

Will Your COVID-19 Documentation Stand Up To Scrutiny?

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This program has been funded by a generous grant from the Mother Cabrini Health Foundation.



Disaster vs. Pandemic





- ▶ Documentation has been, and will continue to be, a basic responsibility of any facility.
- ► The written documentation done throughout the COVID-19 pandemic will "tell the story" of what happened and how you responded to keep your residents as safe as possible while receiving quality and dignified care.



Reaction vs. Response







Why do we document?











- ▶ To validate the decisions we make.
- ► To ensure we have given appropriate care.
- ▶ To prove that we did the correct thing.
- ▶ To document changes or unusual events.
- ► Complete record keeping demonstrates the presence of continuity of care.



"How are we going to do anything more, when we are already too busy?"





Document changes as they occur in the following areas:

- ▶ Screening
- ► Resident Care Strategies
- ▶ Testing
- **▶** Communications
- **▶**PPE

- ► Staffing plans
- ► Cohorting
- **►** Education
- ► Reopening/Visitation



Resident/Staff screening

- ► Is it complete? Is it being done per updated regulatory guidance?
- ► Are you monitoring results, what are the results telling you?
- ► Are you capturing changes in resident's conditions? What trends are occurring? Are they addressed?



Resident care strategies. How are they different and why did they change?

- ► What are the strategies that were initiated as a result of the current pandemic?
- ► Have all decisions, that created the change, been documented?
 - ► What?

► How?

- ►When?
- ►Why?

► Who was included in the decision-making processes?



Testing

- ► Are there facility policies and procedures in place for testing?
 - ► Are they based on regulatory guidance and executive orders?
 - ► Have your policies been updated? If so, is there a new effective date and signatures with each update?
- ► Are there processes and decisions on resident and staff testing?
 - ► What are the facility's general test-based protocols?
 - ► Are there any different testing protocols for symptom-based?



- ► Staff screening/Illness
 - ► Upon entry into the facility
 - In the middle of a shift
- ► Return to work
 - ► Symptomatic employees
 - ► Asymptomatic employees





Communications

- ► To residents, families, responsible persons:
 - ►What ►Who
 - Why ► When
- ► With external agencies:
 - ► What was the facility's response?
 - ► Any follow up actions?







On March 13, 2020 CMS sent out this information:

"State and Federal surveyors should not cite facilities for not having certain supplies (e.g., PPE such as gowns, N95 respirators, surgical masks and ABHR) if they are having difficulty obtaining these supplies for reasons outside of their control. However, we do expect facilities to take actions to mitigate any resource shortages and show they are taking all appropriate steps to obtain the necessary supplies as soon as possible."



What does the staffing emergency contingency plan look like?

- ► Has it been updated to meet current needs?
- ► Will any additional supplemental staff be needed?
- ▶ Will new staff be hired?
- ► Is there a plan for who will cover if the Infection Control Practitioner is out sick? (Nursing Homes only)
- ► Will other departments be expected to assist nursing? What education will they need if any? (Nursing Homes only)



Cohorting

What is the facility plan to meet infection control mandates to possibly move residents into segregated areas or a different facility all together? Is there an updated policy in place?

- ► Who if anyone gets relocated, both staff and residents?
- ▶ Why, how, and when will relocations occur?
- ► When could residents return to their original room? Staff to their original unit?



Education

- What education/competencies are being provided for the staff? Residents? Families?
- ► What are the identified changes in educational needs? What can tentatively be dropped and what can't?





Visitation

- ► What will your reopening plan look like?
 - ► Who was involved in the development of the reopening plan?
 - ► What decisions were made and why (based on what guidance) were they made?
 - ► What happens if a new "outbreak" occurs?



What and when to document?

- ► Before Be prepared
- ▶ During Provisions of care
- ► After Pulling everything together

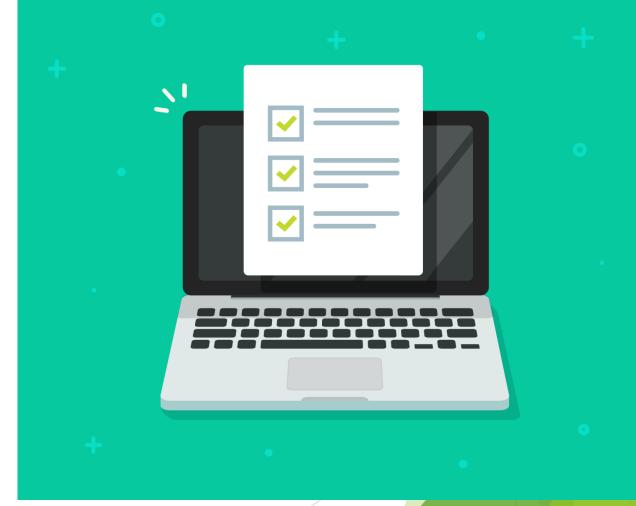


Creating a detailed timeline

- ► Regulatory guidance, executive orders, QSOs
- Communications
 - ► Internal
 - **►** External
 - Meetings
 - ► Emails, phone conversations
 - ► Education completed



- ► How to develop, create and maintain a timeline.
- Start with regulations and any other guidance.





How to develop, create and maintain a timeline

- Document all responses
 - ► What decisions were made based on <u>response not</u> <u>reaction</u>?
 - ► What decisions were made, why and who was involved?
 - ► What process was created or changed?
 - ► What tools were modified or created?
 - ► What communication took place?



Organizing information into a time-based model

- A visual paper hang on the wall model
- ► Virtual data room
- ► Binder
- Excel vs. a Word document
- Project-management software



Examining the differences between now and then?

- ► What part of the new system is working well and should be kept?
- ► Is there any part of the former system that we should bring back?
- ► What are the different approaches that have worked well and are they still appropriate?



Creating a plan to move forward:

- Quality Assurance
 - ► Using the data that has been collected and analyzing it to improve processes and acknowledge the successes during an unprecedented time.



Mitigating legal and regulatory liability

- ► Financial
- ► Clinical/Regulatory/Negligent
- ► Litigations
 - **▶**Civil
 - **▶**Criminal



Multi-faceted risk management:

- ► Financial
 - ► Stimulus money
 - ►Other moneys provided to the facility during the pandemic through loans or grants

COVID-19
STIMULUS
PACKAGE





Multi-faceted risk management:

- ► Clinical/Regulatory
 - ► CMS/State
 - ► Local agencies
 - ► Occupational Health & Safety Administration (OHSA)



Multi-faceted risk management:

- ► Litigation, arbitration and potential legal threats
 - ▶ Waivers
 - **▶**Timeframes
 - **►**Inclusions



Civil litigation:

- ► Class action suits
 - ► Residents and families
 - **►**Employees
 - ▶ Vendors



Criminal litigation

- ► Attorney General's office
- ► Local prosecutors
 - ► MA fraud units



Potential regulatory litigation concerns:

- ► Modifications of regulatory requirements
- Policy dates
- **▶** Education
- ► Survey process during the pandemic



What is a negligence suit?

- Professional negligence
- ► Reasons for negligence lawsuits?





Creating a self-evaluation for reopening

- ► Are staff compliant with policies/procedures?
- ▶ Do you have a strong seasoned staff or a new staff?
- ▶ Do you have a strong Infection Control program?



Can a facility afford to not have detailed documentation reflecting the care provided during a pandemic?



The decision is up to you.



- ► Resources:
- ► https://coronavirus.health.ny.gov/home
- https://www.cdc.gov/coronavirus/2019ncov/communication/guidance
- https://www.leadingageny.org/





Thank You!

Ask a Question

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