3A. Infection Control: Updates Regarding Infection Control Survey Requirements in 2023 Post-Pandemic

Presented by:

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Infection Control:

Updates Regarding Infection Control Survey Requirements in 2023 Post-Pandemic

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Program Objectives

What Does Home Care Agencies’ Infection Control Program Require to Meet the Standards?

Top Infection control deficiencies

What Does a Surveyor Focus On/Common Observations

What Areas Does a Surveyor Look at Regarding Infection Control?

What Changes are Anticipated with the End of the Pandemic?
Infection Control Program Standards

- **418.70: Home Health Condition of Participation: Infection Prevention and Control**
- The HHA must maintain and document an infection control program which has as its goal the prevention and control of infections and communicable diseases
- **3 Standards:**
  - Prevention
  - Control
  - Education
- **G-Codes 680-686**

G-Tags

- **G-680: Infection prevention and control**
- **G-682: Standard precautions:** 6 standard precautions identified by the CDC
  - Hand Hygiene
  - Environmental Cleaning and Disinfection
  - Injection and Medication Safety
  - Appropriate Use of Personal Protective Equipment
  - Minimizing Potential Exposures
  - Reprocessing of reusable medical equipment between each patient and when soiled.
G-682 Standard Precautions

▪ Hand Hygiene
  ❖ Hand Hygiene should be performed at a minimum
  ❖ Before performing an aseptic task (e.g., insertion of IV, preparing an injection, performing wound care)
  ❖ After contact with the patient or objects in the immediate vicinity of the patient
  ❖ After contact with blood, body fluids, or contaminated surfaces
  ❖ Moving from a contaminated body site to a clean body site during patient care; and
  ❖ After removal of personal protective equipment (PPE)

Surveyor Observations

▪ Hand Hygiene Observations
  ❖ Home visits: Surveyors will go with staff on home visits
  ❖ Surveyors will often ask for higher acuity patients
  ❖ This allows multiple opportunities to assess for hand hygiene
  ❖ Hand hygiene with soap and water
  ❖ Hand gel: “Gel” in between glove changes
  ❖ “Gel” before entering the bag.
  ❖ Changing gloves during care when needed
G-682 Standard Precautions/Surveyor Observations

- Environmental cleaning and disinfection
  - HHA staff have very little control over the home environment
  - HHA staff must maintain clean equipment and supplies during a home visit.
  - During transport of reusable patient care items in carrying case

- Surveyor Observations:
  - Bag technique
  - Equipment cleaning
  - Glove changes

- Injection and Medicare Safety
  - Use of aseptic technique when preparing medications
  - Not reusing needles, lancets, or syringes for more than one use on one patient
  - Not administering medications from single-dose vial to multiple patients
  - Use of fluid infusion and administration sets
  - Syringe and needle/cannula contaminated once is has been used to enter or connect to intravenous bag/set
  - Insulin pens must be dedicated for single patient use
  - Sharps disposal in compliance with state and local regulations
Surveyor Observations

- Surveyor Observations
  - Using a lancet device on multiple patients
  - Hand hygiene when doing infusion therapy
  - Not appropriate/approved sharps disposal

Standard Precautions/Surveyor Observations

- Appropriate use of Personal Protective Equipment
  - Selection of PPE is determined by the expected amount of exposure to the infectious materials
  - Selection of PPE is determined by durability of PPE
  - Selection of PPE is determined by suitability of the PPE for the task

- Surveyor Observations
  - Not wearing required PPE
Standard Precautions/Surveyor Observations

- Minimizing Potential Exposures
  - Prevention of exposure for other family members/visitors
  - Prevention of transmission by HHA staff while transporting medical specimens and medical waste such as sharps

- Surveyor Observations
  - General infection control findings such as:
  - Hand hygiene, bag technique, not utilizing gloves appropriately

Standard Precautions/Surveyor Observations

- Reprocessing of Reusable Medical Equipment
  - Cleaning and disinfecting reusable medical equipment is essential
  - Medical equipment such as blood pressure cuffs, and oximetry probes, must be cleaned and disinfected prior to use on another patient when soiled.
  - Maintain separation between clean and soiled equipment to prevent cross-contamination
  - Follow the manufacturer’s instructions for use and current standards of practice for patient care equipment transport, storage, and cleaning/disinfecting

- Surveyor Observations
  - No clean/dirty space
  - Not allowing enough waiting time for equipment drying
  - When cleaning equipment not wet enough
484.70 (b) G684 Control

- Agency must maintain a coordinated agency-wide infection control program which is an integral part of QAPI
  - Program must have a method for identifying infectious and communicable disease problems and;
  - A plan for the appropriate actions that are expected to result in improvement and disease prevention
  - Program must include surveillance, identification, prevention, control, and investigation of infectious/communicable diseases
  - HHA should observe and evaluate services from all disciplines to identify sources, track patterns, and trends
  - Establish a corrective plan for infection control

484.70 (b)(1) G684 Control cont.

- HHA must develop a method for identifying infections
  - The agencies may determine the methodology to be used
  - Analysis of surveillance data should be used to improve care practices and control infections and transmission
  - HHA must develop a corrective plan to address or prevent infections or transmission of communicable diseases.
  - Actions to facilitate improvements and disease prevention may include policy, procedure, and practice changes, education for patients/caregivers and staff
  - The development of process or outcome measures that could be used to monitor and address issues
  - HHA must evaluate and revise the plans as needed
Surveyor Observations G684

▪ Infection control program is not part of the QAPI program
▪ Infection control program does not include all the required elements
▪ Agency not tracking infections
▪ Agency is tracking infections but not analyzing or trending the data
▪ Agency not evaluating the program or setting goals based on the data collected

484.70 (c) G686 Education

▪ HHA must provide infection control education to staff, patients, and caregivers
▪ HHA staff infection control must include the following:
  ❖ Patient care equipment, job-specific infection prevention education, and training
  ❖ Written infection policies/procedures
  ❖ Training before staff allowed to perform duties/procedures
  ❖ Additional training in response to lapses
  ❖ Infection control education to staff at periodic intervals
  ❖ Education provided to patients/caregivers should be specific to the patient’s plan of care, health conditions, and learning needs
Surveyor Observations

- Infection control education not done annually for staff
- Infection control education not documented as being completed with patients/caregivers
- Infection control education not documented as being completed with patients/caregivers for home equipment such as blood glucose meters, and reusable catheters and not documented comprehension

484.70 (d) G687

- New standard during the pandemic: COVID-19 Vaccinations
- Agency must develop and implement policies/procedures so that all staff are fully vaccinated for COVID-19
- Develop policies/procedures for those granted exemption
- Develop and process for tracking and documenting
- Develop a contingency plan for staff who are not fully vaccinated and are exempt
Surveyor Observations

- Agencies did not have specific policies/procedures for COVID-19 vaccinations
- Agencies did not track and document the vaccination status of all employees
- Agency staff were not following the vaccine mandate and there were no exemptions noted

Top Infection Control Deficiencies/Best Practices

G682 Hand Hygiene and G682 Bag Technique

| Best Practices: | Frequent Supervisory visits with a focus on Infection Control Practices | Frequent in-services related to policy/procedures related to hand hygiene and bag technique | Competency at least annually | Hand Hygiene monitoring tool that captures multiple opportunities |
Addressing COVID-19 with Infection Control

Infection Control and Covid

- COVID-19: Policies and Procedures
- Surveyors looking for updated policies:
  - Transmission based precautions: Caring for a patient suspected or confirmed of having COVID-19 in the home
  - Use of appropriate PPE including storage and maintenance
  - Hand Hygiene
  - Bag technique, cleaning and disinfection activities
  - Respiratory protection plan
  - Employee health screening
COVID-19 1135 Waivers/Infection Control

- Some 1135 Waivers related to Infection Control
  - Onsite visits for home health aide supervision were waived and virtual supervision was encouraged
  - Postponing annual onsite supervisory visit by an RN or other skilled professional
  - QAPI programs were narrowed to concentrate on infection control issues during the PHE period
  - Goal was to focus efforts on aspects of care delivery most closely associated with COVID-19
  - During the period of the PHE surveyors utilized the COVID-19 Focused Infection Control Survey
  - Focus also on emergency/pandemic planning

Infection Control/COVID Survey Readiness Questions

- Does the agency have updated policies for COVID-19 and Emergency Plan and Pandemic Plan
- Hand Hygiene: Does the agency provide supplies
- Does the agency provide appropriate PPE
- How did the agency address COVID-19
- Was training provided to staff regarding PPE and prevention/control of COVID-19
- Hand sanitizer used have greater than 60% alcohol
- Staff screening process, patient screening process
Infection Control/COVID Survey Readiness

- Expect a surveyor to review a patient record who had COVID-19
- Expect a surveyor to review COVID-19 policies/procedures
- Expect a surveyor to look for education provided to staff and patients/caregivers
- Expect close observation of infection control practices: handwashing, bag technique, cleaning equipment, and response to fever, cough, sneeze, or runny nose

What Changes Post PHE

- Public Health Emergency expires May 11, 2023
- COVID-19 will still remain a public health priority
- COVID-19 vaccinations and treatments will not be affected
  - These will continue to be covered
- Coverage for COVID-19 testing will change
- Reporting of COVID-19 laboratory results will change
What Changes Post PHE

- Agencies now must update their policies related to COVID-19.
  - Changes already related to isolation requirements
  - Updated Testing recommendations
  - Updated circumstances when universal use of PPE
  - Updated recommendations for testing frequency to detect variants and address the risk of false negatives
  - Clarified that screening testing of asymptomatic healthcare workers is at the discretion of the agency/facility
  - Return to work criteria

What Changes Post PHE

- CMS will soon end the requirement for staff vaccination.
  - Vaccine requirements for Federal employees, contractors and international travelers end May 11, 2023
  - CMS will soon end the requirements for staff vaccination with more details coming.

- Do agencies still need to screen patients for COVID-19 symptoms after the PHE?
  - No clear-cut screening requirements found related post-PHE for home health patients
  - Interpretations of 484.70 related to infection control/education mention symptom screening prior to visit and every visit educate and reinforce infection control.
Summary

- Best Practices for Infection Control and Prevention must include:
- Focus on Infection Control is of great importance
  - Education, supervisory visits with a focus on infection control practices, frequent in-services, competency testing, and infection control surveillance and tracking
- COPs have not changed except for the addition of G647 regarding vaccinations. (This will change post-PHE)
  - Surveyors will still be looking for enhanced Infection Control Programs since the pandemic
  - How has the agencies adjusted their infection control program since the Pandemic?

Questions?
Thank you!
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Resources:

  - https://qsep.cms.gov/data/2505/SOM_APPENDIX_B_FOR_HHA.pdf
- ACHC Educational Resources
  - https://cc.achc.org/
- Joint Commission Resources
  - https://www.jcrinc.com/
- CDC Centers for Disease Control and Prevention
  - https://www.cdc.gov