

The Joint Commission is ~~Coming!~~ **has come!**



David M. Lang, M.D., M.P.H.
CC Office of Patient Safety and Clinical Quality



Introductory Summary

- Joint Commission unannounced triennial accreditation survey was expected before September 2024. (Prior visit- August 31-September 2, 2021)
- Preparations and considerations
- Findings on mock surveys and new initiatives
- TJC triennial survey April 9-11, 2024
- Findings and follow-up actions
- Ongoing activities



Concerning findings in 2021 survey

- Widespread and highest-level findings around sterile instrument management and storage, and of staff training and recognition of instrument suitability for use
- Additional high-level finding concerning screening for abuse and neglect in outpatients



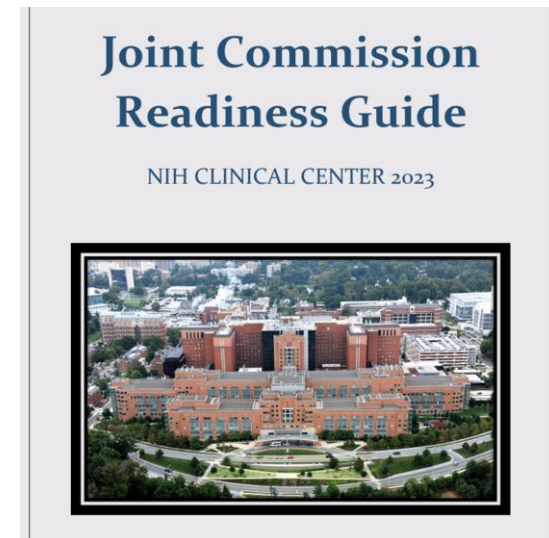
Changes after 2021 survey

- Overhaul of sterile instrument program to ensure the sterile processing department had the resources and support needed
- Management of instrument storage on units and in clinics
- Many collaborations with institute partners and between CC departments
- New training module for staff- in 2021, and updated in 2023
- Sterile instrument management a point of emphasis at all levels of organization
- MAS M94-5 and M97-5, and CCND processes revised to include screening for abuse and neglect in inpatients **and** outpatients



Preparations for 2024

- Focused Standards Assessment
 - Chapter champions for each chapter in TJC manual
 - Monthly meetings to share findings, considerations, and challenges
- Outside consultant
 - Mock survey February 2023
 - Survey management class January 2024
 - Infection control focused consult survey March 2024
- Internal mock survey February 2024
- Leadership Safety Rounds
- Tracers
- Survey Readiness Guide, Safety moments, Points of emphasis





New requirements

- Workplace Violence Prevention- in the Leadership Chapter
 - LD.03.01.01- Leaders create and maintain a culture of safety and quality throughout the hospital
 - EP 9- the hospital has a workplace violence prevention program lead by a designated individual and developed by a multidisciplinary team...
- Healthcare disparities and social determinants of health analysis
 - National Patient Safety Goal
 - NPSG 16.01.01- Improving healthcare equity for the hospital's patients is a quality and safety priority
 - 6 elements of performance
 - Presentation by CMO at February CCRHB

Mock survey- Findings and changes (Feb 2023)



- Sterile instruments- management on floor and certain practices
 - Updated training and practices
 - New SPD space with improved work areas and equipment
- Documentation of home medication management
- Environment of care- “hard to reach, hard to see” areas; housekeeping audits
- Suicide screening- was in process of updating
- New requirements on healthcare disparities and workplace violence

Mock survey- Findings and changes (Feb 2024)



- Storage- clean vs dirty and labelling of equipment
- Expired supplies
- Log of emergency equipment check
- Medication supplies
- Process improvement projects- ability to articulate
- Presentation of data

TJC- summary of sessions and visits- April 9-11, 2024



- Physician, Nurse, and Life Safety
- Physician and Nurse combined to most locations throughout hospital
- Life Safety evaluated environment and life safety everywhere

- Organization Quality and Performance Improvement Session
- Leadership Session
- Credentialing and Competence assessments
- Emergency management Session



TJC Findings- 4/9/2024 - 4/11/2024

Likelihood to harm a Patient / Visitor / Staff	ITHS	ITHS		
	High	MM.03.01.01 EP 8	MM.05.01.07 EP 4 MM.06.01.01 EP 3	
	Moderate	EC.03.01.01 EP 1 LS.02.01.20 EP 14 PC.01.02.03 EP 5	IC.02.02.01 EP 2	
	Low	EC.02.04.03 EP 3 EC.02.05.01 EP 23 LS.02.01.30 EP 3 LS.02.01.34 EP 10 LS.02.01.35 EP 14 LS.05.01.10 EP 7 LS.05.01.30 EP 1 LS.05.01.35 EP 4 LS.05.01.35 EP 5	EC.02.05.01 EP 9 EC.02.05.01 EP 24 IC.02.01.01 EP 1 LS.02.01.70 EP 6 LS.02.01.70 EP 8	LS.01.01.01 EP 4
		Limited	Pattern	Widespread
		Scope		



TJC – Data and Process Improvement Session

- Asked to share our priorities, PI projects, Issues of common concern
- Safety culture
- Falls, Infection Control, Medication Management, Safety, Surgical Statistics, Patient Flow
- Planning, evaluation, and implementation of Pediatric Behavioral Health-Medicine program
- Press-Ganey and Culture of Patient Safety survey



TJC- General observations

- *Very impressed with the hospital and the staff. Inspired by the mission.*
- *Cleanest kitchen I have ever seen.*
- (Transfer record to another hospital) *Impressed with how quickly and how organized the transfer was.*

- Staff was engaged and well prepared
- Showed off excellent care and teamwork
- Multidisciplinary collaboration
- Surveyor asked about communication at every stop

TJC Findings and Responses-

Medication Management



- MM.03.01.01- An expired vial of contrast found in a cabinet
 - Storage moved to the automated dispensing cabinet (Omniceil)
 - All medications in Omnicell, unless there is a compelling reason (e.g. emergency carts)
- MM.05.01.07- Air pressure differentials in hazardous sterile medication preparation, between prep room and buffer room
 - Need to meet USP 800
 - Thorough analysis of the entire area determined that the existing design maintains the integrity and cleanliness of the products while also protecting staff safety, within the allowed deviation guidelines of USP 800
 - Short beyond use date considerations further mitigate potential impact to the products
 - P-IVAU will adhere to a tighter range
- MM.06.01.01- Medication titration order not followed
 - Education to prescribers on entering titration parameters
 - Education and reinforcement to nursing staff on required documentation
 - Audit tool- daily audit in ICU

TJC Findings and Responses-

Infection Control



- IC.02.02.01- How an instrument washer test strip is interpreted
 - Conferred with washer vendor- Adjusted how strip is loaded
 - Modified practice so that *any* coloration leads to evaluation and retest
- IC. 02.01.01- Washing of dishes in Rehab Medicine kitchen
 - For now, patients will not eat food that is prepares as part of evaluation and therapy
 - Investigating higher grade dishwasher

TJC Findings and Responses-

Provision of Care



- PC.1.02.03- Invasive procedure under sedation for outpatient; update to history and physical was completed evening prior
 - Reinforced policy
 - Revised sedation worksheet to include documentation that H&P is reviewed and to provide updates or statement of no updates



TJC- Closing thoughts

- Accreditation is a validation of outstanding work
- Improvements and diligence were evident
 - Internal and consultant mock surveys- We will continue to ensure we maintain improvements
- We do these things not to pass a test, but to be sure we are giving our patients the best care possible

- *Continue* to focus on clear communication and documentation
- *Continue* improved processes
- *Continue* training and preparations
- *Continue* process improvement
- *Continue* to engage and collaborate