

Q&A With The Joint Commission

COVID-19 Webinar for Ambulatory Health Care Accreditation

July 12, 2022

Today's Panel of Speakers

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Environment of Care and Life Safety

Pre-Submitted Questions

Should water bottles used for temperature regulation be stored on the same shelves as vaccines or on separate shelves in a med fridge?

Vaccination Information

Pre-Submitted Questions

What will The Joint Commission be looking for regarding vaccinations for non-deemed status surveys?

How is the COVID vaccine mandate being surveyed?

What evidence of COVID vaccinations do you expect to see during deemed status survey?

Required Documents

1. Overall COVID vaccination rate of eligible staff, excluding exempted staff
2. A list of all staff, including positions/titles, including COVID Vaccination status
3. All policies regarding health care staff COVID vaccinations
 - Policies for COVID Vaccination exemptions
 - Policies for COVID Vaccination Requirements
 - Policies for mitigation of unvaccinated staff
4. List of newly hired staff in last 60 days

Compliance Timelines

State Timelines

- Compliance timelines for Phase 1 and 2 varied based on each state's requirements
- ALL states are now in Phase 2, with the following requirements:
 - Establish and implement policies and procedures
 - Staff must be 100% vaccinated*

Current FAQ's

The following is a list of related FAQs:

[COVID-19 CMS Vaccination Requirements - Applicable Entities](#)

[COVID-19 CMS Vaccination Requirements - Applicable Staff](#)

[COVID-19 CMS Vaccination Requirements - CMS Definition of 'Fully Vaccinated'](#)

[COVID-19 CMS Vaccination Requirements - Exemptions](#)

[COVID-19 CMS Vaccination Requirements - Good Faith Efforts](#)

[COVID-19 CMS Vaccination Requirements - Required Documents, Policies and Procedures](#)

[COVID-19 CMS Vaccination Requirements - Determination of Compliance](#)

CMS 1135 Waivers

Pre-Submitted Questions

Have any of the COVID-19 (Waivers, exceptions, etc.) changed since the start of the public health emergency?

Public Health Emergency (PHE) Extension

The Department of Health and Human Services released a statement on 04/12/22 stating the PHE was extended

The renewal effective date is Saturday 04/16/22 and will last for 90 days ★

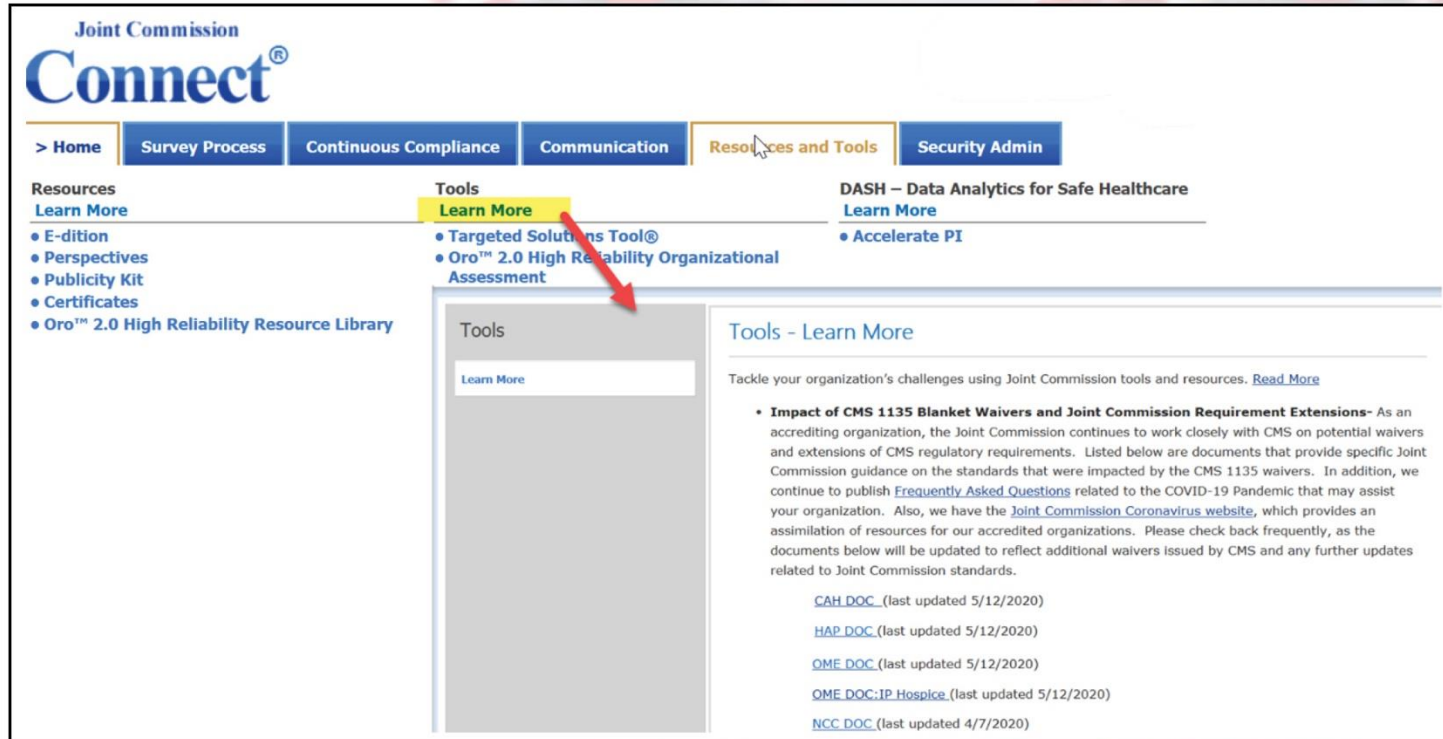
This is the ninth extension of the PHE

★ 1135 Waivers will remain in effect during the declared PHE

Pre-Submitted Questions

Would like general information on what we need at facilities regarding waivers.

Looking for more information on CMS 1135 Waivers?



The screenshot shows the Joint Commission Connect website interface. The navigation menu includes: > Home, Survey Process, Continuous Compliance, Communication, Resources and Tools (highlighted), and Security Admin. Under Resources, there is a 'Learn More' link and a list of items: E-dition, Perspectives, Publicity Kit, Certificates, and Oro™ 2.0 High Reliability Resource Library. Under Tools, there is a 'Learn More' link (highlighted with a red arrow) and a list of items: Targeted Solutions Tool@ and Oro™ 2.0 High Reliability Organizational Assessment. The 'Tools - Learn More' page content includes a 'Learn More' link in a sidebar and a main text area with the following text:

Tackle your organization's challenges using Joint Commission tools and resources. [Read More](#)

- **Impact of CMS 1135 Blanket Waivers and Joint Commission Requirement Extensions-** As an accrediting organization, the Joint Commission continues to work closely with CMS on potential waivers and extensions of CMS regulatory requirements. Listed below are documents that provide specific Joint Commission guidance on the standards that were impacted by the CMS 1135 waivers. In addition, we continue to publish [Frequently Asked Questions](#) related to the COVID-19 Pandemic that may assist your organization. Also, we have the [Joint Commission Coronavirus website](#), which provides an assimilation of resources for our accredited organizations. Please check back frequently, as the documents below will be updated to reflect additional waivers issued by CMS and any further updates related to Joint Commission standards.

[CAH.DOC](#) (last updated 5/12/2020)
[HAP.DOC](#) (last updated 5/12/2020)
[OME.DOC](#) (last updated 5/12/2020)
[OME.DOC:IP Hospice](#) (last updated 5/12/2020)
[NCC.DOC](#) (last updated 4/7/2020)

Accredited organizations can learn more by visiting **Resources and Tools > Tools > Learn More** in their *Joint Commission Connect*® extranet site.

Pre-Submitted Questions

Can ASCs accept COVID waivers from contract anesthesia providers?

Pre-Submitted Questions

Does our center require a separate Policy and Procedure manual for COVID-19 for the management of the center, or it is acceptable to append current Policy and Procedures as they apply to COVID-19?

Recovery and The Joint Commission

Frequent questions you've submitted

- Has COVID impacted surveys?
- How or when will we get a survey?
- What type of instruction have you provided to your surveyors?
- What will that survey process look like, any differences?
- What will the surveyors focus on?
- Options for avoid dates, when the survey is past due?

Onsite survey activity

Onsite survey activity has been ongoing with close monitoring of the rise of COVID-19 and impacts on survey activity.

Organizations should continue to monitor the Notification of Scheduled Events section of the Joint Commission Connect page for notification of the scheduled survey.

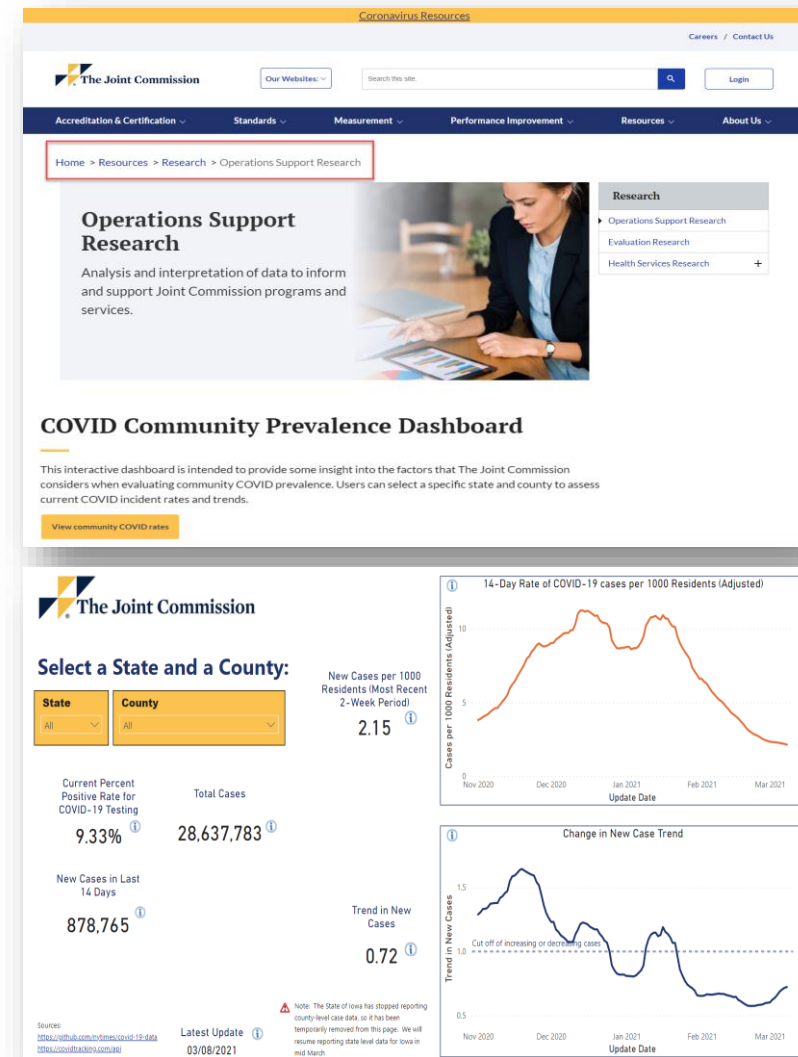
We are aware that some surveys are past their due dates, CMS is also aware – we will conduct those surveys when we are able to do so.

We are prioritizing initial and past due organizations.

How do you determine where to conduct onsite surveys?

Community Prevalence Dashboard

- Number of COVID-19 cases are lower with less impact to organizations
- Cases/thousand population and new cases within the county
- Determination that Joint Commission staff can travel to area safely and find appropriate accommodations



What instructions have been provided to our surveyors?

- **Follow the most current CDC guidelines**
- Do not travel if you are sick
- Do not travel if you have been in close contact with individuals with known or suspected COVID-19
- Avoid large crowds
- When traveling wear a mask/face covering
- Practice physical distancing
- Practice good hand hygiene

All Joint Commission Surveyors and Reviewers conducting on-site events are fully vaccinated, as defined by CDC.

What instructions have been provided to our surveyors?

- **Review and follow individual state department of health specific travel regulations****
- When onsite wearing a medical mask is required, and eye protection is encouraged
- **Follow the organizations' infection prevention and control policies for entry and use of PPE**
- Do NOT enter at risk or confirmed COVID-19 resident rooms
- Do NOT enter rooms where high-risk procedures performed
- The Joint Commission does not have a routine COVID-19 testing program for surveyors

It is expected that staff participating with the survey also comply with masking and distancing for everyone's safety until further notice.

What has changed about the survey process?

The survey process and its components will remain the same however here are some guidelines for the survey:

- Limiting the number of individuals in group sessions
- The use of audio or videoconferencing could be incorporated to safely expand the number of attendees for sessions
- Use of masks will be a routine practice
- Maximize the use of technology to eliminate the number of people needed to sit directly next to an individual for an extended period.
- Driving in separate cars to offsite locations

What will be the focus of survey activities?

- During the opening conference we will have a discussion with you about the impact of the current pandemic and your organization's response.
- We will discuss both Infection Control and Emergency Management.
 - For CMS deemed ASC surveys, compliance with staff vaccinations will be reviewed.

Infection Control Practices

Resource: Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic (updated Feb 2, 2022) <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>

Pre-Submitted Questions

Does The Joint Commission recommend a separate Pandemic Response Team, that is different from the standing Infection Prevention and Control team?

Pre-Submitted Questions

Projecting into the future - should health centers be planning to provide year-round COVID-19 vaccine and testing?

Pre-Submitted Questions

What screening for COVID is still required?

What are some ways to do staff and patient screening that would be compliant with requirements and/or recommendations?

Pre-Submitted Questions

What are the current testing recommendations for patients undergoing a procedure? Are they different for aerosol generating versus non-aerosol generating procedures? Elective versus urgent or emergent procedures?

Pre-Submitted Questions

We have patients and staff who still test positive after 10 days. How do we decide when to discontinue restrictions \ isolation after COVID infection?

Resource: Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2 <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assessment-hcp.html#:~:text=Exclude%20from%20work.,the%20time%20of%20planned%20return.>

Pre-Submitted Questions

Is Fit testing required for outpatient surgery centers if staff are wearing N95 respirators?

Resource: Understanding Compliance with OSHA's Respiratory Protection Standard During the Coronavirus Disease 2019 (COVID-19) Pandemic <https://www.osha.gov/sites/default/files/respiratory-protection-covid19-compliance.pdf>

Pre-Submitted Questions

The majority of the PPE (gowns, gloves) are discarded in the waste container in the room. With limited space in a primary care setting once exiting room, when and where should we discard the mask and eye shield?

Pre-Submitted Questions

Many places are no longer universally wearing masks. What is required versus recommended in healthcare organizations and when?

Staff and patients ask why they should wear a mask when going into a healthcare facility. What is a good way to answer the question?

CDC's [COVID-19 Community Levels](#) recommendations do not apply in healthcare settings, such as hospitals and nursing homes. Instead, healthcare settings should continue to use [community transmission rates](#) and continue to follow CDC's infection prevention and control recommendations for healthcare settings.

Pre-Submitted Questions

What are current best practices for ongoing COVID management in Ambulatory Surgery Centers?

General Questions

Pre-Submitted Questions

Keeping in mind the lack of staffing during COVID-19 pandemic for 2020 and 2021, how will Joint Commission surveyors be evaluating the organization compliant regarding staff competencies and evaluation ?

Staff Competence

HR.01.06.01:
Competence is evaluated once every 3 years or more frequently as required by the organization and/or law/regulation



Time for additional questions

Thank You

We support your efforts
in response to the
COVID-19 pandemic and
hope to provide helpful
resources

