



Revised FOCUS POINT NEWSLETTER – SPECIAL MARCH 5, 2020 – COVID-19

CMS has taken immediate action to address the threat and transmission of COVID-19. On 3/4/2020, they posted 3 memorandums that have direct impact to nursing facilities. The first address guidance for nursing facilities regarding infection control precautions / management. The 2nd has significant impact on survey schedules. The 3rd was directly to hospitals but included guidance on discharging residents to nursing facility and other community situations. Each of the memorandum should be read in their entirety and the most current guidance be implemented throughout the nursing facility. The memorandum may be found at:

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Policy-and-Memos-to-States-and-Regions>

Although nothing has been published specific to Assisted Living Facilities, it makes common sense that these same guidelines be adopted for precautions and protecting both residents and staff.

CMS will be posting updated FAQs in real-time at the following website:

<https://www.cms.gov/medicare/quality-safety-oversight-generalinformation/coronavirus>

QSO-20-14-NH -- Guidance for Infection Control and Prevention of Coronavirus Disease 2019 (COVID-19) in nursing homes. This memorandum provides specific guidance on the following questions.

- *How should facilities monitor or limit visitors?*
- *How should facilities monitor or restrict health care facility staff?*
- *When should nursing homes consider transferring a resident with suspected or confirmed infection with COVID-19 to a hospital?*
- *When should a nursing home accept a resident who was diagnosed with COVID-19 from a hospital?*
- *Other considerations for facilities:*
 - Review CDC guidance for Infection Prevention and Control Recommendations for Patients with Confirmed Coronavirus Disease 2019: <https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>
 - Increase the availability and accessibility of alcohol-based hand sanitizer (ABHS), tissues, no touch receptacles for disposal, and facemasks at healthcare facility entrances, waiting rooms, patient check-ins, etc.
 - Ensure ABHS is accessible in all resident-care areas including inside and outside resident rooms.
 - Increase signage for vigilant infection prevention, such as hand hygiene and cough etiquette.
 - Properly clean, disinfect and limit sharing of medical equipment between residents and areas of the facility.
 - Provide additional work supplies to avoid sharing (e.g., pens, pads) and disinfect workplace areas (nurse's stations, phones, internal radios, etc.)

QSO-20-12-All -- Suspension of Survey Activities -- Effective immediately, survey activity is limited to the following (in Priority Order):

1. All immediate jeopardy complaints (cases that represents a situation in which entity noncompliance has placed the health and safety of recipients in its care at risk for serious injury, serious harm, serious impairment or death or harm) and allegations of abuse and neglect;
2. Complaints alleging infection control concerns, including facilities with potential COVID-19 or other respiratory illnesses;
3. Statutorily required recertification surveys (Nursing Home, Home Health, Hospice, and ICF/IID facilities)
4. Any re-visits necessary to resolve current enforcement actions;
5. Initial certifications;
6. Surveys of facilities/hospitals that have a history of infection control deficiencies at the immediate jeopardy level in the last three years;
7. Surveys of facilities/hospitals/dialysis centers that have a history of infection control deficiencies at lower levels than immediate jeopardy.

QSO-20-13-Hospitals -- Guidance for Infection Control and Prevention Concerning Coronavirus Disease (COVID-19): FAQs and Considerations for Patient Triage, Placement and Hospital Discharge. Key Points for Nursing Facilities and Assisted Living. Key Points include:

- **What are the considerations for discharge to a subsequent care location for patients with COVID-19?** The decision to discharge a patient from the hospital should be made based on the clinical condition of the patient. If Transmission-Based Precautions must be continued in the subsequent setting, the receiving facility must be able to implement all recommended infection prevention and control recommendations.
- Although COVID-19 patients with mild symptoms may be managed at home, the decision to discharge to home should consider the patient's ability to adhere to isolation recommendations, as well as the potential risk of secondary transmission to household members with immunocompromising conditions. More information is available here: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-home-care.html>
- **What are the implications of the Medicare Hospital Discharge Planning Regulations for Patients with COVID-19?** Medicare's Discharge Planning Regulations (which were updated in November 2019) requires that hospital assess the patient's needs for post-hospital services, and the availability of such services. When a patient is discharged, all necessary medical information (including communicable diseases) must be provided to any post-acute service provider. For COVID-19 patients, this must be communicated to the receiving service provider prior to the discharge/transfer and to the healthcare transport personnel.