COVID-19 Webinar for Ambulatory Health Care Accreditation

Q&A With The Joint Commission

August 13, 2020
Panel

Stephanie Campbell, MHA, RN
Field Director, Surveyor
Management and Development
The Joint Commission

Robert Campbell, PharmD
Director, Clinical Standards Interpretation
Hospital/Ambulatory Programs
Director, Medication Management
The Joint Commission

Sylvia Garcia-Houchins, MBA, RN, CIC
Director Infection Prevention and Control
The Joint Commission

Herman A. McKenzie, MBA, CHSP
Director of Engineering, Standards Interpretation Group (SIG)
Division of Healthcare Improvement
The Joint Commission

Diane Cullen, MSN, MBA, RN, CIC
Associate Director, Standards Interpretation Group,
Division of Healthcare Improvement
The Joint Commission

Maura Naddy, MSN, RNC-OB
Associate Director
Standards Interpretation
The Joint Commission

Jennifer Welch, MBA
Associate Director Accreditation
Accreditation and Certification Operations
The Joint Commission

Kelly McCann
Associate Director Accreditation
Accreditation and Certification Operations
The Joint Commission
Pre-Submitted Questions

Since there are anticipated drug shortages such as dexamethasone, fenatnlyl, versed and propofol, are there any exceptions to the rule of multidose vials being used as single dose vials in patient care areas?
Pre-Submitted Questions

If the ASC was temporarily shut down to serve as a COVID-19 testing center, what should be documented? What are you going to look for?
Pre-Submitted Questions

When do the 1135 Waivers expire?
Pre-Submitted Questions

Are Respiratory Therapists among the eligible health care providers being included in telehealth service provision?
Pre-Submitted Questions

If a State Health Department has delayed renewing professional licenses for up to six 6 months following the close of the current Public Health Emergency, how should this be documented in Cred. & Privileging records?
Pre-Submitted Questions

Will there be an extension on temp privilege timeframes?
Pre-Submitted Questions

Where can you find a detailed list of CMS waivers of Joint Commission Standards?
Pre-Submitted Questions

Is there a required number of times the P&T committee should meet? And would there be exceptions i.e.) eliminating/postponing one or two meetings in the pandemic?
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.
The Joint Commission Return to Survey Activity

- In addition to conducting accreditation surveys, we have been advocating for the safety and well-being 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 on-site 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 instructions 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 # of 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 Account Executive will contact you to determine your readiness.
- We are aware that surveys are past their due dates, we will conduct those surveys when we are able.
- 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 surveyors?

- 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 you are required to wear a mask/face covering
- You are required to wear a mask on survey and follow the organization’s 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/review:

- Limit the number of individuals in group sessions
- Use audio or video conferencing to safely expand the number of attendees for sessions
- Make the use of masks 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.
Survey/Review Process - Continued

- We will NOT enter an at risk or confirmed COVID-19 room. We will not visit a unit with any confirmed COVID-19 patients.
- 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)
- Limit observers or scribes to avoid additional exposure during the survey
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

- **Virtual surveys** – early surveys and initial surveys have occurred in some programs

- Virtual 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 presurvey
  - Initial surveys conducted virtually will have a follow-up survey on-site.
  - Organization is contacted to verify ability and willingness to participate
COVID-19 Resources

What Your Organization Needs to Know About the Coronavirus

Trusted Guidance. Trusted Resources.

View resources
<table>
<thead>
<tr>
<th>Resource Type</th>
<th>Update Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulatory COVID-19 Resources</td>
<td></td>
</tr>
<tr>
<td>Ambulatory Health Care</td>
<td>New Resources Added, June 23, 2020</td>
</tr>
<tr>
<td>Behavioral Health Care</td>
<td>New Resources Added, June 22, 2020</td>
</tr>
<tr>
<td>Home Care</td>
<td>New Resources Added, June 12, 2020</td>
</tr>
</tbody>
</table>
Pre-Submitted Questions

If two employees who work in the same area and turn up positive two weeks apart, what should I do in order to be compliant with Joint Commission, federal, state, and local requirements? What do I do with the rest of the employees?
Pre-Submitted Questions

After testing positive for COVID-19, when is it appropriate for a health care professional to return to the workplace?
Pre-Submitted Questions

In COVID times are there any restrictions or scheduling suggestions regarding nursing home residents requiring a medically necessary procedure?
Pre-Submitted Questions

What is The Joint Commission position on the use of plexi-glass sneeze guards? Is this a recommendation or a requirement?
Pre-Submitted Questions

What mechanisms are available to test patients for the flu and COVID at the same time? Can we rely on rapid test results?
Pre-Submitted Questions

What are ways to demonstrate that your IPC Plan & Risk Assessments are "Living Documents" reflecting situational updates related to COVID and other changes in your setting?
Pre-Submitted Questions

Looking for assistance with Air Exchange/Aerosolizing Generating Procedure Room guidelines. For example, is it required to have a wait time for air exchanges if you do not have a centralized HVAC system in a clinic setting.
Pre-Submitted Questions

Do we have to shut a room down for 2 hours after swabbing a suspected COVID or Flu patient? We are concerned with the impact on our ability to see patients come flu season.
Pre-Submitted Questions

Should elective surgeries or any aerosol generating procedures be done if COVID testing is not available for patients prior to procedure?
Pre-Submitted Questions

What are the masks requirements for non-clinical staff?
Pre-Submitted Questions

What is the best way to control transmission in closed spaces?
Pre-Submitted Questions

What are reporting requirements for ASCs to submit to NHSN and or other reporting bodies?
Screeners are not always clinical, and we are concerned about HIPAA violations. What is a good way to screen patients with a recent COVID-19 positive test who comes to the clinic for additional testing?
Pre-Submitted Questions

There are many modifications to CDC Guidance on PPE related to COVID-19, hand hygiene and disinfecting surfaces. How will The Joint Commission survey on these modifications?
We are supposed to wear N95 respirators for all aerosol generating procedures, but we cannot obtain fit testing materials – because of backorders. What do we do?
Pre-Submitted Questions

Will existing centers who were constructed prior to 2016 be cited for having an essential electrical system type 3 system?
Pre-Submitted Questions

Will existing centers who were constructed prior to 2016 be cited for having an essential electrical system type 3 system? Ambulatory Surgery Centers – Endoscopy only center.
Pre-Submitted Questions

Is it ok to use unlicensed office space or not yet licensed clinical space for video visits?
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/