

Joint Conference Committee (JCC) Regulatory Affairs Status Report: **August 2017** (reporting period July 20, 2017 – August 16, 2017)

**I. PENDING SURVEYS**

A. **Joint Commission Accreditation Validation Visit** –unannounced 30 day revisit (September 2017)

**II. COMPLETED SURVEYS**

- A. **Joint Commission Triennial Accreditation Survey** –unannounced (June 20-22, 2017) **Plan of Correction due September 5, 2017**
- B. **Joint Commission Clinical Laboratory Survey** –unannounced (July 18-22, 2017) **Plan of Correction due September 20, 2017**
- C. **Unannounced Medicare Deficiency Survey** – (August 4, 2017) **Plan of Correction due October 9, 2017**

**III. PLANS OF CORRECTIONS: Reports & Updates**

A. **Unannounced Medicare Deficiency Survey** - (August 4, 2017) **Plan of Correction due October 9, 2017**

Unannounced Medicare Deficiency Survey		
Joint Commission Standard:	Finding:	Update(s):
<p><b>EC.02.06.01- Hospital Accreditation- Environment of Care</b></p> <p>The hospital establishes and maintains a safe, functional environment.</p> <p>Note: The environment is constructed, arranged, and maintained to foster patient safety, provide facilities for diagnosis and treatment, and provide for</p>	<p>Survey of the Main ED Behavioral Health rooms/1 behavioral health patient. Rooms are identified as Pod A Rooms 1- 4. Each of these rooms contained medical equipment which was not being used by the behavioral health patient that are considered ligature risk.</p> <p><i>Surveyor comments: mitigation actions in place included installation of a video camera monitoring system with 24/7 coverage. In addition, there is a dedicated staff member assigned to float among the 4 rooms and observe and document behavior. Additional risk: when staff member is assisting other patients (within rooms1-4), it leaves the</i></p>	<p>The organization has scheduled a conference call with The Joint Commission Standards Interpretation Group(SIG) to discuss these findings.</p> <p>The organization believes removing some of the identified patient safety equipment in these four rooms poses a greater risk of harm for our patients.in an emergency situation.</p>

<p>special services appropriate to the needs of the community.</p> <p>Element of Performance 1: Interior spaces meet the needs of the patient population and are safe and suitable to the care, treatment, and services provided.</p>	<p><i>other patients at risk to harm themselves utilizing the ligature risk related equipment.</i></p> <p>During the remainder of the survey and tour in ED, PES, and acute Psych (&amp;C) cited with specific ligature hardware items, surveyor noted all corrections were not fully implemented. Specifically, in relation to the acquisition and installation of anti-ligature hardware.</p> <p>ZSFG provided surveyor evidence of PO orders dated July 16, 2017, for all equipment identified in the risk assessments and TJC survey.</p>	<p>Surveyors during our previous Triennial Joint Commission Survey approved the current practice for constant observation of the suicidal patient in a non-psychiatric setting.</p> <p>Additionally, limiting these four rooms as behavioral health rooms only, has an impact on ED patient flow, since these rooms are also utilized for non-behavioral health patients receiving care in our ED.</p> <p>The organization has placed purchased orders for all of the equipment necessary to resolve the identified ligature risks. However, due to a limited number of manufacturers who produce ligature safe medical grade equipment, and a national shortage we are experiencing delays in delivery of the equipment.</p> <p>The conference call is scheduled for Wednesday, 8/16/17 at 9:30am PST</p>
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