



Health Quality Innovation Network



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Office Hours: COVID-19 Focus Survey Preparedness

April 15, 2020

Facilitators

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Chiles Healthcare Consulting, LLC

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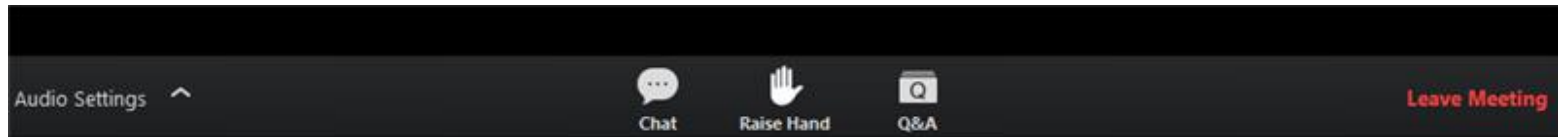
Allison Spangler, BSN, RN

RAC-CT, QCP

Quality Improvement Advisor

Logistics

- To ask questions, click on the **Q&A** icon.
- **Raise your hand** if you want to verbally ask a question.
- Resources from today's session will be posted in **Chat**.
- You may adjust your audio by clicking **Audio Settings**



Covid-19 Survey Readiness Book Overview

COVID-19 Focused Survey Readiness Book

Create a COVID-19 Survey notebook tabbed to match the Survey Entrance Worksheet and this checklist (Tab 1, 2, etc.). Utilize this checklist to prepare the documents the surveyors will request. Keeping this updated will assist you in providing these requested documents timely to surveyors.

REQUIRED DOCUMENTS	Check when placed in book	Comments:
Due IMMEDIATELY when survey initiated		
1. Current Census		
2. Alphabetical resident listing with room numbers listing any residents out of the facility		
3. List of residents confirmed of presumptive COVID-19		
4. Name of facility staff responsible for Infection Prevention and Control Program		
6. Once provided: Post signage announcing survey in high visibility areas		
7. Updated facility floor plan if changes made for COVID-19?		
Due within ONE HOUR		
8. Working schedules for Licensed and Registered Nursing staff for survey time periods		
9. List of Key Personnel, location and phone #'s. Contract staff as appropriate (Rehab)		
10. Provide each surveyor access to Medical Record: <ul style="list-style-type: none"> Completion of Electronic Health Record Information worksheet (see page 3 of this document) 		
11. Electronic Health Record: Is it available for remote access for surveyors? If no remote access allowed with your EHR evaluate for alternative options: <ul style="list-style-type: none"> Ability to fax large amounts of documents to surveyors remotely <OR> Ability to email surveyors encrypted scanned documents. 		
12. POLICIES <ul style="list-style-type: none"> Infection Prevention and Control Policies and Procedures Surveillance Plan Emergency Preparedness to include emergency staffing strategies 		

Covid-19 Survey Readiness Book Overview

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Additional documents that may be requested		
CMS – LTC Facility Assessment Tool https://qsep.cms.gov/data/252/A_NursingHome_InfectionControl_Worksheet11-8-19508.pdf		
Staff <ul style="list-style-type: none"> Entrance screening protocol Return to work screening 		
Visitor Restrictions and Exceptions process and criteria (end of life) <ul style="list-style-type: none"> Visitor Screening documentation Signage at entrances for screening and restrictions 		
Surveillance line listing for residents is up to date		
Surveillance line listings for staff is up to date		
Facility Assessment available <ul style="list-style-type: none"> Documentation of Department of Health Notification as indicated Documentation of notification to State Survey Agency as indicated per state requirement 		
QAPI Meeting at minimum of quarterly <ul style="list-style-type: none"> Validation of required members Medical Director, DON and IP attendance (reference state regulations for additional requirements) Consider recording attendance of COVID-19 calls/meetings that include critical QAPI members! 		
Education records <ul style="list-style-type: none"> Handwashing Standard and Transmission Based Precautions: including proper donning/doffing of PPE Optimizing of PPE plan activated or planned for need. Staff and resident education on COVID-19 Transfer process with notification of EMS/Acute Care of presumptive symptoms. 		
Facility Plan for PPE shortage and optimization		
Environmental Cleaning Guides		
Review your Emergency Plan for EOO24		
Prepare staff for phone or in person interviews by surveyors on COVID-19. Ex: your facility practices for standard and transmission precautions; meal service, environmental cleaning, PPE supply, activities, etc.		
CMS Memo: Prioritization of Survey Activities March 23, 2020: https://www.cms.gov/files/document/qso-20-20-all.pdf CMS COVID-19 Survey Entrance Conference Worksheet: https://cmscompliancegroup.com/wp-content/uploads/2017/08/Entrance-Conference-Form.pdf CMS LTC Facility Assessment Tool: https://qsep.cms.gov/data/252/A_NursingHome_InfectionControl_Worksheet11-8-19508.pdf CDC Strategies to Optimize PPE: https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html		

OPPORTUNITY

If you have not joined HQIN, we would like to invite you to become a member of the Network.

Benefits include access to office hours, educational events, resources and access to quality improvement experts. Please check the chat box for the link to join!

Or, contact a Quality Improvement Advisor



American Health Care

Virginia

Sharing "Off Site" COVID-19 Survey

Melisha Darnell, RN, LNHA, MBA, RAC-CT
*Vice President of Quality Improvement
and Clinical Services*

Kenneth Adkins, RN, SMQT, LNHA
Regional Nurse Consultant



Hilltop Lodge

Kansas

Sharing “On-Site” COVID-19 Survey Experience

Lori Redmond, RN
Director of Nursing

Mary Chiles, RN

Chiles Healthcare
Consulting, LLC



Question and Answers

Please place your questions in the **Q&A** section

Raise your hand to ask question verbally

Use **Chat** to share your experiences.

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CONNECT WITH US

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