

Nursing Care Center Accreditation

Check in with The Joint Commission.



What We'll Cover Today –



What nursing care center customers need to know:

- Learn about standards changes
- Tips from our Field Director on thriving throughout the accreditation process
- Current most commonly cited RFIs
- State relations updates



Today's Nursing Care Center Experts



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Standards Update for Nursing Care Centers

Updates from the Department of Standards and Survey Methods

- NCC & NCC Memory Care Updates
 - Last Updated July 1, 2022
- Assisted Living Community Memory Care Certification
 - Launched July 1st, 2023
- Post-Acute Care Certification
 - Launching July 1st, 2024



Standards Development

- Analyze Current State
- Research
- Technical Advisory Panel
- Draft Standards with Internal Review
- Field Review
- Final Approval





Updates from the Department of Standards and Survey Methods

American Medical Directors Association's (AMDA),

Post Acute and Long-term Care (PALTC) Clinical Practice Guidelines

- 19 Topics
- 3Ds: Delirium, Depression and Dementia



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Field Review

- Boots on the Ground Expertise
- Post-Acute Field Review August-September
 2023
- Invitations Will be Emailed to Customers



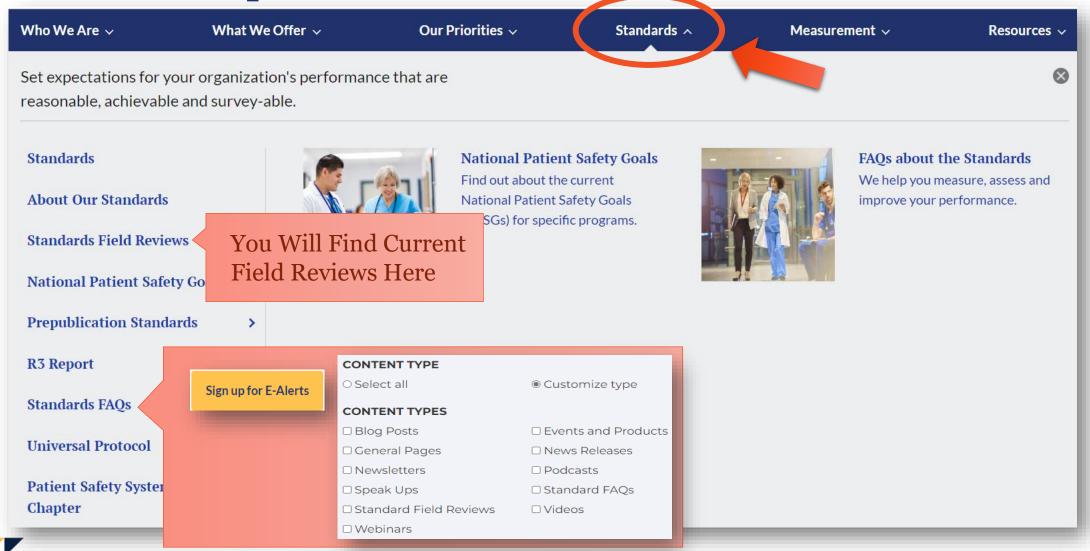
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Who We Are v What We Offer v Our Priorities V Standards ^ Measurement v Resources v Set expectations for your organization's performance that are reasonable, achievable and survey-able. Standards **National Patient Safety Goals FAQs** about the Standards Find out about the current We help you measure, assess and **About Our Standards** National Patient Safety Goals improve your performance. SGs) for specific programs. Standards Field Reviews You Will Find Current Field Reviews Here National Patient Safety Go **Prepublication Standards** > **R3** Report Standards FAQs **Universal Protocol Patient Safety Systems PS** Chapter

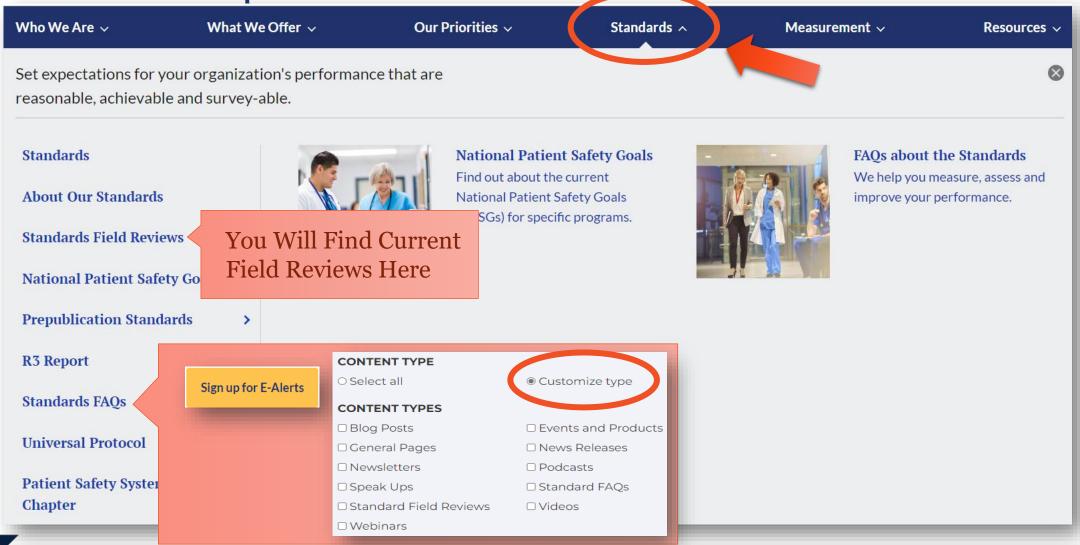


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- ALC Memory Care Add-On Certification
 - Launch 7/1/23
- Webinars and Other Resources <u>www.jointcommission.org</u>
- Standards Inquiries
 https://web.jointcommission.org/sigsubmission/sigquestionform.aspx?Pr
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Tips on Thriving Throughout the Survey Process

Checking in with Survey Process: The Problem

- What to do after the survey is over?**
- Navigating a Joint Commission survey when you have just started a new job as an Administrator or DON for the building
- Managing a Joint Commission survey when The Joint Commission and the State Department of Health are present at the same time



After the Surveyors Leave: Now What?

- Yeah, we're done until they come back in 3 years!
- Celebrate!
- Something Else?





After the Surveyors Leave: The Journey Continues

- Celebrate your accomplishments
- Work with your leadership team and personnel on:
 - understanding the why
 - developing fixes
 - implementing fixes
 - evaluate
 - adjust as needed
 - sustain improvement
 - stay informed/keep current
 - document your journey





I Just Started My Job & The Joint Commission is Here!!!

When you start your new job

- Ask to see the last Joint Commission survey report
- Ask to see the follow-up plan
- Ask for access to Joint Commission Connect
- Get to know the standards
- Read chapter introductions
- Skim through other resources
- Review the public Joint Commission website





I Just Started My Job & The Joint Commission is Here!!!



As soon as you can after starting your new job

- Evaluate where the building is in their quality and safety journey
- Find out what resources are available to you within your organization
- Develop a plan

When the surveyor arrives

- Share your status with the surveyor
- Ask questions during the survey
- Don't focus on the number of requirements for improvement (RFIs)

The Joint Commission Mission
To continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value.

The Joint Commission Vision
All people always experience the safest,
highest quality, best-value health care
across all settings.



State and The Joint Commission Present at Same Time Issues

<u>Issues</u>

- Both arrive at same time
- State arrives after Joint Commission
- DON, Administrator, or Facilities Director needed by both simultaneously
- Both groups requesting the same documents
- Both groups in patient care areas at the same time

Potential Solutions

- Have a plan for how to manage when both groups are onsite at the same time
 - Keep your documents organized and readily accessible
 - Prioritize your quality and safety journey
- Share potential for State visit with surveyor upon arrival
- Have State and Joint Commission surveyors meet to coordinate activities
- Make your schedule preferences known
- Make your patient care priorities and requirements known





Standards Interpretation Group



Most Frequently Cited







Environment of Care

#1 EC.02.02.01 EP 5:

The organization minimizes risks associated with selecting, handling, storing, transporting, using, and disposing of hazardous chemicals.







Eyewash Station Strategies

- Required where corrosive chemicals are used/mixed/dispensed.
- Accessible: within 10 seconds from where hazardous chemicals located without obstructions.
- Temperature: tepid water with mixing valve.
- Activates within 1 second.



^{*} See Perspectives March 2021.

Environment of Care

#4 EC.02.02.01 EP 11

For managing hazardous materials and waste, the organization has the permits, licenses, manifests, and safety data sheets required by law and regulation.

Examples

- DOT training not done.
- Staff who signed the manifest did not have training completed.



Environment of Care

#5 EC.02.06.01 EP 1

Interior spaces meet the needs of the patient and resident populations for safety and suitability for the care, treatment, and services provided. **Note:** Interior spaces contain rehabilitation equipment and activities needed to achieve patients' and residents' goals, but they are arranged in a way that does not compromise the safety of the environment.

Observations

- Stained ceiling tiles.
- Cracked floor or wall tiles.
- Peeling paint.
- Furniture not in good repair.
- Floors in need of deep cleaning.



Strategies

- Set a maintenance schedule for ceiling tiles and deep cleaning.
- Staff education.
- Environmental rounds.









Infection Control

#2: IC.02.02.01 EP 4

The organization implements infection prevention and control activities when doing the following: Storing medical equipment, devices, and supplies.







Examples

- Expired supplies
- Sterile item/kitchen items stored on open, bottom shelf without solid bottom.
- Dirty equipment stored in clean storage area.

Strategies

- Assign someone to check for expired supplies at a specified frequency.
- Use plastic coverings on bottom shelf.
- Designate an area for dirty equipment. Monitor by rounding at a specified frequency.



Provision of Care

#3 PC.02.02.03 EP 11

The organization stores food and nutrition products, including those brought in by patients and residents or their families, under proper conditions of sanitation, temperature, light, moisture, ventilation, and security.









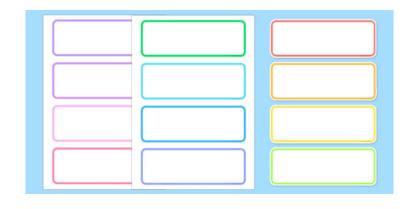
Observations

- Expired food.
- Unlabeled food.
- Missed temperature checks of refrigerator/freezer.
- No action taken when temperatures are out of the required range.
- Comingling expired products with unexpired products.



Strategies

- Environmental rounds monthly.
- Education for staff quarterly or biannual.
- Labels readily available in sleeve on refrigerator.
- Assigned refrigerator clean out twice weekly.







Provision of Care

7: PC.02.01.03 EP 7

The organization provides care, treatment, and services according to current orders.

- Not measuring PICC line arm circumference as ordered.
- Not giving sliding scale insulin as ordered.
- Failing to notify physician when patient refuses medication/treatments.



Human Resources

6: HR.02.01.04 EP 1

Before permitting licensed independent practitioners new to the organization to provide care, treatment, and services, the organization does the following:

- Documents current licensure and any disciplinary actions against the license available through the primary source.
- Verifies the identity of the individual by viewing a valid state or federal government-issued picture identification (for example, a driver's license or passport).
- Obtains and documents information from the National Practitioner Data Bank (NPDB). The medical director evaluates this information.
- Determines and documents that the practitioner is currently privileged at a Joint Commission—accredited organization; this determination is verified through the accredited organization. If the organization cannot verify that the practitioner is currently privileged at a Joint Commission—accredited organization, the medical director oversees the monitoring of the practitioner's performance and reviews the results of the monitoring. This monitoring continues until it is determined that the practitioner is able to provide the care, treatment, and services that they are being permitted to provide.



Human Resources

#10 HR.02.01.04 EP 5

At least every three years or within the period required by law and regulation if shorter, before permitting licensed practitioners to continue to provide care, treatment, and services, the organization does the following:

- Documents current licensure and any disciplinary actions against the license available through the primary source.
- Obtains and documents information from the National Practitioner Data Bank (NPDB). The medical director evaluates this information.
- Reviews any clinical performance in the organization that is outside acceptable standards. The medical director evaluates this information.
- Reviews information from any of the organization's performance improvement activities pertaining to professional performance, judgment, and clinical or technical skills. The medical director evaluates this information.
- Confirms the licensed practitioner's adherence to organization policies, procedures, rules, and regulations.

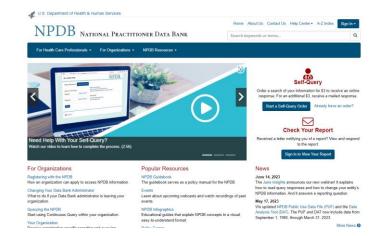


Strategies

- Primary source verification of license.
- National Practitioner
 Data Base.
- Medical Director evaluation.
- Privileges at Joint Commission accredited organization.











Waived Testing

#8 WT.04.01.01 EP 4

For instrument-based waived testing, quality control checks are performed on each instrument used for patient or resident testing per manufacturers' instructions.





Strategy for Quality Controls

- Define specific process regarding frequency, responsibility and accountability of performing QC based on IFU
- Address staff education and training.
- Address documentation requirements.
- Evaluate implementation
 - Monitor QC logs.
 - Interview staff
 - Ensure resources are available (strips, solution)

Free CDC training: Waived Tests | CDC



Waived Testing

#9 WT.03.01.01 EP 5

Competency for waived testing is assessed using at least two of the following methods per person per test: - Performance of a test on a blind specimen - Periodic observation of routine work by the supervisor or qualified designee -Monitoring of each user's quality control performance - Use of a written test specific to the test assessed.





Strategies for Waived Testing Competence

- Plan for annual waived testing competence assessment.
- Identify the 2 methods the organization will use:
 - Performance of a test on a blind specimen.
 - Periodic observation of routine work by the supervisor or qualified designee
 - Observe quality control performance.
 - Use of a written test specific to the test assessed.
- Develop a checklist for documentation purposes.





State Relations Update



Updates from State Relations

Resident/Patient Visitation

Technology

Liability Protection

Workplace Violence







Updates from State Relations

Personal Protective Equipment



Vaccination







Wrapping Up

A new distinction for Memory Care Services in Assisted Living Communities

- A collaboration with the Alzheimer's Association



- A program to help organizations minimize risk and improve care for patients and residents with all levels of cognitive impairment.
- Learn more at https://www.jointcommission.org/what-weoffer/accreditation/health-care-settings/assisted-livingcommunity/





Thank you for joining us.