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The Joint Commission: Infection Prevention and Control Challenges and Strategies for Success

September 19, 2024



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Program Objectives

Discuss

Discuss the top 2023 Infection Control non-compliant standards

Provide

Provide examples for how to identify the root cause of non-compliance with the Infection Control Standards

Clarify

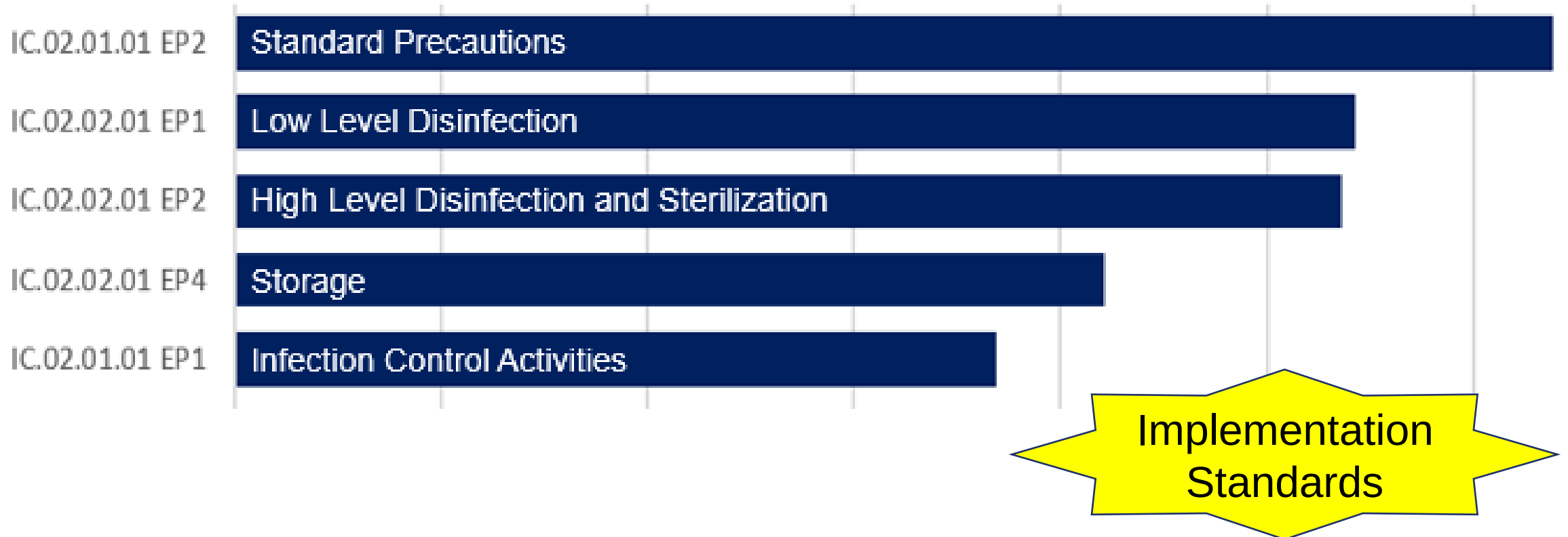
Clarify the expectations of the Infection Control standards

Review

Review strategies for how your organization can support Infection Prevention and Control initiatives and activities

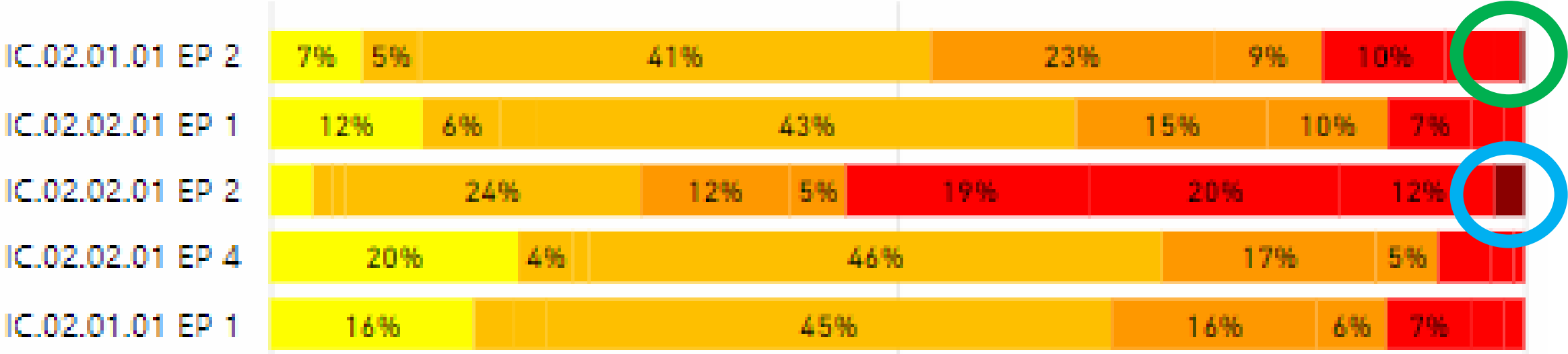
Top Infection Control Findings: 2023

Top 5 Infection Control Findings: All Programs 2023



Safer Placement Top 5 Infection Control Findings: All Programs 2023

Proportion of SAFER Placement

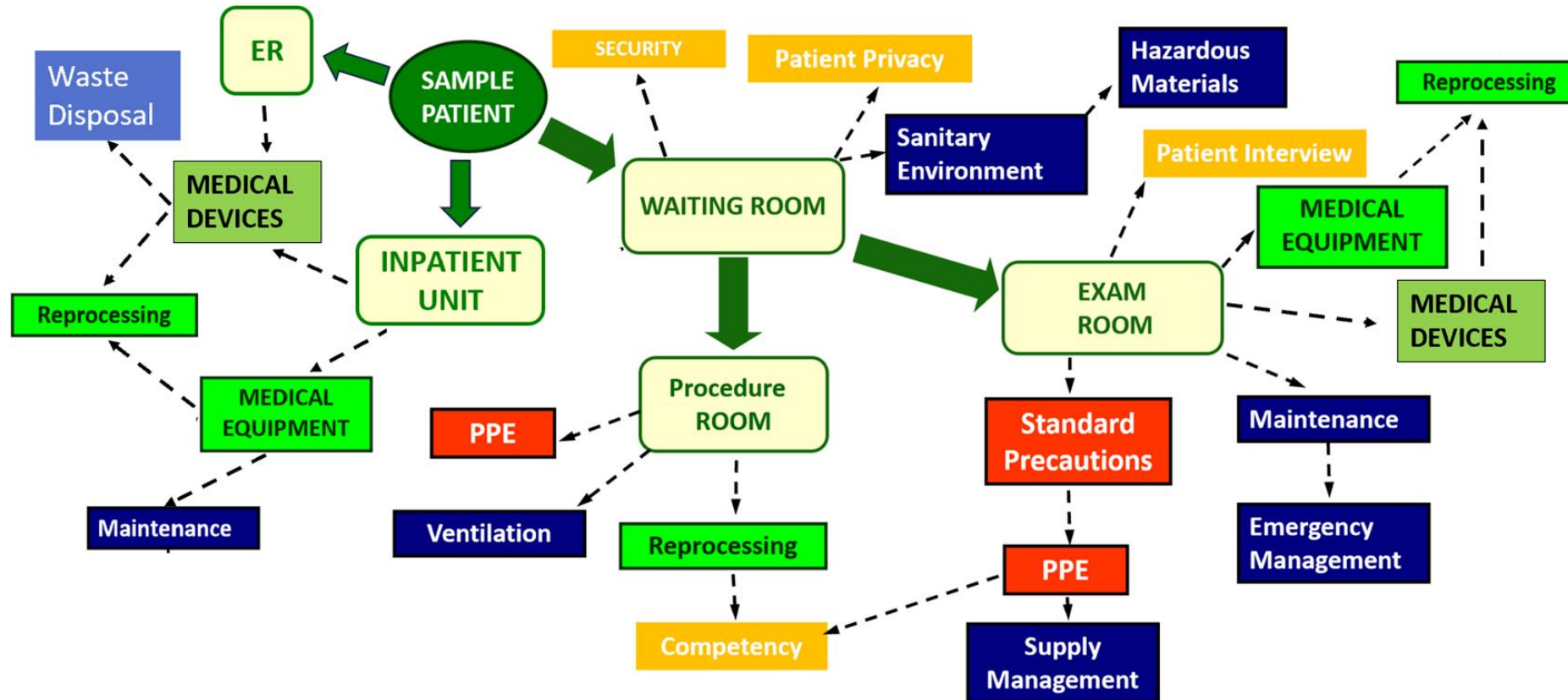


Safer Matrix Scoring All IC Findings: All Programs 2023

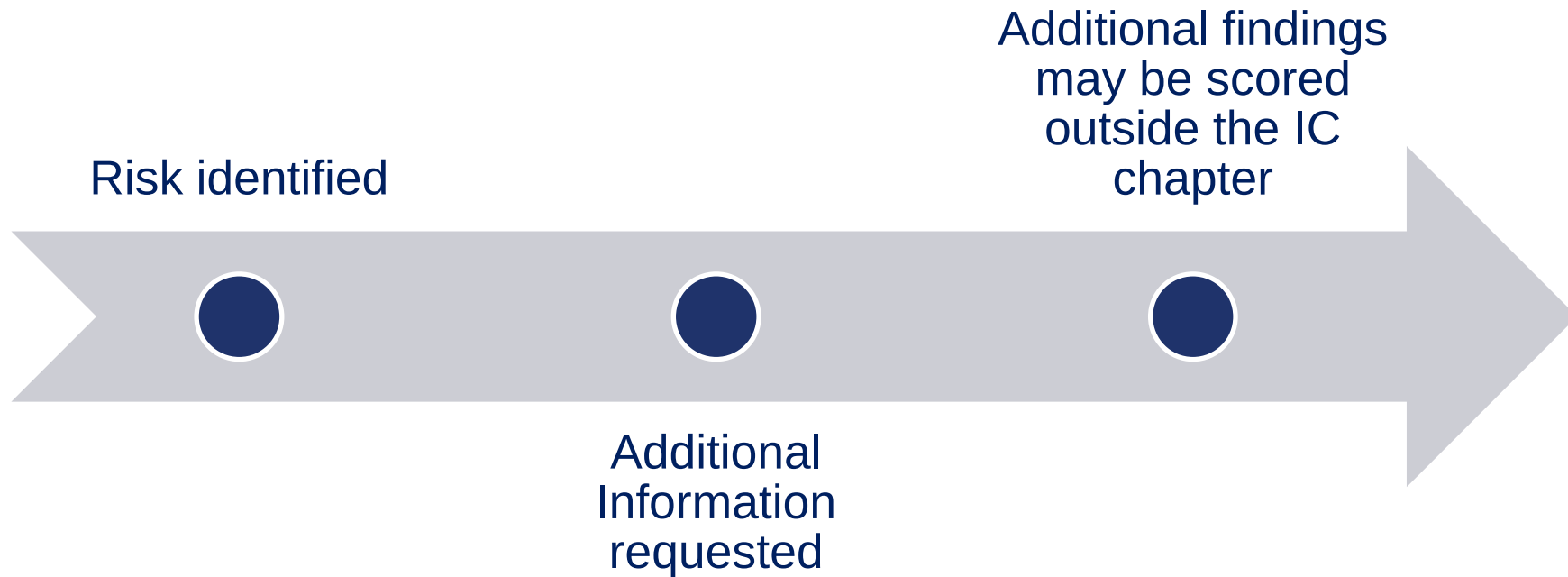
SAFER Matrix Scoring				
Likelihood to Harm	Immediate Threat to Health or Safety -			
				0.4%
High	7.1%	4.3%	3.2%	14.6%
Moderate	31.2%	13.6%	12.9%	57.7%
Low	14.0%	4.0%	9.3%	27.3%
	Limited	Pattern	Widespread	
	52.3%	21.9%	25.4%	
	Scope			

Evaluating the Implementation of Infection Control Activities

Tracer Methodology is Used to Identify Risks



Evaluating Identified Risks



What is the Root Cause?



Resources

Accountability

Process Development

Process Oversight

Education/Training/Competency

There May be Additional Opportunities Identified when Investigating a Risk

Resources
Information
Equipment and
Supplies

Leadership
Activity
Management
Oversight

Human resources
Education
Training
Competency

What's at the Root of Frequently Cited IC Observations?

IC.02.02.01 EP2:

Sterilization and High-Level Disinfection

#1 on the Most Frequently Cited Higher-Risk Accreditation Requirements 2023

❖ HAP, CAH, AHC, OBS

Highest Percentage of High-Risk Findings and findings evaluated for Immediate Threat to Health and Safety

IC.02.02.01 EP 2



What Level of Reprocessing is Required for Instruments and Devices?

Intended use Drives MINIMUM Reprocessing: FDA Uses Spaulding

Level	Risk of Infection	Description of Intended Use	Examples of Items	Reprocessing Methods
Critical	High	Item comes in contact with or enters sterile tissue, sterile body cavity, or the vascular system	Surgical and dental instruments, some endoscopes, inner surfaces of hemodialyzers, urinary catheters, biopsy forceps, implants, and needles	Sterilization
Semi-Critical	Moderate	Item comes in contact with mucous membrane or non-intact skin	Respiratory therapy and anesthesia equipment, some endoscopes, laryngoscope blades, esophageal manometry probes, vaginal ultrasound probes and specula, and diaphragm fitting rings	Minimum: High Level Disinfection (sterilization may be needed in certain cases*)
Non-critical	Low	Item comes in contact with skin	Patient care Items: bedpans, blood pressure cuffs, crutches, incubators Environmental Surfaces: bed rails, bedside tables, patient furniture, counters, and floor	Clean or disinfect

Key Elements: Sterilization



Available Resources

Manufacturer's Instructions For Use (MIFU) available

Supplies necessary for all steps of reprocessing

Personal Protective Equipment



Manufacturer Instructions for Use Followed

For all steps of the process

- Handling used items
- Cleaning
- Sterilization
- Documentation
- Storage
- Transporting

Conflicts within MIFU resolved

Conflicts between MIFUs resolved



Competent Employees

Staff who perform sterilization are trained and competent

Staff who oversee process are competent to evaluate the process



Infection Prevention and Control

Process to audit adherence to policies, processes, procedures



Leadership Oversight

Leadership provide oversight and hold staff accountable

Wide Variety of Instruments and Devices Used in Healthcare Settings

May be found in central locations or distributed to decentralized locations (e.g., ICU, ED, Ambulatory locations, etc.)



Single use vs. reusable

Varying levels of
disinfection/sterilization required

Varying levels of complexity

Wide variation in reprocessing
instructions

What is a Single-use Device?

Labeling Recommendations for Single-Use Devices Reprocessed by Third Parties and Hospitals; Final Guidance for Industry and FDA

“Single-use device: A single-use device, also referred to as a disposable device, is intended to be used only once during a single procedure. If you are unsure if an item is single use or reusable, contact the manufacturer for clarification.”

**Contact the Manufacturer for
Clarification**

<https://www.fda.gov/oc/medical-devices/labeling-recommendations-for-single-use-devices-reprocessed-by-third-parties-and-hospitals>

documents/labeling-
s-and-hospitals

Manufacturer's Instructions for Use (MIFU)

Most items utilized throughout the steps of reprocessing will have IFUs

- Instruments/Devices, Equipment
- Cleaning accessories, Accessories used for reprocessing
- Process indicators

Provides instructions for use, including infection and/or sterilization, when the item is used

Compatible disinfection/sterilization processes

- May have instructions for reprocessing that surpass intended use (e.g., used for semi-critical procedure, IFU only provides instructions for sterilization)

If there is a conflict within a MIFU or between MIFUs for items, or if a MIFU contains unclear or ambiguous information

Contact the Manufacturer for Clarification

May be ambiguous or contain conflicting information

Know your Instruments, Devices and Equipment

This is Critical

Validate the type of sterilization cycle that your sterilizer uses

- Gravity Displacement
- Dynamic Air Removal (Prevac, Steam Flush Pressure Pulse)

Follow the MIFU of the instruments/devices being sterilized based on the type of sterilizer in use

One standard sterilization cycle/parameters may not be sufficient for reprocessing the different types of instruments and devices being sterilized

Failure to follow the manufacturers instructions for use at any point in the process can lead to issues such as:

Altered functionality of the instrument, device or equipment

Inability to high level disinfect or sterilize the instrument, device or equipment

Frequently Cited Sterilization Observations

Manufacturer's Instructions for Use (MIFU) not available

MIFU conflicts/ambiguity not clarified

Supplies not available

MIFU not followed

Instruments/ devices not appropriate for sterilization

Immediate Use Steam Sterilization

Key Elements: High Level Disinfection

Available Supplies

- MIFU available
- Supplies necessary to decontaminate and perform high level disinfection available

Manufacturer Instructions for Use Followed

- For all steps of the process
- From point of use through storage
- Resolve conflicts

Competent Employees

- Staff who perform HLD are trained and competent
- Staff who oversee process are competent to evaluate the process

Infection Prevention and Control Involvement

- Process to audit adherence to procedures

Leadership Oversight

- Leadership provides oversight and holds staff accountable

Frequently Cited High Level Disinfection Observations

Manufacturer's Instructions for Use (MIFU) not available

Supplies not available

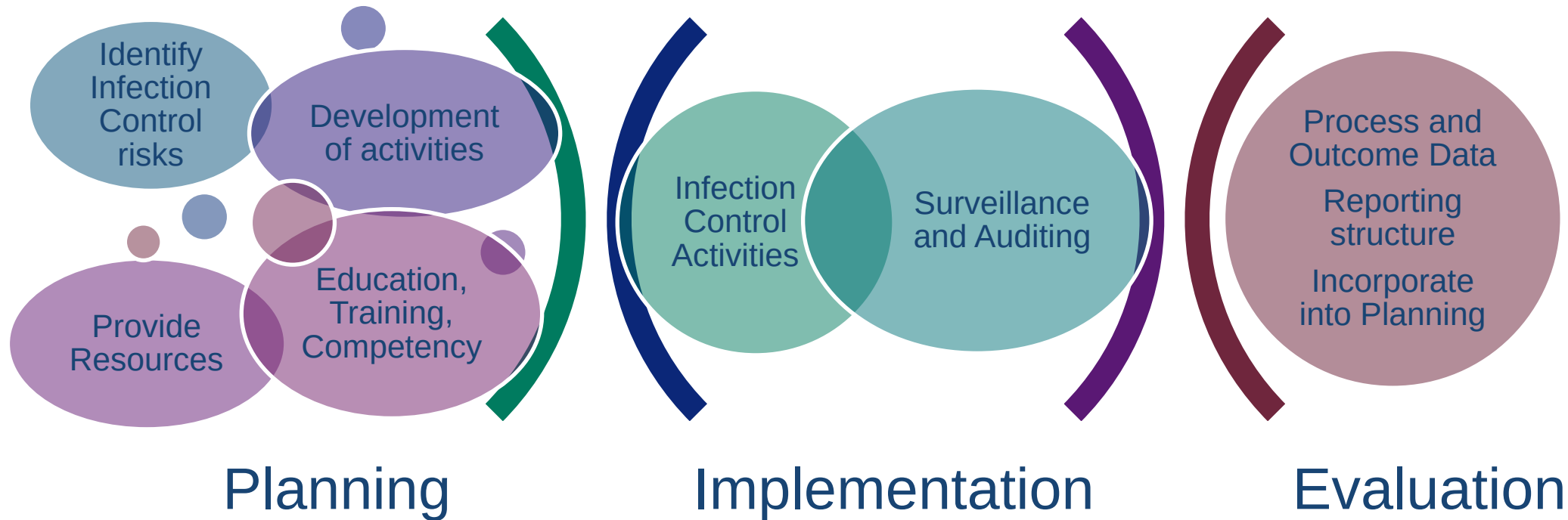
MIFU not followed

Not stored in a manner to protect from contamination/damage

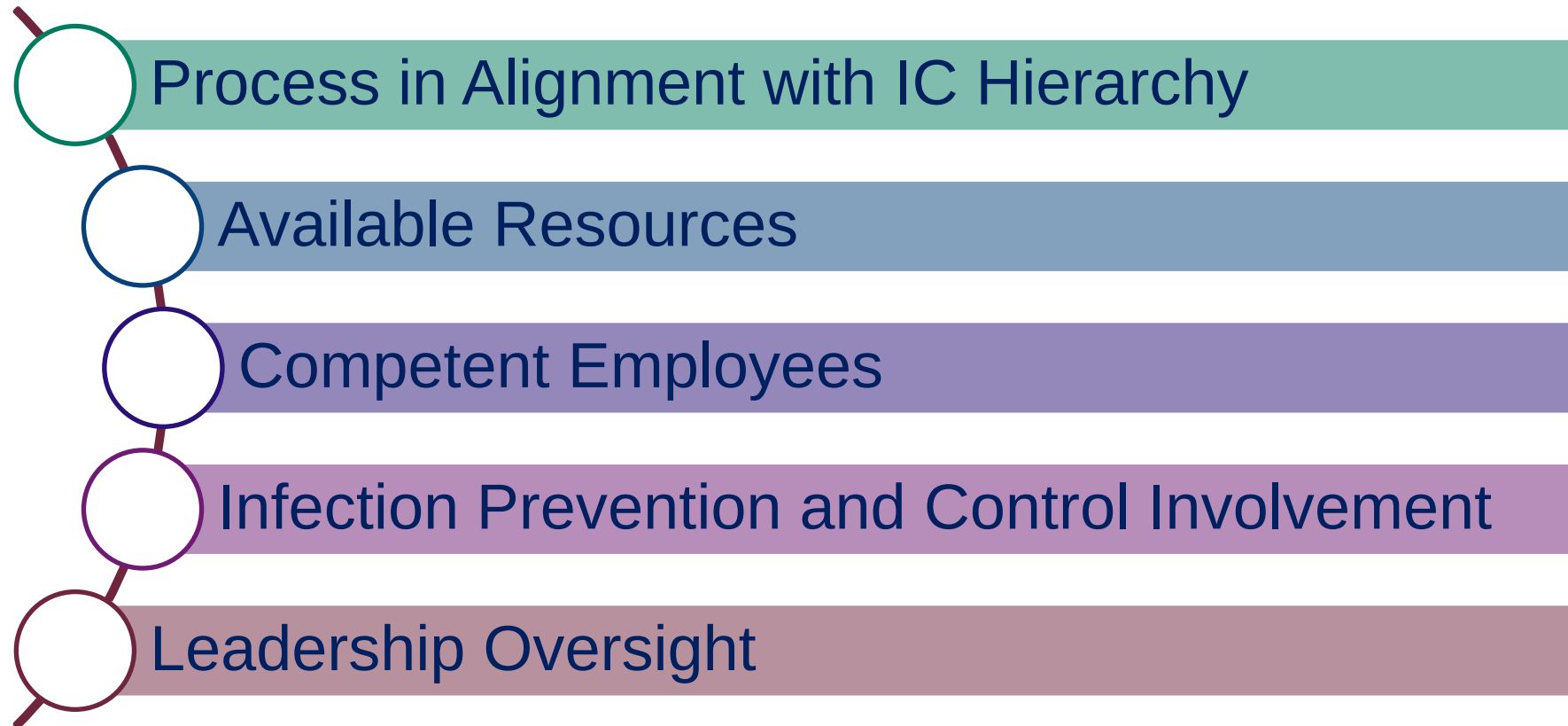
Contaminated probes not transported per OSHA Bloodborne Pathogen standard

Implementing Infection Prevention and Control Activities

Successful Implementation of Infection Control Activities is Multifactorial



What are Key Elements of Implementation that Surveyors are Looking for?



Standard Precautions

CDC's Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings

Use Standard Precautions to care for all patients in all settings. Standard Precautions include:

- 5a. Hand hygiene
- 5b. Environmental cleaning and disinfection
- 5c. Injection and medication safety
- 5d. Risk assessment with use of appropriate personal protective equipment (e.g., gloves, gowns, face masks) based on activities being performed
- 5e. Minimizing Potential Exposures (e.g. respiratory hygiene and cough etiquette)
- 5f. Reprocessing of reusable medical equipment between each patient or when soiled

Frequently Cited Standard Precautions Observations

Hand Hygiene

- Supplies expired/not available
- Not performed at required times

Injection and Medication Safety

- Top of vial not swabbed
- Multidose vials accessed in a direct patient care area
- **Fingerstick device Used for more than one patient**

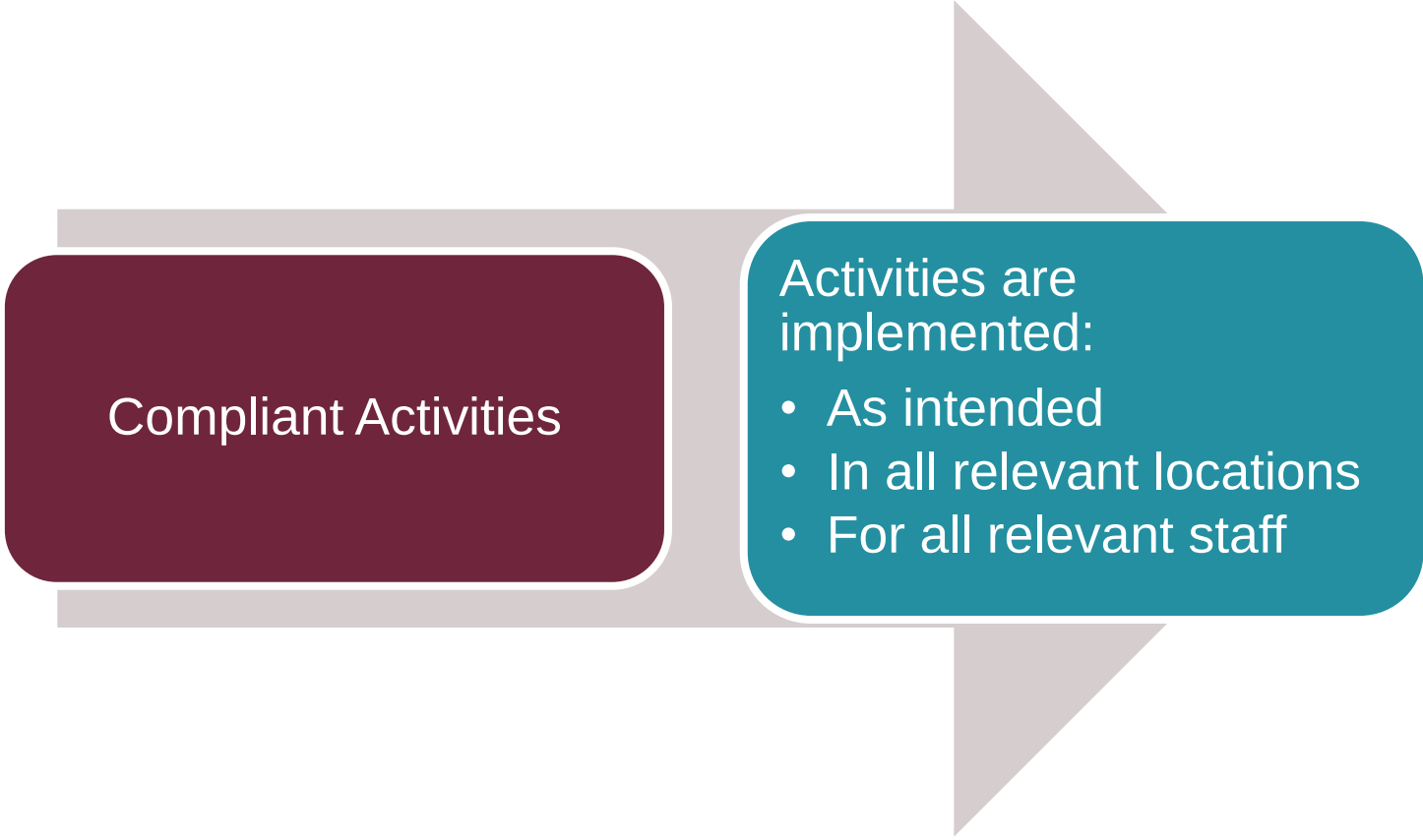
Personal Protective Equipment

- PPE not worn when required

Minimizing Potential Exposures

- Supplies not stocked
- Staff not performing organization required screening for signs/symptoms of infectious diseases at point of entry

Implement Infection Control Activities



Compliant Activities

Activities are implemented:

- As intended
- In all relevant locations
- For all relevant staff

Frequently Cited Infection Control Activity Observations

Not following regulations/ requirements

- The dishwasher temperature was not monitored as required by state food code
- Washing of hospital linens lacked evidence of a process by which to achieve & maintain proper water temperatures required by state regulation

Not following MIFU

- Failure to use surgical and/or skin preparation products and antiseptics in a manner consistent with manufacturer's instructions for use

Not following organization process, procedure and policy

- Surgical staff was wearing earrings that were not covered as required by the facility Operating Room attire policy.
- The shared patient shower was not cleaned between patient uses as required by organizational policy.

Not implemented for all relevant components / functions

- The organization's attire policy was not enforced for all persons performing central line insertion, across multiple locations/departments in the organization.

Lack of Leadership Oversight

- Leaders did not effectively manage the implementation of Infection Control Activities

Frequently Cited Storage Observations



Expired supplies

Expired urinary catheter insertion tray in storage room, available for patient use.



Location of storage soiled

Visible dirt in drawer where laryngoscope blades were stored.



Clean and soiled supplies, devices or equipment co-mingled

Clean supplies stored unprotected in soiled utility room.



Package integrity not maintained

Holes, tears in packaging.
Package had evidence of being wet.



Leadership Oversight

Staff witnessed accessing clean supply cabinet or cart with soiled hands or gloves worn during patient care.

Low and Intermediate Level Disinfection



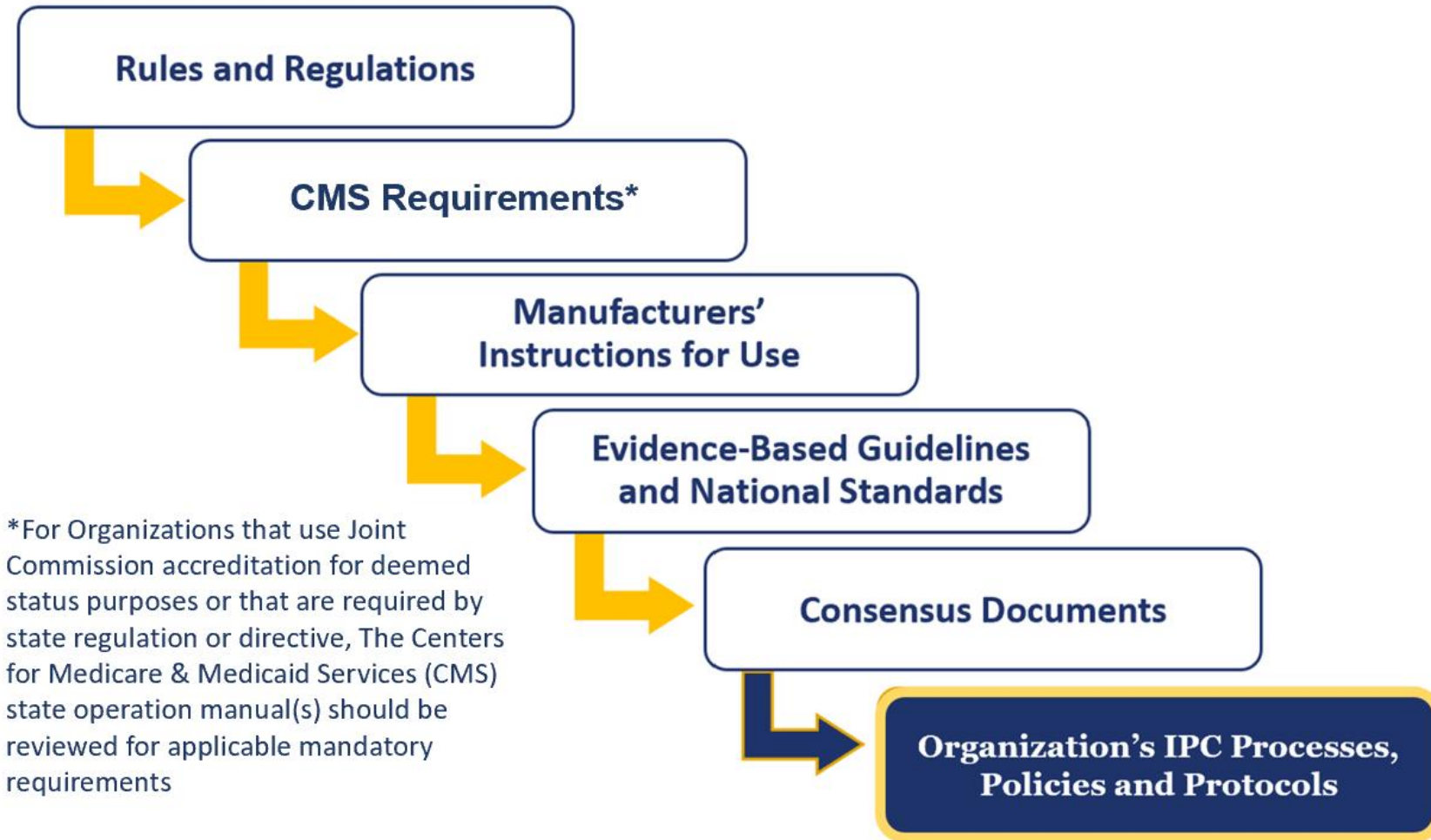
Product selection



Contact time

Supporting Your Infection Prevention and Control Program

Approach to Assessing Compliance with Infection Prevention and Control Requirements



There Are Many Specialized Services Provided in Healthcare Which May Have Infection Control Implications

Infection
Prevention and
Control

Intensive Care

Emergency
Department

Oncology/Bone
Marrow
Transplant

Burn Unit

Child Life

Specialty
Services

Sterile Processing

High Level
Disinfection

What Does the Person Responsible for the Management of Infection Prevention and Control Activities Need to Know?

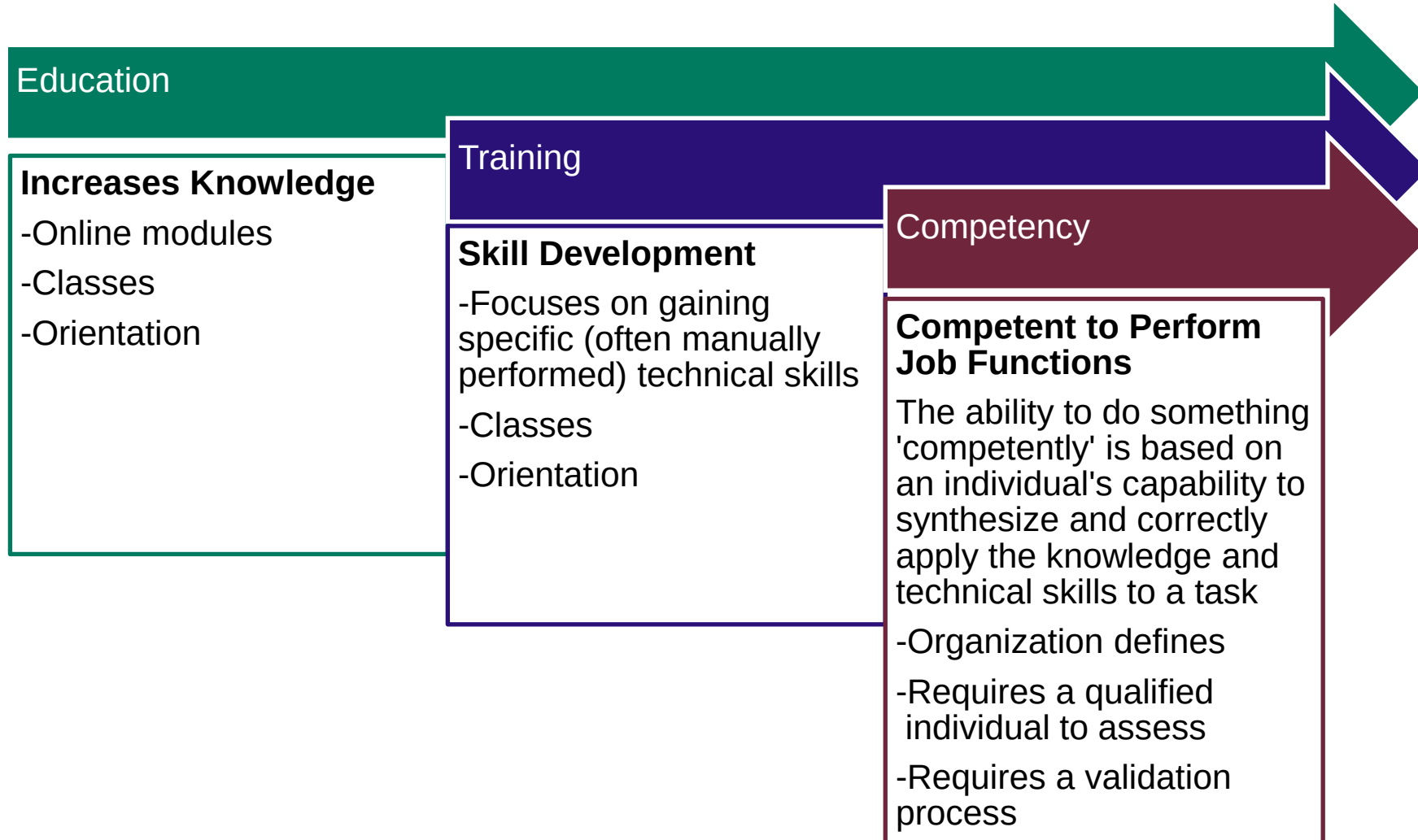
All settings have basic Infection Prevention and Control needs

- Regulatory compliance
- Risk assessment
- Standard Precautions
- Transmission-based precautions
- Cleaning and Disinfection

Some settings provide additional care, treatment and/or services:

- Sterilization
- High level disinfection
- Specialty Services
- Specialty populations

Education, Training and Competency



Staff Who Reprocess Devices and Instruments

- Devices, Instruments and Accessories



Low Complexity

Simple
Instruments/
devices

Few items



Moderate Complexity

Few types of
instruments/
devices

Additional
reprocessing
steps



High Complexity

Many different
types of
instruments/de
vices

Widely
variable
reprocessing
instructions

- Education, training and competency may look different based on the types of items that are reprocessed and accessories and equipment needed

A one size fits all approach may not be appropriate!

Process Oversight



Organization
determines if
processes
should be
monitored



Person
Assigned to
Oversight



Are they
competent to
provide
oversight



Are staff held
accountable

Critical Elements of Implementation

Resource Availability

Education, Training and Competency

Staff Accountability

Oversight of Critical Activities

Activities Implemented in All Relevant Locations

Activities Implemented for All Relevant Staff

Safety Culture

- Leaders can build safety cultures by readily and willingly participating with care team members in initiatives designed to develop and emulate safety culture characteristics.
- Effective leaders who deliberately engage in strategies and tactics to strengthen their organization's safety culture see safety issues as problems with organizational systems, not their employees, and see adverse events and close calls ("near misses") as providing "information-rich" data for learning and systems improvement.



Summary



Follow the hierarchical approach to ensure compliance with IC standards



Provide the necessary resources and foundation to support implementation of Infection Control activities



Ensure a culture of safety in which staff are held accountable to perform their job functions correctly, to ensure staff and patient safety

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**Thank you for
Keeping Patients Safe!**