individuals served, and location and type of service.

**A**

**KEY:** **A** indicates scoring category A; **C** indicates scoring category C; **2** indicates situational decision rules apply; **3** indicates direct impact requirements apply; **M** indicates Measure of Success if needed; **D** indicates that documentation is required

- |    |   |          |
|----|---|----------|
| 2. | The organization identifies infection risks based on the care, treatment, or services it provides.  | <b>A</b> |
| 3. | For 24-hour care settings: The organization identifies risks based on its monitoring of infection prevention and control activities and/or tracking and analyzing the occurrence of infections.<br>Note: The infections that should be tracked are those that are most relevant to the organization's setting, services, and population(s). The organization may contact its local health department for statistics and other information on some infections, and track other infections internally. For example, an organization may decide to track conjunctivitis itself but rely on health department statistics related to tuberculosis. | <b>A</b> |
| 5. | <b>D</b> The organization establishes priorities among the risks it identified. The organization documents priority risk(s).  | <b>A</b> |

### Standard IC.01.04.01

Based on the priority risk(s), the organization sets goals to minimize the possibility of spreading infections.

Note 1: See NPSG.07.01.01 for hand hygiene guidelines.

Note 2: Goals can be process and/or outcome goals.

#### Elements of Performance for IC.01.04.01

- |    |   |          |
|----|---|----------|
| 1. | <b>D</b> The organization's written infection prevention and control goals include the following: Addressing its priority risk(s).  | <b>A</b> |
| 2. | <b>D</b> The organization's written infection prevention and control goals include the following: Limiting unprotected exposure to germs.<br>Note: One method to limit exposure is to follow basic hygiene practices.   | <b>A</b> |
| 4. | <b>D</b> The organization's written infection prevention and control goals include the following: Limiting the spread of infections associated with the use of medical supplies (such as needles and syringes) and devices (such as the organization's glucose meters). | <b>A</b> |
| 5. | <b>D</b> The organization's written infection prevention and control goals include the following: Improving staff compliance with hand hygiene guidelines. (See also NPSG.07.01.01, EP 1)   | <b>A</b> |

**KEY:** **A** indicates scoring category A; **C** indicates scoring category C; **2** indicates situational decision rules apply; **3** indicates direct impact requirements apply; **M** indicates Measure of Success if needed; **D** indicates that documentation is required

**Standard IC.01.05.01**

The organization has an infection prevention and control plan.

**Rationale for IC.01.05.01**

The organization has a plan for infection prevention and control to support consistency in the activities that prevent the spread of infection. Such activities help protect individuals served and staff from infectious disease even if the organization is not specifically aware that an infection is present. Furthermore, when the organization is aware of or is notified of the presence of an infection, the organization with a plan will be better prepared to respond quickly to prevent its spread within the organization, and to access external information and assistance (for example, through the local health department) if needed.

The local health department may support organizations by following 10 general steps to investigate an outbreak of infectious disease:

1. Prepare for fieldwork (that is, research the disease, gather supplies and equipment, make administrative arrangements such as travel, and consult with local contacts to define roles and activities)
2. Establish the existence of an outbreak
3. Verify the diagnosis
4. Define and identify cases
5. Describe and orient the data in terms of time, place, and person
6. Develop hypothesis
7. Evaluate hypothesis
8. Refine hypothesis and carry out additional studies
9. Implement control and prevention measures
10. Communicate findings

Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion at <http://www.cdc.gov/excite/classroom/outbreak/steps.htm>

**Elements of Performance for IC.01.05.01**

- |    |   |          |
|----|---|----------|
| 1. | When developing infection prevention and control activities, the organization uses accepted practices in preventing the spread of infections where individuals are served.<br>Footnote: When considering accepted practices, the organization may find it useful to consult guidelines available from the Centers for Disease Control and Prevention: Healthcare Infection Control Practices Advisory Committee (CDC/HICPAC): <a href="http://www.cdc.gov/ncidod/dhqp/hicpac_pubs.html">http://www.cdc.gov/ncidod/dhqp/hicpac_pubs.html</a> . Although portions of these guidelines apply only in acute care settings, much of the information is relevant regardless of the setting of care. | <b>A</b> |
| 2. | <b>D</b> The organization's infection prevention and control plan includes a written description of the activities, including surveillance, to minimize or reduce the risk of infection.<br>Note: The purpose of surveillance is to support the organization's efforts to reduce the risk of spreading infections where individuals are served. Information from the surveillance activities is used within the organization to improve processes and outcomes related to infection prevention and control.   | <b>A</b> |

- |    |  |          |
|----|--|----------|
| 3. | <p><b>D</b> The organization's written infection prevention and control plan includes a description of its method for evaluating its infection prevention and control activities.</p>  | <b>A</b> |
| 5. | <p><b>D</b> The organization describes in writing its response when it becomes aware of or is notified of an outbreak of infectious disease among its staff or individuals served. (See also IC.02.01.01, EP 5)</p> <p>Note: An outbreak is an occurrence of more than expected cases of disease or other health condition among a specific group during a specified time frame, exceeding the typical number of cases for that setting. In some cases the behavioral health care organization may not be aware that an outbreak has occurred until it is notified by an external entity. When the organization does become aware of an outbreak in its organization, its response should be immediate and practical. It may include measures such as notifying staff and individuals served that they may have been exposed, contacting the health department for guidance, or closing temporarily to properly disinfect the setting.</p> | <b>A</b> |
| 6. | <p>Everyone who works in the organization has responsibilities for preventing and controlling infection. (See also HR.01.04.01, EP 4)</p>  | <b>A</b> |
| 7. | <p>For 24-hour care settings: The organization has a method for communicating responsibilities for preventing and controlling infection to staff and individuals served. (See also IC.02.01.01, EP 7)</p> <p>Note: The communication can be verbal or written, using posters, brochures, or other resources.</p>   | <b>A</b> |
| 8. | <p>The organization identifies methods for reporting infections to local, state, and federal public health authorities in accordance with law and regulation.</p> <p>Note: The local health department can provide guidance about what types of infections should be reported.</p>   | <b>A</b> |

### Standard IC.01.06.01

The organization prepares to respond to an increased number of infectious individuals.

#### Rationale for IC.01.06.01

Some behavioral health care organizations may experience an emergency situation which results in an increase in infections among the individuals they serve, or an increase in demand for their services by new individuals who have infections. The organization will need to determine what its response will be to this increase; responses can range from expanding services to closing services, depending upon the organization's mission, services, staffing, relationship with the local health department, legal obligation to accept certain individuals for care, role in the community, or other factors.

#### Elements of Performance for IC.01.06.01

- |    |   |          |
|----|---|----------|
| 1. | <p>The organization identifies resources that can provide information about infections that could cause an increased number of infectious individuals.</p> <p>Note: Resources may include local, state, and federal public health systems.</p>  | <b>A</b> |
| 2. | <p>The organization obtains current clinical and epidemiological information from its resources regarding new infections that could cause an increased number of infectious individuals.</p> <p>Note: Some behavioral health care organizations may experience an increase in infections among the individuals currently served, including individuals who come from outside the immediate geographic area.</p> | <b>C</b> |



**KEY:** **A** indicates scoring category A; **C** indicates scoring category C; **2** indicates situational decision rules apply; **3** indicates direct impact requirements apply; **M** indicates Measure of Success if needed; **D** indicates that documentation is required



- |    |   |          |
|----|---|----------|
| 3. | The organization has a method for communicating critical information to staff about emerging infections that could cause an increase in the number of infectious individuals served.  | <b>A</b> |
| 4. | <p><b>D</b> The organization plans how it will respond to an increased number of infectious individuals. This plan is documented. (See also EM.01.01.01, EP 2)</p> <p>Note: One acceptable response is to decide not to accept individuals for service.</p> | <b>A</b> |
| 5. | <p><b>D</b> If the organization decides it will accept an increased number of infectious individuals, then the organization describes in writing its methods for how it will handle these individuals over an extended period of time.</p>                  | <b>A</b> |
| 6. | When the organization experiences an increased number of infectious individuals, it activates its planned response.   | <b>A</b> |

**Standard IC.02.01.01**

The organization implements its infection prevention and control plan.

**Elements of Performance for IC.02.01.01**

- |             |   |  |
|-------------|---|--|
| 1.          | <p>The organization implements its planned infection prevention and control activities and practices, including surveillance, to reduce the risk of infection.</p> <p>Note: The purpose of surveillance is to support the organization’s efforts to reduce the risk of spreading infections where individuals are served. Information from the surveillance activities is used within the organization to improve processes and outcomes related to infection prevention and control.</p>   | <b>C</b>   |
| <b>M</b> 2. | <p>The organization uses standard precautions, including the use of personal protective equipment (such as gloves and face shields), to reduce the risk of infection.</p> <p>Footnote: For further information regarding standard precautions, refer to the Web site of the Centers for Disease Control and Prevention (CDC) at <a href="http://www.cdc.gov/ncidod/dhqp/">http://www.cdc.gov/ncidod/dhqp/</a> (Infection Control in Healthcare Settings).</p>   |  <b>C</b> |
| <b>M</b> 3. | <p>In addition to standard precautions, the organization takes other precautions in response to the way suspected or identified infections are spread within the organization’s setting or population of individuals served.</p> <p>Note: "Other precautions" are infection prevention and control measures used in response to the specific way suspected or identified infections are spread. These "other precautions" are also known as "transmission-based" precautions. Transmission-based precautions include contact, droplet, airborne, or a combination of these precautions.</p> <p>Footnote: For further information regarding transmission-based precautions, refer to the Web site of the Centers for Disease Control and Prevention (CDC) at <a href="http://www.cdc.gov/ncidod/dhqp/">http://www.cdc.gov/ncidod/dhqp/</a> (Infection Control in Healthcare Settings).</p> |  <b>C</b> |

**KEY:** **A** indicates scoring category A; **C** indicates scoring category C;  indicates situational decision rules apply;  indicates direct impact requirements apply; **M** indicates Measure of Success if needed; **D** indicates that documentation is required

5. To prevent the spread of infections, the organization investigates outbreaks of infectious disease within the organization. (See also IC.01.05.01, EP 5) **A**  
 Note: An outbreak is an occurrence of more than expected cases of disease or other health condition among a specific group during a specified time frame, exceeding the typical number of cases for that setting. In some cases the behavioral health care organization may not be aware that an outbreak has occurred until it is notified by an external entity. When the organization does become aware of an outbreak in its organization, its response should be immediate and practical. It may include measures such as notifying staff and individuals served that they may have been exposed, contacting the health department for guidance, or closing temporarily to properly disinfect the setting.
6. The organization stores and disposes of infectious waste (such as used sharps and body fluids) in a manner that minimizes the risk of infection. (See also EC.02.02.01, EP 2) **3 C**
- M** 7. For 24-hour care settings: The organization communicates to staff and individuals served and, when permitted by individuals served, their families about their respective roles in preventing and controlling infection. (See also HR.01.04.01, EP 4; IC.01.05.01, EP 7) **C**  
 Note: The communication can be verbal or written, using posters, brochures, or other resources.
- M** 8. The organization reports infection surveillance, prevention, and control information to organization staff consistent with their responsibilities for infection prevention and control activities. **C**
9. The organization reports information about the occurrence of infections to local, state, and federal public health authorities in accordance with law and regulation. (See also IC.03.01.01, EP 6) **A**  
 Note: The local health department can provide guidance about what types of infections should be reported.
13. The organization reduces the risks associated with animals, including potential problems with cleanliness, immunizations, and management of waste. **A**

**KEY:** **A** indicates scoring category A; **C** indicates scoring category C; **2** indicates situational decision rules apply; **3** indicates direct impact requirements apply; **M** indicates Measure of Success if needed; **D** indicates that documentation is required

**Standard IC.02.02.01**

The organization reduces the risk of infections associated with medical supplies and devices.

Note: This standard applies only to organizations that use medical supplies and devices.

**Rationale for IC.02.02.01**

Individuals served are at risk of developing an infection from contact with medical supplies and devices. Failure to properly clean or disinfect, and use or store, medical supplies and devices not only poses risks for the individual seeking services, but also carries the risk for person-to-person spread of infections.

There are several steps involved in the cleaning and disinfecting of medical supplies and devices. It is critical that staff follow standardized practices to minimize infection risks related to medical supplies and devices. In order to maintain a reliable system for controlling this process, organizations pay attention to the following:

- Orientation, training, and competency of health care workers who are processing medical supplies and devices
- Supervision of the health care workers who are processing medical supplies and devices
- Standardization of process regardless of whether it is centralized or decentralized
- Reinforcing the process (for example, the use of placards which list the steps to be followed, according to manufacturers' guidelines)
- Ongoing quality monitoring

**Elements of Performance for IC.02.02.01**

- |          |   |                   |
|----------|---|-------------------|
| <b>M</b> | 1. The organization implements infection prevention and control activities when doing the following: Cleaning and performing low-level disinfection of medical supplies and devices.<br>Note: Low-level disinfection is used for items such as blood glucose meters. Additional cleaning and disinfecting is required for medical supplies and devices used by individuals who require the use of other precautions in addition to standard precautions. These "other precautions" are also known as "transmission-based" precautions.<br>Footnote: For further information regarding cleaning and performing low-level disinfection of medical supplies, refer to the Web site of the Centers for Disease Control and Prevention (CDC) at <a href="http://www.cdc.gov/ncidod/dhqp/sterile.html">http://www.cdc.gov/ncidod/dhqp/sterile.html</a> (Sterilization and Disinfection in Healthcare Settings). | <b>3</b> <b>C</b> |
|          | 3. The organization implements infection prevention and control activities when doing the following: Disposing of medical supplies and devices.   | <b>3</b> <b>A</b> |
| <b>M</b> | 4. The organization implements infection prevention and control activities when doing the following: Storing medical supplies and devices.  | <b>C</b>          |

**Standard IC.02.03.01**

The organization works to prevent the spread of infectious disease among individuals served and staff.

**Elements of Performance for IC.02.03.01**

- |          |  |          |
|----------|--|----------|
| <b>M</b> | 1. The organization arranges for screening of staff for exposure and/or immunity to infectious disease when workplace contact with infections is possible, and as required by law and regulation or organization policy. | <b>C</b> |
|----------|--|----------|

**KEY:** **A** indicates scoring category A; **C** indicates scoring category C; **2** indicates situational decision rules apply; **3** indicates direct impact requirements apply; **M** indicates Measure of Success if needed; **D** indicates that documentation is required

- |          |  |          |
|----------|--|----------|
| <b>M</b> | 2. When staff have or are suspected of having an infectious disease that puts others at risk, the organization refers them for assessment and potential testing, prophylaxis/treatment, or counseling. | <b>C</b> |
|          | 3. When staff have been occupationally exposed to an infectious disease, the organization refers them for assessment and potential testing, prophylaxis/treatment, or counseling.                      | <b>A</b> |
|          | 4. When individuals served have been exposed to an infectious disease, the organization refers them for assessment and potential testing, prophylaxis/treatment, or counseling.                        | <b>A</b> |

### Standard IC.03.01.01

The organization evaluates the effectiveness of its infection prevention and control plan.

#### Elements of Performance for IC.03.01.01

- |    |  |          |
|----|--|----------|
| 1. | The organization evaluates its infection prevention and control plan annually and whenever its priority risk(s) significantly change(s). | <b>A</b> |
| 2. | The evaluation includes a review of the following: The infection prevention and control priority risk(s).                                | <b>A</b> |
| 3. | The evaluation includes a review of the following: The infection prevention and control goals. (See also NPSG.07.01.01, EP 2)            | <b>A</b> |
| 4. | The evaluation includes a review of the following: Implementation of the infection prevention and control plan's activities.             | <b>A</b> |
| 6. | Findings from the evaluation are communicated at least annually to leadership. (See also IC.02.01.01, EP 9)                              | <b>A</b> |
| 7. | The organization uses the findings of its evaluation of the infection prevention and control plan when revising the plan.                | <b>A</b> |

**KEY:** **A** indicates scoring category A; **C** indicates scoring category C; **2** indicates situational decision rules apply; **3** indicates direct impact requirements apply; **M** indicates Measure of Success if needed; **D** indicates that documentation is required