Joint Commission Survey Experience
Lee Dailey, PharmD, BCPS, BCGP
October 25, 2017

Disclosures
• The presenter has no financial or special interest related to any component of this presentation nor does she intend to provide any information regarding medication indications which would be considered off-label use.

Objectives
• Following the completion of this session, the pharmacist will be able to:
  – Describe the Safer Matrix and how it is utilized during a Joint Commission survey
  – Identify hot topics for 2017 with regard to the Joint Commission survey
  – Discuss strategies for complying with challenging standards

The SAFER Matrix

The SAFER Matrix

The SAFER Matrix

The SAFER Matrix

The SAFER Matrix
Example SAFER Matrix

Hot TJC Topics for 2017
- Cardboard
- Malignant Hyperthermia
- Updated employee files
- QAPI
- Medication storage
- Antimicrobial stewardship
- Conscious sedation
- Anything cited on your previous survey
- Range orders

Cardboard
- TJC surveyors will look for cardboard throughout the hospital
  - External shipping boxes and corrugated cardboard are not allowed
  - Internal shipping boxes are allowed
- Be sure to limit time from receiving supplies to removal of shipping boxes
  - MAXIMUM 4 hours within the facility walls
- Be able to discuss and demonstrate your plan

Malignant Hyperthermia
- Contents of cart
  - MH cart should be treated as an emergency cart
  - Cart should be checked regularly, as crash carts are checked
  - TJC surveyors will be interested in who can access the cart
- TJC wants facility to demonstrate that drills are being conducted to ensure preparedness

Malignant Hyperthermia (cont)

Employee Files
- Items I keep in my department file for my staff:
  - Employment application
  - Contact info & emergency contact info
  - Primary source verification
    - Must sign and date each primary source verification on file
  - Department orientation checklist with initial competency review
  - Proof of department-specific competencies
  - At least 3 years of performance reviews
  - Performance improvement plans or documentation of other discussions or disciplinary actions if applicable
  - FMLA documentation if applicable
  - Employee health return to work documentation if applicable
  - Annual respiratory fit testing & PPD
QAPI

- Quality Assurance and Process Improvement
- TJC looked for evidence of QAPI in all lines of questioning
  - Wanted to be sure front line staff was involved in improvements
  - Liked that we used a standard format for documenting process improvement (we use A3)

QAPI (cont)

Medication Storage

- All surveyors looked for “stashes” of medications in unlocked drawers and other areas where pharmacy wouldn’t store meds
- They wanted to ensure emergency carts were properly secured
- They searched for outdated items everywhere they went
- We utilized survey preparation checklists to check units on a regular basis to ensure meds were only stored where we intended and to ensure meds were in date

Antimicrobial Stewardship

- LCMH received 3 citations related to antimicrobial stewardship
- TJC wants to see a LOCAL team
  - Needs to be supported by leadership
  - Should include a physician, an infection preventionist, a pharmacist
- TJC wants a LOCAL program
- Must publish antibiogram yearly
- Wants tracking, trending, and reporting LOCALLY

Conscious Sedation

- During our visit, the nurse surveyor requested to see the chart of a patient who had recently received ketamine for conscious sedation
- Interested in who administered the medication
- Interested in privileging (must know how to look this up at your facility)
- Wanted to see that discharge instructions were being provided for the moderate sedation, which wasn’t happening at our facility

Anything cited on your previous survey

- Know that TJC now has access to past surveys
- They will review these surveys prior to visiting your facility
- Past issues will be sure to come up during your next survey
  - Ensure these items are resolved
  - Action plans and data will be helpful to demonstrate that you’ve overcome the issue
Range Orders

- Range orders was an issue for us on our previous survey so these surveyors were certain to assess for issues in this department
- Although we had worked diligently to eliminate range orders, the surveyors did identify one range order on an order set
- We corrected it prior to the end of the survey, but it was still listed as a citation
- Again, having an action plan and months/years of data are helpful to demonstrate how you’ve worked on an issue, even if you failed to completely resolve the issue

Issues Experienced at Oconee

- Propofol (MM.03.01.01 EP3; moderate/pattern)
  - TJC observed disposal of propofol into both black and blue containers
  - TJC was concerned that they weren’t following their policy for disposal
- Succinylcholine (MM.03.01.01 EP2; moderate/pattern)
  - TJC stated that they must follow the manufacturer’s recommendations for storage (14 days at room temp)
  - Would not accept letter from manufacturer stating they could use a 60 day BUD
- Pill cutter (MM.05.01.07 EP2; low/limited)
  - Residue found on a pill cutter during tour
  - The topic of pill splitters was on an EOC tracer used in preparation for our survey at LCMH, as well
  - The acceptable solution seems to be to issue pill splitters on a patient-specific basis or to specify cleaning procedures an ensure they are appropriately followed

Issues Noted at Other Hospitals

- Atlantic Health, Morristown, NJ
  - Crash carts: outdated ACLS guidelines, logs
  - Dirty pill splitter
  - Temperature monitoring: response to excursions (out of range temps documented on log without action noted)
- University of Vermont Medical Center
  - Therapeutic duplications
  - Beyond use dating – found 3 bags of IV fluids outside of wrapper on IV poles without BUD (need policy and a BUD); incorrect blood use (using the blood wasn’t tracked this was a finding)
  - Antimicrobial stewardship: did not focus heavily on this, but they did confirm the site had a program
  - Diversion: must be able to speak to the reports that are reviewed and who is included
- MedStar Georgetown University Hospital, Washington, DC
  - Malignant Hyperthermia
  - Antimicrobial stewardship: focused heavily on this; cited because education not robust enough
  - Corrugated cardboard

Tools Used During Survey Preparation

- One-A-Day document and tracer tools
- Opioid Safety Gap Analysis
- Questions for Clinical Staff document