

FAQ RCS Survey and Inspection  
Reimplementation  
April 8<sup>th</sup> and 9<sup>th</sup>, 2021

**Topics: Availability of presentation, materials discussed, and provider pages**

QUESTIONS:	ANSWERS:
Q: WILL THE RECORDING AND/OR SLIDES BE AVAILABLE AFTER THE WEBINAR?	A: Yes, you will be able to find the slides and the recording of the Webinar at the top of each provider page. You can link to each provider page through this link: <a href="https://www.dshs.wa.gov/altsa/residential-care-services/residential-care-services">https://www.dshs.wa.gov/altsa/residential-care-services/residential-care-services</a>
Q: HOW DO WE ACCESS THE PROVIDER PAGE TO GET A COPY OF THIS EXCEL? [POLICY SPEADSHEET]	A: The Excel Spreadsheet is located at the top of each provider page. You can link to each provider page through this link: <a href="https://www.dshs.wa.gov/altsa/residential-care-services/residential-care-services">https://www.dshs.wa.gov/altsa/residential-care-services/residential-care-services</a>
Q: IS THIS EXCEL TOOL ON THE WEB SITE NOW? WHEN CAN WE ANTICIPATE THESE FORMS TO BE ON EACH RESPECTIVE WEBSITE?	A: The Excel Spreadsheet is located at the top of each provider page. You can link to each provider page through this link: <a href="https://www.dshs.wa.gov/altsa/residential-care-services/residential-care-services">https://www.dshs.wa.gov/altsa/residential-care-services/residential-care-services</a>
Q: WHEN YOU SAY PROVIDER PAGE, WHAT SPECIFICALLY ARE YOU REFERRING TO? I'M ASSUMING THE ALTSA SITE BUT CAN YOU CLARIFY?	A: Yes, we are referring to the ALTSA site found here: <a href="https://www.dshs.wa.gov/altsa/residential-care-services/residential-care-services">https://www.dshs.wa.gov/altsa/residential-care-services/residential-care-services</a>

**Topics: Timing of surveys/inspections:**

QUESTIONS:	ANSWERS:
Q: ICF/NF - WHEN YOU SAY TIME SINCE LAST INSPECTION, ARE YOU REFERRING TO LAST ANNUAL RECERTIFICATION OR ANY INSPECTION (I.E., INFECTION CONTROL, COMPLAINTS, ETC.)?	A: Time since last recertification survey.
Q: CAN YOU CLARIFY ABOUT "STARTING WITH FACILITIES WITH NO COVID OUTBREAKS? DOES THAT MEAN IF YOU HAVE NOT HAVE COVID YOU WOULD BE MORE LIKELY TO HAVE SURVEY EARLIER?	A: Correct. We will be starting in facilities without COVID outbreaks.

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<b>Q: SO WOULD THE 45 DAYS START WHEN FOR CITATIONS?</b>	<b>A: The expectation for being back in compliance when cited is not to exceed 45 days from inspection completion date.</b>
<b>Q: HAS RCS OFFICIALLY RESUMED HOME INSPECTIONS FOR AFH? WHEN WILL INSPECTIONS START? DO SNF SURVEYS START IN MAY?</b>	<b>A: The plan is to resume during the month of April with the exception of SNF surveys which will start in May.</b>
<b>Q: HOW ARE YOU GOING TO PLACE THE NEWLY LICENSED AFH FROM THE BEGINNING OF LAST YEAR IN TERMS OF INSPECTION? IS RCS GOING TO START INSPECTIONS WITH NEWLY LICENSED HOMES?</b>	<b>A: Newly licensed homes will be taken into consideration as a part of the scheduling process.</b>
<b>Q: IS RCS GOING TO BE ABLE TO COMPLETE ALL ANNUAL SURVEYS WITHIN THE 18 MONTH WINDOW FROM THE PREVIOUS SURVEY FOR EACH FACILITY?</b>	<b>A: At this time we are past the 18 month window for most homes. We are working to “reset” this window with the current visit.</b>
<b>Q: ARE HOMES THAT HAD INVESTIGATIONS BUT NO CITATIONS A PRIORITY?</b>	<b>A: Homes with investigations will be taken into consideration as a part of scheduling, but this is not the only thing taken into consideration as a part of the process for setting the new schedule.</b>
<b>Q: IF THERE IS ANOTHER SURGE IN COVID RATES IN WASHINGTON, HOW WILL YOU DETERMINE HOW TO GO ABOUT INSPECTION?</b>	<b>A: We will re-evaluate the survey and inspection schedule to determine if inspections need to be paused or if we can continue while still following all infection prevention measures to assure the safety of residents and staff in the home, as well as the safety of RCS staff.</b>
<b>Q: WHERE WILL THE HOME WITH COVID BEFORE AND NOW COVID FREE, WHERE WILL IT FALL IN YOUR CATEGORY?</b>	<b>A: Homes with previous COVID cases will be taken into consideration as a part of the scheduling process.</b>
<b>Q: IN ADDITION TO BEGINNING SURVEYS AT COMMUNITIES WITHOUT ACTIVE COVID CASES, WILL CONSIDERATION BE GIVEN TO COMMUNITIES WHO HAVE GONE THE LONGEST WITHOUT A FULL INSPECTION?</b>	<b>A: Yes, we will be including this criteria as a part of our consideration during the scheduling of surveys and inspections</b>
<b>Q: FOR OBSERVATIONS OF RESIDENT CARE AND/OR INTERVIEWS, WILL THE SURVEYORS VACCINATION STATUS IMPACT THOSE RESIDENTS THEY CAN OBSERVE AND/OR</b>	<b>A: Surveyors and licensors will be utilizing all required PPE and will follow all infection prevention standards during observations.</b>

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<p><b>INTERVIEW. IE: IF BOTH RESIDENT AND SURVEYOR ARE UNVACCINATED?</b></p>	
<p><b>Q: ON THE EXCEL SHEET CAN YOU INCLUDE THE CONTRACT ITEMS THAT HAVE BEEN WAIVED? EXAMPLE PER ALL MEDICAID CONTRACT TYPES FROM MY UNDERSTANDING, YOU MUST CONTINUE TO GIVE SAFETY AND ORIENTATION TO STAFF THAT ARE NOT LICENSED OR FULLY TRAINED. PER ESF MY UNDERSTANDING IS THAT ACCESS TO FOOD 24HRS IS SUSPENDED BUT IT WAS NOT SUSPENDED UNDER THE MEDICAID CONTRACT WHEREAS ALF AND AFH THESE ITEMS ARE WAIVED PER THE CONTRACT RULES. WAIVED BECAUSE THE WAC IS CURRENTLY WAIVED. THESE CONTRACT ITEMS THAT ARE NOT WAIVED OR A LIST OF WHAT IS WAIVED WOULD BE HELPFUL. THERE ARE MANY CONTRACT ITEMS THAT WOULD BE HELPFUL TO KNOW WHAT IS WAIVED AS THERE ARE MANY ADDITIONAL SERVICES, EDUCATION OR OTHER ITEMS ARE ADDED REGULATION TO MAINTAIN THE MEDICAID CONTRACT. IN AFH HAS COMMUNITY INTERGRATION STILL BEEN WAIVED OR IS IT TO RESUME?</b></p>	<p><b>A: RCS oversees the WACs and does not do the contract monitoring. We can discuss with HCS the possibility of putting together a similar document related to waived contract items.</b></p>

**Topic: Testing and Screening of RCS Staff**

<b>QUESTIONS:</b>	<b>ANSWERS:</b>
<p><b>Q: JUST TO CLARIFY WILL ALL SURVEYORS BE TESTED FOR COVID BASED ON THE COVID + RATES IN EACH COUNTY?</b></p>	<p><b>A: RCS staff are offered weekly testing regardless of county positivity rates.</b></p>
<p><b>Q: ARE RCS STAFF REQUIRED TO GET WEEKLY OR AS NEEDED COVID TESTING OR JUST "OFFERED" AN OPPORTUNITY TO TEST BUT NOT REQUIRED? IS IT OKAY FOR A FACILITY TO REQUEST FOR AN INFORMATION OF WHEN A RCS STAFF WAS TESTED AND RESULT OF THE TEST?</b></p>	<p><b>A: RCS staff are offered, they are not required to take the test. If a staff tests positive, RCS follows the required protocol as an employer and would not have the person working on a survey or inspection. The surveyors and licensors who enter a home are not required to show results of a COVID test to perform their</b></p>

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	<p>duties, however they would not be at the home if they tested positive.</p>
<p><b>Q: THE DEAR PROVIDER LETTER THAT WAS SENT OUT LAST WEEK STATES "RCS STAFF ARE SCREENED PRIOR TO CONDUCTING A SURVEY, INSPECTION, OR EVALUATION." HOWEVER, YOU MAY ASK THE COVID SCREENING QUESTIONS THAT YOU NORMALLY ASK EMPLOYEES AND OTHERS WHO ENTER YOUR FACILITY OR HOME." AND "AS ESSENTIAL WORKERS, RCS STAFF ARE NOT CONSIDERED VISITORS AND DO NOT SIGN A VISITOR ATTESTATION." BUT IT WAS JUST STATED THAT RCS SHOULD BE SCREENED ACORDING TO AGENCY POLICY WHICH FOR MY SL AGENCY INCLUDES A SIGNED VISITOR SCREENING LOG. ARE WE TO FOLLOW OUR POLICY OR THE INSTRUCTION FOUND IN THE LETTER?</b></p>	<p><b>A: This was later clarified. RCS staff do complete the routine COVID screening questions prior to work each day, however you may also follow the same screening process with RCS staff that you use with your <u>staff and essential health care workers</u> entering your building. RCS staff are essential health care workers, not visitors, and should not be asked to sign the visitor attestation used for resident visitors.</b></p>
<p><b>Q: CAN WE ASK THE INSPECTOR ABOUT THEIR VACCINATION STATUS BEFORE THEY CAN COME IN THE FACILITY SO THAT WE CAN CHOOSE WHO OF THE RESIDENTS THAT THEY COULD INTERVIEW?</b></p>	<p><b>A: No. The RCS staff will determine who is interviewed according to the survey and inspection process and will follow all infection prevention protocols and utilize all appropriate PPE for the situation.</b></p>
<p><b>Q: ARE YOU ALLOWING STAFF TO ENTER THE HOME IF THE STAFF MEMBER HAS HAD CONTACT OR HAS BEEN IN CONTACT WITH SOMEONE WITH COVID IN THE PAST 14 DAYS?</b></p>	<p><b>A: Any staff who has had contact or been in contact with someone with COVID-19 will screen themselves out with self-screening questions and not come to work.</b></p> <p><b>Staff who are conducting investigations in COVID+ units wear all appropriate PPE and take all appropriate precautions for the situation. These situations would not be considered "contact" or exposure for the purpose of screening.</b></p>
<p><b>Q: ARE THE FIRE MARSHALS SCREENED AND OFFERED VACCINATION AS WELL?</b></p>	<p><b>A: Like RCS staff, fire marshals were also offered testing and vaccination.</b></p>
<p><b>Q: SO WE ARE NOT ALLOWED TO SCREEN THEM IN WHEN THEY ARRIVE? WE CAN'T TAKE THEIR TEMPERATURE?</b></p>	<p><b>A: RCS staff do complete the routine COVID screening questions prior to work each day; however, you may also follow the same screening process with RCS staff that you use</b></p>

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	<p>with your staff and essential health care workers entering your building. RCS staff are essential health care workers, not visitors, and should not be asked to sign the visitor attestation used for resident visitors.</p>
<p><b>Q: SO WITH CONTACT TRACING WILL RCS BE NOTIFYING THE AGENCY IF THERE IS A POSITIVE EXPOSURE?</b></p>	<p><b>A: RCS will follow all contract tracing protocols.</b></p>
<p><b>Q: ALTHOUGH THEY ARE ESSENTIAL WORKERS, THEY SHOULD STILL CONTINUE TO SIGN-IN AS THEY WOULD PRE-COVID (SUCH AS ENTERING RECEPTION/ADMIN, RECEIVING VISITOR BADGE, ETC.), CORRECT?</b></p>	<p><b>A: Correct. RCS staff will still show their badge, provide a business card, and come through the required or designated entrance.</b></p>
<p><b>Q: ISN'T THE VISITOR LOG A REQUIREMENT FOR THE SAFE START PROGRAM TO MEET DOH CONTRACT TRACING REQUIREMENTS? IN ORDER TO MEET THIS REQUIREMENT, WE HAVE ALL STAFF AND VISITORS, WITH THE ONLY EXCEPTION OF EMERGENCY WORKERS AS STATED IN THE SAFE START GUIDELINES, SIGN IN ON THE VISITOR LOG - ESSENTIAL HEALTHCARE WORKER STATUS DOES NOT SEEM TO BE EXEMPTED FROM SIGNING VISITOR LOG?</b></p>	<p><b>A: RCS staff do complete the routine COVID screening questions prior to work each day; however, you may also follow the same screening process with RCS staff that you use with your staff and essential health care workers entering your building. RCS staff are essential health care workers, not visitors, and should not be asked to sign the visitor attestation used for resident visitors.</b></p>
<p><b>Q: SO YOU ARE SAYING WE CANNOT SCREEN RCS STAFF BECAUSE THEY HAVE DONE IT PRIOR TO EVEN COMING ON THE PROPERTY AND BECAUSE THEY ARE CONSIDER ESSENTIAL WORKERS AND THEREFORE, NOT A 'VISITOR.' BUT OUR POLICY INCLUDES SCREENING OF EVEN OUR OWN STAFF AT THE FRONT DOOR, BEFORE ENTRY. THEY ARE ALSO ESSENTIAL SUPPORT WORKERS AND DESPITE THEIR EMPHATIC ASSURANCES THEY HAVE SCREENED THEMSELVES PRIOR TO ENTRY, IT IS OUR POLICY TO SCREEN THEM AT THE FRONT DOOR. HOW COME RCS WORKERS ARE EXEMPT FROM THIS PRACTICE? I DON'T THINK IT WOULD EVER BE ACCEPTED BY A SURVEYOR IF I OFFERED MY OWN EMPHATIC REASSURANCE IT HAD BEEN DONE PRIOR TO COMING IN THE BUILDING; I WOULD LIKELY RECEIVE A CITATION FOR NOT FOLLOWING MY OWN POLICY!</b></p>	<p><b>A: RCS staff do complete the routine COVID screening questions prior to work each day; however, you may also follow the same screening process with RCS staff that you use with your staff and essential health care workers entering your building. RCS staff are essential health care workers, not visitors, and should not be asked to sign the visitor attestation used for resident visitors.</b></p>

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<b>Q: ALL CAREGIVERS LIVE IN-HOME AND WE HAVE NOT ACCEPTED NEW RESIDENTS DURING PANDEMIC. DO WE STILL NEED MASKS FOR CAREGIVERS ALL DAY LONG AND FOR EVERYONE OUTSIDE OF BEDROOMS?</b>	<b>A: CDC still recommends social distancing and source control for those in long-term care, even for those who have been vaccinated. At this time they have not differentiated between the different program types so it would still be required regardless of setting.</b>
<b>Q: IF AN RCS SURVEYOR ANSWERS ONE OF THE SCREENING QUESTION IN THE AFFIRMATIVE (THEY HAVE ONE OF THE SYMPTOMS OF COVID-19) CAN THE PROVIDER STAFF REFUSE ENTRY?</b>	<b>A: Staff screen themselves out with self-screening questions and do not come to work if they answer yes to any screening questions.</b>
<b>Q: IS RCS TRACKING SURVEYOR TRAVEL OUTSIDE OF THE USA AND HOLDING THOSE SURVEYORS OUT FROM ENTERING CLIENT'S HOMES FOR A DESIGNATED PERIOD OF TIME OR AFTER A NEGATIVE COVID-19 TEST RESULT IS OBTAINED?</b>	<b>A: RCS is following CDC guidance for travel and requiring staff to do the same. If a staff person has traveled outside the US and is unvaccinated, they would not be placed into survey or inspection until the required steps have been completed.</b>
<b>Q: WE ARE AN AFH AND WOULD LIKE TO OFFER PERIODIC COVID TESTING FOR OUR RESIDENTS AND OUR STAFF. WE DO NOT HAVE ANYONE WITH ANY SYMPTOMS OR AN ACTIVE CASE, BUT WOULD LIKE TO KNOW HOW AND WHERE WE COULD OBTAIN TEST KITS OR IF THERE ARE RESOURCES AVAILABLE THAT OFFER TESTING FOR ASYMPTOMATIC INDIVIDUALS?</b>	<b>A: The Local Health Jurisdiction (LHJ) would be the best place to start in determining how to access test kits and assistance with testing.</b>
<b>Q: WILL YOU NEED OFFSITE ACCESS TO ELECTRONIC HEALTH RECORDS?</b>	<b>A: If the option is available and it is feasible for the home to provide, it would be the preferred method for accessing the records. This will help RCS limit the amount of time surveyors and licensors need to spend onsite in the home during the inspection.</b>
<b>Q: HOW MANY SURVEYORS SHOULD WE PREPARE FOR? SIZE OF ROOM SHOULD BE APPROPRIATE FOR SOCIAL DISTANCING BASED ON TOTAL NUMBER</b>	<b>A: For nursing homes, the # of staff will start out with 4 surveyors and in addition, may include trainees and trainers. The #s may change depending on the circumstances.</b>

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**TOPICS: PPE and masking Questions**

<b>QUESTIONS:</b>	<b>ANSWERS:</b>
<b>Q: IF ALL RESIDENTS AND STAFF HAVE BEEN VACCINATED IS IT REQUIRED TO WEAR A FACESHIELD OR JUST MASK?</b>	<b>A: CDC still recommends social distancing and source control, even for those who have been vaccinated.</b>
<b>Q: ARE AFH REQUIRED TO WEAR BOTH A FACE SHIELD NOW ALONG WITH A MASK? CAN YOU PLEASE CLARIFY PPE REQUIREMENTS FOR AFHS? DO CAREGIVERS HAVE TO WEAR BOTH MASK AND FACESHIELD AT ALL TIMES? DOES VACCINATION STATUS AFFECT THIS REQUIREMENT?</b>	<b>A: Eye protection should be worn when providing care to a resident or when appropriate social distancing cannot be maintained. CDC still requires social distancing and source control, even for those who have been vaccinated.</b>
<b>Q: WHAT KIND OF PPE DO THE VISITORS NEED TO WEAR IF THE RESIDENT IS VACCINATED?</b>	<b>A: CDC still recommends social distancing and source control (such as a mask or cloth face covering), even for those who have been vaccinated.</b>
<b>Q: ACCORDING TO CDC PEOPLE ARE ALLOWED TO VISIT IN SMALL GROUPS WITHOUT A MASK IF EVERYONE IS VACCINATED. BUT, IN THE LETTER WE RECIEVED FROM DOH ALL RESIDENTS MUST WEAR A MASK WHEN OUT OF THEIR ROOMS. IF THIS IS THEIR HOME, AND EVERYONE IS VACCINATED WHY ARE RESIDENTS IN THE AFH'S NOT ABLE TO COME OUT OF THEIR ROOMS WITHOUT A MASK?</b>	<b>A: For Long-Term Care CDC still recommends social distancing and source control, even for those who have been vaccinated.</b>
<b>Q: IS THE SPACE REQUIRED FOR LICENSOR STRICTLY FOR PUTTING ON AND TAKING OFF PPE OR IS IT ALSO FOR USE FOR THE DURATION OF THE VISIT. IF SO WHAT RECOMMENDATION DO YOU HAVE FOR AFH'S THAT DON'T HAVE A SPACE THAT CAN BE DESIGNATED FOR LICENSOR?</b>	<b>A: Work with the licensor to determine the best option that will allow them to do their work with minimal disruption to the home environment, while also allowing for proper infection prevention strategies.</b>
<b>Q: WHAT PPE WILL THE LICENSOR BE WEARING WHEN COMING INTO OUR AFHS FOR INSPECTIONS? CAN WE REQUIRE THEM TO WEAR FULL PPE (INCLUDING GOWN) SINCE THEY ARE GOING INTO SO MANY</b>	<b>A: Licensors will have full PPE available and will wear the PPE appropriate to the situation. If you are more comfortable with the use of full</b>

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<p><b>FACILITIES INCREASING THE RISK OF BRINGING COVID INTO OUR HOMES?</b></p>	<p><b>PPE at all times, please discuss this with the licenser and explain your reasoning.</b></p>
<p><b>Q: WHERE DO WE GET INFORMATION ABOUT FIT TESTING AND IS IT STILL REQUIRED?</b></p>	<p><b>A: Fit testing is always required per L&amp;I regulations. For more information please go to the following page. Under resources you will find a link for N95 fit testing resources and information: <a href="https://www.dshs.wa.gov/altsa/information-providers-and-long-term-care-professionals">https://www.dshs.wa.gov/altsa/information-providers-and-long-term-care-professionals</a></b></p>
<p><b>Q: CAN YOU WEAR GOOGLES IN PLACE OF FACE SHEILDS?</b></p>	<p><b>A: Googles would be okay to use in place of a face shield for eye protection.</b></p>
<p><b>Q: WHAT IF RESIDENTS CAN'T WEAR FACE MASKS, HOW DO WE GO ABOUT IT DURING INSPECTION?</b></p>	<p><b>A: If the resident meets the exemption requirements under the health order, please be sure to document in their record why the resident is unable to wear the mask to show this has been addressed.</b></p>
<p><b>Q: THE PERSON WHO WEARS PRESCRIPTION GLASSES ARE THEY OK NOT TO WEAR EYE SHIELD?</b></p>	<p><b>A: No, eye glasses would not provide the same level of protection</b></p>
<p><b>Q: FOR RESIDENTS IN AFH THAT REFUSE TO WEAR MASK ESPECIALLY DUE TO COGNITIVE ISSUES, HOW WILL WE EXPLAIN TO RCS STAFF?</b></p>	<p><b>A: If the resident meets the exemption requirements under the health order, please be sure to document in their record why the resident is unable to wear the mask to show this has been addressed.</b></p>
<p><b>Q: WHAT IF RESIDENTS REFUSE TO STAY 6 FEET APART?</b></p>	<p><b>A: Document in the record this has been addressed with the residents and that information has been provided to the residents about the importance of social distancing. Document the strategies the home has tried in working with the residents related to this issue.</b></p>
<p><b>Q: STAFF AND RESIDENTS OF AFH/ESF ARE QUESTIONING WHETHER THEY NEED TO CONTINUE TO WEAR MASKS WHILE IN THE FACILITIES, SOME FEEL THEY NO LONGER NEED TO WEAR MASKS INSIDE THE FACILITIES, WHAT IS PROTOCOL SO THAT WE ARE COMPLIANT?</b></p>	<p><b>A: At this time CDC still recommends masking for LTC residents, staff, and visitors regardless of vaccination status.</b></p>



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<b>Q: WHEN WORKING WITH CLIENTS, DO WE HAVE TO WEAR FACE MASK, FACE SHIELD, AND GOWN WHILE LIVING WITH THE CLIENTS?</b>	<b>A: At this time CDC still recommends use of source control in long-term care, and it is still recommended eye protection be used during care or when social distancing cannot be maintained.</b>
<b>Q: WHAT DO YOU MEAN BY HAVING A PLACE TO DON PPE?</b>	<b>A: A place for the RCS staff to appropriately put on any needed PPE. This may be at the entrance, or on the patio before entering the building depending on the set up of the home.</b>
<b>Q: WHAT IF SMALL FACILITIES DO NOT HAVE SPACE LARGE ENOUGH TO PROMOTE SOCIAL DISTANCING FOR SURVEYORS THAT DOES NOT INTERFERE WITH OPERATIONS?</b>	<b>A: The home will work with the licensor on determining the best options. This may include a conference call to the Field Manager to discuss options.</b>
<b>Q: CAN A BATHROOM BE USED TO PUT ON PPE IN AN AFH</b>	<b>A: The bathroom is one option, however this may hold others up from being able to use the bathroom and it may not be the ideal spot if the bathroom is not close to the space you will need to be doing the work in your PPE. If this is the place being offered to the licensor, this will require them to walk through the home without PPE before getting to the bathroom which contradicts the point of using PPE for infection control purposes.</b>
<b>Q: SUPPORTED LIVING - OBVIOUSLY THESE ARE HOMES AND DIFFERENT FROM A NURSING HOME. WHEN YOU SAID WE MUST PROVIDE A PLACE FOR INSPECTORS TO DON PPE. - WHAT SPACE WILL BE EXPECTED IN SL HOMES?</b>	<b>A: A place for the RCS staff to appropriately put on any needed PPE. This may be at the entrance, or on the patio before entering the building depending on the set up of the home.</b>
<b>Q: CONSIDERING THAT MY AFH HAS A 100% VACCINATION RATE, EMPLOYEES ARE GETTING FRUSTRATED AT HAVING TO STAY MASKED UP IN A SMALL FACILITY WITH VERY LITTLE CONTAMINATION RISKS. WHAT TIMEFRAME CAN I GIVE MY CAREGIVERS FOR THEM TO LOOK FORWARD TO NO LONGER WEARING PPE? IT'S MENTALLY/EMOTIONALLY DRAINING FOR THEM TO CONTINUE THIS EXERCISE IN FUTILITY AND THEY KEEP WHINING...</b>	<b>A: It is understanding people are frustrated. Many of us are feeling COVID fatigue after a year of this very difficult work. At this time it is not known when we will reach a level of herd immunity with the vaccination that would allow for a loosening of the rules around source control. Assure the staff we all appreciate their hard work and their willingness to continue protecting the residents they care for every day.</b>

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<p><b>Q: AL: WE HAVE MEMORY CARE COMMUNITIES BEING TOLD BY LHJ AND COMPLAINT INVESTIGATORS THAT SANITIZERS NEEDS TO BE AVAILABLE IN THE RESIDENT AREAS FOR INFECTION CONTROL. TO THE LAST QUESTION, WE HAVE HAD CITATIONS FOR HAVING SANITIZER POLES OR WALL MOUNTS IN MC BEFORE... WHAT IS THE CLEAR GUIDANCE ON SANITIZER BEING IN MC RESIDENT AREAS?</b></p>	<p><b>A: Needs to be readily available for staff access. The provider needs to assess the residents residing on the memory care unit regarding access to ensure the sanitizer is not a safety hazard.</b></p>
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**TOPIC: Infection Control Concepts Broadly**

<b>QUESTIONS:</b>	<b>ANSWERS:</b>
<p><b>Q: DO WE NEED BIO BUCKET FOR USED PPE?</b></p>	<p><b>A: PPE does not need a special bio container to be disposed of.</b></p>
<p><b>Q: CAN YOU BE MORE SPECIFIC ON INFECTION CONTROL WHAT YOU'RE LOOKING AT?</b></p>	<p><b>A: Following CDC, DOH, and LHJ guidance for PPE use both in COVID or suspected COVID situations as well as in situations without COVID. CDC, DOH and LHJ guidance for sanitization.</b></p>
<p><b>Q: WHAT REQUIREMENTS ARE THERE FOR INFECTION CONTROL?</b></p>	<p><b>A: Follow CDC and DOH guidance. You can also prepare by using the Infection Prevention Assessment Pathway tools found in the Dear Provider/Administrator letter located here:</b> <a href="https://www.dshs.wa.gov/sites/default/files/AL TSA/rcs/documents/multipl e/021-03-31.pdf">https://www.dshs.wa.gov/sites/default/files/AL TSA/rcs/documents/multipl e/021-03-31.pdf</a></p>
<p><b>Q: CAN HAND SANITIZER BE LEFT OUT? OR LOCKED UP? CAN WE HAVE HAND SANITIZERS AROUND HOMES FOR GUESTS AND STAFF?</b></p>	<p><b>A: This is dependent on the resident population. Assess the situation and determine if you have residents who can be safe with sanitizer left out. If residents are not safe with products left out, try small pocket items staff can carry with them, possible units attached to the wall in locations very visible to staff that utilize foam rather than gel.</b></p>
<p><b>Q: HOW ABOUT THE ALCOHOL AND</b></p>	<p><b>A: This is dependent on the resident population. Assess the situation and determine if you have residents who can be safe with the product left out. If</b></p>

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<b>DISINFECTANT SPRAY, CAN IT BE PLACED BY THE DOOR?</b>	residents are not safe with products left out, try small pocket items staff can carry with them, or assure cleaning of this area is done on a routine basis.
<b>Q: IS IT REQUIRED TO PUT STICKERS ON OUR FLOOR IN COMMON AREA FOR SHOWING SOCIAL DISTANCE?</b>	<b>A:</b> It is not required. A home may choose to use these as a good visual reminder for staff, residents, and visitors.
<b>Q: WHAT KIND OF POLICIES ARE WE SUPPOSED TO HAVE ?</b>	<b>A:</b> This is dependent on the program you work with. Each provider type has different regulations related to required policies. Currently for COVID all providers should have policies around visitation
<b>Q: HOW DO I KNOW IF I HAVE ALL THE NECESSARY REQUIREMENTS THEY LOOKING SPECIFICALLY COVID RELATED PAPERWORKS?</b>	<b>A:</b> You can prepare by using the Infection Prevention Assessment Pathway tools found in the Dear Provider/Administrator letter located here: <a href="https://www.dshs.wa.gov/sites/default/files/AL TSA/rcs/documents/multiple/021-03-31.pdf">https://www.dshs.wa.gov/sites/default/files/AL TSA/rcs/documents/multiple/021-03-31.pdf</a> Also be sure to review DOH and CDC websites for infection prevention principles related to COVID.
<b>Q: CAN YOU PLEASE CLARIFY WHICH POSITIVITY RATE WILL YOU BE UTILIZING? IS IT FROM THE CMS SITE OR FROM THE DOH SITE?</b>	<b>A:</b> At this time the only requirement related to positivity rate is the CMS testing requirement for nursing homes. It is expected the NH will use the CMS positivity rates for this purpose.
<b>Q: FOR NURSING HOMES, WHAT IS THE FREQUENCY OF COVID-19 TESTING IN KING COUNTY. POSITIVITY RATE IS 4.3%. KING COUNTY RECOMMENDATION IS WEEKLY TESTING AND CDC IS ONCE A MONTH</b>	<b>A:</b> Follow the CMS guidance for testing unless the LHJ recommendation is higher, then you would want to follow the LHJ recommendation.

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<p><b>Q: HI IS IT MANDATORY NOW TO DO TESTING TO ALL STAFF AND RESIDENT EVEN IF THERE IS NO POTENTIAL EXPOSURE? STAFF ARE LIVING IN THE HOME AND DOESN'T GO OUT?</b></p>	<p><b>A: You will want to work with the LHJ to determine testing strategies for the home in this situation.</b></p>
<p><b>Q: CAN YOU SHARE THE INFECTION CONTROL TOOL OR DIRECT US WHERE WE CAN FIND IT?</b></p>	<p><b>A: Here is the link to the provider letter with the different Infection Prevention Assessment tools:</b> <a href="https://www.dshs.wa.gov/sites/default/files/AL TSA/rcs/documents/multiple/021-03-31.pdf">https://www.dshs.wa.gov/sites/default/files/AL TSA/rcs/documents/multiple/021-03-31.pdf</a></p>
<p><b>Q: WHEN WILL THE UPDATED INFECTION CONTROL DOCUMENT BE AVAILABLE? THE DOCUMENT LINKED IN THE DEAR PROVIDER LETTER IS OUTDATED TO CURRENT SAFE START GUIDANCE.</b></p>	<p><b>A: It was updated 4/8/2021. Here is the link to the updated provider letter:</b> <a href="https://www.dshs.wa.gov/sites/default/files/AL TSA/rcs/documents/multiple/021-03-31.pdf">https://www.dshs.wa.gov/sites/default/files/AL TSA/rcs/documents/multiple/021-03-31.pdf</a></p>
<p><b>Q: DO WE HAVE TO HAVE POLICY AND PROCEDURE WRITTEN FOR EACH ITEM USE FOR EXAMPLE SANITZER USE, CLEANERS USE, ETC?</b></p>	<p><b>A: The more clear and concise an infection prevention policy is, the easier it will be for staff to understand what needs to be done and the easier it will be for staff to implement appropriate infection prevention strategies.</b></p>
<p><b>Q: IF A RESIDENT IS BED BOUND AND CONFINED TO THEIR ROOM CAN THEY HAVE THEIR DOORS</b></p>	<p><b>A: If there is no current COVID activity in the home and there is low risk of transmission the door can be open.</b></p>

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<p><b>OPEN OR DO WE NEED TO CLOSE DOORS AT ALL TIMES WHEN NOT PROVIDING CARE?</b></p>	
<p><b>Q: WHAT IS THE POSITIVITY RATE THRESHOLD FOR RETURNING TO PREVIOUS INSPECTIONS ON HOLD?</b></p>	<p><b>A: At this time there has not been a specific rate set, however RCS will continue to evaluate virus activity in the community and structure the survey and inspection schedule accordingly.</b></p>
<p><b>Q: WHAT IS THE PROPER DOOR SIGN?</b></p>	<p><b>A: The sign needs to alert visitors it is a violation of the Governor Proclamation for an unvaccinated visitor to visit with an unvaccinated resident indoors.</b></p>

Survey/Inspection Process

<u>QUESTIONS:</u>	<u>ANSWERS:</u>
<p><b>Q: WILL THE RESIDENT AND STAFF SAMPLE SIZE REMAIN THE SAME?</b></p>	<p><b>A: Yes. The requirement within the survey and inspection have not changed.</b></p>
<p><b>Q: EXCEPT THE VIDEO COMUNICATION, CAN YOU SUMMARIZE THE NEW WAY OF INSPECTION WITH THE PREVIOUS INSEPECTION?</b></p>	<p><b>A: All the same components of the inspection and survey will be completed, however those components that can be completed offsite or virtually (interviews, record reviews) will be done through this process if possible.</b></p>
<p><b>Q: WHAT ARE THE SURVEYORS FOCUSING ON DURING THIS YEAR'S INSPECTIONS? WILL THERE BE ANY CONSIDERATIONS DUE TO THE EXTRA CHALLENGES</b></p>	<p><b>A: Surveyors will follow the standard survey process. They will take into consideration the challenges posed while reviewing the health and safety needs of residents and they will review all of the suspended and waived regulations during the pandemic period.</b></p>

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<b>POSED BY THE PANDEMIC?</b>	
<b>Q: WILL YOU PLEASE EXPLAIN IF YOU ARE PROHIBITING OR PERMITTING MANAGEMENT STAFF FROM OBSERVING AND MONITORING RCS EVALUATOR'S ACTIVITY WHILE PERFORMING A RE-CERT EVAL IN THE CLIENT'S HOME?</b>	<b>A:</b> RCS does not control what management staff in the home do. If a management staff person chooses to observe the activities they should not interfere with the survey process or stop RCS staff from performing their job, but they can observe.
<b>Q: WHAT IS THE GENERAL PHILOSOPHY AS EVALUATING COMPLIANCE THROUGH THE PANDEMIC? IS THERE SOME UNDERSTANDING OF LIMITATIONS OF RESOURCES, AND ABILITY FOR NON-COVID ISSUES?</b>	<b>A:</b> RCS staff will review the waivers and suspension of regulations that were put in place to assist providers and residents through the pandemic. RCS is aware of certain limitations and the contingency plans that were put in place as a result. Many of these were addressed through CDC and DOH guidance and RCS staff will take this into consideration. RCS staff also need to take into consideration the health and safety of the resident.
<b>Q: ARE FIRE MARSHALS COMING TO AFH AS WELL? IF SO, WHAT IS THE PURPOSE OF THEIR VISIT?</b>	<b>A:</b> No. The State Fire Marshal inspects ALFs, ESFs, and NHs/ICFs.
<b>Q: IN LIGHT OF SAFE START HOW WILL COMPLIANCE BE EVALUATED WHEN AFH PROVIDERS, RN DELEGATORS AND ASSESSORS DON'T/AREN'T GOING TO BE</b>	<b>A:</b> Providers, RN delegators, and assessors are considered essential health care personal and are not included under the vaccination standards for visitation requirements.

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VACCINATED AND RESIDENTS CHOSE NOT TO BE VACCINATED?

Q: HOW CAN WE EXPECT TO SUBMIT DOCUMENTS THAT ARE REQUIRED FOR EVALUATION? ALSO ARE EVALUATION NOTIFICATIONS DONE IN PERSON, MEANING WILL WE SEE LICENSOR ON SITE FIRST AND THEN SHE/HE WILL NOTIFY US WHEN DOCUMENTS ARE DUE? OR ARE REQUESTS FOR DOCUMENTS DONE FIRST AND THEN ON SITE VISITS?

**A:** Surveys are unannounced so the provider will not know about the survey until the team or licensor arrives on site. At that time they will alert the provider regarding any standard documentation that will be needed. Through the course of the inspection other documents may also be required as a part of a specific investigation.

Q: I THINK THERE IS A LOT OF CONFUSION REGARDING THIS: WILL THERE BE 2 DIFFERENT INSPECTIONS FOR EACH HOME (1 FOR INFECTION PREVENTION INSPECTION & THE OTHER ANNUAL INSPECTION)?

**A:** During COVID RCS has primarily been focusing on conducting Infection Control inspections. Now RCS will be re-implementing the standard survey and inspection process. As a part of that standard process, RCS will be enhancing the review of the infection control process in the home.

Q: WILL YOU BE STAYING AGAIN IN THE HOME A WHOLE DAY AS BEFORE?

**A:** In an effort to limit time in the home we will be doing more interviews using remote technology (phone, computer, etc.) and would prefer to do record reviews offsite if the records are made available electronically or copies are provided. However it does depend on the circumstances. We may be in the home throughout the day.

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<b>Q: WILL YOU BE LOOKING AT COVID RELATED POLICY AND LOGS, ETC?</b>	<b>A: We will review any policies that are required by regulation. If a provider indicates they have a policy on a specific topic, we may ask to review the policy.</b>
<b>Q: IF WE CALL IN BECAUSE WE ARE GOING TO BE OUT OF COMPLIANCE ASKING FOR HELP WITH THE ISSUE WILL WE GET A CITATION OR WILL HELP BE PROVIDED?</b>	<b>A: The Department can provide information on the regulations related to the issue. The Department will investigate any complaints received that could result in noncompliance.</b>
<b>Q: IF DURING A SURVEY, A POTENTIAL COVID POSITIVE CASE IS IDENTIFIED, WHAT IS THE PROCESS THAT WILL BE FOLLOWED?</b>	<b>A: It would be expected that the facility follows the process required for a potential positive case. RCS staff would communicate with the field manager to determine next steps for the survey, but the survey may continue as RCS staff are properly equipped and trained to perform their duties in COVID + buildings.</b>
<b>Q: IF THE REGION IS MOVED BACK TO PHASE II OR PHASE 1, DOES THIS CHANGE THE SURVEY PROCESS?</b>	<b>A: Not at this time. RCS continues to evaluate virus activity in the community and will re-evaluate the survey schedule as needed.</b>
<b>Q: HOW MANY HOMES WILL AN INSPECTOR VISIT PER DAY? HOW WILL THEY BE SCREENED BETWEEN EACH HOME? DO YOU HAVE STAFF THAT ARE DEDICATED TO COVID EXPOSED HOMES?</b>	<b>A: It depends on many factors. Yes, inspectors are screened between homes. RCS staff can be assigned to both COVID and non-COVID homes.</b>
<b>Q: WHAT WILL BE THE EXPECTATION FOR TRANSMISSION</b>	<b>A: A secure file transfer process will be expected for documents.</b>



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OF DOCUMENTS WHICH MAY HAVE SENSITIVE INFORMATION (EMAIL, ENCRYPTION, SECURE FILE TRANSFER, ETC.)?

Q: WOULD YOU CONSIDER CREATING A CHECKLIST FOR AFHS THAT WOULD OUTLINE EVERY EXPECTATION IN REGARDS TO COVID INFECTION CONTROL AND PROCEDURES? THAT WAY ALL AFHS KNOW EXACTLY WHAT YOUR EXPECTATIONS ARE AND WE CAN WORK TOGETHER TO PROTECT THE MOST VULNERABLE?

Q: WILL THEY TAKE OUR PAPERWORK OFF SITE TO REVEIW

Q: WHAT ARE THE NEW THINGS THAT YOU WILL BE LOKING FOR DURING THE INSPECTION, NEW THINGS SO WE CAN BE AWARE OF IT?

Q: HOW FAR BACK WILL RCS LOOK AT DOCUMENTATION ?

**A:** You can use the Infection Control assessment found in this provider letter. This is the same assessment that is used by the surveyors and licensors: <https://www.dshs.wa.gov/sites/default/files/AL TSA/rcs/documents/multiple/021-03-31.pdf>

**A:** RCS will not take original documents offsite to review. We would expect copies, scanned documents, or allowed access to electronic records.

**A:** RCS will be following the same inspection and survey process followed prior to COVID. There will be an enhanced review of infection prevention with the expectation the home is following current CDC, DOH, and LHJ guidelines.

**A:** We will follow the standard survey and inspection process. The documents reviewed will largely depend on the care area being reviewed and the information needed to accurately assess the situation.

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**Q: IF WE ARE GOING TO START SENDING ALL OF THE CONFIDENTIAL RECORDS VIA EMAIL TO THE SURVEYORS WILL WE START USING A SECURE EMAIL SYSTEM? CURRENTLY SENDING FOR COMPLAINTS TO INVESTIGATORS WORK EMAIL THAT IS NOT SECURED LIKE FOR SAY A DSHS CASEWORKER'S IS?**

**A: You can work with the licensor to assure the most secure system is used for transfer of files.**

**Q: DO WE HAVE TO GIVE YOU REMOTE ACCESS TO ALL RESIDENTS, OR CAN WE GIVE YOU A MODIFIED ACCESS THAT ALLOWS FOR ONLY ACCESS TO YOUR SAMPLE RESIDENTS/STAFF?**

**A: You can work with the licensor or surveyor to determine what access is needed. You may be able to start with the sample residents/staff, keeping in mind the sample may need to be expanded per policy and the RCS staff may need access to more records as a result.**

**Q: WITH REMOTE INTERVIEW BEING DONE ARE WE MANDATED TO PROVIDE STAFF PRIVATE PHONE NUMBERS OR CAN WE ARRANGE FOR THESE INTERVIEWS TO TAKE PLACE DURING STAFF WORKING HOURS AND WHAT IF A**

**A: The provider needs to make arrangements to assure both staff and resident interviews can occur. Per regulation a phone should always be available to the resident in the home. It is acceptable for staff to use the facility phone and is not the expectation they must provide their private number. They can provide it if they wish but are not mandated to do so.**

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<b>RESIDENT HAS NO PHONE?</b>	
<b>Q: IF AN INCREASE IN COVID OCCURS AND THE STATE CHANGES THE COVID PHASE WILL THIS IMPACT THE SURVEY PROCESS?</b>	<b>A: RCS is monitoring virus activity in the community regularly and will be continually re-evaluating the survey schedule.</b>

**Waivers**

<u><b>QUESTIONS:</b></u>	<u><b>ANSWERS:</b></u>
<b>Q: IF A RULE WAS WAVED DUE TO COVID AND THAT WAVED RULE HAS BEEN LIFTED DO WE HAVE ANY GRACE PERIOD FOR US? SUCH AS CNA RENEWALS?</b>	<b>A:</b> Both DSHS and DOH will be working to write rules that will allow for a grace period where able. Some laws may not afford the Dept. that opportunity.
<b>Q: PENDING NAR CARE GIVER CERTIFICATE CAN THEY WORK UNSUPERVISED?</b>	<b>A:</b> If they have been appropriately trained and shown comprehension in the task. This training can be done onsite by someone such as the RN.
<b>Q: WHERE DO WE FIND THE WAVED AND SUSPENDED REQUIREMENTS?</b>	<b>A:</b> At the top of each provider page is a link to an excel spreadsheet outlining all of the waived and suspended regulations. The provider pages can be found here: <a href="https://www.dshs.wa.gov/altsa/residential-care-services/residential-care-services">https://www.dshs.wa.gov/altsa/residential-care-services/residential-care-services</a>
<b>Q: FOR STAFF WHO DO NOT HAVE THE 2 STEP TB, WHEN CAN THEY INITIATE THE 2 STEP PROCESS? PRIOR TO COVID SHOT? WHEN CAN THEY GET IT? AFTER THE 2ND STEP DOSE?</b>	<b>A:</b> At this time the timing requirements for TB are waived to allow staff to obtain the COVID shot without concern about interference from the TB test. Providers and staff can follow CDC guidance regarding the best time to obtain the TB test when receiving the COVID vaccine.  <a href="https://www.cdc.gov/tb/publications/letters/covid19-mrna.html">https://www.cdc.gov/tb/publications/letters/covid19-mrna.html</a>
<b>Q: ALSO... FOR AFH'S, IS CPR RE-CERTIFICATION CURRENTLY BEING WAVED?</b>	<b>A:</b> All training requirements in 388-112A are currently waived.

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<b>Q: FOR AFH'S ARE CE'S STILL BEING WAVED?</b>	<b>A:</b> All training requirements in 388-112A are currently waived.
<b>Q: WHAT ABOUT EMPLOYEE FILES, CERTIFICATIONS, HCA, NAC'S, TRAININGS ETC....?</b>	<b>A:</b> All training requirements in 388-112A are currently waived.
<b>Q: AFH: HOW MANY DAYS FOR THE NURSE DELEGATION TO DELEGATE RESIDENTS, 90 DAYS OR 120 DAYS?</b>	<b>A:</b> Please speak with your nurse delegator to determine the current requirements.

**Vaccines:**

<b>QUESTIONS:</b>	<b>ANSWERS:</b>
<b>Q: IF ALL RESIDENTS ARE IMMUNIZED AND CHOOSE NOT WEAR MASK IS THIS CITABLE?</b>	<b>A:</b> The home will want to be sure there is documentation in the resident record regarding the resident choice not to wear a mask. There should be documentation that education with the resident occurred regarding the benefits of source control and the risks for not wear source control, allowing the resident to make an informed choice.
<b>Q: WILL YOU VISIT HOMES WHERE RESIDENTS HAVE NOT BEEN VACCINATED?</b>	<b>A:</b> Yes
<b>Q: SHOULD WE STILL WEAR MASK IN THE AFH EVEN IF ALL OF US (STAFF AND RESIDENTS) ARE FULLY VACCINATED?</b>	<b>A:</b> At this time CDC still recommends masking for LTC residents, staff, and visitors regardless of vaccination status.
<b>Q: WILL FULLY VACCINATED AFH HAVE PRIORITY FOR INSPECTION?</b>	<b>A:</b> Vaccination status of facility will not be part of the consideration process for creation of the survey schedule.
<b>Q: WILL UNVACCINATED INSPECTORS BE MEETING WITH</b>	<b>A:</b> Yes. RCS staff will wear appropriate PPE and follow all infection control protocols.

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<b>UNVACCINATED OCCUPANTS IN THEIR APARTMENT?</b>	
<b>Q: DO WE STILL NEED TO REPORT SYMPTOMS TO THE HOTLINE IF RESIDENT/STAFF IS NOW FULLY VACCINATED? AS MANY OF THE COVID SYMPTOMS ARE THE SAME AS COLD AND FLU?</b>	<b>A: Yes, the requirement for what needs to be reported has not changed.</b>
<b>Q: DO WE NEED TO PROVIDE A PAPER THAT SHOWS IF RESIDENTS AND CAREGIVERS TOOK THE VACCINE?</b>	<b>A: Only if it is needed during the course of an investigation for a specific issue.</b>
<b>Q: HAS THE GOVERNOR'S PROCLAMATION OF UNVACCINATED PERSON CANNOT VISIT UNVACCINATED RESIDENT? IF IT IS STILL IN PLACE, CAN I ASK THE INSPECTOR THAT WOULD COME IN IF SHE OR HE IS VACCINATED SO THAT IF SHE ASKED FOR A RESIDENT TO INTERVIEW I CAN CHOOSE THE BEST RESIDENT TO INTERVIEW?</b>	<b>A: You may not ask the vaccination status of the licenser. Essential health care workers are allowed in the building and are not a part of the Governor's proclamation for visitors. You will not be able to choose the resident sample for the inspector. The inspector has specific parameters to follow in choosing the sample.</b>
<b>Q: ARE WE REQUIRED TO REPORT THE VACCINATED AND</b>	<b>A: The surveyor or licenser would need this data if it is required during the course of an investigation. It is not a standard report RCS will require with every inspection.</b>

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<p><b>UNVACCINATED RESIDENTS?</b></p>	
<p><b>Q: MY CAREGIVER IS PREGNANT REFUSED TO BE VACCINATED. WHAT SHOULD I DO?</b></p>	<p><b>A:</b> The staff are not required to get vaccinated. She can work with her MD on the best course of action during and after her pregnancy.</p>
<p><b>Q: IF RESIDENTS ARE NOT VACCINATED AND THE VISITOR IS NOT VACCINATED, SAFE START GUIDELINES DICTATE VISITS HAVE TO BE OUTDOORS. WILL RND AND ASSESSMENTS HAVE TO BE OUTDOORS THEN?</b></p>	<p><b>A:</b> RNDs and Assessor would be considered essential health care personnel and would not fall under the visitor requirements in the Governor's proclamation.</p>
<p><b>Q: IS IT MANDATORY FOR STAFF TO BE VACCINATED?</b></p>	<p><b>A:</b> No.</p>
<p><b>Q: HOW DOES RCS LOOK AT VACCINATIONS FOR CLIENTS WITH GUARDIANS?. THE GUARDIAN SAYS NO, BUT THE CLIENT WANTS TO BE VACCINATED. HOW SHOULD A PROVIDER HANDLE THIS?</b></p>	<p><b>A:</b> If a guardian is not following a resident wishes, the Ombuds may be able to assist. The provider may want to reach out to the LTC Ombuds or the DD Ombuds (depending on the client diagnosis) for assistance.</p>
<p><b>Q: WE ARE ALL VACCINATED. NO RESIDENTS ARE SICK OR WE HAVE NO COVID IN OUR HOME. ARE ALL STILL GOING TO</b></p>	<p><b>A:</b> Eye protection should be worn when providing care to a resident or when appropriate social distancing cannot be maintained. CDC still requires social distancing and source control, even for those who have been vaccinated.</p>

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**WEAR A MASK  
RESIDENT AND  
CARE GIVER  
INSIDE THE HOME  
AT ALL TIMES?  
WHEN GIVING  
CARE ARE WE  
STILL GOING TO  
USE A  
FACESHIELD?**

**Q: FOR AFH IF  
RESIDENTS ARE  
FULLY  
VACCINATED CAN  
THEY EAT  
TOGETHER  
AGAIN? AND IF  
ALL BUT ONE  
RESIDENT IS  
VACCINATED DUE  
TO ONE RESIDENT  
DECLINING  
VACCINATION CAN  
THEY BE AROUND  
THEM?**

**Q: SNF: PLEASE  
CLARIFY IF  
RESIDENTS WHO  
HAVE BEEN FULLY  
VACCINATED  
REQUIRE A 14 DAY  
QUARANTINE  
UPON ADMSSION  
TO FACILITY?**

**Q: FOR SNF AND AL,  
WHAT WILL BE THE  
EXPECTATION OF  
ONGOING  
VACCINATIONS TO  
RESIDENTS AND  
TEAM MEMBERS, IF  
VACCINES ARE NOT  
AVAILABLE ON  
CAMPUS?**

**A: Residents may eat in the dining room if the provider is able to set up dining so social distancing can be maintained. CDC still recommends social distancing, even for those who are vaccinated, in LTC.**

**A: Not at this time, unless they had prolonged exposure to COVID+ person, they would not necessarily need quarantine. Check with LHJ as they can have stricter requirements.**

**A: DOH is working on a process for ongoing vaccinations. Please also see the recent message to providers outlining steps to take to obtain vaccinations in your home/facility:  
<https://content.govdelivery.com/accounts/WADSHSALTSA/bulletins/2cbef4c>**

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Other:

QUESTIONS:	ANSWERS:
Q: WHY WOULD YOU START WITH COMMUNITIES THAT HAVE HAD NO COVID CASES? SHOULDNT IT BE FOR THOSE THAT HAVE HAD CASES?	A: Facilities/homes with COVID cases are seen through the complaint investigation process. Those homes have been recently visited through the complaint process and we are now working to schedule homes that may not have been recently reviewed.
Q: WILL THE STATE FIRE MARSHAL INSPECT THE GROUP TRAINING HOMES AS WELL?	A: Yes.
Q: CE REQUIREMENT S? STACKING 2020/2021?	A: We are still working on the process for how we will address the CE requirements.
Q: 1.) WHERE DO WE FIND TEMPLATE FOR/ABOUT COVID BINDER? 2.) "WHERE DO WE FIND DSHS COVID INSPECTION - WHAT TO LOOK FOR" LIST?	A: You can find the Infection Prevention assessment tool on the provider page and through the recently released Dear Provider letter: <a href="https://www.dshs.wa.gov/sites/default/files/AL TSA/rcs/documents/multiple/021-03-31.pdf">https://www.dshs.wa.gov/sites/default/files/AL TSA/rcs/documents/multiple/021-03-31.pdf</a>



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<b>Q: HOW DO YOU GO ABOUT THOSE AFHS THAT ARE IN THE CHOW PROCESS?</b>	<b>A: RCS may do an inspection with the current licensee as most homes are due for inspection. Once the CHOW occurs, the new owner could expect an inspection within a few months after obtaining the license.</b>
<b>Q: ANY TIME LINE FOR CHOW INSPECTIONS? FOR EXAMPLE AFH CHANGING STRUCTURE? OR NEW AFH THAT TURNED IN APPLICATION OF CHOW?</b>	<b>A: RCS may do an inspection with the current licensee as most homes are due for inspection. Once the CHOW occurs, the new owner could expect an inspection within a few months after obtaining the license.</b>
<b>Q: HI I SIGNED FOR THE ICARE TO VISIT ME IN PERSON. ARE THEY STILL COMING TO DO THE UNREAL INSPECTION?</b>	<b>A: Yes, The LHJs in coordination with DOH are still providing the ICAR assessments in facilities/homes. This is separate from the RCS inspections and will continue after RCS resumes doing inspections in the facilities/homes.</b>
<b>Q: HI - DO YOU KNOW WHEN THE TRAINING SITES FOR HCA WILL BE OPEN AGAIN?</b>	<b>A: A small number of training sites are currently open but are only able to take a reduced number of trainees due to social distancing and infection control guidelines. As more of the state moves into phase 3 of the Governor's Healthy WA plan, more sites will become available. RCS, HCS, and DOH are working on regulation language in recognition LTC staff are struggling to meet timeframes due to limited training and testing sites available.</b>
<b>Q: WHAT ABOUT NEW AFH HOMES THAT HAVE NOT RECEIVED Q&amp;A? IT USED TO BE THAT NEWLY LICENSED AFH ARE GIVEN A CALL AS TO</b>	<b>A: Quality Assurance (QA) inspections have always been unannounced. At the time of licensure, providers are informed of QA visits. Providers are called 60 days post licensure to determine whether or not they have admitted residents so licensuror can plan when to conduct the unannounced QA inspection. Licensed providers are told the QA inspection is done within 120 days post licensure, provided they have admitted at least one resident and the resident has been in the home at least 30 days. Because these visits are unannounced, providers are not told what date/time of the QA inspection.</b>

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WHEN THEIR FIRST Q&A WILL BE CONDUCTED.	
Q: OUR COUNTY IS BEGINING A OFF SITE DAY PROGRAM. CAN OUR RESIDENTS GO TO THIS DAY PROGRAM IF THEY HAVE TO GET ON A BUS THAT DOESN'T PROVIDE THE 6 FOOT DISTANCE REQUIREMENT ?	A: Residents are able to participate in outside activities. The home will want to complete a risk assessment when the resident returns home. The risk assessment will help determine if the resident needs to quarantine after the activity and does take into account the resident vaccination status: <a href="https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/riskassessment_communityvisit.pdf">https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/riskassessment_communityvisit.pdf</a>
Q: WHAT HAPPENS IF THEIR HOME IS SMALL AND SAFE FOR ONLY STAFF AND THE PERSON?	A: The provider will need to work and talk with the licensor or contractor on the best approach or options to take to complete the inspection.
Q: HOW DO WE CONTROL RESIDENTS THAT CHOOSE NOT TO FOLLOW MASKING OR SOCIAL DISTANCING RULES/GUIDANCE?	A: Educate residents about risk to themselves and others. Ask Ombuds if they may be able to assist in talking with resident about the risk their behavior may pose to others in the home.
Q: MY HOME JUST SIGNED UP WITH COMPUTERIZED CHARTING WITH SYNKWISE ...	A: Yes, if you are able to share some of your records this way it would be very helpful in potentially reducing the time the RCS staff need to spend in the home.

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**MAY WE USE THIS TO HELP RCS & OUR HOMES TO FACILITATE THE ANNUAL STATE INSPECTION PROCESS?**

**Q: CAN YOU EXPLAIN WHAT A GROUP INTERVIEW IS WITH REGARDS TO AN ESF AND ALF INSPECTION? WE ARE WAITING FOR OUR FIRST INSPECTION AND ARE NOT FAMILIAR WITH WHAT THIS IS AND HOW MANY PEOPLE WILL ATTEND TO FIND A SPACE THAT WILL WORK FOR THIS.**

**A: During the survey RCS staff would usually invite residents in the home to come to a meeting with the RCS staff. Usually it is members of the Resident’s Council who want to participate in this group meeting, but others are also encouraged to join. RCS staff gather information from the residents about the home.**

**Currently this group meeting will be more difficult to accomplish due to social distancing guidelines and required infection control practices. The inspection and survey team will work with the provider in setting up any group meetings. A large group will not be practical and the concept may need to be modified depending on the number of residents in the home and the size of meeting space available.**