

GREATER NEW YORK HEALTH CARE FACILITIES ASSOCIATION

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Memo 24-20

To: Administrator, DNS, Medical Director, Licensed Nurses and QA Committee
From: Mary Gracey-White RN, Director of Regulatory Compliance and
Arlette A Drigpaul, MSN RN Infection Preventionist/Education Coordinator
Date: August 20, 2024
Re: NYSDOH Provider Association Meeting

On August 15th GNYHCFA participated in the NYSDOH/DOH Provider Association meeting. Key points of the agenda/discussion included:

- Facility responsibility to provide services or obtain services such as dental, psychological and consultant services as needed. Associations shared that some facilities are having difficulty obtaining psychology services in both urban and rural areas.
- The importance of updating contact information, including 24/7 contact info in the HCS.
- Ongoing NYSDOH review of Facility submitted Infection Control surveys, including feedback for additional documentation needed to achieve compliance. GNYHCFA has updated IC P/P on our website to incorporate this feedback.
- NYSDOH reported on the current top three citations across NYS. These are:
 1. **F684 Quality of Care**- Example(s) include failure to intervene timely for resident significant change such as uncontrolled vomiting without comfort measures, CHF exacerbation without assessment and follow up.
 2. **F600 Free from Abuse and Neglect**-Example included failure to protect resident from sexual abuse, fall with fracture, also need to address Psychosocial harm from the “reasonable person” standpoint and address potential/actual psychosocial harm.
 3. **F604 Free from Restraints** – Example included use of bedrails without assessment for dependent residents resulting in a resident crawling from bed sustaining a Fx.

GNYHCFA requested that NYSDOH continue to address quality care issues where some residents transferred from acute care settings do not have clear discharge information regarding serious psychiatric illnesses/issues as well lack of information being provided for residents with substance use disorders. DOH indicated they have communicated to the Hospital program regarding this and will continue to follow. We also expressed the limited resources available to discharge to the community settings for residents with complex needs.

Facility members that recently completed recertification surveys have shared some information focused on by surveyors. Two recent surveys began on a Monday morning at 6 AM. Information shared included:

1. Care Plan issues such as not providing resident/rep with copy of baseline care plan, inviting Residents to quarterly care plan meetings, and updating CCPs
2. MDS coding and late submissions
3. **Infection Control** which included implementation of Enhanced Barrier Precautions, Foley drainage bags touching the floor, Hand Hygiene after removal of gloves during Tx changes and medication administration. Post signage reflecting that the facility offers Covid vaccination Staff age 65 and older must be offered the Pneumococcal vaccine based on most current CDC recommendations. Review of Antibiotic Stewardship program including antibiotic utilization, data collection. Surveyors requesting validation of Infection Preventionist Training.
4. Meal observations including tray accuracy, observing residents eating in rooms, menus, and tube feeding labeling.
5. Follow up to Drug Regime Reviews (DRRs).

Additionally, Mary Gracey-White and Arlette A Drigpaul will be presenting on “**Enhanced Barrier Precautions: Regulation to Implementation**” at this year’s NYS APIC Conference on October 9th. Please encourage your Infection Preventionist and other Leadership to attend!! See attached brochure to register [Trifold Brochure APIC Fall 2024 \(2\).pdf](#).

If you have any questions or need further information, please contact us.