

Joint Conference Committee Regulatory Affairs Status Report for July 2020

I. PENDING SURVEYS				
1.	Joint Commission Triennial Accreditation Survey (Hospitals and Nursing Care Center)	San Francisco is currently a	NO-GO-COUNTY	
2.	Joint Commission Stroke and TBI Certification Visits	San Francisco is currently a	NO-GO-COUNTY	
3.	4A SNF COVID Mitigation Plan Review: CDPH will review compliance with our own plan	Unannounced every 6-8 weeks beginning July		
4.	Commission on Cancer	EXTENTION GRANTED TO 2021, expect survey December 2020		
5.	4A SNF Fire Life Safety	To Be Determined		
II. COMPLETED SURVEYS				
1.	Complaints x 3	ED Staffing, Quality of Care & Environemnet	6/22/2020	No Deficiencies
2.	FRI	4A Alleged Staff to Resident Verbal Abuse (CDPH)	6/25/2020	Anticipate No Deficiencies
3.	FRI	4A Elopement (CDPH)	6/25/2020	Anticipate No Deficiencies
4.	FRI	4A Alleged Staff to Resident Abuse/Neglect (CDPH)	6/25/2020	Anticipate No Deficiencies
5.	Complaint	ED Walk-In Greeter Station Duress Button (Cal/OSHA)	7/2/2020	Anticipate No Deficiencies; Response letter posted in ED
III. PLANS OF CORRECTION				
1.	Complaint x 2	PES – CDPH – Staffing ratios	Record review of patient charts for the dates specified indicated no adverse events. 23 RNs and 1 LPT have been hired since the initial on-site investigation. All 24 PES staff members have been cross trained to work in both inpatient and emergency services settings. Weekly audits of sampled staffing assignments are being conducted to ensure ratios are maintained.	
IV. OPEN SITE VISITS – Investigation commenced by CDPH				
			COMPLAINT: submitted by public.	FRI: Facility Reported Incident. ABUSE: Long Term Care CMS self report
1.	Complaint	H76/78 – Quality of Care ACE Unit	February 2019	Ongoing
2.	Complaint	Nurse staffing – All inpatient units 10/27/2018	January 2019	Documents Requested
3.	Complaint	SPD – Infection Control and Staff Accommodations	10/7/2019	Ongoing
4.	Complaint	ED – Staffing and CareStart	11/06/2019	Ongoing
5.	FRI	ED – Retained Guide Wire	11/06/2019	Ongoing
6.	FRI	Retained Foreign Object 6G	1/3/2020	Documents Requested
7.	FRI	Wrong Site Surgery (Cornea) 4M	1/3/2020	Documents Requested
8.	FRI	Patient Death following Med Error	4/17/2020	Ongoing – Anticipate Deficiencies
9.	FRI	Privacy Breach FNS	Pending Visit	
10.	FRI	Wrong Site Surgery OR Kidney Stent	Pending Visit	
11.	Privacy Breach	7L	Pending Visit	
12.	FRI	Fall 7L	Pending Visit	
13.	Privacy Breach	HIS	Pending Visit	
14.	ABUSE	4A Staff to Resident Abuse Allegation	Pending Visit	
15.	FRI	Wrong Site Surgery OR Kidney Stent	Pending Visit	
V. NEW FACILITY REPORTED INCIDENTS (FRI)				
			COMPLAINT: submitted by public.	FRI: Facility Reported Incident. ABUSE: Long Term Care CMS self report
1.	HAPI	Stage III Mid-Coccyx (Unavoidable) H44	6/17/2020	
2.	FRI	Fall with Injury H38	7/8/2020	
3.	ABUSE	Allegation of Staff to Resident Abuse 4A (Unsubstantiated internally)	7/17/2020	

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VI. PLAN OF CORRECTION MONITORING DATA

CMS Complaint Validation Survey		March 2 – 5, 2020 onsite, telephone exit March 18, 2020		
Contract Monitoring		Compliance is <90%	Continue to monitor	L Safier
		OCA contracts do not include performance improvement metrics		
CDPH General Acute Care Hospital Relicensing Survey (GACHRLS)		March 2 – 5, 2020 onsite, telephone exit March 16, 2020		
Medication return post discharge	Maternal Child Health	Compliance is >90% for < 3 months	Continue to monitor	G Otway
Pharmacy	Expiration Date Completion	Compliance is monitored q2w	Continue to monitor	J Russell
		Difficulty with staffing schedule to meet q2w frequency		
	PPD expired vials	Compliance is >90% for < 3 months	Continue to monitor	J Russell
Pediatric Crash Cart stock and checklists		Compliance is >90% for < 3 months	Continue to monitor	D Staconis
4A SNF CMS Recertification Survey		March 9 – 10, onsite and March 11 remotely with telephone exit		
Pain assessment and Reassessment		Compliance is <90%	Continue to monitor	G Delacruz
Psychotropic Medication Monitoring		Compliance is >90% for < 3 months	Continue to monitor	G Delacruz
Ice Machine cleanliness		Compliance is met for < 3 months	Continue to monitor	K Merriman

Reporting will begin in August regarding the PES Staffing Plan of Correction

Steps for Joint Commission to Schedule Survey

1. County must be a **GO-County**, or be "low risk," this is defined as;
 - a. New Cases per 1,000 residents figure of 0.5 percent or less and
 - b. Trend in new cases of 1 percent or less.

This data is publicly available on the Joint Commission and sourced from NYTimes.
2. An **Assessment Call** from TJC Account Executive
3. If between the assessment call and the survey the data changes and San Francisco becomes a **NO GO-County** survey will be aborted

7/20/2020 – San Francisco is a **NO-GO-COUNTY**
 New cases per 1000 >0.5 & Trend in New Cases >1.00

