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Patient safety

National Time Out Day to be recognized by The Joint Commission and AORN

The Joint Commission and the Association of periOperative Registered Nurses (AORN) urge health care practitioners and organizations to recognize National Time Out Day on June 12 to help draw attention to the "time out" as a tool for the prevention of wrong-site, wrong-side, wrong-procedure or wrong-person surgery. In honor of National Time Out Day, AORN and The Joint Commission ask all immediate members of the surgical team and the organizations where they work to commit to conducting a safe, effective time out for every patient, for every surgical procedure. A wrong-site surgery should never happen and when it does it can be devastating for the patient, the surgical team and the health care organization. Resources for celebrating National Time Out day are available on the <u>AORN website</u>. Resources to prevent wrong-site surgery:

- Joint Commission Universal Protocol
- Joint Commission Center for Transforming Healthcare TST for Wrong Site Surgery
- AORN Comprehensive Surgical Checklist

(Contact: Elizabeth Eaken Zhani, ezhani@jointcommission.org, or Gayle Davis, gdavis@aorn.org)

Environment of Care management plan: A roadmap to managing the EC

To provide true value, the Environment of Care (EC) management plan should serve as a roadmap, guiding an organization's operations to minimize risk and support strong performance in six key EC functional areas: safety, security, hazardous materials and waste, fire safety, medical equipment, and utilities. Effective management plans are required of all Joint Commission-accredited organizations except for those accredited under the office-based surgery and home care programs. Management plans shouldn't detail how things are done, but should provide assurance that processes are in place to respond to risk. For example, an organization's utilities management plan might say: Although Acme Hospital does not monitor for Legionella bacteria, there is a process in place whereby the organization can implement mitigation strategies when notified by the infection control department of a potential outbreak. This statement assures that the organization has a mitigation strategy and knows when to activate it. As your organization creates or revises its management plan, keep the following in mind:

- Don't cite the standards in the plan. While the plan must address the pertinent EC standards and
 their elements of performance (EPs), you don't need to repeat them. Your organization may
 annotate a copy of the plan with the standard numbers to ensure that the plan addresses every
 relevant EP. This can also help during survey because the surveyor can quickly see how your
 organization complies with specific standards.
- Determine a format for the plan. The format of the plan can be determined by your organization. The plan can be:
 - o Individual documents that address each aspect of the EC
 - One set of consolidated plans that cover all your organization's functions
 - One document that covers the topic areas that apply to all management plans and adjunct plans that highlight the work specific to the functional areas

An overall plan could describe each function as it relates to the entire EC management process, and attachments can go into the details for each of the six functional areas.

- Have a consistent structure for the plan. This enables anyone to pick up the plan and know where
 to find certain information. For example, each plan could include a mission and vision statement,
 a description of plan scope, a list of objectives, a list of compliance details, and a brief discussion
 about how performance will be measured and how the plan will be evaluated.
- Cite supporting policies and how to access them. This might include cross-referencing the appropriate policies and procedures or providing a list of them in an addendum to the plan.
- Show compliance with the strictest authority having jurisdiction (AHJ). The EC standards require one fire drill per shift per year in freestanding business occupancies. However, if the local fire marshal requires more frequent drills, an organization must honor that requirement. If the local AHJ requires one drill every two years, an organization is still required to have one per shift per year according to The Joint Commission, which is then the strictest AHJ. When the AHJ is not The Joint Commission, the plan should state that your organization is meeting the stricter authority's requirements.
- Reference related Joint Commission standards. Standards from other chapters of the
 accreditation manual might apply to EC efforts and should be referenced in the management
 plan. A plan that refers to other standards will yield a more complete picture of the management
 process for each EC area and will create a safer environment for patients.
- Have a plan for every site accredited by The Joint Commission and ensure that the plan applies
 to the setting. For example, if a hospital has several physician offices, each office should have a
 management plan that reflects the activities that occur at that location. The hospital's primary plan
 can be adapted to different settings. While the hospital's hazardous materials management plan
 might mention mitigation strategies for Legionella, the physician office should not address this
 topic unless it has such mitigation strategies in place.

For more information, see the June 2013 *Perspectives* or the June 2013 issue of *Environment of Care® News*. (Contact: George Mills, gmills@jpintcommission.org)

Seeking successful infection control practices in nursing homes and assisted living facilities. As part of a U.S. Agency for Healthcare Research and Quality (AHRQ)-funded conference grant, "High Reliability Practices to Reduce Transmission of Infections in Long Term Care," The Joint Commission is seeking examples of effective, successful or high reliability practices that prevent infections in nursing homes and assisted living facilities. These could include effective policies or procedures that prevent infections or stop the transmission of organisms, effective strategies to control infections, or successful ways to communicate with staff, residents, families and other health care facilities. The submissions may be selected for discussion at an invitational roundtable meeting in July 2013 and included (with permission) in education materials made available at no charge to the field later this year. To submit a practice for consideration, please complete the online survey. The survey will be available until June 21, 2013. (Contact: Kris Donofrio, kdonofrio@jointcommission.org)

Accreditation

Errata for DSC manual: Comprehensive Stroke Center chapter corrections

The first three pages of the "Advanced Disease-Specific Care Certification Requirements for Comprehensive Stroke Center (CSC)" chapter of the 2013 Disease-Specific Care Certification Manual were incorrectly printed with information from the manual's advanced primary stroke center chapter. The error affects information on the program background, including CSC eligibility, standards requirements, clinical practice guidelines requirements, and performance measurement requirements. The standards and elements of performance in the CSC chapter are correct. Corrected introductory pages for the chapter are available on The Joint Commission website, and will be included in the July 2013 issue of Perspectives. We apologize for any inconvenience caused by this error. (Contact: Helen Fry, hfry@jcrinc.com)

Resources

New on the web

- Technical Assistance Teleconference List Listen to audio replays of the Bureau of Primary Healthcare's monthly technical assistance teleconferences. The May 30 teleconference: Review of the Most Challenging 2012 Ambulatory Care Standards for Health Centers - Part 2 on Customer Value Assessment Background, National Class Standards Fact Sheet 2013.
- Home Care Bulletin Issue 1, 2013 News about the Home Care accreditation program
- Blog Posts:
 - @ Home with The Joint Commission Season of the Talisman As our resilient Midwest neighbors in Moore, Okla., recover from last month's devastating F5 tornado, they demonstrate courage, community and caring.
 - Lab Accreditation The LOINC and short of it why you should become a data transmission advocate - Laboratorians are the lab data experts, but how do you transform yourself into a data transmission advocate?
 - Joint Commission Webmaster's Blog Help us improve our website!

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