



GREATER NEW YORK HEALTH CARE FACILITIES ASSOCIATION

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MEMO 24-05

TO: Administrator, DON, Infection Preventionist and Department Heads

FROM: Mary Gracey- White RN, BSN, QCP Director of Regulatory Compliance

DATE: February 15, 2024

RE: NYS DOH Provider Association Meeting

GNYHCFA participated in NYSDOH/Provider Association meeting on February 15, 2024. Key points are outlined below.

I. Updates/Feedback on required NYSDOH Infection Control Surveys:

NYSDOH is continuing to send out approximately 100 requests for IC Survey completion to facilities monthly. Initial feedback is positive with some areas for facilities to review to ensure compliance including:

- Ensuring cohorting policy identifies what facility policy is for cohorting residents and staff during a communicable disease such as Covid-19
- Uploading PPE invoice(s) if available
- Uploading line listing toll used by facility during outbreak(s)
- How facility communicates to staff and residents regarding outbreaks
- Identifying that the Infection Preventionist as the lead with your Team in implementing your Infection Prevention and Control Program

II. Quarterly Most frequent Citations:

- **F812 - Food safety requirements:** Discussion included that food safety is considered to potentially affect all residents therefore it is classified as a widespread scope/severity citation resulting in higher points that impacts Facility Star Rating.
 - We recommend working with Dietary, Maintenance, Housekeeping and Administration to audit kitchen sanitation, cleanliness, repair, and preparation practices.
- **F880 - Infection Control:** There have not been any harm level citations but continued citations relating to hand hygiene, wearing gloves in hallways, disinfection of blood pressure cuffs between residents.
- **F584 - Clean, Safe Homelike Environment:** issues regarding overbed tables, broken blinds. This can also be a widespread citation adding higher points to survey rating.

- Recommend Facility Team conduct room rounds to ensure residents safe and comfortable environment.
- **F761** - Storage of Drugs and Biologicals involving expired medications and ensuring medication available.
- **F609 – Reporting:** Although this citation is less prevalent than in 2023 it continues to be an issue where facilities do not report all “alleged “abuse within 2 hours as required. This has potential for harm level citation.
 - The Department acknowledged that cases may be unsubstantiated, but reporting is still required for all allegations of abuse.
- **F689 - Accidents and Supervision:** This includes citations relating to resident accidents/injuries, smoking and elopement and there have been citations at IJ level.
 - Facilities should ensure maintenance checks all alarms, including exit doors etc. to ensure they are functioning and audible. Facilities with Smoking programs need to ensure safe smoking practices.
- **F656 - Developing Care Plan:** Review Care plan policies to ensure individualized care plans are developed, implemented, and evaluated with revisions as needed.
- **F610- Alleged Violations-Investigate/Prevent/Correct:** Facilities need to conduct and document a thorough investigation of violations that includes protecting residents during the investigation, a root cause analysis and corrective action plans.
- **F684 -Quality of Life:** Based on the comprehensive assessment of a resident, the facility must ensure that residents receive treatment and care in accordance with professional standards of practice, the comprehensive person-centered care plan, and the residents’ choices.
 - Facilities should review policies/procedures for CPR and Advanced Directives.
 - NYSDOH emphasized that Agency/Contract staff that work in other facilities need to be educated on the PPs at individual facilities as systems may differ.
- **F686 - Pressure Ulcers:** Review Facility policies and observe implementation of resident interventions to prevent pressure ulcers as well as treat and manage existing ulcers following standards of practice.
- **F695 - Tracheostomy and Respiratory Services:** The facility must ensure that a resident who needs respiratory care, including tracheostomy care and tracheal suctioning, is provided such care, consistent with professional standards of practice, the comprehensive person-centered care plan, the residents’ goals, and preferences.

Our State QIO, IPRO was represented in the meeting and will be hosting an educational webinar on CPR, Advanced Directives and Resident Rights next Wednesday, February 21st at Noon. Registration is available [HERE](#).

If you have questions or need assistance, please contact us at the Association. In addition, our member website has various policies/procedures that may assist in quality improvement activities.