

388-97-1600 Care of residents with active tuberculosis

(1)

When the nursing home accepts the care of a resident with suspected or confirmed tuberculosis, the nursing home must: (a) Coordinate the resident's admission, nursing home care, discharge planning, and discharge with the health care provider; (b) Provide necessary education about tuberculosis for staff, visitors, and residents; and (c) Ensure that personnel caring for a resident with active tuberculosis comply with the WISHA standards for respiratory protection, chapter 296-842 WAC.

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(b)

Provide necessary education about tuberculosis for staff, visitors, and residents; and

(c)

Ensure that personnel caring for a resident with active tuberculosis comply with the WISHA standards for respiratory protection, chapter 296-842 WAC.

(2)

For a resident who requires respiratory isolation for tuberculosis, the nursing home must: (a) Provide a private or semiprivate isolation room:(i) In accordance with WAC 388-97-2480; (ii) In which, construction review of the department of health

determines that room air is maintained under negative pressure; and appropriately exhausted, either directly to the outside away from intake vents or through properly designed, installed, and maintained high efficiency particulate air (HEPA) filters, or other measures deemed appropriate to protect others in the facility; (iii) However, when a semiprivate isolation room is used, only residents requiring respiratory isolation for confirmed or suspected tuberculosis are placed together. (b) Provide supplemental environment approaches, such as ultraviolet lights, where deemed to be necessary; (c) Provide appropriate protective equipment for staff and visitors; and (d) Have measures in place for the decontamination of equipment and other items used by the resident.

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others in the facility;

(iii)

However, when a semiprivate isolation room is used, only residents requiring respiratory isolation for confirmed or suspected tuberculosis are placed together.

(b)

Provide supplemental environment approaches, such as ultraviolet lights, where deemed to be necessary;

(c)

Provide appropriate protective equipment for staff and visitors; and

(d)

Have measures in place for the decontamination of equipment and other items used by the resident.