

Staying Ahead of The Compliance Survey



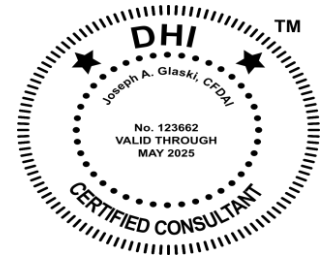
Speaker Info



Director of Healthcare Life Safety and Environment of Care

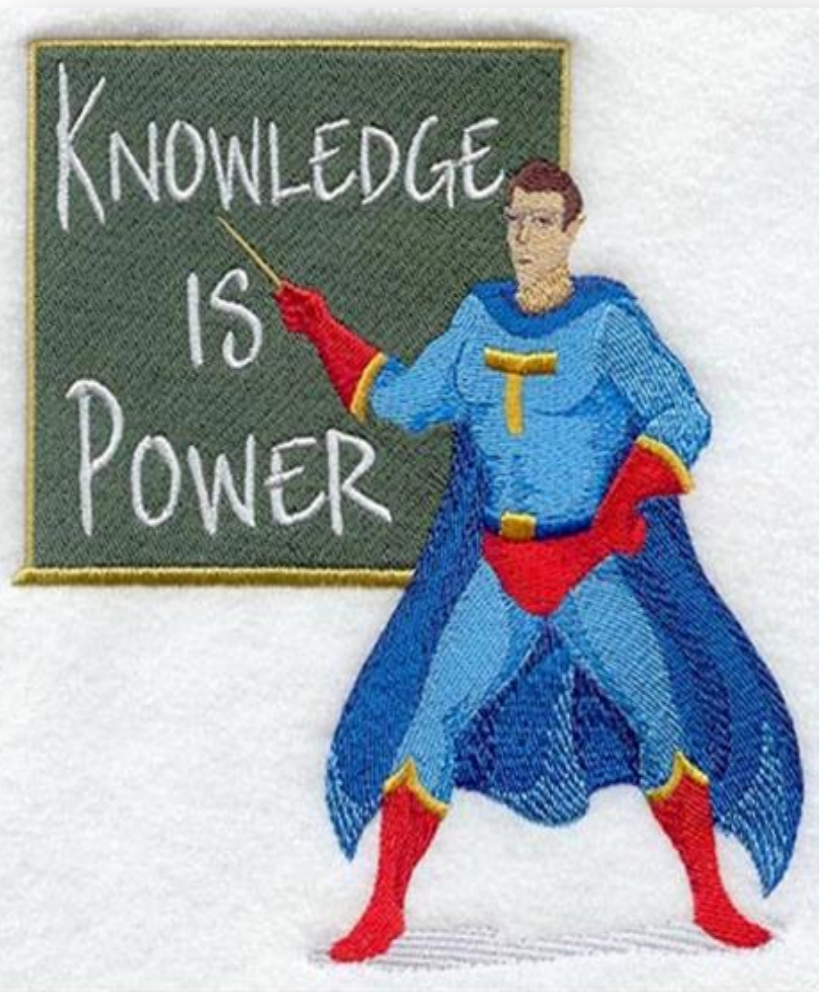
Joseph A. Glaski, MBA, FASHE, CFDAI, CLSS-HC

- **30+ years as Director & VP of Facilities and Engineering**
- **NFPA Technical Committee member “Building Fire and Life Safety Director”**
- **NFPA Technical Committee Member “NFPA 80 Fire Doors and other Opening Protectives”.**
- **Certified Fire Door Assembly Inspector –DHI #123662**
- **Certified Life Safety Specialist – Healthcare**
- **Certified Healthcare Physical Environmental Worker**
- **Certified Healthcare Consultant #123662**
- **ASHE - Advocacy and Codes Chair with HESGNY – NYC ASHE Chapter.**
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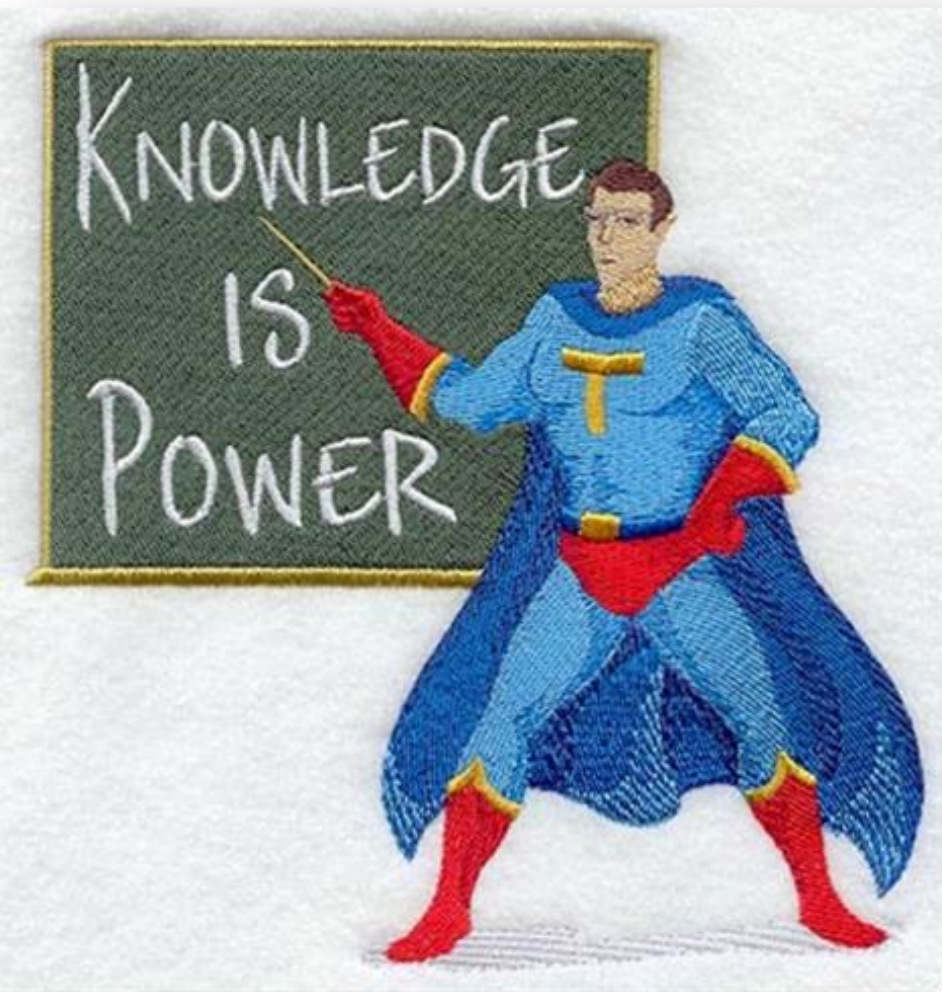
- **“T” - The Team Compliance Hero will be guiding us through the presentation - Taking a deserved break from saving the world: One healthcare compliance survey at a time.**

Strategies for a Successful Survey



- The Facilities Manager is being pulled in several directions with added responsibilities i.e., Real Estate management or Managing construction projects.
- Preparing for a survey is very time-consuming and takes resources and time for a successful survey.
- This makes being prepared for surveys even more challenging.
- The next few slides we will look at some recommended strategies to help with a successful survey.
 - **“T” - The Team Compliance Hero** will be guiding us through the presentation - Taking a deserved break from saving the world:
 - **“One healthcare compliance survey at a time”.**

First: Read the Codes & Standards!



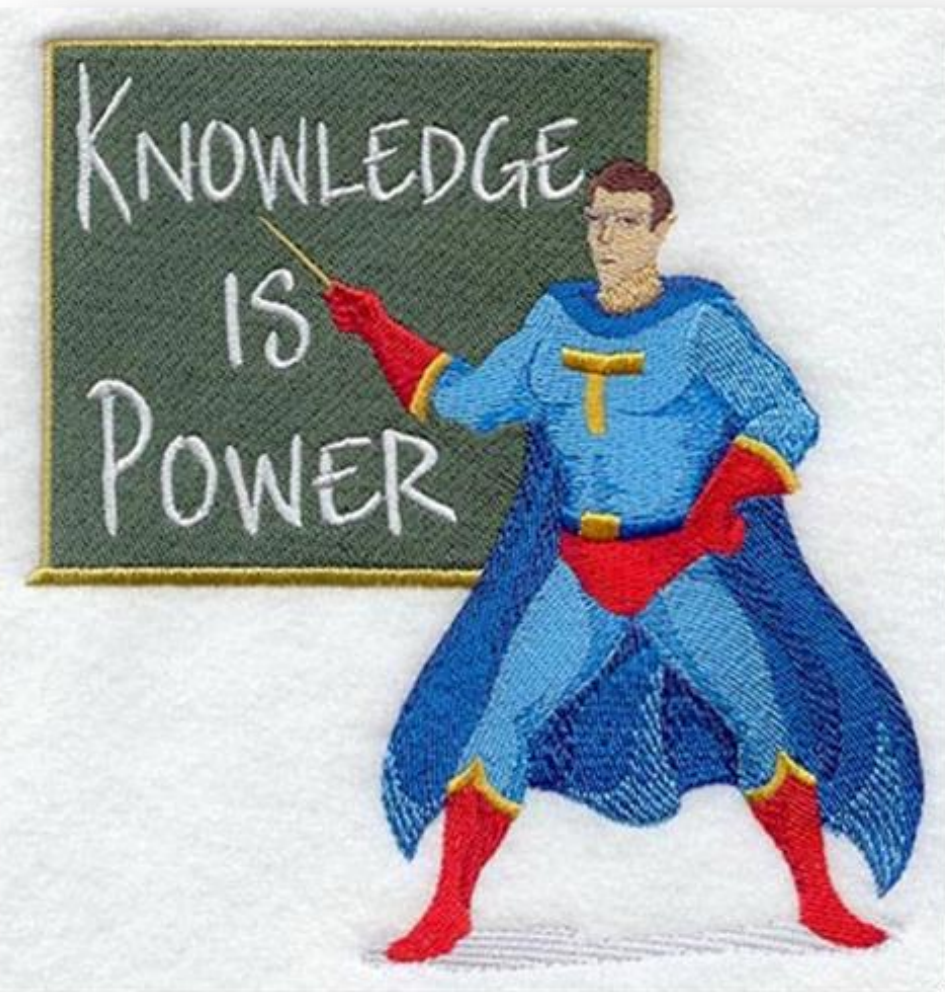
- Take the time to read the TJC /DNV Standards & NFPA Codes that apply to your area of responsibility. The NFPA codes are available free online, and the Accreditation Agencies provide their standards online and can be purchased.
- **Make sure** you are applying the correct Standards & Codes.
- **Ask Questions!** Knowing the Standards & Codes will only build your confidence during the survey process.
- **Network among your peers!** Seek them out for clarification on a particular Standard or Code question.

For Example:

my ASHE online portal

Your local ASHE chapter members

Third: The Survey Preparation!

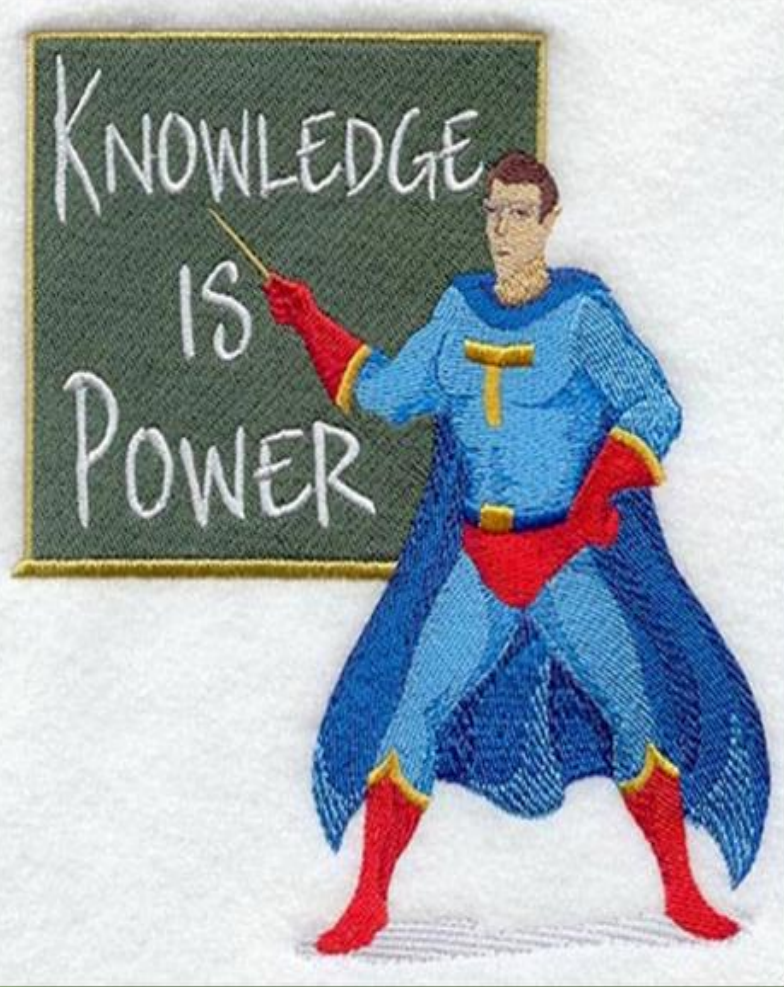


- Close the Loop! Check ITM reports and any repair work-orders and sign the reports.
- If a device did not pass the test or inspection, or was not tested due to inaccessibility, then ILSM/ALSM may be required based on your policy.
- If a device failed, it needs to be repaired or replaced, and then **retested**. The documentation proving this needs to be available to the surveyor.
- Remember to document **PASS or FAIL** in your ITM documents.
- Have all required certifications from Third-Party Vendors on file i.e., Fire Alarm Contractor, Sprinkler Contractor & Medical Gas Vendors.
- Remember: **If it's not documented then it's not COMPLIANT!**

T's Tips for Survey Success:

- It is best to not frustrate the surveyor during the survey.
- Have all your documentation prepared in advance and ready for the surveyor to review.

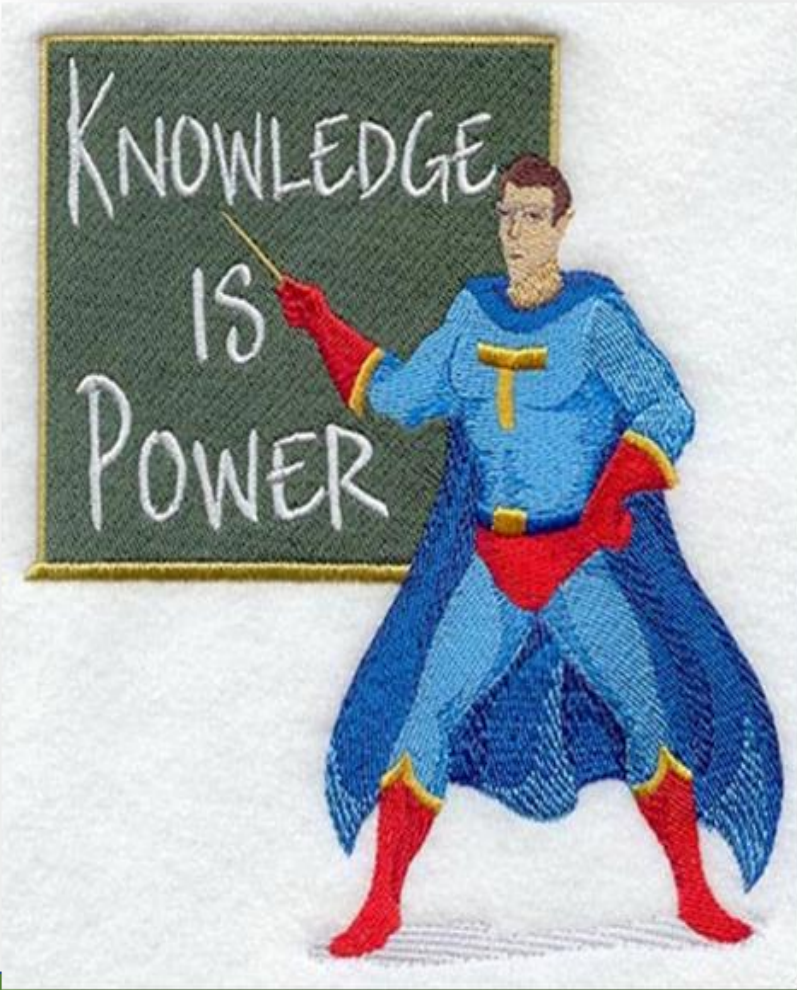
“The Joint Commissions top 5 most frequently cited EC and LS Eps during survey”



Joint Commission compliance data from the first six months of 2023 reveal that hospitals continue to face difficulties with several “Environment of Care” (EC) and “Life Safety” (LS) chapter elements of performance.

- **EC.02.06.01, EP 1:** Interior spaces meet the needs of the patient population and are safe and suitable to the care, treatment, and services provided.
*The number-one observation scored under EC.02.06.01, EP 1 is stained ceiling tiles. If a ceiling tile is stained, it’s not enough to replace it. Why is it stained?
- **EC.02.05.01, EP 9:** The hospital labels utility system controls to facilitate partial or complete emergency shutdowns.
* **Note 1:** *Examples of utility system controls that should be labeled are utility source valves, utility system main switches and valves, and individual circuits in an electrical distribution panel.*
- **LS.02.01.35, EP 4:** Piping for approved automatic sprinkler systems is not used to support any other item. (For full text, refer to NFPA 25 2011:5.2.2.2.)

The Joint Commissions 5 of the top 10 most frequently cited EC and LS Eps during survey



Joint Commission compliance data from the first six months of 2023 reveal that hospitals continue to face difficulties with several “Environment of Care” (EC) and “Life Safety” (LS) chapter elements of performance.

- **EC.02.05.05, EP 6:** The hospital inspects, tests, and maintains the following:
 - Non-high-risk utility system components on the inventory. The completion and the results of the activities are documented.
- * **EC.02.05.05, EP 6** is where TJC scores a ‘garden variety’ utility issues that are non–high risk. For example, electrical junction boxes that are open are a frequent finding. “These have to be covered. It an electrical safety issue, and a shock hazard.
- **LS.02.01.10, EP 14:** The space around pipes, conduits, bus ducts, cables, wires, air ducts, or pneumatic tubes penetrating the walls or floors are protected with an approved fire-rated material.
- **Note:** *Polyurethane expanding foam is not an accepted fire-rated material for this purpose. (For full text, refer to NFPA 101-2012: 8.3.5.)*

What is SAFER™?

- The **Survey Analysis for Evaluating Risk™** (SAFER™) is a transformative approach for identifying and communicating risk levels associated with deficiencies cited during surveys. The additional information related to risk provided by the SAFER Matrix helps organizations prioritize and focus corrective actions.
- The **SAFER Matrix™** provides one, comprehensive visual representation of survey findings in which all Requirements for Improvement (RFIs) are plotted on the SAFER matrix™ according to the likelihood of the issue to cause harm to patients, staff or visitors, in addition to how widespread the problem is, based on the surveyor's observations.
- The **SAFER Matrix** replaces the current scoring methodology, which is based on pre-determined categorizations of elements of performance (such as direct and indirect impact) – instead allowing surveyors to perform real-time, on-site evaluations of deficiencies. Placement of RFIs within the matrix will determine the level of detail required within each RFI's Evidence of Standards Compliance follow-up.

Reminder – SAFER definition (*Perspectives Jan 2017*)

REMINDER: SAFER™ Matrix Effective January 1, 2017 (continued)

Continued from page 1

		Immediate Threat to Life (a threat that represents immediate risk or may potentially have serious adverse effects on the health of the patient, resident, or individual served)		
		LIMITED	PATTERN	WIDESPREAD
Likelihood to Harm a Patient/Staff/Visitor	HIGH			
	MODERATE			
	LOW			
		Scope		

Figure 1. SAFER Matrix

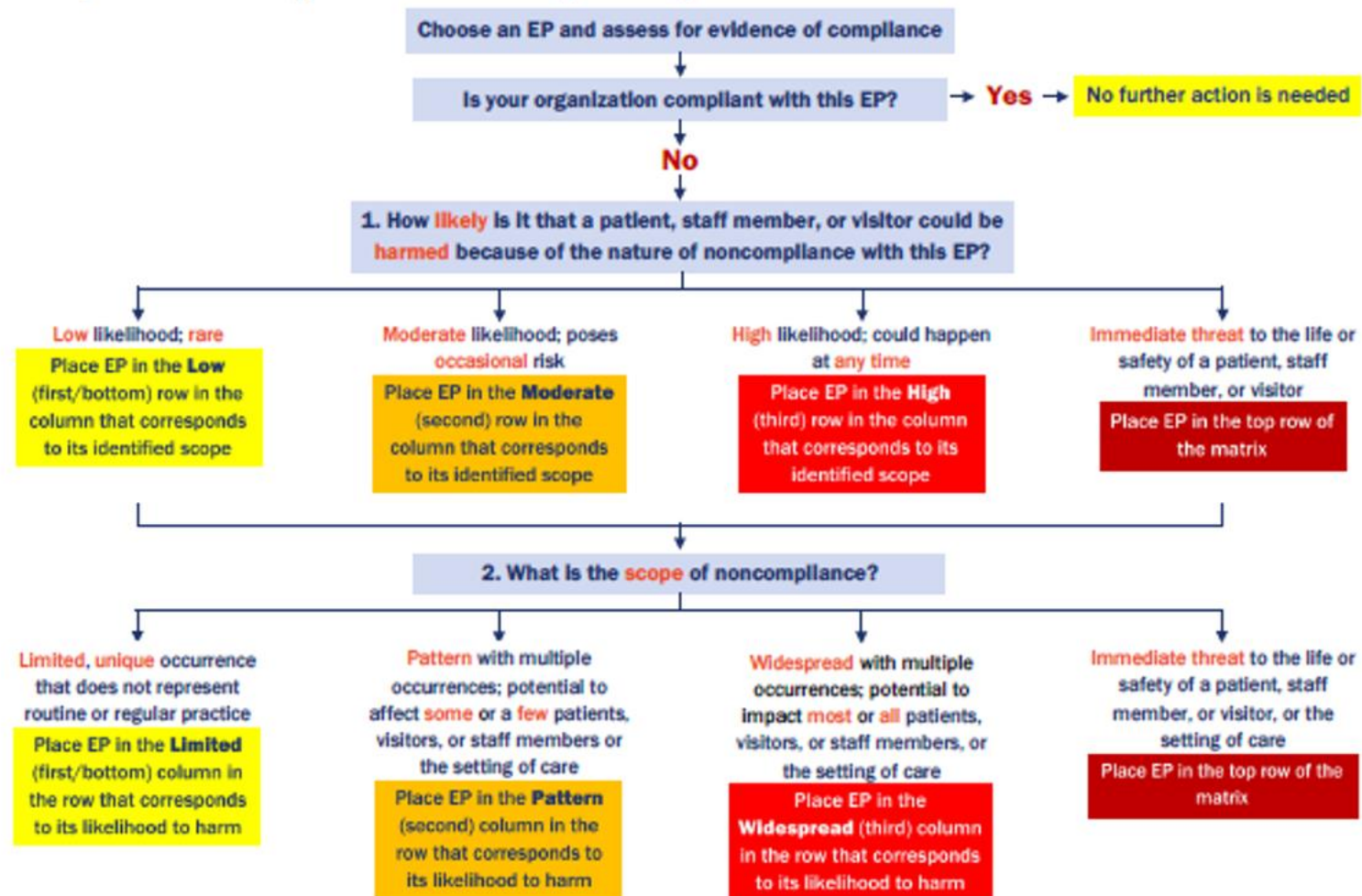
- **High**—Occurrence of harm is likely; that is, the finding could directly lead to harm without the need for other significant circumstances or failures.
- **Moderate**—Occurrence of harm is possible; that is, the finding could cause harm directly but is more likely to cause harm as a contributing factor in the presence of special circumstances or additional failures.
- **Low**—Occurrence of harm is rare; that is, the finding undermines safety/quality or contributes to an unsafe environment is but very unlikely to directly contribute to harm.

Operational definitions along the *x* axis—“Scope”—are as follows:

- **Widespread**—Issue is described as “pervasive at the organization”; that is, the finding is the result of a process or systemic failure and could impact a majority of patients.
- **Pattern**—Issue is described as having the potential to “impact more than a limited number of patients impacted”; that is, the finding involves process variation.
- **Limited**—Issue is described as a “unique occurrence”; that is, the finding is considered an outlier and not representative of routine or regular practice.

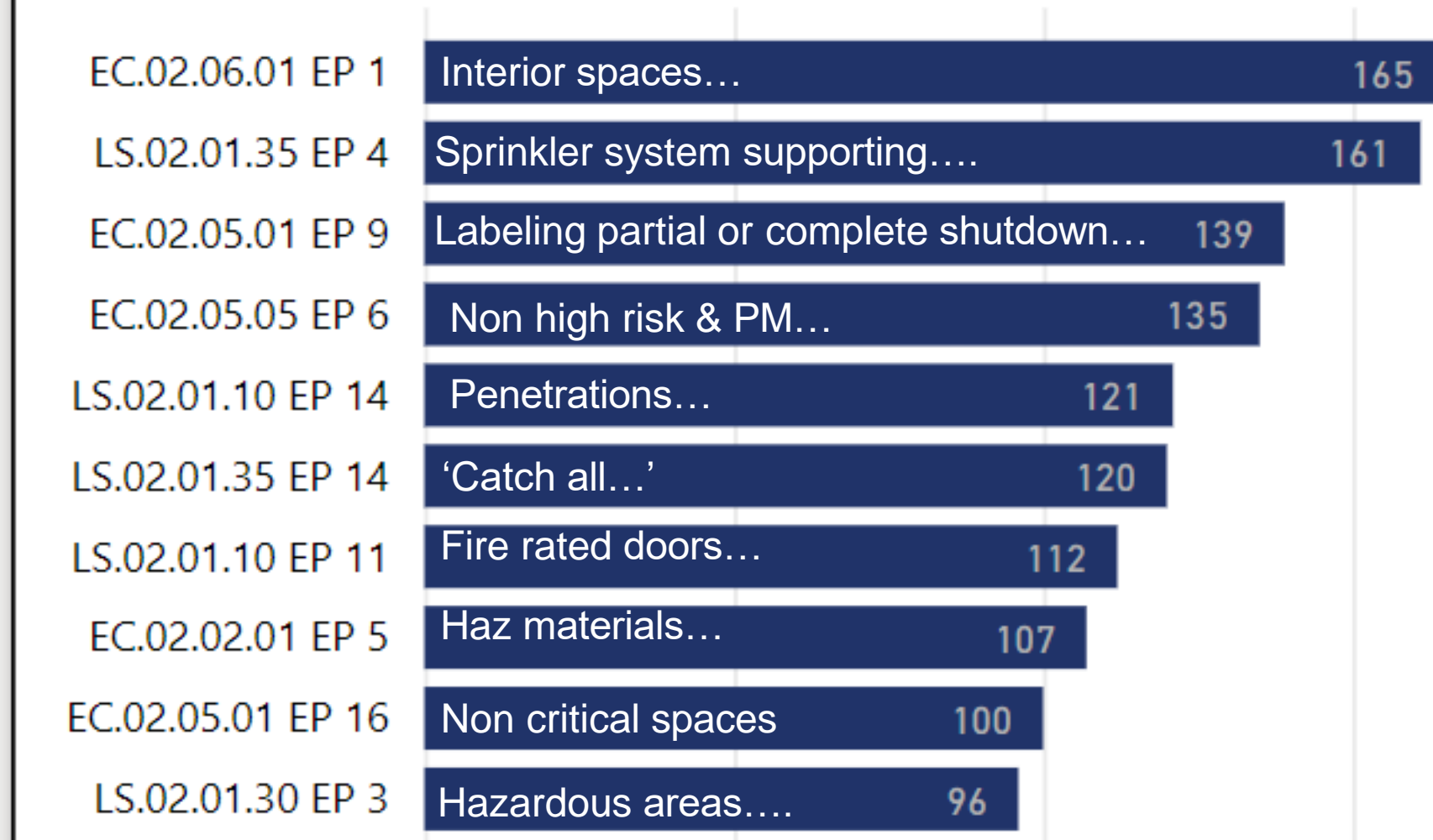
Determining Where to Place an Element of Performance (EP) on the SAFER Matrix

Use this figure to help determine where to place noncompliant EPs on the SAFER Matrix. After noncompliant EPs are plotted on the matrix, you will be able to better prioritize improvement efforts.



Top 10 EC & LS - 1/1/2023 to 10/10/2023 - FL

Number of EP-Level RFIs and SAFER Placement





SAFER

SAFER Matrix Scoring

Likelihood to Harm	Immediate Threat to Health or Safety -			0.0%
High	2.1%	0.7%	0.4%	3.3%
Moderate	18.8%	5.5%	1.5%	25.8%
Low	59.6%	9.7%	1.7%	71.0%
	Limited 80.5%	Pattern 15.9%	Widespread 3.6%	
	Scope			

Life Safety Code Surveyors Average RFI's per Survey

Full Hospital Surveys

2022	2021	2020	2019	2018	2017	2016	2015	2014
17.64	15.5	14.01	17.04	16.33	13.13	10.96	11.17	10.52

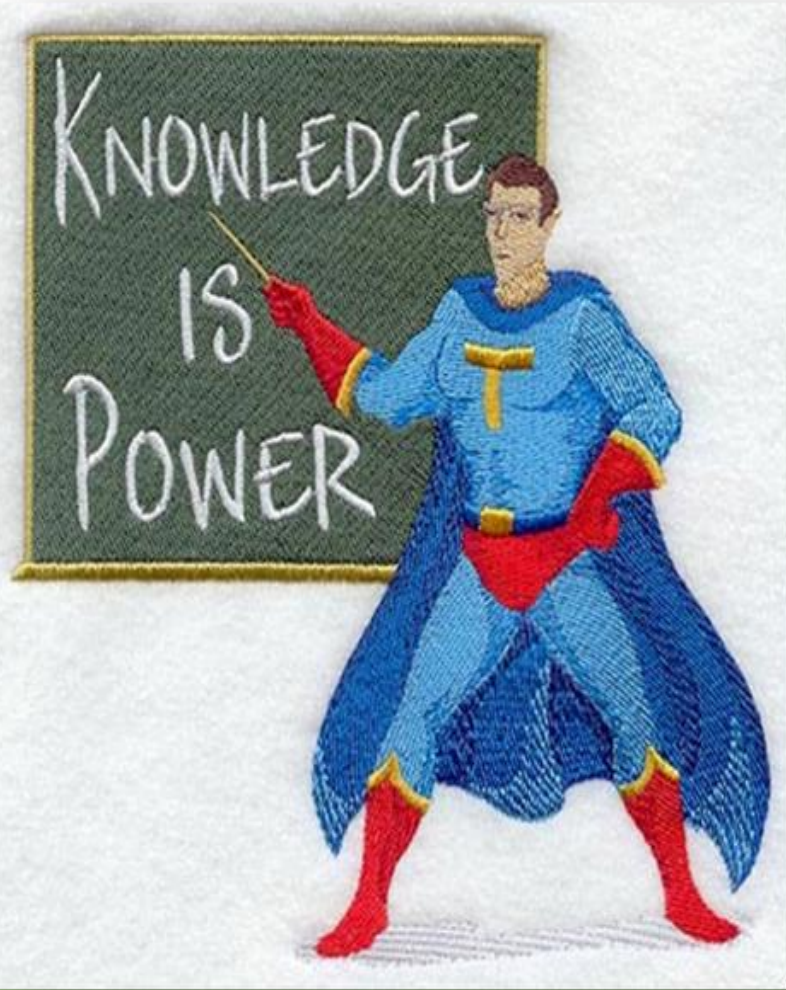


COVID

SAFER & "See it /
Cite it"

"C" Category & OFI's

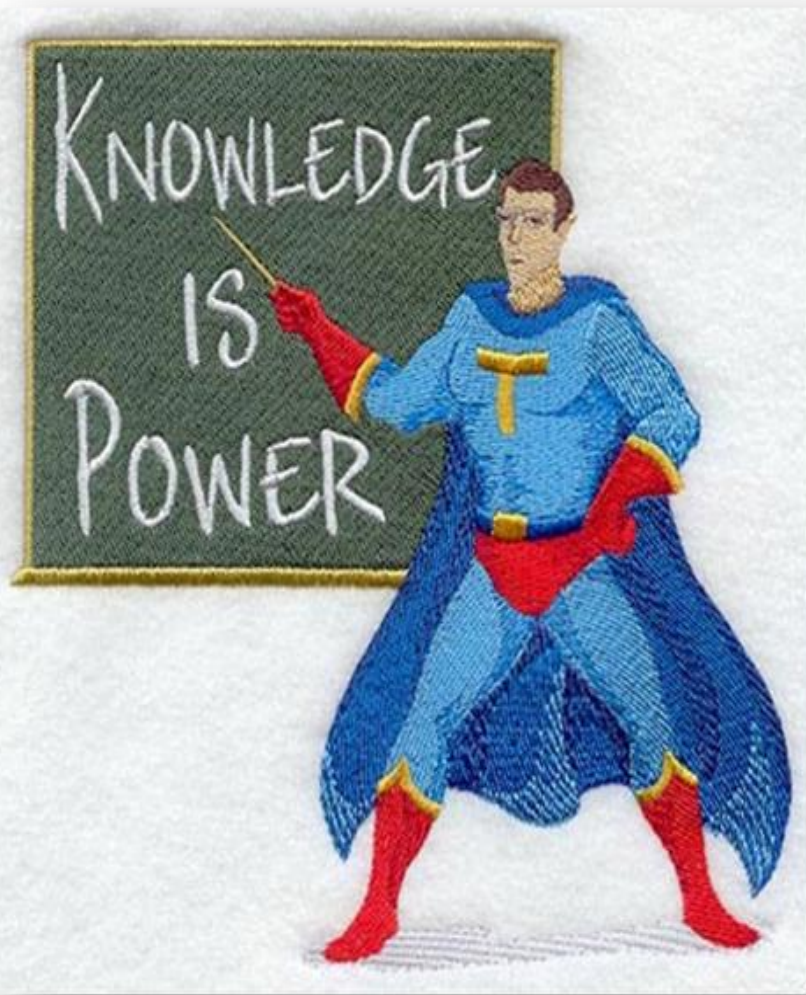
What's New ?



Changes Effective Now Impacting All Programs

- The Joint Commission has modified its **Environment of Care (EC) survey process for ambulatory surgery centers** (those that are deemed and/or assigned life safety code surveyors), critical access hospitals, and hospitals.
- The change eliminates the one-hour, sit-down EC discussion with members of the Safety or EC committee. Content from this session will be integrated into the document review and building tours conducted by the Life Safety Code® surveyors. Also, EC topics will be incorporated during individual tracer activities completed by the clinical surveyors.
- This new survey approach will provide the LS Surveyor additional time to review your Medical Equipment Program and the Building Survey.
- **EC & LS changes in Behavioral Health** – see JC prepublication standards effective July 1, 2021. Clarification on Fire drills is included since BHU is considered Healthcare Occupancies (12 drills per year instead of 4) there are a few other exemptions where locking arrangements are being used. See **EC.02.03.03 EP 1**.

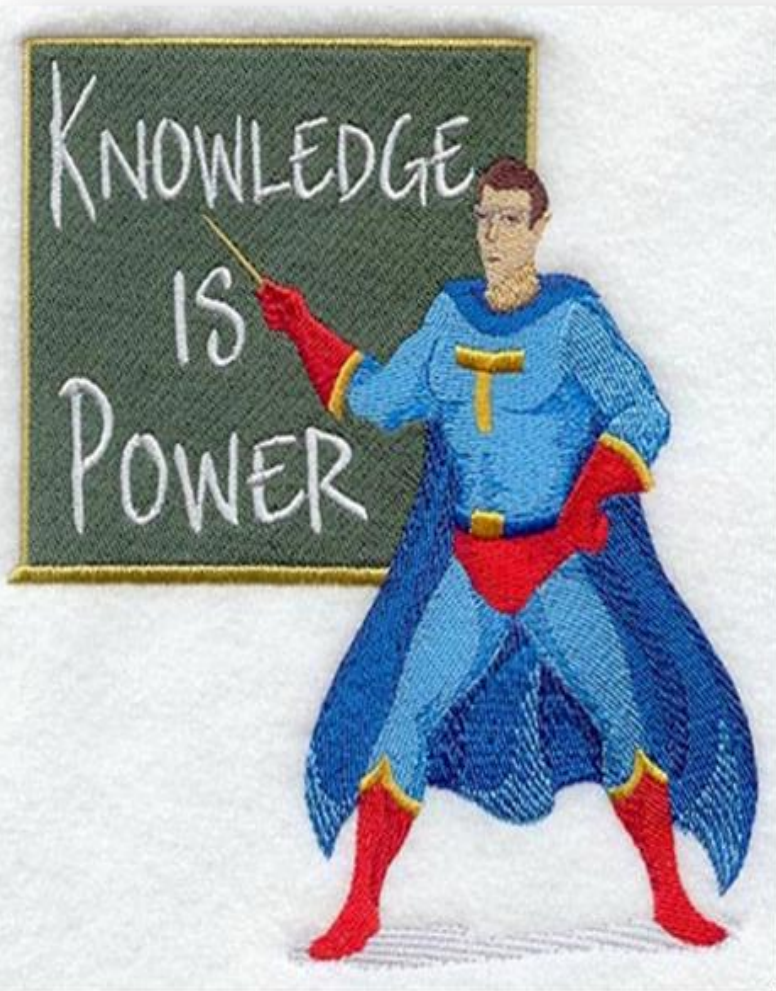
What's New ?



Changes Effective Now Impacting All Programs

- **Life Safety Code® Building Assessment** – Specified the NFPA editions being surveyed.
- **Life Safety & Environment of Care Document List and Review Tool** – Tool has been expanded to include additional Environment of Care related documents for review. Eliminated EP's 7 & 8 in EC.02.03.05.
- **Kitchen Tracer Survey Guide** – This guide is the same as surveyors use when conducting their evaluation of the kitchen environment and dietary services. **Make sure you have the update tool published by TJC.**

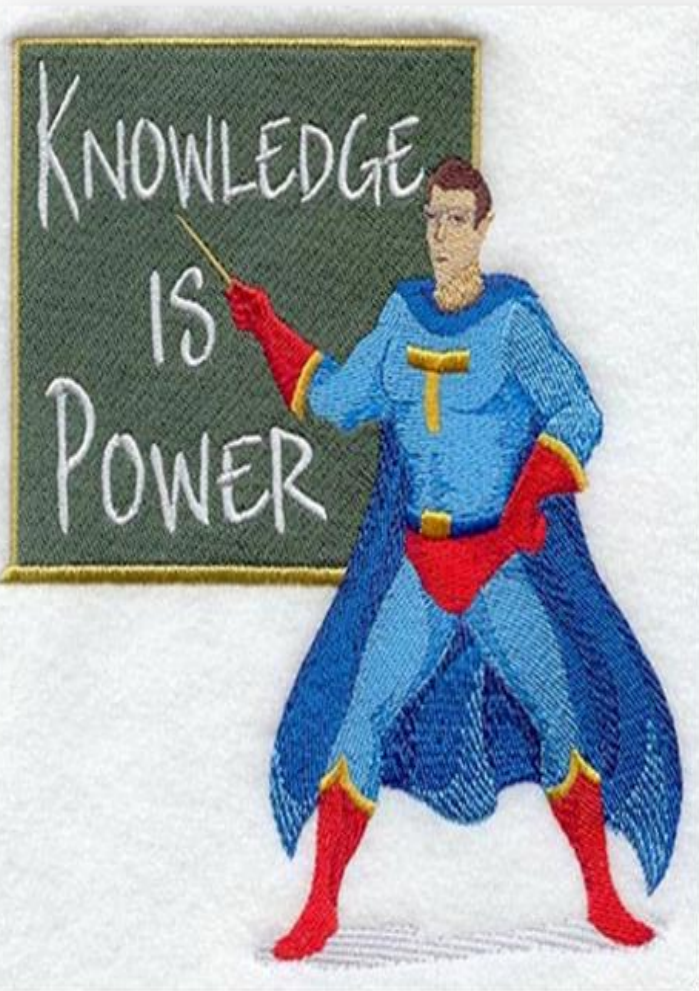
What's New ?



Changes Effective Now Impacting All Programs

- **Focus on Pre-Construction Risk Assessment** – Are you doing what your PICRA/ICRA/WICRA policy states? **ICRA 2.0 tool ?**
- **Surveying what space?** Business Occupancies are now added to the Building Survey as of Jan 2021.
- Business Occupancies program will only be applied to bldgs. where individuals receive services.
- Requires the LSC survey to extend to all Inpatient locations and to locations where patients customarily go to receive Patient Care and would permit those locations to be classified as Healthcare.
- See Pre-Publication of TJC “Business Standards”
LS.05.01.10 – LS.05.01.35 are Effective July 1,2021

What's New ?



“ Hospital within a Hospital “

- The Host Hospital has a Tenant within the Hospital.
- Survey Process: example
- The space or floor is surveyed during the Host Hospital’s survey if both TJC accredited.
- If Host is not TJC accredited a Life Safety Specialist will be assigned to the tenant's survey.



New :

JOINT COMMISSION SAFETY BRIEFING: WHAT TO INCLUDE

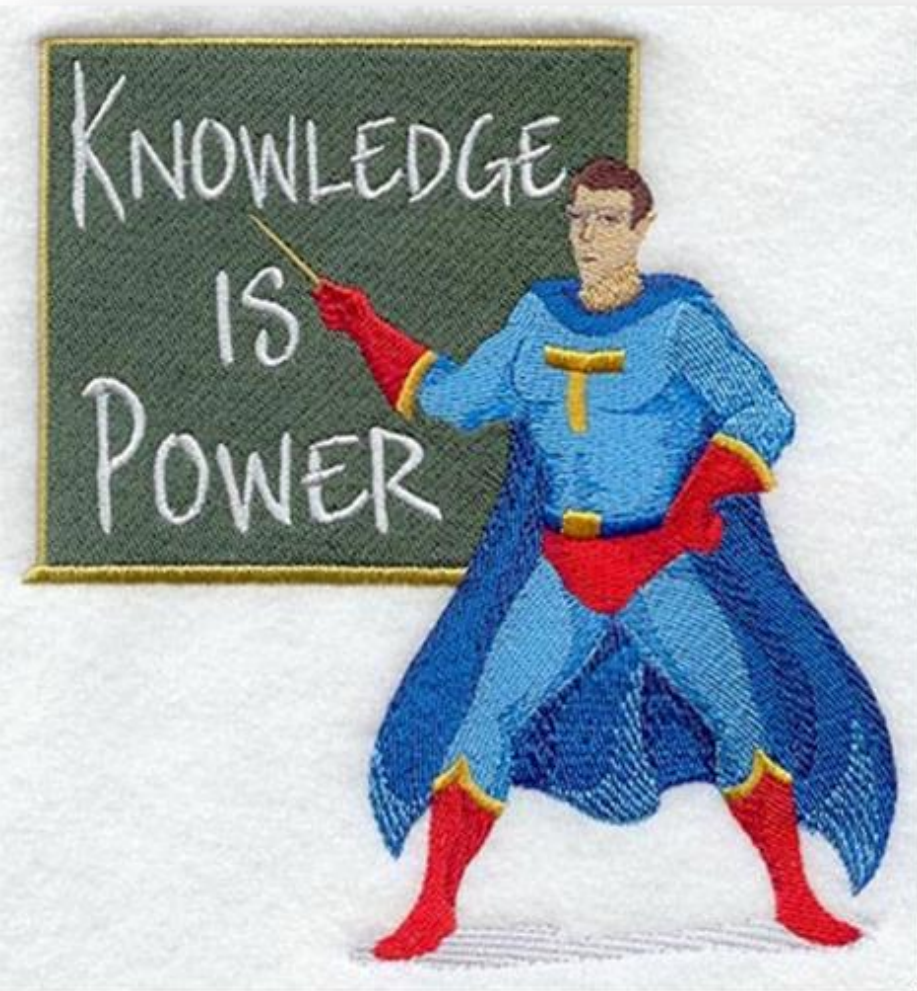
TJC advises that the Safety Briefing should take no more than five minutes. It's an informal session and should take place with the surveyors in their conference room soon after their arrival.

The Joint Commission Safety Briefing will not be a separate item on your survey agenda. Rather, you should incorporate it into the Surveyor Arrival Session which takes place on the morning of Day 1. (For full details on the survey process, be sure to consult the [2023 TJC Survey Activity Guide](#).)

The briefing should include any potential safety concerns and any associated response activities the surveyors should be aware of while they're on site. For example,

- Fire, smoke, or other emergencies
- Workplace violence (including active shooter scenarios)
- Any specific issues the organization is aware of such as civil unrest, labor actions, etc. that surveyors might encounter
- How surveyors should respond

What's New?

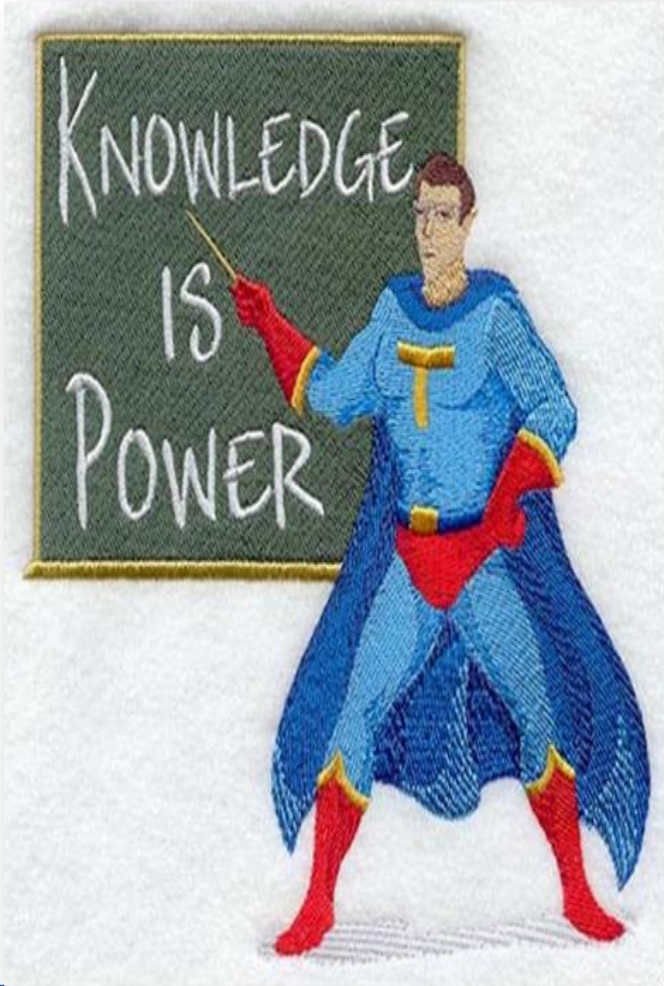


The Joint Commission Retires Select Accreditation Requirements

Effective February 19, 2023.

- The review began with hospital elements of performance (EPs) that met all the following criteria:
 - The EP did not support a CMS CoP or state regulation.
 - The EP has been in effect for at least three years.
 - The EP has been scored five times or less during full triennial surveys between 2017 and 2019 (the three years prior to the COVID-19 public health emergency).

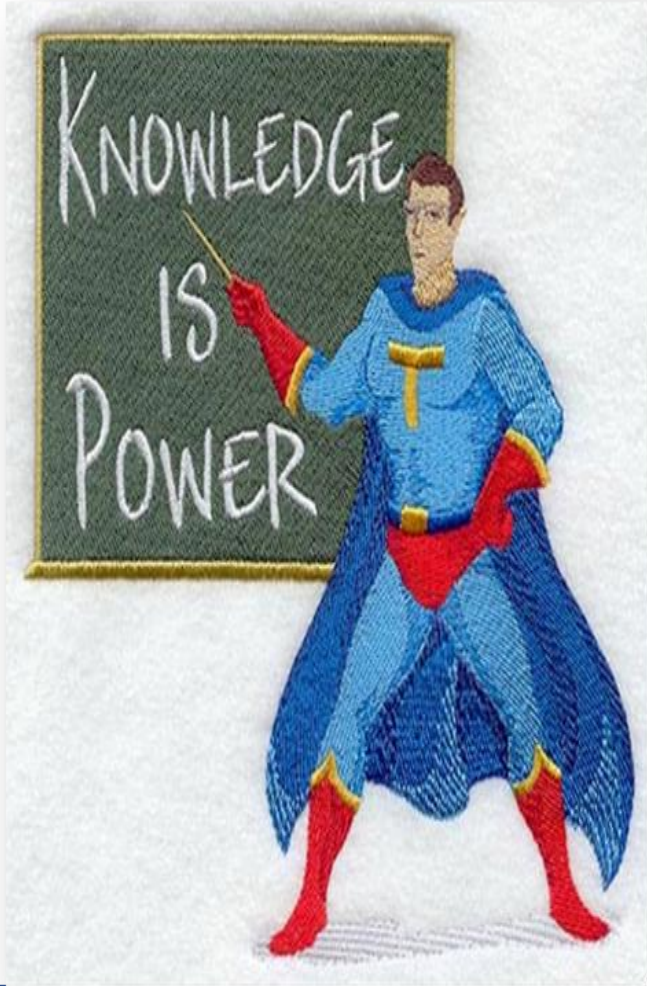
What's New ?



The Joint Commission Retires Select Accreditation Requirements

- The Joint Commission is eliminating 168 accreditation requirements that are above and beyond regulations from the Centers for Medicare & Medicaid Services (CMS) or any other state or federal agency.
- In addition to eliminating roughly 14% of the standards within their scope, TJC are revising an additional 13 standards in the near future.

What's New ?



The revisions affect 182 standards across all accreditation programs.

- **56 Hospital** standards were identified for deletion, with 4 additional standards being revised to make them more effective.
- Ambulatory Health Care (**20 deleted**, 1 revised),
- Critical Access Hospitals (**37 deleted**, 4 revised)
- Behavioral Healthcare (**9 deleted**, 1 revised)
- Home Care (**10 deleted**, 1 revised)
- Laboratory Services (**6 deleted**, 1 revised)
- Nursing Care Centers (**12 deleted**)
- Office-Based Surgery (**18 deleted**, 1 revised).

What's New ?



Environment of Care (EC) Chapter retired EP

Standard EC.02.01.03 EP 1

- The hospital prohibits smoking except in specific circumstances.
- The hospital develops a written policy prohibiting smoking in all buildings. Exceptions for patients in specific circumstances are defined.
 - **Note:** The scope of this EP is concerned with all smoking types—tobacco, electronic, or other.

Standard LS.02.01.40 EP 2

- The hospital provides and maintains special features to protect individuals from the hazards of fire and smoke.
 - The hospital meets all other Life Safety Code automatic extinguishing requirements related to NFPA 101-2012: 18/19.4.2.

QUIZ #1 FOR FHEA ATENDEES



EMERGENCY OPERATION PLAN

Standard EM.09.01.01 EP 1

Written EM Program w/all-hazards approach

Please answer the following question as to the new revised EM

**Why did TJC revise the EM standard for HAP/CA from
EM.01.01.01 to EM.09.01.01**

Answer : To Honor those of 911 and First Responders

QUIZ #2

2018 LSC–Smoke Zones

What is the maximum allowable size of a smoke compartment in New Health Care Construction?

- a) 22,500 sq.ft
- b) 40,000 sq.ft
- c) There is no limit



QUIZ #2 Answer

2018 LSC–Smoke Zones



- **Answer –a) 22,500 sq ft –NFPA 101 18.3.7.1(3)**
- **OR 40,000 sq ft if you are using NFPA 101- 2018 edition.**
- 2018 LSC§18.3.7.1
- •2015 Edition of the IBC permits 40,000ft²
- •2018 Edition of the IBC restricts it to compartments with single-bed patient rooms or suites
- •2015 Edition of LSC only permits 22,500 ft²
- •2018 Edition LSC permits 40,000 ft² with restrictions similar to 2018 IBC, and in compartments with no patient sleeping

QUIZ #3

2012 LSC–Exit Discharge

What is the maximum percentage of exit stairs that are permitted to discharge to the interior of a building?

- a) Exit stairs are not permitted to discharge to the interior
- b) 25 %
- c) 50 %
- d) 75 %



QUIZ #3 Answer

2012 LSC–Exit Discharge

- **Answer –c) 50%**

- 2012 NFPA 101 §7.7.2

- Interior exit discharge shall lead to a free and unobstructed way to the exterior that is readily apparent or identifiable with exit signage



QUIZ #4



NFPA 10 – Fire Extinguisher Installment

- A. At a height not more than 5 ft above the floor.
- B. At a height not less than 4 in. from floor.
- C. At any height as long as it is readily accessible and visible.
- D. Both A and B

QUIZ #4 Answer



NFPA 10 – Fire Extinguisher Installment

- Answer – d) Both A and B

Reference NFPA Code: 2010 NFPA 10 §6.1.3.8

- NOTE: Extinguishers greater than 40 lbs. shall not be installed more than 3.5 ft above the floor.

QUIZ #5

NFPA 80 - Labeling

It is acceptable for a fire door (in a fire barrier) label to be covered by a continuous hinge.

A.True

B.False



QUIZ #5 Answer

NFPA 80 - Labeling

- Answer – b) False
- 2010 NFPA 80 §4.2.2
- Labels must be readily visible and convenient for identification by the Authority Having Jurisdiction.



QUIZ #6



NFPA 13 – Sprinkler Supports

What are the limitations on non-system components that can be supported by sprinkler piping or hangers?

- A. Acceptable as long as the components are less than 10 lbs.
- B. Acceptable as long as the components are tied to the sprinkler pipe.
- C. No items can be supported by sprinkler pipe.

QUIZ #6 Answer



NFPA 13 – Sprinkler Supports

Answer – c) No items can be supported by sprinkler pipe.

2010 NFPA 13 §9.1.1.7

Citations have been noted by TJC even a single wire on a sprinkler pipe.

(DNV may not cite just a single wire)

QUIZ #7



- What is the fire rating requirement for a Hyperbaric Chamber classified as a Class B = Human single occupancy as defined in NFPA 99:14.1.2.2.
- A) The room where the Chamber is in the facility needs to have a 2-hour fire-resistant rated construction.
- B) No rating at all

QUIZ #7 Answer



Answer – B)

NFPA 99:14.2.1.1.2 states:

- * Class B and C chambers located inside a building **shall not** be required to be protected by 2-hour fire-resistant rated construction.

Thank you to everyone attending!

The Team Compliance Hero is here to answer any of your questions!



***Disclaimer:** The information expressed and shared in this presentation is only applicable through **December 31st, 2023** - We take no responsibility for any issues that may arise from using information presented here past this date. Permission from TJC to use Safer Matrix Slides and survey data for this presentation.