

# FOCUS SURVEYS FOR COVID-19

## What's Happening In Virginia

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# QSO 20-20 – CMS Publication Date 3/23/20

- Targeted Infection Control Surveys: Federal CMS and State surveyors will conduct Targeted Infection Control Surveys of providers identified through collaboration with the Centers for Disease Control and Prevention (CDC) and the HHS Assistant Secretary for Preparedness and Response (ASPR). They will use a streamlined review checklist to minimize the impact on provider activities, while ensuring providers are implementing actions to protect the health and safety of individuals to respond to the COVID-19 pandemic.

<https://www.cms.gov/files/document/qso-20-20-all.pdf>

# Instructions for Focus COVID 19 Survey

- **This survey tool must be used to investigate compliance at F880 and determine whether the facility is implementing proper infection prevention and control practices to prevent the development and transmission of COVID-19 and other communicable diseases and infections.** Entry and screening procedures, as well as resident care guidance has varied over the progression of COVID-19 transmission in facilities. Facilities are expected to be compliant with CMS requirements and surveyors will use guidance that is in effect at the time of the survey. Refer to QSO memos released at: <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Policy-and-Memos-to-States-and-Regions>
- **For the purpose of this survey tool, “staff” includes employees, consultants, contractors, volunteers, and others who provide care and services to residents on behalf of the facility. The Infection Prevention and Control Program (IPCP) must be facility-wide and include all departments and contracted services.**

# Surveyor(s) Review for:

- The overall effectiveness of the Infection Prevention and Control Program (IPCP) including IPCP policies and procedures;
- Standard and Transmission-Based Precautions;
- Quality of resident care practices, including those with COVID-19 (laboratory-positive case), if applicable;
- The surveillance plan;
- Visitor entry and facility screening practices;
- Education, monitoring, and screening practices of staff; and
- Facility policies and procedures to address staffing issues during emergencies, such as transmission of COVID-19

# Virginia Trends from Focus COVID 19 Surveys

- As of 4/15/20
  - 41 Focus Surveys had been conducted [7 were being completed this week]
  - They are being conducted throughout the state
  - **ALL** have been conducted remotely
  - To our knowledge there has only been 1 deficiency – associated with management of soiled personal linen
  - ALL have been conducted by our state surveyors
    - There has been some variances in approach
    - There has been some variance in what information is being requested, but ALL appear to be following the CMS pathway for review

# Preparedness is KEY for a Successful Survey

- Prepare your survey ready book using the CMS COVID 19 Entrance Checklist

| INFORMATION NEEDED FROM THE FACILITY IMMEDIATELY UPON ENTRANCE*               |  |
|---|--|
| <input type="checkbox"/>  | 1. Census number   |
| <input type="checkbox"/>  | 2. An alphabetical list of all residents and room numbers (note any resident out of the facility).   |
| <input type="checkbox"/>  | 3. A list of residents who are confirmed or presumptive positive for COVID-19.   |
| <input type="checkbox"/>  | 4. Name of facility staff responsible for Infection Prevention and Control Program.  |
| ENTRANCE CONFERENCE   |  |
| <input type="checkbox"/>  | 5. Conduct a brief Entrance Conference with the Administrator.   |
| <input type="checkbox"/>  | 6. Signs announcing the survey that are posted in high-visibility areas.   |
| <input type="checkbox"/>  | 7. A copy of an updated facility floor plan, if changes have been made.  |
| INFORMATION NEEDED FROM FACILITY WITHIN ONE HOUR OF ENTRANCE*                 |  |
| <input type="checkbox"/>  | 8. The actual working schedules for licensed and registered nursing staff for the survey time period.  |
| <input type="checkbox"/>  | 9. List of key personnel, location, and phone numbers. Note contract staff (e.g., rehab services).   |
| <input type="checkbox"/>  | 10. Provide each surveyor with access to all resident electronic health records – do not exclude any information that should be a part of the resident’s medical record. Provide specific information on how surveyors can access the EHRs outside of the conference room. Please complete the attached form on page 2 which is titled “Electronic Health Record Information.”   |
| <input type="checkbox"/>  | 11. Explain that the goal is to conduct as much record review offsite as possible to limit potential exposure or transmission. Determine what information can be reviewed offsite, such as electronic medical records (EMRs), or other records and policies/procedures. If offsite review of EMRs is not possible, surveyors will request photocopies (that can be made by surveyors instead of facility staff). If the facility has an electronic health record (EHR) system that may be accessed remotely, request remote access to the EHR to review needed records for a limited period of time. If this is not an option, discuss with the facility the best options to get needed medical record information, such as fax, secure website, encrypted email, etc. |
| <input type="checkbox"/>  | 12. Facility Policies and Procedures: <ul style="list-style-type: none"> <li>• Infection Prevention and Control Program Policies and Procedures, to include the Surveillance Plan.</li> <li>• Emergency Preparedness Policy and Procedure to include Emergency Staffing Strategies</li> </ul>  |
| <b>NOTE</b> – A comprehensive review of policies should be completed offsite. |  |

| ENTRANCE CONFERENCE WORKSHEET<br>ELECTRONIC HEALTH RECORD (EHR) INFORMATION  |  |
|--|--|
| Please provide the following information to the survey team within one hour of Entrance.   |  |
| Provide specific instructions on where and how surveyors can access the following information in the EHR (or in the hard copy if using split EHR and hard copy system). Surveyors require the same access staff members have to residents’ EHRs in a read-only format. |  |
| Example: Medications   | EHR: Orders – Reports – Administration Record – eMAR – Confirm date range – Rim Report   |
| Example: Hospitalization   | EHR: Census (will show in/out of facility)<br>MDS (will show discharge MDS)<br>Prog Note – View All - Custom – Created Date Range - Enter time period leading up to hospitalization – Save (will show where and why resident was sent) |
| 1. Infections  |  |
| 2. Hospitalization   |  |
| 3. Change of condition   |  |
| 4. Medications   |  |
| 5. Diagnoses   |  |
| <b>Please provide name and contact information for IT and back-up IT for questions:</b>  |  |
| IT Name and Contact Info: _____  |  |
| Back-up IT Name and Contact Info: _____  |  |

# Preparedness is the Key Covid-19 Survey Readiness Book



Virginia

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## 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: |
|--|---------------------------|-----------|
| <b>Due IMMEDIATELY when survey initiated</b>   |                           |           |
| 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?   |                           |           |
| <b>Due within ONE HOUR</b>   |                           |           |
| 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"> <li>Completion of Electronic Health Record Information worksheet (see page 3 of this document)</li> </ul>   |                           |           |
| 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"> <li>Ability to fax large amounts of documents to surveyors remotely &lt;OR&gt;</li> <li>Ability to email surveyors encrypted scanned documents.</li> </ul> |                           |           |
| 12. POLICIES <ul style="list-style-type: none"> <li>Infection Prevention and Control Policies and Procedures</li> <li>Surveillance Plan</li> <li>Emergency Preparedness to include emergency staffing strategies</li> </ul>  |                           |           |

# CMS COVID Self-Assessment

Facilities should utilize the CMS COVID-19 Focused Survey for Nursing Homes as a self- assessment tool. Priority areas for self- assessment includes the following:

- Standard Precautions;
  - Hand hygiene
  - Use of PPE
  - Transmission-Based Precautions
- Resident care (including resident placement);
- Infection prevention and control standards, policies and procedures;
- Infection surveillance;
- Visitor entry (i.e., screening, restriction, and education);
- Education, monitoring, and screening of staff; and
- Emergency preparedness (E0024) – staffing in emergencies



# Lessons Learned

- Keep your survey ready book up to date
- Check your availability to send requested information by encrypted email or fax
- Check your availability to provide “remote” access to your medical records software
- Educate your staff across all departments, conduct practice interviews
- Keep a timeline of when you instituted/changed various precautions/systems
- Be prepared to discuss how you educated residents and families
- Be prepared to discuss your screening / monitoring for residents, staff and visitors

# Lessons Learned

- Have multiple staff knowledgeable on what to do -- remember your leaders may be out sick
- Prepare staff for the interviews with surveyor
- Be sure to be able to answer questions about your supply of PPE and how Fit Testing for the N95
- Prepare for the absolute worse
- Keep abreast of the changes; visit the VHCA website daily for the most current guidelines
- Provide requested information in a timely manner

**Thank You; Stay Well, Take Care of Yourself While Caring for Your Residents and Staff**

***The CHC Team***