On Monday, June 1, CMS released a memorandum (QSO-20-31-ALL), which provides performance based funding to States tied to the CARES Act and outlined survey direction for SAs. With this news also comes enhanced penalties for noncompliance with infection control related deficiencies. Additionally, the QIO’s have been refocused to provide education and training based on infection control problem areas.

QSO-20-31-ALL covers the following items:
- Focused infection control nursing home surveys (tied to states CARES Act funding)
- Survey activities
- Expanded survey activities
- Enhanced enforcement for Infection Control deficiencies
- QIO support
  - But why now????
The data from the required NHSN COVID-19 reporting from nursing homes indicates, additional immediate action is necessary to safeguard the health and safety of residents.

CARES ACT FUNDING INTERWOVEN WITH SURVEY COMPLETION

Complete infection control focused surveys by **July 31st**

1. Perform on-site surveys by **June 30th** (30 days) in homes with COVID-19 outbreaks;
2. Perform on-site surveys of any home with **three or more NEW COVID-19 suspected and confirmed cases** since the last NHSN report or one confirmed resident case in a home that was previously COVID-free;
3. Beginning FY 2021 (October 1, 2020) infection control surveys in 20% of homes.

EXPANDED SURVEY ACTIVITIES

- Complaint investigations that are triaged as Non-Immediate Jeopardy-High
- Revisit surveys of any facility with removed Immediate Jeopardy (but still out of compliance),
- Special Focus Facility and Special Focus Facility Candidate recertification surveys, and
- Nursing home and Intermediate Care Facility for individuals with Intellectual Disability (ICF/IID) recertification surveys that are greater than 15 months.

Prioritizing Providers:
- Abuse or neglect;
- Infection control;
- Violations of transfer or discharge requirements;
- Insufficient staffing or competency; or
- Other quality of care issues (e.g., falls, pressure ulcers, etc.).

Once a state has entered Phase 3 of the Nursing Homes Re-opening guidance or earlier, at the state’s discretion, States are authorized to expand beyond the current survey prioritization (Immediate Jeopardy, Focused Infection Control, and Initial Certification surveys) to include:
**No IC Deficiencies in the Last Year (Or on the Last Standard Survey):**

Cited for Non-compliance for an infection control requirement that **is not** widespread Level D & E

- Directed Plan of Correction

Cited for Non-compliance for an infection control requirement that **is** widespread Level F

- Directed Plan of Correction, Discretionary Denial of Payment for New Admissions with 45-days to demonstrate compliance with Infection Control deficiencies.

**Cited Once in the Last Year (Or on the Last Standard Survey):**

Nursing Homes cited for current non-compliance with infection control requirements that is not widespread (Level D & E)

- Directed Plan of Correction (DPOC), Discretionary Denial of Payment (DPNA) for New Admissions with 45-days to demonstrate compliance with Infection Control deficiencies, Per Instance Civil Monetary Penalty (CMP) up to $5000 (at State/CMS discretion)

Nursing Homes cited for current non-compliance with infection control requirements that is widespread (Level F)

- Directed Plan of Correction, Discretionary Denial of Payment for New Admissions with 45-days to demonstrate compliance with Infection Control deficiencies, $10,000 Per Instance CMP
CITED FOR INFECTION CONTROL DEFICIENCIES TWICE OR MORE IN THE LAST TWO YEARS (OR TWICE SINCE SECOND TO LAST STANDARD SURVEY)

Cited for Non-compliance for an infection control requirement that is not widespread Level D & E

• DPOC, Discretionary DPNA, with 30-days to demonstrate compliance with Infection Control deficiencies, $15,000 Per Instance CMP (or per day CMP may be imposed, as long as the total amount exceeds $15,000)

Cited for Non-compliance for an infection control requirement that is widespread Level F

• DPOC, Discretionary DPNA, with 30-days to demonstrate compliance with Infection Control deficiencies, $20,000 Per Instance CMP (or per day CMP may be imposed, as long as the total amount exceeds $20,000)

REGARDLESS OF PAST HISTORY...

Nursing Homes cited for current non-compliance with Infection Control Deficiencies at the Harm Level (Level G, H, I)

• DPOC, Discretionary DPNA for New Admissions with 30 days to demonstrate compliance with Infection Control deficiencies. Enforcement imposed by CMS Location per current policy, but CMP imposed at highest amount option within the appropriate (non-Immediate Jeopardy) range in the CMP analytic tool.
REGARDLESS OF PAST HISTORY...

Nursing Homes cited for current non-compliance with Infection Control Deficiencies at the Immediate Jeopardy Level (Level J, K, L)—In addition to the mandatory remedies of Temporary Manager or Termination

- DPOC, Discretionary DPNA for New Admissions with 15 days to demonstrate compliance with Infection Control deficiencies. Enforcement imposed by CMS Location per current policy, but CMP imposed at highest amount option within the appropriate (non-Immediate Jeopardy) range in the CMP analytic tool.

WHAT THE NUMBERS SAY

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<tbody>
<tr>
<td>2018 (October 1, 2017-September 30, 2018)</td>
<td>245</td>
<td>17</td>
<td>0</td>
<td>0</td>
<td>262 (50%)</td>
</tr>
<tr>
<td>2019 (October 1, 2018-September 30, 2019)</td>
<td>263</td>
<td>37</td>
<td>1</td>
<td>0</td>
<td>301 (52.8%)</td>
</tr>
<tr>
<td>2020 (October 1, 2019-June 3, 2020)</td>
<td>114</td>
<td>11</td>
<td>0</td>
<td>0</td>
<td>125 (23.8%)</td>
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**QUALITY IMPROVEMENT ORGANIZATION SUPPORT**

- Through the Quality Improvement Organization (QIO) Program, the Centers for Medicare & Medicaid Services (CMS) hosts a weekly webinar series (every Thursday, 4-5pm ET, through July 16) to provide training for infection control processes in nursing homes. ([https://qioprogram.org/nursing-home-trainings](https://qioprogram.org/nursing-home-trainings))
- Past webinars are recorded and can be accessed. Presentation slides and resources are also available.

**QIO National Nursing Home Training Series**

Missouri Quality Innovation Network (QIN)-QIOs

Contact Information:
Dana Schmitz, MS, BS
Quality Improvement Advisor
Health Quality Innovators - A Local HQIN Improvement Partner
804.289.5320 main
314.391.5538 direct
dschmitz@hqin.solutions
www.hqin.org

**RESOURCES**

- Infection control is here to stay, so what can we do to sustain compliance?
  - Plan, plan, plan and be prepared!
  - Use the tools and resources we have been given:
    - CMS/CDC Guidance, checklist and toolkits
    - Networking—Ask your peers what they are doing and share your successes with each other.


**COVID-19 Healthcare Planning Checklist:**

Coronavirus Disease 2019 (COVID-19) Preparedness Checklist for Nursing Homes and other Long-Term Care Settings:

Toolkit on State Actions to Mitigate COVID-19 Prevalence in Nursing Homes:

Survey Resources:
[https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Nursing-Homes](https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Nursing-Homes)
COVID-19 FOCUSED SURVEY FOR NURSING HOMES

- Policies on Infection Control
- Handwashing
- Donning and Doffing PPE
- Asking residents if they have been updated on the home’s status.

LTC INFORMATION UPDATE: JUNE 2, 2020

NHSN-MISSOURI GROUP REQUEST AND DATA ENTRY

Once you have completed the NHSN enrollment process and received your acceptance notification from NHSN, you can login to the NHSN site to:

1. Access the COVID-19 Module within the Long-Term Care Component
2. Join the Missouri Group
3. Confer rights to grant the state health department access to your facility’s information.

CONFER RIGHTS

- The document is titled: NHSN Data Sharing: Joining a Group and Accepting the Confer Rights Template.
- Please use the following information to join the Missouri group:
  - Group ID: 20503
  - Use password: MHIRS29
HOW NURSING HOMES WILL RECEIVE IMPORTANT INFORMATION FROM CMS

CMS will utilize the CASPER Shared folders to communicate important information regarding findings of noncompliance with the requirement to report COVID-19 data to the Centers for Disease Control and Prevention (CDC) through the National Healthcare Safety Network (NHSN). This includes the CMS 2567 and Enforcement Notices. You will not receive a notice if you are found in compliance with the reporting requirement.


IMPORTANT DATES

- 31 May: Nursing home for failing to report
- 30 Jun: FY 2020 Focused Infection Control survey
- 7 Jun: Check your CASPER Shared Folder
- 31 Jul: 100% Completion of Infection Control focused surveys
- 1 Oct: FY 2021 Focused Infection Control Survey
- Nursing homes with previous COVID-19 Outbreaks: Cumulative confirmed cases/bed capacity at 10% or greater OR cumulative confirmed cases plus suspected cases at 20% or greater bed capacity OR ten or more COVID-19 related deaths
- 20% of nursing homes based on state discretion or additional data
CDC YOUTUBE VIDEOS FOR LTCF

- Hand Washing -
  https://www.youtube.com/watch?v=xmYMUly7qIE&feature=youtu.be&deliveryName=425-DM27411

- Monitoring Residents -
  https://www.youtube.com/watch?v=1ZbT1Njv6xA&feature=youtu.be&deliveryName=425-DM27411

- How to keep it out -
  https://www.youtube.com/watch?v=7srwrF9MGdw&feature=youtu.be&deliveryName=425-DM27411

- Proper use of PPE -
  https://www.youtube.com/watch?v=YYTATw9yav4&feature=youtu.be&deliveryName=425-DM27411

- Cleaning surfaces -
  https://www.youtube.com/watch?v=t7OH8ORr5lg&feature=youtu.be&deliveryName=425-DM27411

PPE CDC STRATEGIES FOR OPTIMIZING THE SUPPLY

- Strategies for Optimizing the Supply of Eye Protection
- Strategies for Optimizing the Supply of Facemasks
- Strategies for Optimizing the Supply of Isolation Gowns
- Strategies for Optimizing the Supply of N95 Respirators
- CDC PPE burn rate calculator to anticipate PPE needs
USEFUL LINKS

• CDC guidance for nursing home safety and preparedness during this pandemic, visit: https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html

• Information on COVID-19 per DHSS, visit: https://health.mo.gov/living/healthcondiseases/communicable/novel-coronavirus/ltcf.php


• Terms and Conditions of the Relief Fund: https://www.hhs.gov/coronavirus/cares-act-provider-relief-fund/terms-conditions/index.html

QUESTIONS, SHARE YOUR STORIES, WHAT ELSE CAN WE HELP YOU WITH?

Resources are available at:

• QIPMO
• MO DHSS
• MO DHSS Regional Emergency Contact Numbers
• MHCA
• CDC
LET US KNOW HOW WE CAN HELP

• Evaluations

LTC LEADERSHIP COACHES

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Nursing Home Help
We can do virtual visits via zoom!