Outpatient Infection Control Guideline Checklist

Health System Administration Level 3



The current state of the issue

Over the past few decades, healthcare delivery has largely moved from acute inpatient facilities to outpatient and community-based settings. Proper infection control practices are essential to reduce the risk of healthcare-acquired infections.2 The Centers for Disease Control (CDC) developed minimum expectations for outpatient infection control in 2016, but emerging pathogens and the COVID-19 pandemic have highlighted the need for more robust procedures.3 These guidelines focus on infection control measures for outpatient healthcare settings. While they provide a general outline to improve infection control practices, each site must adhere to applicable regulations from the CDC, Department of Health, and their local health jurisdiction as needed.

Prevention
 Assign at least one individual with dedicated FTE trained in IPC to coordinate the outpatient setting's IPC program and continued education. Provide appropriate time off for infectious disease considering potential incubation period and infectious period (in alignment with DOH recommendations for staff exposure risk and staff shortage requirements).
Monitoring/Disease Surveillance
Consider providing point-of-care (POC) testing for patients and staff members or, if POC tests are unavailable on-site offer resources regarding where testing is available.
Minimizing Exposure
 Surveillance testing via on-site or at-home screening tests may be required to prevent and control the spread of infectious disease. Follow institutional policy or Labor and Industry guidelines about surveillance testing for employees. If a potentially infectious employee is willing to work to maintain operations, first
consider alternative work structures, such as telework. When no alternatives are

available consider allowing the infectious worker to return to work after conducting a risk assessment and minimizing exposures through proper PPE, proper hand hygiene

with alcohol-based hand sanitizer or wash hands with soap and water.

Maintain ventilation systems. Ensure physical environment is optimized in consideration of IPC, including placement, and spacing of furniture and ability to clean furniture and other shared items.

Environment of Care

Community Spread

Participate in community health and IPC meetings with local public health and
establish relationships with community organizations and public health agencies prior
to an outbreak.

Partner with community leaders and media for information campaigns.

Resources

- The Bree Report on Outpatient Infection Control is meant to supplement these resources.
- Full Bree Report on Outpatient Infection Control: www.qualityhealth.org/bree/wp-content/uploads/sites/8/2022/09/Bree-Outpatient-Infection-Control Final.pdf
- WA DOH Infection Control Assessment and Response (ICAR): www.doh.wa.gov/public-health-healthcare-providers/healthcare-professions-and-facilities/healthcare-associated-infections/infection-control-assessment-and-response
- WA DOH Notifiable Conditions: <a href="https://doi.org/do
- CDC Infection Control Self-Assessment Tools: www.cdc.gov/hai/prevent/infection-control-assessment-tools.html
- CDC Infection Control Resource Center: www.cdc.gov/infectioncontrol/index.html
- CDC Guide to Infection Prevention for Outpatient Settings:
 www.cdc.gov/hai/settings/outpatient/outpatient-care-guidelines.html
- OSHA Infectious Disease and Healthcare Workers: www.osha.gov/healthcare/infectious-diseases

Read the full Bree Report on Outpatient Infection Control online by scanning the QR code:



Connect with the Bree Collaborative at bree@qualityhealth.org