

COVID-19 Webinar for Hospital Accreditation

# Q&A With The Joint Commission

February 25, 2021



# Panel

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# CMS 1135 Waivers

# Pre-Submitted Questions

Explain the extension of waivers.

Do we have an ETA on when waivers will end?

When can we expect to hear updates on the 1135 waivers? Will there be sufficient warning before waivers end?

# Public Health Emergency (PHE) Extension

The Department of Health and Human Services released a statement on Thursday, 01/07/21 stating the PHE was extended

The renewal effective date is Thursday 01/21/21 and will last for 90 days

This is the fourth extension of the PHE

★ 1135 Waivers will remain in effect during the declared PHE

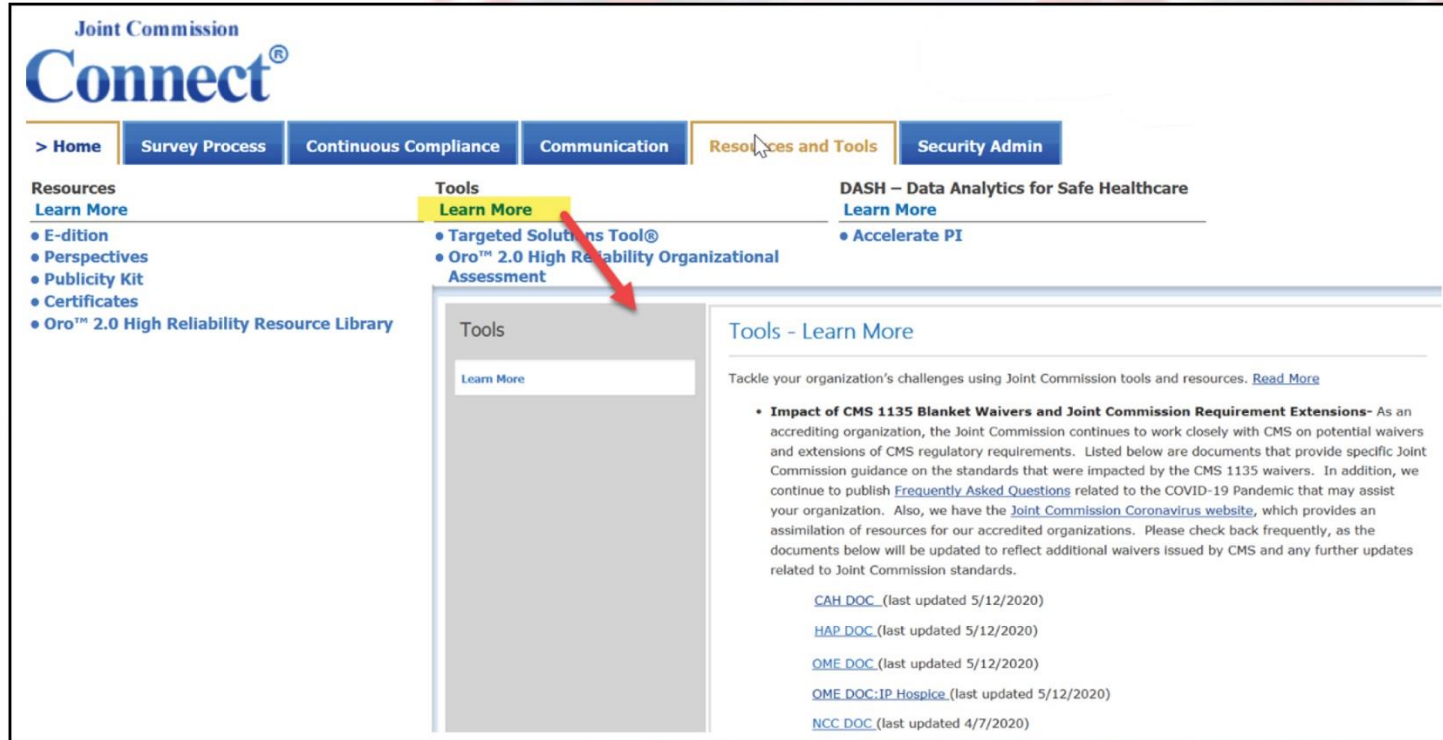
# Pre-Submitted Questions

Do you have a list of waivers which might affect survey?

Is the list of Joint Commission EPs impacted by CMS waivers up to date?

There have been so many waivers, extension of waivers and expiration of waivers, can you provide an update of what waivers are still in effect?

# Looking for more information on CMS 1135 Waivers?



The screenshot shows the Joint Commission Connect website interface. The top navigation bar includes links for Home, Survey Process, Continuous Compliance, Communication, Resources and Tools (highlighted), and Security Admin. Below this, there are three main sections: Resources, Tools, and DASH – Data Analytics for Safe Healthcare. The Tools section is highlighted with a yellow background and a red arrow pointing to the 'Learn More' link. The 'Learn More' link is also highlighted in yellow. The main content area displays the 'Tools - Learn More' page, which includes a list of tools and a detailed section on the 'Impact of CMS 1135 Blanket Waivers and Joint Commission Requirement Extensions'.

Joint Commission  
**Connect**<sup>®</sup>

> Home Survey Process Continuous Compliance Communication **Resources and Tools** Security Admin

Resources  
[Learn More](#)

- E-dition
- Perspectives
- Publicity Kit
- Certificates
- Oro™ 2.0 High Reliability Resource Library

Tools  
[Learn More](#)

- Targeted Solutions Tool@
- Oro™ 2.0 High Reliability Organizational Assessment

DASH – Data Analytics for Safe Healthcare  
[Learn More](#)

- Accelerate PI

Tools - Learn More

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*<sup>®</sup> extranet site.

# Pre-Submitted Questions

After the emergency declaration is over, what is the timeline for stopping use of the 1135 waivers?



# Pre-Submitted Questions

Are all measures implemented required to be documented in a policy?

# Pre-Submitted Questions

Are the waivers related to documentation for only the surge areas in a hospital or may the entire hospital adopt those measures? This is specifically related to the waivers in Section C of Medical Records.

# Pre-Submitted Questions

Can you explain the process of determining if the 1135 waiver actually applies to your facility?

# Pre-Submitted Questions

To utilize the 1135 waivers, must the facility have activated their emergency management plan?

Can you still use the CMS 1135 waiver if the hospital is no longer operating under its Emergency Plan?

# Pre-Submitted Questions

Have allowances been made for training/exercise in hospitals due to COVID-19 restrictions and 1135 waivers?

# Pre-Submitted Questions

Do the CMS 1135 waivers affect both deemed and non-deemed hospitals?

If there is a Joint Commission waiver and a CMS blanket waiver, which one does a deemed hospital follow?

# Pre-Submitted Questions

How will the 1135 waivers affect the survey process?

What documentation will the surveyors be looking for in relation to the CMS 1135 waivers?

# Pre-Submitted Questions

Will there be focus on waivers during the surveys?



# Pre-Submitted Questions

What will surveyors look for related to disaster credentialing?

# Pre-Submitted Questions

How will The Joint Commission survey to the QAPI and PI in general considering our pandemic?

# Pre-Submitted Questions

Review of waivers specific to consent process. What has been waived?

# General

# Pre-Submitted Questions

As we fill with COVID patients, we are having a huge problem with getting patients out of the ED to a bed. Is it OK to co-hort adult behavioral health patients that are non-violent in an area regardless of sex?

# Pre-Submitted Questions

Can you address streamlining documentation during surge periods -- I have reviewed the related FAQ -- any additional information?

# Pre-Submitted Questions

How have HR audits changed during the pandemic?

# Pre-Submitted Questions

How have requirements changed for agency and travel nursing during the COVID crisis with such high demand for temp staff?



# Pre-Submitted Questions

How will hospital at home be surveyed if that is a waiver our organization is applying?

# Pre-Submitted Questions

Please discuss HR01.01.01 EP 1, new note 5 and provide clarification and examples of expectations.

# Pre-Submitted Questions

What are the minimum expectations for telehealth visits documentation when only the provider and patient are participating? Screenings?  
Documentation a nurse would typically complete.

# Pre-Submitted Questions

What will surveyors be reviewing concerning telehealth?

# Infection Control Practices

# Pre-Submitted Questions

Is there a requirement that COVID-19 is specifically addressed in the organization's Infection Control Plan?

# Pre-Submitted Questions

What Quality Assurance and Performance Improvement project recommendations do you have specific to COVID-19 and infection control?

# Pre-Submitted Questions

Are policies expected to reflect every CDC or Department of Health change and associated citation?



# Pre-Submitted Questions

Are there specific requirements for facilities to complete COVID education, training, and competency and how should they be documented?

# Pre-Submitted Questions

Is screening for COVID-19 required for all persons who enter the facility and are there recommendations for screening and documentation?

## **Resource:**

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

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>

# Pre-Submitted Questions

What are best practices for identifying COVID-19 positive patients who come to the outpatient setting for follow-up?

**Resource:**

Healthcare Facilities: Managing Operations During the COVID-19 Pandemic

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-hcf.html#outpatient-ambulatory>

# Pre-Submitted Questions

Is there a standard that addresses PPE storage and accessibility in COVID patient care areas?

## **Resources:**

OSHA Bloodborne Pathogen Standard

<https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1030>

Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings – Standard Precautions

<https://www.cdc.gov/hicpac/recommendations/core-practices.html>

# Pre-Submitted Questions

How does double masking, wearing a mask not provided by the healthcare facility or placing a medical mask over a N95 respirator mask apply in health care?

## **Resources:**

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

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>

Improve How Your Mask Protects You

<https://www.cdc.gov/coronavirus/2019-ncov/your-health/effective-masks.html>

# Pre-Submitted Questions

What are N95 fit testing requirements?

## Resources:

OSHA Respiratory Protection

<https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.134>

OSHA Temporary Guidance Enforcement

<https://www.osha.gov/memos/2020-03-14/temporary-enforcement-guidance-healthcare-respiratory-protection-annual-fit>

<https://www.osha.gov/memos/2020-04-08/expanded-temporary-enforcement-guidance-respiratory-protection-fit-testing-n95>

# Pre-Submitted Questions

How long can N95 masks be safely used for extended use or reuse and are they different if they are reprocessed?

## **Resources:**

Optimize N95 Respirator Supplies

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/n95-other-respirators.html>

FDA Emergency Use Authorization

<https://www.fda.gov/emergency-preparedness-and-response/mcm-legal-regulatory-and-policy-framework/emergency-use-authorization#covidppe>

# Pre-Submitted Questions

What are acceptable alternatives to N95 masks, if the size that is needed is not available?

## **Resources:**

CDC Strategies for Optimizing the Supply of N95 Respirators

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy/index.html>

FDA Personal Protective Equipment EUAs

<https://www.fda.gov/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/personal-protective-equipment-euas>



# Pre-Submitted Questions

During extended use of an isolation gown, can an employee come out of the room and walk in the hallway and go to see another COVID patient without doffing?

**Resource:**

Strategies for Optimizing the Supply of Isolation Gowns

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/isolation-gowns.html>

# Pre-Submitted Questions

Is reuse of masks appropriate at conventional capacity?

**Resource:**

Strategies for Optimizing the Supply of Facemasks

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/face-masks.html>

# Pre-Submitted Questions

How does an organization determine when it is appropriate to return to normal PPE practices and discontinue PPE extended use and reuse?

**Resource:**

Optimizing Supply of PPE and Other Equipment during Shortages

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/general-optimization-strategies.html>

# Pre-Submitted Questions

Do you foresee masks becoming part of our everyday life in a healthcare facility?

When will COVID-19 isolation precautions transition to routine transmission-based precautions?

## **Resource:**

Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings – Recommendations of the HICPAC

<https://www.cdc.gov/hicpac/recommendations/core-practices.html>

# Pre-Submitted Questions

Are suspected and confirmed COVID-19 patients able to be cohorted with non-COVID patients for staffing purposes?

**Resource:**

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

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>

# Pre-Submitted Questions

What are the recommendations for discontinuing isolation for COVID-19 positive patients?

**Resource:**

Discontinuation of Transmission-Based Precautions and Disposition of Patients with COVID-19 in Healthcare Settings (Interim Guidance)

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

# Pre-Submitted Questions

What precautions are required for patients undergoing aerosol generating procedures?

**Resource:**

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

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>

# Pre-Submitted Questions

Can procedures on COVID-19 positive patients be performed in positive pressure Operating or Procedural Rooms?

## Resources:

Clinical Questions about COVID-19: Questions and Answers

[https://www.cdc.gov/coronavirus/2019-ncov/hcp/faq.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhcp%2Finfection-control-faq.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/faq.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhcp%2Finfection-control-faq.html)

ASHE OR use during COVID-19

<https://www.ashe.org/ashe-issues-recommendation-or-use-during-covid-19>



# Pre-Submitted Questions

While disinfectant supplies are still limited, is it appropriate for organizations to utilize disinfectants that are effective against targeted organisms found in the healthcare environment, but may not be approved by the manufacturer of the equipment that is being disinfected?

## **Resources:**

EPA Frequent Questions about Disinfectants and Coronavirus (COVID-19)

<https://www.epa.gov/coronavirus/frequent-questions-about-disinfectants-and-coronavirus-covid-19>

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

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>

# Pre-Submitted Questions

Can Behavioral Health hospitals or departments modify COVID-19 infection control recommendations, including the use of PPE?

**Resources:**

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

<https://www.cms.gov/files/document/qso-21-07-psych-hospital-prtf-icf-iid.pdf>

SAMHSA COVID-19: Interim Considerations for State Psychiatric Hospitals

<https://www.samhsa.gov/sites/default/files/covid19-interim-considerations-for-state-psychiatric-hospitals.pdf>

# Pre-Submitted Questions

Will standards be revised to address emerging and new infectious diseases?

# Pre-Submitted Questions

Are there any resources available to help guide the creation of an isolation unit for a surge of COVID-19 patients?

**Resource:**

Facility Planning and Operations for COVID-19

[https://www.cdc.gov/coronavirus/2019-ncov/hcp/facility-planning-operations.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhcp%2Fpreparedness-checklists.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/facility-planning-operations.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhcp%2Fpreparedness-checklists.html)

# Pre-Submitted Questions

As vaccine administration becomes more widespread have there been any recommended changes in social distancing rules?

**Resource:**

Frequently Asked Questions about COVID-19 Vaccination

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html>

# Environment of Care and Life Safety

# Pre-Submitted Questions

Are there waivers or have they relaxed the regulations for:

- temp barriers in corridors
- temp barriers blocking sprinklers
- excessive corridor clutter
- excessive PPE storage in non-hazardous areas
- fire exits

# Pre-Submitted Questions

Can we please get guidance on how to perform annual negative/positive pressure relationships with most of our systems under alteration?



# Pre-Submitted Questions

Can you please touch base on emergency drills while in a current state of disaster.

# Pre-Submitted Questions

COVID-19 has increased the amount of medical equipment, isolation carts, PAPRs, PAPR supplies and waste containers on the units. This has resulted in an increase of hallway clutter. Is there any flexibility on how this would be scored?

# Pre-Submitted Questions

Do GFI receptacles need to be tested monthly?

# Pre-Submitted Questions

EM030103 EP3 Note 1 waives "next required full-scale, community-based exercise or facility-based, functional exercise following the onset of the emergency event." Explain how this works with EOP activation >12 months (i.e. COVID).

# Pre-Submitted Questions

How do you envision our COVID response being incorporated into the Emergency Management portion of the Joint Commission survey?

# Pre-Submitted Questions

How long will time delays for Inspection, Testing and Maintenance (ITM) be reviewed after the pandemic is officially ended?

# Pre-Submitted Questions

How will survey of the physical plant, specifically patient care areas used as part of the waiver during surge high census show up on the survey?

# Pre-Submitted Questions

If we have continuous electronic monitoring devices that will alarm 24/7 for follow-up, do we still need to manually document values for temperature, humidity and pressure differentials?



# Pre-Submitted Questions

Interim life safety and NFPA 241. What's the connection and does The Joint Commission recognize the standard?

# Pre-Submitted Questions

Please confirm if The Joint Commission will start visiting business occupancy buildings as of July 1st, 2021? If so, will the life safety surveyor visit the stand alone building as well?

# Pre-Submitted Questions

Please provide information regarding using the pandemic as one of the emergency management drills. I believe that there are six topics that must be addressed.

# Pre-Submitted Questions

We have a few FSES that need to be completed, however our facility has COVID patients and we do not provide access to our consultants on the COVID units to survey the facility. Will the ITM waiver cover the FSES process and allow to be deferred?

# Pre-Submitted Questions

What documentation of deferred scheduled inspection, testing, and maintenance tasks are needed for the surveyors? Is there a recommended format or report?

# Pre-Submitted Questions

What is the process for cleaning the HVAC system and how often, regardless of COVID status, according to ASHRAE Standards?

# Pre-Submitted Questions

When an AHJ approves the use of cling wraps on elevator doors, are we good to go with the survey?  
The AHJ is the State Fire Marshal and Elevator Inspection department of our state.

# Recovery and The Joint Commission



# The Joint Commission return to survey activity

- In addition to conducting accreditation surveys and certification reviews, we have been advocating for the safety and wellbeing of healthcare workers at the highest levels of policy making.
- We want to assure you that we want to work together to reduce your risk and ours during the onsite survey process.

# Your questions

You have had a number of questions about our return to survey:

- How or when will we get a survey?
- What will that survey process look like, any differences?
- What type of instruction have you provided your surveyors?
- What will the surveyors focus on?

# When and how will survey activity resume?

- Survey activity has started in low risk areas – includes all programs
- Low risk criteria
  - Number of COVID-19 cases are lower and less impact to organizations
  - the # cases/thousand population and new cases within the county
  - Determination that our staff can travel to that area safely and find appropriate accommodations.
- In addition, your AE will contact you to determine your readiness.
- 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.
- Prioritized initials and past due organizations. We will also be looking for organizations due in the next few months that meet the low risk criteria and are currently ready for survey.

# What instructions have been provided to our field staff ?

- Do not travel if you are sick
- Do not travel if you have been in close contact with known or suspected COVID-19 patients
- When traveling they are required to wear a mask/face covering
- **Required to wear a mask on survey and follow the organizations' guidelines. The organization will provide the PPE to the surveyor as required by their policy.**
- Practice physical distancing
- Practice good hand hygiene
- Follow CDC guidelines

# 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.

# Offsite (Virtual) Survey

- **Offsite (virtual) survey**– may be scheduled for some organizations who meet eligibility criteria
- Eligible organizations will be contacted via a Qualtrics survey or other outreach from our staff (phone call or email) to confirm their ability to participate
- Offsite event is a combination of:
  - Secure Zoom technology for the survey and facility review
  - Use of a secure SharePoint site for document upload to review pre-survey
- A dry run test of technology will be conducted prior to the event
- Most offsite events will have a follow-up onsite event.

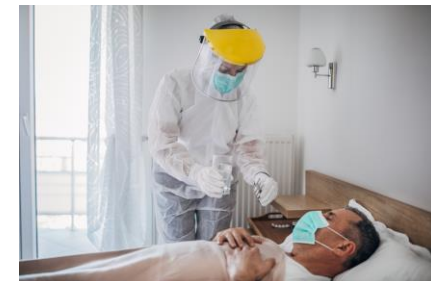


# Additional information

- We would ask that you do not provide additional avoid dates due to the difficulty in scheduling surveys – avoid dates already submitted will be honored to the extent we can do so
- Offsite/virtual activity continues to expand
- We will work with you to ensure you are ready and prepared.

# Thank You

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



# Resources

- COVID Resources

- <https://www.jointcommission.org/covid-19/>

- Standards Interpretation

- <https://www.jointcommission.org/standards/standard-faqs/>