## **Wyoming Department of Health**

## **Aging Division - Healthcare Licensing and Surveys**

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## ASSISTED LIVING FACILITY Focused COVID-19 Infection Control Survey

Facility Name:		
City: Survey Date:		
Surveyor(s):		
The surveyor will request the following documents:  -A list of all current residents, noting those with active/confirmed/suspected COVID-19 -The policies or guidance the facility is using for COVID-19		
Regulatory Language: (5001, 5002)		
Staffing: Section 6 (b)(i) The staffing level shall be sufficient to meet the needs of all residents of the facility, and insure	YES	NO
the appropriate level of care is provided.		
Section 6 (b)(ii) There shall be personnel on duty to maintain order, safety, and cleanliness of the premises, to		
prepare and serve meals, to keep an adequate supply of clean linens, to assist the residents in personal needs and		
recreational activities, and to meet the other operational needs of the facility.		
Based on observation, and staff and resident interviews, does the facility have sufficient staff to safely provide		
care during ongoing COVID-19 pandemic conditions?		
Regulatory Language: (5007)		
Infection Control		
Section 6 (d) Infection Control. Written policies shall be in effect to ensure that newly hired and current		
employees do not spread a communicable disease that could be transmitted through usual job duties. These shall		
include but not be limited to: (i) Ensure a safe and sanitary environment for residents and personnel.		
Specific to the WDH COVID-19 recommendations, issued 10/01/20:		
1. Have staff and residents been educated on COVID-19?		
2. Are staff and residents appropriately using personal protective equipment (PPE)?		
3. Are residents encouraged to remain in the facility?  4. In the facility ellowing vicitation according to avidelines?		
4. Is the facility allowing visitation according to guidelines?	-	
5. Do all visitors and residents enter through a designated entry to allow for screening?	-	
6. Are staff screened at the beginning of each shift?		
7. Are residents routinely screened for COVID-19 symptoms?	<b> </b>	
8. Does the facility encourage proper hand washing?		
9. Has the facility ensured the availability and accessibility of alcohol-based hand rub (ABHR)?		
10. Do staff regularly clean and disinfect the facility, paying special attention to high-touch areas and surfaces?		
11. Is the facility limiting communal dining and requiring social distancing of at least 6 ft. between residents in the dining room?		
12. Do residents with suspected or confirmed COVID-19 infection eat meals in their rooms?		
13. Is the facility familiar with CDC and WDH guidelines?		
14. Iis the facility conducting surveillance testing of staff:		
15. Is the facility following the testing and infection control recommendations of WDH when a case of COVID-19 is detected among residents or staff?		

16. Is the facility following WDH recommendations related to barbering and cosmetology services (no		
suspected or confirmed cases ov COVID-19 in the facility, barber/cosmetologist screened for symptoms or	1	
exposure to COVID-19, residents wearing masks, barber/cosmetologist wearing mask, appropriate cleaning	1	
and sanitization, appropriate hand hygiene, social distancing, barber/cosmetologist remains in location where		
they provide services, barber/cosmetology service area is well-ventilated)?	1	
17. Is the facility following WDH recommendations for the prevention of COVID-19? If "No", please		
document explanation.	1	
Based on observation, resident and staff interview, and review of policies, has the facility developed and		
implemented written policies to ensure the prevention of COVID-19 infection?	1	
Regulatory Language: (5008)		
(ii) (F) No person with an airborne, contagious or infectious disease shall be employed until a work release is		
obtained. (I)The facility shall prohibit employees with a communicable disease or infected skin lesions from direct contact		
with residents and their food, if direct contact will transmit disease.		
Based on observation, review of policies, and staff interviews, does the facility prohibit employees with		
suspected or confirmed COVID-19 from working?	1	
Regulatory Language: (5012)		
Section 7. Core Services.		
(a) (ii) A safe and clean environment		
Based on observation and staff interview, do staff regularly clean and disinfect the facility, paying special		
attention to high-touch areas and surfaces?	1	
Regulatory Language: (5023, 5024, 5026)		
Section 7 (b)(iv) Frequency of [RN] assessment. An assessment must be conducted:		
(B) Immediately upon any significant change in the resident's mental or physical condition.		
Section 7 (b) (v) (A) The results of the assessment are used to develop, review and revise the resident's		
individualized assistance plan.		
(vii) The assistance plan shall be reviewed and updated by the RN at least annually or when a significant change		
occurs, with input from direct care-givers, the resident, and others as designated by the resident.		
Based on observation, record review, and resident and staff interview, does the facility have procedures in		
place for assessing residents suspected of having COVID-19, and revising the assistance plan as	1	
necessary?		
Regulatory Language: (5054)		
Section 7 (e) (D) All accidents, injuries, incidents, illnesses, and allegations of abuseshall be reported to the		
resident's family or responsible party and be documented in the individual resident recordsReport of all		
incidents affecting the health, welfare of safety of a resident shall be provided to the Licensing Division and the		
Long Term Care Ombudsman within five (5) working days.		
Based on observation, record review, review of incidents, and resident and staff interview, does the facility		
report suspected or confirmed COVID-19 appropriately?		
Regulatory Language: (5073, 5077)		
Section 7. (j) (vi) The kitchen and dining area shall be kept clean and sanitary in accordance with standards		
established in the current edition of FDA Food Code. The dining area shall provide suitable furniture and		
adequate space to comfortably seat all residents.		
Based on observation and staff interview, are recommendations for social distancing and communal dining	1	
being followed for residents who are not suspected of COVID-19 infection?		
Regulatory Language: (5091)		
Section 7 (n)(ii)		
(X) (II) All linen shall be bagged or placed in a hamper before being transported to the laundry area.		
(VI) Soiled linen shall not be transported through, sorted, processed, or stored, in kitchens, food preparation		
areas, or food storage areas.		
Based on observation and staff interview, does the facility handle the linens of residents with suspected or		
confirmed COVID-19 appropriately?		