

## COVID-19 Webinar for Disease-Specific Care Certification Q&A With The Joint Commission

#### Panel

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### Environment of Care and Life Safety

What should we expect during onsite survey for Environment of Care/Life Safety? If we have modifications due to the pandemic, how will that be scored?



What sorts of environmental controls will surveyors be looking for to prevent disease? For example: Plexiglas shields between workstations, ventilation changes, etc.



How will the learnings from the pandemic effect future building code (i.e., air flow requirements?)



The Joint Commission requires positive air flow in ORs. COVID recommendations say we should have negative airflow to reduce possible viral load being pushed out into facility. Any recommendations on this subject?



# Infection Control Practices

Do cloth masks prevent COVID-19 transmission?



Do powered air-purifying respirators (PAPRs) provide better protection against COVID-19 than an N95 respirator?



If the patient is tested for COVID and is negative, can they stop wearing a mask?



Do vaccinated staff still need to wear masks in non-clinical spaces of a healthcare facility?



How should patients be transported to procedural areas if they have COVID-19? What should the patient wear and what should the employee wear?



Will surveyors come to facilities that are on contingency capacity status for PPE due to PPE shortages?



If a patient is fully vaccinated but tests positive for COVID-19 is isolation still required? If yes, for how long?



If a patient tests negative but they clearly have COVID-19 symptoms, do we retest? What is the time interval? Can we stop isolation?



Are there any new recommendations to combat the delta strain?



If an asymptomatic patient is re-tested for COVID-19 greater than 90 days from initial onset of COVID and is positive, is isolation required?



Is entry way screening required for patients, visitors and staff or can they be phased out?



Is there any update to survey process because of the OSHA emergency temporary standard (ETS) for protecting healthcare workers from COVID-19?



What is the most common IC standard scored during the PHE?



What kind of documents do we need to have available for surveyor review to show COVID-19 compliance? Will there be a change in emphasis on surveying infection control?



Will reviewers be understanding if infection control department is behind on "normal operations" such as having policies reviewed for this year and action plans formally typed up?



### Infection Prevention References

- <u>Diagnostic Testing:</u>
  - https://www.cdc.gov/coronavirus/2019-ncov/hcp/faq.html#Testing,-Diagnosis,-and-Notification
  - https://www.cdc.gov/coronavirus/2019-ncov/testing/diagnostic-testing.html
  - https://www.cdc.gov/coronavirus/2019-ncov/lab/faqs.html#Interpreting-Results-of-Diagnostic-Tests
- **Discontinuing Isolation:** https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html
- General Infection Prevention: https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html
- N95 Respirators: https://www.cdc.gov/coronavirus/2019-ncov/hcp/n95-other-respirators.html
- **PAPR:** https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/powered-air-purifying-respirators-strategy.html#:~:text=Most%20PAPR%20components%20can%20be,resistance%20perspective%20than%20other%20respirators.
- Variants: https://www.cdc.gov/coronavirus/2019-ncov/variants/variant-info.html#Concern

#### FDA: Diagnostic Testing

• <a href="https://www.fda.gov/medical-devices/letters-health-care-providers/genetic-variants-sars-cov-2-may-lead-false-negative-results-molecular-tests-detection-sars-cov-2">https://www.fda.gov/medical-devices/letters-health-care-providers/genetic-variants-sars-cov-2-may-lead-false-negative-results-molecular-tests-detection-sars-cov-2</a>

#### OSHA Emergency Temporary Standard:

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





## Recovery and The Joint Commission



#### The Joint Commission return to review 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 review process.



#### Your questions

You have had a number of questions about our certification review process:

- Will my review be onsite or offsite?
- What will that review process look like, any differences?
- What type of instruction have you provided your reviewers?
- What will the reviewers focus on?



#### Offsite (Virtual) Review

- Offsite (virtual) review
   – for all recertification programs and initial core programs
- Organizations will be contacted via a Qualtrics survey to indicate that their program is ready to be scheduled.
- 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-review
- An Offsite Review Dry Run Resource Document is now available to support customers with links to videos to walk through the technology.



#### Onsite Review Activity

- Review activity in low risk areas <u>only</u> for Initial Advanced programs, Medication Compounding, and Integrated Care Certification
- Low risk criteria

he Joint Commission

- 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 reviews are past their due dates, CMS is also aware
   we will conduct those reviews when we are able to do so.
- Prioritizing initials and past due organizations.

#### 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 reviews and follow the organizations' guidelines. The organization will provide the PPE to the reviewer as required by their policy.
- Practice physical distancing
- Practice good hand hygiene
- Follow CDC guidelines



#### What has changed about the review process?

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

- 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 unless everyone in the car is vaccinated



#### Review 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 review
- 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 review



#### What will be the focus of review activities?

During the opening conference we will have a discussion with you about the impact of the current pandemic and your organization's response.

 The focus of our review will not be the timeframe of the public health emergency but the current situation within your organization.



Will education requirements for PSC be waived for physicians due to the pandemic? OR is there any grace for staff annual education/competencies.



How many weeks/months are the disease specific surveys behind? We are in the window for our stroke survey already and wanted to know how much notice we will we have.



Will all virtual re-certifications result in an 18 month onsite visit shortening their certification window?



For stroke, can you clarify what is required for stroke log?



Is The Joint Commission doing virtual reviews? If so, under what conditions?



In addition to the Qualtrics contact will there be any additional communication from our account representative prior to a DSC review since these are staying virtual at present?



What is the current process for Disease Specific recertification?



Will The Joint Commission force us to have a stroke survey when our COVID numbers are so high?



How delayed are DSC surveys? We are past our window for Primary Stroke by 2 months.



Interested in what exactly is needed prior to DSC Stroke recertification review especially if virtual.



How far behind are recertifications?



Will the entire re-certification survey be virtual?



When will we be notified of when our virtual survey will be?



Are there any specific documentation requirements related to the pandemic that we need to be aware of?



What changes do you see for the future for DSC with respect to COVID-19?



I am curious how COVID-19 has impacted on-site DSC recertification surveys for 2021 now that vaccines have been widely administered, and COVID positive rates are falling.



How should our organizations plan for current "windows" with the virtual surveys through the end of they year?



Have there been any changes in assessment requirements for post-thrombolytic stroke patients?



Will re-certifications be virtual or on site? Does the organization get to select their preference?



What can we expect regarding advanced certification surveys?



Will the hospital contact receive a readiness call prior to the survey? What is the timeframe for the survey after the call?



Is there comparative data to share on virtual vs. onsite surveys? What are the top 3 biggest challenges with virtual surveys so far? What are organizations' feedback on virtual surveys and can you share?



If we are outside our scheduling window for our recertification visit, does The Joint Commission send a new window? Are we allowed to update our days that we prefer The Joint Commission not come?



Can we please get specific details on exactly how to prepare for a virtual survey.



What are the new treatment options for stroke patients with COVID-19?



What is the outlook for continuing virtual DSCs in the fall/winter? Are there any updated planning tools/resources for virtual surveys?



Will The Joint Commission focus on months with surge and high hospital census?



Does the disease specific survey happen in one day?



If the patient has a stroke, then later gets COVID and dies from the infection, how is 90-day mRS to be scored?



#### COVID-19 resources

Accreditation & Certification >

Standards >

Measurement >

Performance Improvement >

Resources v

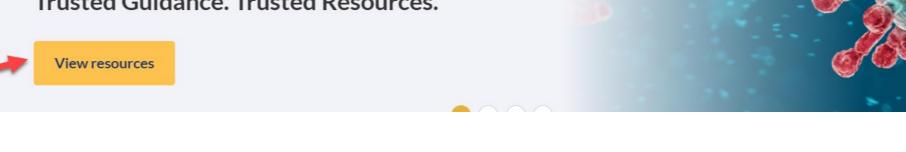
**About Us** 

#### What Your Organization Needs to Know About the Coronavirus

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Trusted Guidance. Trusted Resources.







#### Resources

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

- Standards Interpretation
  - https://www.jointcommission.org/standards/standardfaqs/



#### Thank You

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









