COVID-19 Webinar for Nursing Care Center Accreditation

Q&A With The Joint Commission

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Panel

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The Joint Commission
Topic for Today

Today’s webinar will be focused solely on the nursing care center accreditation program related questions as they relate to COVID-19 and The Joint Commission.

For questions related to other accreditation or certification programs, please join us for those webinars.
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/review process.
Your questions

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

• How or when will we get a survey/review?
• What will that survey/review process look like, any differences?
• What type of instruction have you provided your surveyors/reviewers?
• What will the surveyors/reviewers focus on?
When and how will survey activity resume?

Survey/review 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/reviews are past their due dates, CMS is also aware – we will conduct those surveys/reviews 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/reviewers?

- 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/review and follow the organizations guidelines. The organization will provide the PPE to the surveyor/reviewer as required by their policy.**
- Practice physical distancing
- Practice good hand hygiene
- Follow CDC guidelines
What has changed about the survey process?

The survey/review process and its components will remain the same however here are some guidelines for the survey/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
Survey/Review process - continued

• We will NOT Enter at risk or confirmed COVID-19 homes or rooms.
• 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.
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 (Hospital, Behavioral, Lab, NCC, CAH and Home care)

• 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 pre survey

• Initial surveys conducted virtually will have a follow-up survey on-site.

• Organization is contacted to verify ability and willingness to participate
Pre-Submitted Questions

What is the survey process after COVID-19?
Pre-Submitted Questions

What is the status of on-site surveys in Massachusetts facilities?
Pre-Submitted Questions

Will surveyors come to facilities that are on contingency basis for PPE conservation?
CMS 1135 Waivers
Public Health Emergency (PHE) Extension

The Department of Health and Human Services released a statement on Friday, 10/02/20 stating the PHE was extended.

The renewal effective date is Friday, 10/23/20 and will last for 90 days.

This is the third extension of the PHE.

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

How do the waivers affect nursing home facilities?
Pre-Submitted Questions

What are the waivers that have ended?
Pre-Submitted Questions

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.
Infection Control
When accepting a resident from the hospital we request a negative COVID test. Is there a timeframe as to how many days prior to discharge the test is good for? 3 days, 14 days, 20 days?

CMS: QSO-20-38-NH (Aug 26, 2020) ... Testing Requirements and Revised COVID-19 Focused Survey Tool
If a person has tested negatively recently could that represent a person who had a COVID infection in late January/February? Will they continue to test negative if they already were infected?
Are we going to test all healthcare providers for at least COVID antigens? What about antibody?

Does testing apply to all staff or just direct care providers?
Pre-Submitted Questions

How long do you keep a resident in isolation when they are a new admission, tested negative in the hospital and had no signs/symptoms of COVID and were then retested after admission in 48 hours and continue with no signs or symptoms?

Is there a window limit that patient should be COVID negative before admissions; if yes how many days?
We know that there are people with asymptomatic COVID infection. In order to prevent transmission should the whole building be wearing PPE?
We have one unit with 22 beds, how would I accommodate a COVID-19 patient without having a room away from the general population?
What are the best practices for the warm zone/quarantine unit? Do we need to use plastic barriers for this hallway? What else should we be keeping in mind?
If you are working at another organization with the same infection control policies in place, do we need to quarantine/isolate for 14 days if we are exposed to a person with COVID? or is quarantine\isolation not needed?

We are concerned about not allowing family visits, there are social needs that can only be fulfilled through family visits. Are there policies or best practices for controlled visits during the COVID-19?

What resources are available to our elderly on to how to prevent social isolation?

Is it a best practice or a requirement that all staff coming within six feet of patients and/or coworkers wear face shields in addition to surgical masks?
How are\should organizations handling COVID-19 positive patients?

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/