

All Member Call Agenda April 12, 2022

- **Susan Wallace | President/CEO**
 - Welcome & Updates
 - Upcoming education, awards, & scholarships
- **Regulatory Updates**
 - Waivers
 - Wage Index
- **COVID-19 Focused Inspection Initiative in Healthcare**
 - **Episcopal Retirement Services**
 - Laura Lamb | President & CEO
 - Joan Wetzel | Vice President, Human Resources & Organizational Development

Welcome & Updates



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- Upcoming education, awards, & scholarships

Susan Wallace | President/CEO

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Education

- 4/13 STAT: Survey Tips & Tactics
- 4/14 Activity Professionals Zoom Fellowship Mtg.
- 4/12 Hospice Quality & Compliance Virtual Networking Forum
- 4/27 Ohio Certified Medication Aides: Enhancing Your Nursing Unit
- 4/28 Advanced Principles of Hospice Management

<https://www.leadingageohio.org/aws/LAO/pt/sp/education>

Regulatory Update

- CMS released memo [QSO-22-15-NH & NLTC & LSC](#) on April 7 to announce that most 1135 waivers will be ending.
 - Waivers scheduled to end in 30 days will terminate on May 7, while those scheduled to end in 60 days will terminate on June 6.
 - 30 days - Resident groups, physician delegation and visits, QAPI, discharge planning, record request
 - 60 days – Physical environment, equipment maintenance, life safety code, training – including NATCEP
 - Notify and demonstrate attempts to get tested – also notify LeadingAge Ohio

Regulatory Update

- FY2023 Hospice Wage Index and Payment Rate Update and Hospice Quality Reporting Requirements.
 - <https://public-inspection.federalregister.gov/2022-07030.pdf>
 - FY2023 Proposed wage increase of 2.7%
 - Permanent 5-percent cap on wage index decreases
 - The Consolidated Appropriations Act, 2021 increased the payment reduction for hospices who fail to meet hospice quality measure reporting requirements from 2% to 4% beginning in FY 2024 annual payment update (APU) based on CY 2022 quality data
 - Beta testing of the HOPE tool will continue through 2022
 - CMS testing a web-based CAHPS hospice survey
 - Request for more information on health equity



**Occupational Safety
and Health Administration**

U.S. Department of Labor

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OSHA COVID-19 Focused Inspection Initiative in Healthcare

- This Initiative supplements OSHA's targeted enforcement under the COVID-19 National Emphasis Program (NEP), See [DIR 2021-03 \(CPL 03\)](#), *Revised National Emphasis Program – Coronavirus Disease 2019 (COVID-19)*, July 7, 2021
- <https://www.osha.gov/laws-regs/standardinterpretations/2022-03-02>
- OSHA will assess employer compliance efforts, including the readiness of hospitals and skilled nursing care employers to address any ongoing or future COVID-19 surges.
- The intent of this initiative is to magnify OSHA's presence in high-hazard healthcare facilities over a three-month period (March 9, 2022 to June 9, 2022), to encourage employers in these industry sectors to take the necessary steps to protect their workers against the hazards of COVID-19.

Assessment of COVID-19 Mitigation Strategies

- Determine whether previously cited COVID-19-related violations have been corrected.
- Determine whether the employer has implemented a COVID-19 plan that includes preparedness, response, and control measures for the SARS-CoV-2 virus. If this plan is a part of another emergency preparedness plan, the review should not be expanded to the entire emergency preparedness plan.
- Verify the existence and effectiveness of all control measures, including procedures for determining vaccination status by reviewing relevant records.
- Request and evaluate the establishment's COVID-19 log and the Injury and Illness Logs (OSHA 300 Log, OSHA 300A Summary, and any applicable OSHA 301 Incident Reports) for calendar years 2020, 2021, and 2022, if available, to identify work-related cases of COVID-19.

Assessment of COVID-19 Mitigation Strategies

- Review the facility's procedures for conducting hazard assessments and protocols for personal protective equipment (PPE) use.
- Conduct a limited records review of the employer's respiratory protection program. The records reviewed may be limited to the written respiratory protection program and fit tests, medical evaluations, and training records for the interviewed employees.
- Perform a limited, focused walkaround of areas designated for COVID-19 patient treatment or handling (common areas, walkways, and vacant treatment areas where patients have been or will be treated), including performing employee interviews to determine compliance.

Walkaround

- The walkaround portion of the inspection shall be less extensive than a usual inspection, the scope of an inspection may be expanded where plain-view hazards are identified during the walkaround, or where information obtained from workers or worker representative(s) indicate deficiencies in compliance;
- Determine compliance under the Respiratory Protection Standard (29 CFR 1910.134), especially in areas involving close-contact work with suspected or confirmed positive COVID-19 patients, to include fit testing, medical evaluations, training, and proper use of respirators. Conduct employee interviews.
- Review documentation of any procedures or efforts made by the employer to obtain and provide appropriate and adequate supplies of PPE.
- Determine whether the employer has implemented procedures for screening workers and/or any measures to facilitate physical distancing (*e.g.*, barriers or administrative measures to encourage 6-foot distancing).
- Determine whether the employer ensures the use of face coverings or facemasks by employees, and by visitors in accordance with the CDC.

OSHA Inspection



- **Laura Lamb | President & CEO**
- **Joan Wetzel | Vice President,
Human Resources &
Organizational Development**

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In Closing

Thank you to the Episcopal Retirement Services for sharing today!

Alert LeadingAge Ohio to concerns with getting nursing assistants tested

Join a committee

Email questions to COVID19@leadingageohio.org

