**Section 300.697 Infection Preventionists**

A *facility shall designate a person or persons as Infection Preventionists (IP) to develop and implement policies governing control of infections and communicable diseases. The IPs shall be qualified through education, training, experience, or certification or a combination of such qualifications. The IP's qualifications shall be documented and shall be made available for inspection by the Department.* (Section 2-213(d) of the Act). The facility’s infection prevention and control program as required by Section 300.696(e) shall be under the management of an IP.

a) IPs shall complete, or provide proof of completion of, initial infection control and prevention training, provided by CDC or equivalent training, covering topics listed in subsection (b)(1) to the facility, within 30 days after accepting an IP position. Documentation of required initial infection control and prevention training shall be maintained in the employee file.

b) Effective July 1, 2022, a qualified IP candidate shall:

1) Have completed at least 19 hours of training in infection prevention and control including, but not limited to, training in the following areas:

A) Principles of Standard Precautions

B) Principles of Transmission-Based Precautions

C) Prevention of Healthcare-Associated Infections

D) Hand Hygiene

E) Environmental Cleaning, Sterilization, Disinfection, and Asepsis

F) Environment of Care and Water Management

G) Employee/Occupational Health

H) Surveillance and Epidemiological Investigations

I) Antimicrobial Stewardship

2) Have clinical work experience related to infection prevention and control in health care settings including, but not limited to, hospitals or long-term care settings.

c) A facility shall have at least one IP on-site for a minimum of 20 hours per week to develop and implement policies governing prevention and control of infectious diseases.

d) Facilities with more than 100 licensed beds or facilities that offer high-acuity services, including but not limited to on-site dialysis, infusion therapy, or ventilator care shall have at least one IP on-site for a minimum of 40 hours per week to develop and implement policies governing control of infectious diseases. For the purposes of this subsection (d), "infusion therapy" refers to parenteral, infusion, or intravenous therapies that require ongoing monitoring and maintenance of the infusion site (e.g. central, percutaneously inserted central catheter, epidural, and venous access devices).

e) A facility’s IP shall coordinate with the facility group listed in Section 300.696(c) to ensure compliance with Section 300.696.

(Source: Added at 46 Ill. Reg. 6033, effective April 1, 2022)