



Department of Health

Infection Inspection Audit and Checklist Questions and Answers

In response to [Dear Administrator Letter NH 23-16](#), the Department of Health (“Department”) received questions from its stakeholders, and shares the following answers to questions received to date. Questions are continually accepted at nhinfo@health.ny.gov.

Question #1: Where is the survey link for the Infection Inspection Audit and Checklist?

Answer #1: <https://apps.health.ny.gov/pubpal/builder/survey/ltc-infection-control-audits-vid>. The Department strongly recommends that users bookmark this link on their computers.

Question #2: Where can we find the recorded webinar for future reference?

Answer #2: The recording is available at:

<https://meetny.webex.com/webappng/sites/meetny/recording/b08cff7e7bf6103cbfdd0050568101f7/playback>.

Question #4: Does the survey save our work as we go?

Answer #4: Users cannot save their work within the survey as sections are completed. The survey will need to be completed and submitted in one session or work will be lost.

Question #5: How will the facility know when their survey is due?

Answer #5: The Department will outreach each facility with their specific 2024 due dates. Because the audit is annual, generally the due date in future years will be similar and therefore predictable going forward.

Question #6: Can only specific staff or assigned Health Commerce System roles complete the survey?

Answer #6: No, the submission can be made by facility staff as assigned. However, one of the survey questions requires identification of a contact person, who may or may not be the same person who submits the survey. It is important that contact information is current and accurate in the event that follow-up is needed.

Question #7: Are there file size limits for the evidence such as photos and/or videos, that we upload?

Answer #7: Yes, the per submission size limit is 100 MB. Within the survey, a user can click on the “Upload requirements” link to see the limitations.

Question #8: How does a facility find their Facility Identification Number?

Answer #8: The Facility’s Identification Number and other facility demographics for the audit such as its address and name, will be provided to the provider upon outreach by the Department. Additionally, the Facility’s Identification Number is its Organization Number as it appears on the Health Commerce System. For Health Commerce System account inquiries, please outreach the Commerce Accounts Management Unit via email to camu@health.ny.gov.

Question #9: Whose information should be entered in the “Audit Staff Information” section?

Answer #9: Please use this section to identify the facility staff who completed the audit at the facility level.

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Question #10: Is there a template for the staffing and cohort plan?

Answer #10: There is not a template.

Question #11: What if our COVID staffing and cohorting plan is included as a subsection of our general infection control staffing, and cohorting plan?

Answer #11: In this case, the facility should submit their general infection control staffing, and cohorting plan twice, once for both the COVID Staffing and Cohorting Plan and General Infection Control Staffing and Cohorting Plan survey elements.

Question #12: What if a facility does not have a designated outbreak staffing team, but rather staff that work on that particular unit during that particular time?

Answer #12: If a facility's submission is due during an active outbreak, the facility should upload a list of staff names and titles of staff who directly interact with residents who are confirmed or suspected to be infected with a contagious or infectious disease. If the facility's submission is due at a time when there are no confirmed or suspected resident infections, the facility should indicate there is not presently an outbreak and provide titles of staff only who would have direct interactions during an outbreak.

Question #13: Must a complete line list be submitted?

Answer #13: No, a completed line list is not required for several reasons. First, the purpose of this audit is to submit information that illustrates the facility's outbreak readiness. Second, completed line lists contain protected health information that might not be appropriate to share in this instance. While this survey platform is secure and compliant with the Health Insurance Portability and Accountability Act of 1996, facilities do not need to submit resident-identifying protected health information, just the template of the list to be used during an outbreak.

Question #14: Can a facility upload multiple submissions within a section?

Answer #14: Only 1 upload per section is allowed, however there are additional areas labeled as photo or video evidence that can be used for additional submissions in those sections, referenced by no red *.

Question #15: Is there a percentage requirement for the supplies of personal protective equipment?

Answer #15: Please follow the Personal Protective Equipment supply requirements as set forth in Public Health Law section 2803(12) and as outlined in [DAL NH 23-17: Personal Protective Equipment Stockpile Requirements for Nursing Homes](#).

Question #16: Will this audit supersede the onsite infection control surveys?

Answer #16: No. This is a new infection control inspection annual audit required pursuant to 2022 amendments to Public Health Law § 2803-aa to evaluate the Nursing Home's infection control competencies. This is a desk audit and as such does not require an onsite visit. Non-compliance, however, may result in an onsite visit as part of the routine regulatory oversight provided by the Department of Health.

Question #17: Must nursing homes submit an Infection Control manual with all policies and procedures?

Answer #17: Please upload the facility's General Infection Control and COVID-19 Staffing and Cohorting Plan based on recommendations by the Centers for Disease Control and Prevention. If the General Infection Control staffing and cohorting plan is the same one used for the COVID plan, please upload the same plan in both sections.

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Question #18: If there is no outbreak, are we to create a mock outbreak for purposes of the audit, providing photos of signage and staff donned in personal protective equipment?

Answer #18: No, the purpose of this audit is to assess the facility's infection control competencies. If there is not an outbreak at the time the facility's audit is due, please document there is no current outbreak and upload pictures of an area the facility might use for an outbreak, illustrating, for example, the facility's ability to isolate within the area/room such as by having the ability to close doors, as well as copies of signage to be used during an outbreak.

Question #19: Once submitted, how will the facility know if the submission is accepted?

Answer #19: Within ninety days of submission, the Department team will outreach if there are updates required. In that instance, the Department will advise which section/s require resubmission.