COVID-19 Webinar for Home Care Accreditation

Q&A With The Joint Commission

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Panel

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General Questions
Pre-Submitted Questions

Are telephone and/or video visits acceptable in providing care? Home health care providers are trying to meet the demand for care and find it helpful along with other visits to meet home care goals.
Pre-Submitted Questions

Are virtual competency assessments for RNs, aides, etc. acceptable? Please share insight on what a surveyor would expect to see with documentation.
Can physical/occupational therapies do the start of care OASIS if Nursing is also ordered?
Do you need a policy for patients that are COVID positive or rule out to accept verbal consent vs. written consent on CMS/State forms that require written signature?
Does the CMS temporary change under section 3708 of the CARES act, which allows a Medicare-eligible home health patient to be under the care of an NP or PA, also cover/apply to Medicaid (under 21) patients?
For Hospice Continuous Care, due to difficulty in staffing, can we include telehealth services to fill in gaps for continuous care?
Home health can do tele-visit for initial assessment, correct?
How should we handle our annual skills fair, educations with having the requirement for social distancing, etc.? Want to assure good infection control.
What are the HR documentation requirements on screenings, vaccinations?
In relation to the COVID-19 pandemic, do all policies have to be revised individually to address changes or will the emergency operations plan take care of identifying all changes such as infection control, environment of care?
Pre-Submitted Questions

What will survey be looking at in terms of COVID responses for visit frequencies, social work and chaplain visits, etc.?

What does The Joint Commission expect to see on Home Health & Hospice (collectively Home Care) nursing plans of care?
Recovery and The Joint Commission
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 is being conducted in low-risk areas – including Home Care

• 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.

• **Effective March 15, the AE will no longer contact organizations regarding the scheduling of an on-site event.** Organizations should continue to monitor the Notification of Scheduled Events section of the Joint Commission Connect page for notification on the first day of survey.

• 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 on-site survey process?

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

• **Practicing safe social distancing:** Limit the number of individuals in group sessions, minimize the number of staff who accompany a surveyor during tracer activities. Drive in separate vehicles to home visits. Interviewing patients and staff by telephone or virtual home visits.

• **Wearing personal protective equipment:** The surveyors are required to wear face masks, we are asking that organizations provide masks and/or other PPE to surveyors based on the organization’s policy.
What has changed about the on-site survey process?

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

• **Utilization of enhanced technology**: The goal is to maximize technology to support social distancing. This may be accomplished through screen sharing, or projection to review EMR and interviewing patients and staff.

• **Surveyors will NOT Enter** at risk or confirmed COVID-19 homes.

• Surveyor will have limited physical review of high risk and aerosol generating procedures

• Surveyor can consider using a simulation and/or distant review of certain activities/procedures.
Offsite (Virtual) Survey

- **Offsite (virtual) survey** – may be scheduled for some organizations who meet eligibility criteria
- 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.
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 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.
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.

• If an onsite survey is not possible in your area, your AE will contact your organization to determine whether the survey can be conducted off site with an onsite evaluation taking place for those who meet the follow-up requirement.
Environment of Care and Life Safety
Should I have a separate EOP for each aspect of COVID-19 response (masking, patient home entry, office safety and sanitization, etc.) or can I utilize one EOP with different sections?
Pre-Submitted Questions

Does The Joint Commission follow CMS's emergency preparedness testing exemptions during the COVID-19 PHE?
CMS 1135 Waivers
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.
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.
Can you clarify the CMS waiver that relates to performance improvement?
What are the recommendations for hospice volunteer involvement in office versus patient contact?
Infection Control
Pre-Submitted Questions

How has home care changed due to COVID? Please provide resource/guidelines for IC best practices and surveillance during COVID.

What is the specific protocol for infection control in the home?

**Resources:**
CMS QSO-20-18-HHA Revised 4/23/20

CDC: healthcare Workers: Information on COVI-19
Hierarchical Approach

- Rules and Regulations
- CoPs and CfCs*
- Manufacturers’ Instructions for Use
- Evidence-Based Guidelines and National Standards
- Consensus Documents
- Organization’s Infection Prevention and Control Policy

* For organizations that use Joint Commission accreditation for deemed status purposes or that are required by state regulation or directive, Conditions of Participation (CoPs) and/or Conditions for Coverage (CfCs) should be reviewed for applicable mandatory requirements.

Must comply with these!

Mostly your choice as to which you follow.
How to Get Your Answers!

1. Is there a State or Local MANDATE?
   a) Review Department of Health Information
   b) Understand ‘required’ vs ‘recommended’

2. Are you deemed? If so, what is the CMS requirement?

3. What EBG or clinical practice guidelines are you following?
Deciding IP Practices During COVID 19

Federal Mandate

State mandate

Local Mandate

CMS requirement (if deemed)

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

Instructions for Use

Evidence based guidelines

Consensus documents
Can you provide a list of aerosol generating procedures?

Resource:
Pre-Submitted Questions

What PPE should staff wear in COVID testing centers and COVID vaccine clinics?

Resource:
Centers for Disease Control and Prevention

COVID-19 Vaccine Training
https://www2.cdc.gov/vaccines/ed/covid19/SHVA/30010.asp
Pre-Submitted Questions

How do I dispose of PPE that was worn for the care of a COVID patient if it is not visibly soiled?

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

How can a home health agency test fit their N95 masks? I understand this is mandatory for the first time and is very different than the self-check.

Resources:
OSHA Respiratory Protection

NIOSH Healthcare Respiratory Protection Resources
https://www.cdc.gov/niosh/nptoolkit/hospresptoolkit/fittesting.html

OSHA Temporary Guidance Enforcement
What is the status of requiring N-95 mask fitting when we may not be able to acquire the mask that was fitted? How can we be in compliance?
How do we sterilize used medical masks and face shields?

Resources:
Optimize N95 Respirator Supplies

FDA Emergency Use Authorization
Please discuss details on the efficacy of mask wearing protocols in the home (N95, KN95 vs. medical grade vs cloth...caregiver only wears, client wears, family wears...).
Face mask (PPE) vs. Face Covering (Source Control)

**PPE**
- Protect from splashes, sprays, splatters, respiratory secretions
- Remove and discard after patient encounter

**Source Control**
- Cover one’s mouth and nose to prevent respiratory secretions
- Use until become soiled, damaged or hard to breathe through

Please discuss removal of PPE and leaving it at patient's house or placing it in company vehicle to dispose. Do you need to have separate COVID policy or include with Infection Control?
What QAPI project recommendations do you have specific to COVID-19 and infection control?
Pre-Submitted Questions

Can home health care agency accept patients from a hospital while patient is still COVID-19 positive?

Resource:
Do you have to wash your bedding in chlorine bleach or can you wash it with a non-chlorine bleach detergent?

Resource:
CDC Cleaning and Disinfecting Your Home
Does The Joint Commission have specific infection control protocols outlined specific to the COVID-19 pandemic for office environment, retail environment, home environment, etc.?

Resources:
CDC ‘For Specific Industries and Occupations

OSHA’s Guidance on Preparing Workplaces for COVID-19
Pre-Submitted Questions

Our policy is to disinfect clinical bags inside and out monthly or when visibly soiled. Is this acceptable during the pandemic? For a household with suspected or known COVID (and other infectious/contamination risks) we do not bring the bag in.

What disinfectant should we use?

Resource:
EPA LIST N Disinfectants for Coronavirus
https://www.epa.gov/pesticide-registration/list-n-disinfectants-coronavirus-covid-19
We service nursing homes and have employees who visit the homes. Should our testing policy be specific to us or based on each facility?

Resource:
Pre-Submitted Questions

Is it required to take temperatures of everyone entering hospitals and does this need to be tracked?

Resource:
Pre-Submitted Questions

Would The Joint Commission request temperature logs for nurses and patients?

Resource:
Pre-Submitted Questions

Does it matter when a COVID test is taken after suspected exposure?
How frequently should care givers working at homes, not facilities, be tested? Is referring care givers to CVS sites considered an acceptable procedure?
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.