

# COVID-19 Focused Survey Protocol

## Prior to Survey

Surveyors should have access to this protocol and survey tool on every survey in the event infection control concerns are identified while in the facility.

- This survey protocol should be used in the following ways:
  - Facilities **with** COVID-19: This survey protocol provides surveyors with a tool for a focused review of the critical elements associated with the transmission of COVID-19, will help surveyors to prioritize survey activities while onsite, and identify those survey activities which can be accomplished offsite. These efficiencies will decrease the potential for transmission of COVID-19, as well as lessen disruptions to the facility and minimize exposure of the surveyor. Surveyors should be mindful to ensure their activities do not interfere with the active treatment or prevention of transmission of COVID-19.
  - Facilities **without** COVID-19: In facilities with no active cases of COVID-19, the use of this survey protocol and focused review tool will help identify and correct deficient practices in order to prevent the transmission of the virus.
  - **Data used to determine facility compliance at F884 is only available to the CMS locations. F884 will only be cited by CMS Federal Surveyors.**
- If the survey team plans to enter a facility with an active COVID-19 case, or identifies an active COVID-19 case after entering a facility, the survey team should contact their State Survey Agency (SSA), the state health department, and CMS Regional Location to coordinate activities for these facilities. For example, in certain cases, the focused survey protocol can be used to investigate noncompliance and ensure the facility has taken steps to prevent transmission. In other cases, the agencies may ask the survey team to delay the survey until the health department or CDC has assessed the situation. As surveyors may enter a facility with confirmed or suspected COVID cases, or a facility requiring certain PPE in order to enter, SSAs should ensure surveyors have needed personal protective equipment (PPE) that could be required onsite.
- Refer to latest CDC guidance on use of Personal Protective Equipment at: <https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>
- Ensure surveyors are:
  - Medically cleared; and
  - Trained in the proper use of respirators, safe removal and disposal, and medical contraindications to respirator use.

## Offsite Preparation

- Create a survey shell. Under Survey Properties:
  - **When conducting a complaint investigation the SA will code the Type of Survey in ACO as A=complaint and U=COVID-19**
    - **The extent (if needed) should be marked as E=abbreviated survey**
  - **When conducting a Focused COVID-19 survey the SA will code the Type of Survey as U=COVID-19 (M will automatically be marked)**
    - **The extent (if needed) should be marked as E=abbreviated survey**
- ***\*There should be no offsite surveys coded in ACO.***
- Limit the team to one or two surveyors.
- Conduct offsite planning based on available information from:
  - Facility-reported information;
  - CDC, state/local public health information if available (in some cases CDC or public health will have gone onsite prior to the SA/CMS);

## COVID-19 Focused Survey Protocol

- Available hospital information regarding patients transferred to the hospital; and/or
- Complaint allegations.
- Identify surveyors who are remaining offsite to receive information from the surveyors or facility staff while onsite. List key survey activities that will be conducted onsite and offsite, with a plan for doing as much offsite as possible. For example:
  - For onsite activities:
    - Prioritize observations to key areas and activities related to infection control;
    - Identify interviews that need to be conducted onsite, and make arrangements for those that can be conducted offsite telephonically; and
    - Identify the records that need to be reviewed onsite, and those that can be sent for offsite review.
  - For offsite activities:
    - Medical record reviews;
    - Telephonic interviews, such as:
      - Surveillance policies
      - First onset of symptoms
      - Communication to facility leaders and health officials
      - Resident, representatives and families (if feasible, otherwise conduct onsite);
    - Facility Policy/Procedure Reviews (e.g., Infection Control and Prevention Program, Emergency Preparedness Plan); and
    - Review communication(s) to residents, representatives and families (e.g., listserv, newsletter, etc.).
- Surveyors should add the following to their desktop:
  - COVID-19 Focused Survey Protocol
  - COVID-19 Focused Survey
  - Surveyor Resources folder
- Refer to and review latest CDC guidance on use of personal protective equipment and Standard and Transmission-Based Precautions based on the CDC Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 (COVID-19) in Healthcare Settings at the following link: <https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>

### Entrance Conference

- Notify the Facility administrator of the limited nature of the COVID-19 focused survey:
  - Prioritize observations on day one; and
  - Complete remaining observations and interviews on day two.
- Follow the COVID-19 Entrance Conference worksheet to request information.

### Onsite Survey Activities

- Adhere to Standard and Transmission-Based Precautions and refer to the CDC Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 (COVID-19) in Healthcare Settings.
- Refer to the COVID-19 focused survey to guide your investigation and make

## COVID-19 Focused Survey Protocol

compliance determinations.

- Identify onsite assignments for activities, such as:

Resident Care Observations:

- Hand hygiene practices
- Proper use/discarding of PPE
- Cleansing medical equipment
- Effective Transmission-Based Precautions

Environmental observations:

- Signage at entrances and resident rooms
- Screening (staff at shift change, entrances, limiting nonessential staff)
- Hand hygiene stations

Interviews with relevant staff:

- Policy/Procedure knowledge
- Surveillance for sign/symptoms
- Notifying local health officials
- Information provided to residents, their representatives, and families concerning COVID-19 activity in the facility
- NOTE: Identify and arrange for interviews that can be done telephonically offsite.

- Document your investigation on the electronic version of the COVID-19 focused survey and/or electronic or paper-based surveyor notes worksheets.
- While the primary focus is COVID-19, you should investigate any other areas of potential noncompliance where there is a likelihood of immediate jeopardy. Follow the interpretive guidance and CE pathways relevant to the area of concern.
- Be alert to situations that may create a likelihood for serious injury, harm, impairment, or death, use guidance in Appendix Q and complete an IJ Template.
- Determine what information can be reviewed offsite (e.g., electronic medical records, EP plan for staffing and other policies or photocopies). NOTE: Surveyors should limit photocopies to only those records necessary for confirming noncompliance or to support findings of deficient practice.

### Concluding the Survey

- Conduct any survey exit discussion with the facility by telephone (unless requested in person by facility).
- Draft the CMS-2567 offsite. If citing for noncompliance related to COVID-19, the surveyor(s) must include the following language at the beginning of the Deficient Practice Statement or other place determined appropriate on the Form CMS-2567: “Based on [observations/interviews/record review], the facility failed to [properly prevent and/or contain – or other appropriate statement] COVID-19.”