Nursing Home Checklist for QIO Outreach in COVID-19 Hotspots
07/2020

1. **Ensure the contact information for key entities is up to date for support, guidance, or emergency assistance.** Examples of key entities include:
   a. The health department, or state emergency management agency
   b. State survey agency
   c. Office of long term care ombudsman.
   d. Quality Improvement Network/Quality Improvement Organization
   e. Nursing home industry association state chapter
   f. Hospitals:
      i. Those that discharge residents to the nursing home
      ii. Those that the nursing home transfers emergency cases to

2. **Perform self-assessments to ensure the facility is prepared to prevent the spread of COVID-19:**
   - ➢ CMS Infection Control Focused Survey
   - ➢ CDC Infection Prevention and Control Assessment Tool for Nursing Homes Preparing for COVID-19

   Key areas to address:
   - Visitation policies: Nursing homes should be in the highest level of visitation restriction.
   - Screening: Ensure effective screening of all residents (daily) and staff (each shift).
   - Testing: Adhere to CDC or state recommended testing regimen.
   - Cohorting plan: Create areas to cohort COVID-19 positive, COVID-19 negative, and residents with an unknown COVID-19 status (e.g., new admissions).
   - Staff assignment: Use consistent assignment to assign staff based on cohorting area (avoid using staff across different types of residents' COVID-19 status).
   - Staffing contingency plan: A plan to ensure adequate staffing for vacancies caused by staff infection or staff who are in a high-risk category.
   - Medical oversight: Ensure consistent accessibility of the medical director and access to physician services 24 hours a day.
   - Supplies:
      o Personal Protective Equipment (PPE): Ensure adequate supply and that all staff are properly trained to use PPE.
      o Hand and surface hygiene (alcohol-based hand rubs, disinfectant for medical equipment and other surfaces).
      o Screening supplies (thermometers)
   - Communication plan:
      o Families/Ombudsman: Ensure an efficient method of communicating the status of the facility to families and ombudsman.
      o Hospitals: Ensure hospitals are aware of the facility's COVID-19 and cohorting status (e.g., whether a facility has been designated a COVID-19 positive facility).
   - Training: Ensure all staff are trained in the appropriate infection control and prevention practices (e.g., screening process, implementing transmission-based precautions, etc.). Contact state health department, HAI coordinator, or CMS Quality Improvement Networks (QIN)/Quality Improvement Organization (QIO).

- Staff have been trained in COVID-19 prevention procedures for when they are not at work
- Resident care:
    - Ensure residents' needs are throughout COVID-19 mitigation efforts.
    - Maintain safe infection prevention practices among residents (e.g., social distancing, face coverings, hand hygiene, etc.)
    - Facilitate virtual visits between residents and their loved ones.
- CDC National Healthcare Safety Network (NHSN) Reporting: Ensure timely and accurate reporting of COVID-19 information through the CDC's NHSN system.
- NH communicated with local hospitals to discuss D/C planning, ensuring that patients to be transferred from hospital to NH have been tested
- Have a vaccination plan, both for influenza, and for a possible COVID vaccine in 2021

3. **Ensure each Nursing Home's compliance with Federal guidance:**

   a. Restricting visitors
   b. Testing all residents and staff
   c. Maintaining separate areas for residents with confirmed or suspected COVID-19
   d. Participated in the QIO training program for infection control
   e. Staff have been trained in COVID-19 prevention procedures for when they are not at work
   f. NH communicated with local hospitals to discuss D/C planning, ensuring that pts to be transferred from hospital to NH have been tested
   g. NH communicated with local hospitals to discuss a "hospital without walls" whereby separate facilities are created for pts with suspected or confirmed COVID-19
   h. NH established a method or system through which it can facilitate virtual or telephonic visitation between residents and family, friends, ombudsmen, and others

4. **Review CMS' best practices toolkit for states and NH.**

5. **Review state guidance, including for phased reopening.**

6. **Other resources:**
   a. CDC website: [Preparing for COVID-19 in Nursing Homes](#)
   b. CMS [Guidance for Infection Control and Prevention of Coronavirus Disease 2019(COVID-19) in Nursing Homes](#) and [FAQ](#)
   c. CMS [Reopening recommendations](#)