Today’s Panel of Speakers

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Environment of Care and Life Safety
Are there any ventilation requirements for behavioral health units treating a cohort of asymptomatic COVID positive patients?
CMS 1135
Waivers
Public Health Emergency (PHE) Extension

The Department of Health and Human Services released a statement on 01/14/22 stating the PHE was extended.

The renewal effective date is Sunday 01/16/22 and will last for 90 days.

This is the eighth extension of the PHE.

1135 Waivers will remain in effect during the declared PHE.
Pre-Submitted Questions

Do waivers apply to privately owned organizations or only Drug Medi-Cal or Medi-Care facilities?
Pre-Submitted Questions

What documentation are you asking to see related to COVID protocols in facility surveys?

What policies/documents will you be reviewing during survey relating to COVID?
Looking for more information on CMS 1135 Waivers?

Accredited organizations can learn more by visiting Resources and Tools > Tools > Learn More in their Joint Commission Connect® extranet site.
Vaccination Information
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
Timelines for **Original 25 States, DC and Territories**

- **1/27/2022 – 2/27/2022**
  - Establish and implement policies and procedures
  - **All staff have at least one dose of vaccine**
- **2/28/2022 – 3/27/2022**
  - Establish and implement policies and procedures
  - **Staff must be 100% Vaccinated**
**Timelines for Additional 24 States**

- **2/14/2022 – 3/14/2022**
  - Establish and implement policies and procedures
  - All staff have at least one dose of vaccine
- **3/15/2022 – 4/13/2022**
  - Establish and implement policies and procedures
  - Staff must be 100% Vaccinated*
Timelines for Texas

- **2/22/2022 – 3/20/2022**
  - Establish and implement policies and procedures
  - **All staff have at least one dose of vaccine**
- **3/21/2022 Forward**
  - 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
Infection Control Practices
Pre-Submitted Questions

What are the best practices for maintaining a COVID safe environment for clients?

Outside of enforcing staff and clients to wear masks, social distance, sanitize (surfaces & hands), and check temperatures, what are other ways to assist in keeping exposure and or COVID-19 positive cases to little or none as possible?

Resources:
Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic

CMS COVID-19 Infection Control for Psychiatric and Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID)
Pre-Submitted Questions

Are there any changes to guidance based on the prevalence of COVID variants, such as between Delta and Omicron?

Resource:
Infection Control Guidance for Healthcare Professionals about Coronavirus (COVID-19)
Pre-Submitted Questions

If other behavioral health hospitals have dedicated COVID units, is there a general layout/standard of work for isolating COVID-19 positive patients from other hospital populations?

Resources:
Infection Control Guidance for Healthcare Professionals about Coronavirus (COVID-19)

CMS COVID-19 Infection Control for Psychiatric and Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID)

SAMHSA COVID-19: Interim Considerations for State Psychiatric Hospitals
Pre-Submitted Questions

What does The Joint Commission want to see pertaining to COVID-19 management?
Pre-Submitted Questions

Where can I find guidance for managing a COVID-19 positive patient in an inpatient behavioral health setting?

Resources:
Infection Control Guidance for Healthcare Professionals about Coronavirus (COVID-19)

CMS COVID-19 Infection Control for Psychiatric and Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID)

SAMHSA COVID-19: Interim Considerations for State Psychiatric Hospitals
Pre-Submitted Questions

If a patient becomes positive during their stay, do you isolate them on the behavioral health unit or transfer them to a medical bed?
Pre-Submitted Questions

How often should you test/retest behavioral health patients?

Resource:
Overview of Testing for SARS-CoV-2, the virus that causes COVID-19
https://www.cdc.gov/coronavirus/2019-ncov/hcp/testing-overview.html#ConsiderationsScenarios
Pre-Submitted Questions

Our local health department has discontinued contact tracing for the county. Does The Joint Commission still anticipate providers will do internal contact tracing, or should we follow the lead of our local health department?
Pre-Submitted Questions

How can you address employee's fears about seeing people in person when community spread of COVID-19 in our area is in the severe risk range?
Pre-Submitted Questions

As a facility that receives a majority of our PPE from a medical supplies company through charity, what alternative masks and sanitizers should we request that lie outside the CDC’s recommendations of N95 or KN95 due to unavailability?

Resources:
Optimizing Supply of PPE and Other Equipment during Shortages


Pre-Submitted Questions

Is annual personal protective equipment training mandatory?

Resource:
OSHA Personal Protective Equipment Standard
Pre-Submitted Questions

From an accreditation standpoint, what procedures should take place if employees do not comply with an enacted COVID-19 policy?
Recovery and The Joint Commission
Frequent questions you’ve submitted

• Will I have an Onsite or Offsite (virtual) survey?
• 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?
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.
Offsite (virtual) survey

**Offsite (virtual) survey**—we are conducting offsite surveys for Disease Specific Care (DSC) and free-standing Behavioral Health Care (BHC) programs.

- We continue to monitor COVID/variant cases and retain the ability to expand to more offsite surveys for other programs if necessary; however, our primary focus is onsite surveys when possible

What is an offsite survey?

- Utilization of Secure Zoom technology for the survey and facility review accessed through the agenda on the Extranet
- Use of a secure SharePoint site for document upload to review pre-survey
- Discussions via webcam (Zoom)
- Review of processes and physical environment via mobile webcam (Zoom)
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

https://www.jointcommission.org/resources/research/operations-support-research/
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 wear a medical mask 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

**Joint Commission surveyors are designated as essential workers**
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 of time. (For example, screen sharing or projecting medical records)
• Interviewing patients and staff by telephone
• Driving in separate cars to offsite or patient homes
Survey process - continued

- We will NOT Enter at risk or confirmed COVID-19 rooms or homes.
- We will avoid visiting a unit with any confirmed COVID-19 patients when possible.
- Limited physical review of high risk and aerosol generating procedures
- Consider using a simulation and/or distant review of certain activities/procedures
- Practice social/physical distancing during the survey
- Follow “PPE” and risk reduction strategies as established by the CDC
- Limit attendance at group sessions e.g., opening, briefings, system tracers
- Limiting observers or scribes to avoid additional exposure during the survey
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.
  - The focus of our survey will not be the timeframe of the public health emergency but the current situation within your organization.
Resources

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

- Standards Interpretation
  - https://www.jointcommission.org/standards/standard-faqs/
Time For More Questions?
Thank You

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