Nursing Care Center Accreditation

COVID-19 Q & A Webinar



Panel

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Recovery and The Joint Commission

Your questions

You have asked several questions about our survey process during COVID-19:

- How has the survey process evolved over the course of the COVID-19 pandemic?
- How will overdue surveys be addressed?
- What will survey process look like, any differences?
- What type of instruction have you provided your surveyors?
- What will the surveyors focus on?



How has the survey process evolved over the course of the COVID-19 Pandemic?

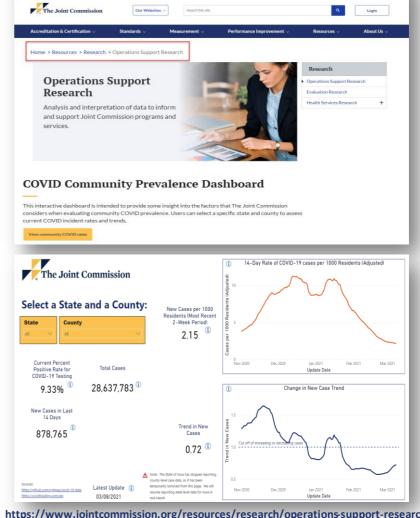
- We have returned to onsite surveys from virtual/offsite model
- We are aware that surveys are past their due dates,
 CMS is also aware we will conduct those surveys when we are able to do so
- We will prioritize initials and past due organizations
- The length of the survey has not changed



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 our 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
- Wear a mask/face covering during flights
- Practice good hand hygiene



What instructions have been provided to our surveyors?(continued)

- Review and follow individual state department of health specific travel regulations
- When onsite in the NCC wear a medical mask
- 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



What will be the focus of survey activities?

- During the opening conference, the surveyor will have a discussion with you about the impact of the COVID-19 pandemic and your organization's response
- We will discuss Infection Control, Emergency Management, and the role of leadership

Coronavirus Disease 2019 (COVID-19) Preparedness Checklist for Nursing Homes and other Long-Term Care Settings



Nursing homes and other long-term care facilities can take steps to assess and improve their preparedness for responding to coronavirus disease 2019 (COVID-19). Each facility will need to adapt this checklist to meet its needs and circumstances based on differences among facilities (e.g., patient/resident characteristics, facility size, scope of services, hospital affiliation). This checklist should be used as one tool in developing a comprehensive COVID-19 response plan. Additional information can be found at www.cdc.gov/COVID-19. Information from state, local, tribal, and territorial health departments, emergency management agencies/authorities, and trade organizations should be incorporated into the facility's COVID-19 plan. Comprehensive COVID-19 planning can also help facilities plan for other emergency situations.

This checklist identifies key areas that long-term care facilities should consider in their COVID-19 planning. Long-term care facilities can use this tool to self-assess the strengths and weaknesses of current preparedness efforts. Additional information is provided via links to websites throughout this document. However, it will be necessary to actively obtain information from state, local, tribal, and territorial resources to ensure that the facility's plan complements other computative and regional planning efforts. This checklist does not describe

COVID-19 Focused Survey for Nursing Homes

not having certain supplies (e.g., PPE such as gowns, N95 respirators, surgical masks) if they are having difficulty obtaining these supplies for reasons outside of their control. However, we do expect facilities to take actions to mitigate any resource shortages and show they are taking all appropriate steps to obtain the necessary supplies as soon as possible. For example, if there is a shortage of PPE (e.g., due to supplier(s) shortage which may be a regional or national issue), the facility should contact their healthcare coalition for assistance (https://www.phe.gov/Preparedness/planning/hpp/Pages/find-the-coalition-aspx), follow national and/or local guidelines for optimizing their current

supply or identify the next best option to care for residents. Among other practices, optimizing their current supply may mean prioritizing use of gowns based on risk of exposure to infectious organisms, blood or body fluids, splashes or sprays, high contact procedures, or aerosol generating procedures (AGPs), as well as possibly extending use of PPE (follow national and/or local guidelines). Current CDC guidance for healthcare professionals is located at: https://www.cdc.gov/coronavirus/2019-ncov/hepfndex.html. Guidance on strategies for optimizing PPE supply is located at: https://www.cdc.gov/coronavirus/2019-ncov/hepfndex.html. Guidance on strategies for optimizing PPE supply is located at: https://www.cdc.gov/coronavirus/2019-ncov/hepfndex.html. If a surveyor believes a facility should be cited for not having or providing the necessary supplies, the State Agency should contact the CMS Regional Location.

General Standard Precautions

- Are staff performing the following appropriately:
- Respiratory hygiene/cough etiquette,
- · Environmental cleaning and disinfection, and
- Reprocessing of reusable resident medical equipment (e.g., cleaning and disinfection of glucometers per device and disinfectant manufacturer's instructions for use)?

Hand Hygiene



When will the post-virtual onsite surveys be conducted?

 Specific plans are being finalized and they will be shared soon



Additional Questions

For onsite surveys, should staff/surveyors be vaccinated?

- The Joint Commission does not require surveyors receive a COVID-19 vaccine, although it is encouraged
- Many surveyors are vaccinated



We're surveyed under Hospital program for our Hospital and NCC for our long-term care: we get both surveys at the same time.

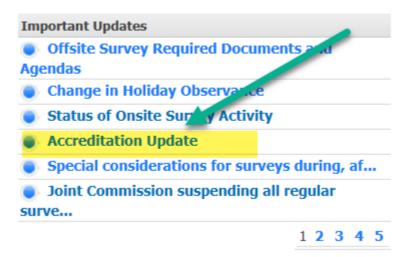
My Question: Is it possible to have 2 different surveys this time (located):on-site for hospital (Deemed) and virtual for our NCC (Not Deemed)



What is The Joint Commission doing to catch up on inspections, especially coming into Flu season on top of COVID? Has there been a timeline set for full recovery?



Status of Accreditation during COVID?







Infection Control

As our states open up, can we still require visitors to wash their hands, fill out a questionnaire about symptoms, and take their temperature? Can we require proof of vaccination?

Resource:

CMS QSO-20-39-NH REVISED 04/27/2021 Nursing Home Visitation - COVID-19 (REVISED)

https://www.cms.gov/files/document/qso-20-39-nh-revised.pdf





How soon will Nursing Care Centers be able to stop routine testing on non-vaccinated staff that refuse to be vaccinated?

Resource:

CMS QSO-20-38-NH REVISED 04/27/2021 Interim Final Rule (IFC), CMS-3401-IFC, Additional Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency related to Long-Term Care (LTC) Facility Testing Requirements and Revised COVID19 Focused Survey Tool https://edit.cms.gov/files/document/qso-20-38-nh-revised.pdf



Can a fully vaccinated dialysis patient who gets tested every other day be roomed with another resident who is fully vaccinated?

Resources:

CDC Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes Nursing Homes & Long-Term Care Facilities **last updated March 29, 2021** https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html

CDC Updated Healthcare Infection Prevention and Control Recommendations in Response to COVID-19 Vaccination **last updated April 27, 2021**https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html



If an unvaccinated resident becomes COVID positive, how long must be isolated from other vaccinated residents?

Resource:

CDC Discontinuation of Transmission-Based Precautions and Disposition of Patients with SARS-CoV-2 Infection in Healthcare Settings last updated June 2, 2021

https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html



Is electronic thermal scanning at facility entry in compliance with temperature screening requirements?

Resources:

FDA Thermal Imaging Systems (Infrared Thermographic Systems / Thermal Imaging Cameras) current as of 1/12/2021 https://www.fda.gov/medical-devices/general-hospital-devices-and-supplies/thermal-imaging-systems-infrared-thermographic-systems-thermal-imaging-cameras

Coronavirus Disease 2019 (COVID-19) Public Health Emergency current as of 4/16/2020 https://www.fda.gov/regulatory-information/search-fda-guidance-documents/enforcement-policy-telethermographic-systems-during-coronavirus-disease-2019-covid-19-public-health



What will be the major infection control components that surveyors will look for during survey?



Is there a use for finger stick antibody tests in nursing care centers?

Resource:

CMS QSO-20-38-NH REVISED 04/27/2021 Interim Final Rule (IFC), CMS-3401-IFC, Additional Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency related to Long-Term Care (LTC) Facility Testing Requirements and Revised COVID19 Focused Survey Tool

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What type of protection should be used when cleaning a regular resident room (not on precautions)?

Resources:

OSHA Bloodborne Pathogens Standard

https://www.osha.gov/bloodborne-pathogens/standards

OSHA Personal Protective Equipment

https://www.osha.gov/personal-protective-equipment



The CDC recommends cleaning high touch surfaces frequently, does that mean we have to track compliance?



If we are in "outbreak mode," how often do we need to test residents and staff?

Resource:

CMS QSO-20-38-NH REVISED 04/27/2021 Interim Final Rule (IFC), CMS-3401-IFC, Additional Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency related to Long-Term Care (LTC) Facility Testing Requirements and Revised COVID19 Focused Survey Tool

https://edit.cms.gov/files/document/qso-20-38-nh-revised.pdf



Will there be new regulations released pertaining to infection control or disaster preparedness?

Resources:

OSHA June 10, 2021 News Release

https://www.osha.gov/news/newsreleases/national/06102021

OSHA COVID Healthcare Emergency Temporary Standard

https://www.osha.gov/coronavirus/ets



Environment of Care and Life Safety

Are there any changes related to the oxygen storage signage in nursing care areas?

Are there any changes to the alcohol based prep recommendation regarding removing it from the operating room vs. 3 feet away from the patient?



What are requirements pertaining to fire alarm hardware and door releases?

Overhead paging for events such as Code Green --- what are the requirements for overhead paging?



Resources

- COVID Resources
 - https://www.jointcommission.org/covid-19/

- Standards Interpretation
 - https://www.jointcommission.org/standards/standard-faqs/



Thank You

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









