FISHER COUNTY HOSPITAL DISTRICT

Administration: Infection Control	Policy # 102
Subject: Statement of Authority	Reviewed/Revised: 9/2026
Written: 1998 Last revised: 06/07, 1/19, 11/22, 11/24, 8/25	Approved Medical Staff Date: 9/16/26
	Approved Governing Board: Date: 9/28/26

Infection Control Program- Authority and Responsibilities

The Infection Control Program, through the Infection Control Nurse/Preventionist, Infection Control Committee Chairperson, or designated physician member, has the authority to institute appropriate infection prevention and control measures, conduct necessary surveillance or studies, and recommend corrective actions within any department when an actual or potential risk exists to patients, employees, visitors, or others related to infection, communicable disease, or infection control practices.

When infection prevention and control actions directly affect the care or treatment of a patient, the physician or other appropriate provider responsible for the patient's care shall be notified. Notification, interventions, and follow-up shall be documented as appropriate.

Authority

As the designated Infection Control Nurse/Preventionist, **Kennedy Warner, RN**, is authorized by Fisher County Hospital District (FCHD) to implement and oversee Infection Prevention and Control activities and assigned Employee Health and Risk Management functions and to administer the applicable policies, procedures, surveillance activities, and interventions outlined within this manual.

The Infection Control Nurse/Preventionist has the authority to initiate appropriate infection prevention and control measures when an immediate or potential risk of infection or communicable disease is identified. This includes recommending or implementing Standard Precautions, Transmission-Based Precautions, isolation, or other appropriate measures based on the identified or suspected risk and in accordance with established policies, nationally recognized infection prevention guidelines, and applicable provider directions.

The Infection Control Program policies and procedures shall be developed, maintained, reviewed, and revised as necessary to remain consistent with applicable federal and state requirements, nationally recognized infection prevention and control guidelines, and FCHD policies. Policies shall be submitted through the appropriate FCHD review and approval process.

Responsibilities

The Infection Control Nurse/Preventionist is responsible for the development, implementation, monitoring, and documentation of the facility-wide Infection Prevention and Control Program. Responsibilities include, but are not limited to:

• Conducting hospital-wide surveillance for healthcare-associated infections (HAIs), communicable diseases, and other identified infection risks.

• Identifying, investigating, monitoring, and documenting infection prevention and control concerns, trends, exposures, and potential outbreaks.

• Collaborating with department managers, Medical Staff, Nursing, Laboratory, Pharmacy, Environmental Services, Quality, Employee Health, and other applicable departments regarding identified infection risks and necessary interventions.

• Monitoring compliance with infection prevention and control policies, procedures, Standard Precautions, Transmission-Based Precautions, hand hygiene, personal protective equipment, environmental cleaning and disinfection, and other established infection prevention practices.

• Initiating, recommending, and monitoring appropriate precautions or isolation measures when indicated based on a patient's known or suspected infectious condition.

• Providing or coordinating infection prevention and control education and competency-based training for employees, Medical Staff, contracted personnel, and other applicable individuals.

• Conducting follow-up of infection-related incidents, occupational exposures, and communicable disease concerns in accordance with FCHD policies.

• Coordinating Employee Health activities related to infection prevention, including applicable immunizations, screening, post-exposure evaluation, follow-up laboratory testing, and interventions related to employee communicable illnesses or occupational exposures.

• Communicating and collaborating with local, state, and federal public health authorities when required, including reporting communicable diseases and outbreaks in accordance with applicable reporting requirements.

• Collaborating with the FCHD Quality Assessment and Performance Improvement (QAPI) Program regarding identified infection prevention and control concerns, trends, corrective actions, and opportunities for improvement.

• Maintaining documentation of Infection Prevention and Control Program activities, surveillance findings, investigations, interventions, education, follow-up activities, and corrective actions as required.

Identified infection prevention and control concerns shall be addressed promptly. Corrective actions, additional monitoring, education, policy revisions, or other interventions shall be implemented when indicated. Significant findings and trends shall be communicated through the appropriate Infection Control, Quality Assurance/Performance Improvement, Medical Staff, Employee Health, Risk Management, and administrative processes as applicable.

References and Regulatory Authority

• 42 CFR § 485.640- Condition of Participation: Infection Prevention and Control and Antibiotic Stewardship Programs for Critical Access Hospitals
• Centers for Medicare & Medicaid Services (CMS), State Operations Manual, Appendix W- Survey Protocol, Regulations and Interpretive Guidelines for Critical Access Hospitals
• Centers for Disease Control and Prevention (CDC), Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings
• CDC, Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings
• CDC, Guideline for Disinfection and Sterilization in Healthcare Facilities
• Occupational Safety and Health Administration (OSHA), 29 CFR § 1910.1030- Bloodborne Pathogens
• OSHA, 29 CFR § 1910.132- Personal Protective Equipment
• OSHA, 29 CFR § 1910.134- Respiratory Protection
• Applicable Texas Department of State Health Services (DSHS) requirements regarding communicable disease surveillance, prevention, control, and reporting

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Medical Director- Dr. Lufkin Moses, DO

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Physician Supervisor- Dr. Chad White, MD

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CEO- Leanne Martinez

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Governing Board