

Joint Conference Committee Regulatory Affairs Status Report for July 2021 Meeting

I. PENDING SURVEYS				
1.	TJC, CMS Deficiency Revisit Survey		Anticipate Early June (30 days post survey)	
2.	TJC Biennial Laboratory Accreditation Survey		Anticipate June/July 2021	
3.	CMS 4A SNF Recertification		Anticipate any time	
4.	CMS 4A SNF Fire Life Safety		Anticipate after SNF Recertification Survey	
II. COMPLETED SURVEYS				
1.	Survey Board of Pharmacy Annual Survey	7/8/2021	On minor environmental finding	
2.	Survey DEA OBOT Annual Survey	7/19/2021	No Findings	
3.	FRI Retained Foreign Body (Glove tip) ED	2/20/2021	Substantiated with No Deficiencies	
4.	Complaint Grievance Process	01/3/2020	Substantiated with No Deficiencies	
5.	FRI Privacy Breach: Ward 92 (AVS given to the wrong patient)	6/16/2021	Substantiated with No Deficiencies	
III. PLANS OF CORRECTION				
1.	Joint Commission Triennial Accreditation Survey	7/19/2021	Evidence of Standards Compliance (ESC) submitted See Attached summary	
IV. OPEN SITE VISITS – Investigation commenced by CDPH				
		COMPLAINT: submitted by public.	FRI: Facility Reported Incident.	ABUSE: Long Term Care CMS self report
1.	Complaint ED Staffing	1/2/2020	Investigation resumed by different surveyor 6/08/21	
2.	FRI Patient Death following Med Error	4/17/2020	Ongoing – Anticipate Deficiencies	
3.	FRI Wrong Site Surgery OR Kidney Stent	4/5/2020	Documents Requested	
4.	Privacy Breach 7L	3/15/2020	Pending Visit	
5.	Privacy Breach HIS	4/24/2020	Pending Visit	
6.	ABUSE Allegation of Staff to Resident Abuse 4A	6/1/2020	Documents Requested	
7.	FRI Wrong Site Surgery OR Kidney Stent	6/8/2020	Documents Requested and onsite survey commenced	
8.	HAPI Stage III Mid-Coccyx (Unavoidable) H44	6/17/2020	Documents Requested	
9.	FRI Fall with Injury H38	7/8/2020	Pending Visit	
10.	ABUSE Allegation of Staff to Resident Abuse 4A	7/17/2020	Documents Requested	
11.	FRI Patient to Patient Abuse, 7C	8/7/2020	Pending Visit	
12.	FRI Elopement, H42/44	8/7/2020	Pending Visit	
13.	FRI HAPI H38	8/19/2020	Pending Visit	
14.	Privacy Breach 3 ED Patient records stolen for a Social Workers car off campus	7/31/2020	Pending Visit	
15.	FRI Fall sustaining fractured mandible H54	8/13/2020	Pending Visit	
16.	FRI HAPI, H38	8/19/2020	Pending Visit	
17.	FRI Fall, 4A	9/8/2020	Pending Visit	
18.	Privacy Breach 3D – appointment information sent to wrong patient	9/8/2020	Pending Visit	
19.	FRI ED – Fall with injury	10/5/2020	Documents Requested	

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20. FRI	7C – Alleged Sexual Assault	10/13/2020	Pending Visit
21. Privacy Breach	PHI sent via email to incorrect patient	10/4/2020	Pending Visit
22. FRI	Alleged Sexual Assault 7C	10/21/2020	Pending Visit
23. FRI	Fall with Injury H64	10/29/2020	Pending Visit
24. FRI	Elopement H64 (Patient returned to ED)	10/31/2020	Documents Requested
25. FRI	Alleged Sexual Assault 7B	11/10/2020	Pending Visit
26. Privacy Breach	Test Result provided to patient and relative overheard	11/02/2020	Pending Visit
27. FRI	Retained Foreign Object H22	11/17/2020	Pending Visit
28. FRI	HAPI H34	11/17/2020	Pending Visit
29. FRI	COVID-19 Outbreak 4A	1/6/2021	Pending Visit
30. FRI	Power Outage >4hrs B100	1/13/2021	Pending Visit
31. Privacy Breach	Patient Labels Lost 4A	1/14/2021	Pending Visit
32. FRI	Fall with Injury 4A	2/10/2021	Pending Visit
33. Privacy Breach	PES Allegation that phi was released without consent	7/16/2020	Pending Visit
34. Privacy Breach	7B staff provided information via phone without consent	1/29/2021	Pending Visit
35. Privacy Breach	PACU medication given to wrong patient (drug was correct drug)	2/2/2021	Pending Visit
36. Privacy Breach	H76/78 Misplaced patient list and labels	2/10/2021	Pending Visit
37. Privacy Breach	7B appointment slip given to wrong patient	2/12/2021	Pending Visit
38. Privacy Breach	H25 medication given to wrong patient (drug was correct drug)	2/20/2021	Pending Visit
39. FRI	Medication Error ICU	3/23/2021	Pending Visit
40. Abuse	Resident to Resident 4A	4/7/2021	Pending Visit
41. FRI	Product/Devise – Blood Transfusion Event IR	4/3/2021	Pending Visit
42. FRI	Fall with Hip Fracture ED	4/13/2021	Pending Visit
43. FRI	HAPI Right Heel, H54	4/1/2021	Pending Visit
44. FRI	HAPI Left Heel H62	4/22/2021	Pending Visit
45. Complaint	Infection Control – 4M	6/10/2021	Pending Visit
46. FRI	Resident to Resident verbal abuse – 4A	5/28/2021	Pending Visit
47. FRI	AWOL: Building 5, ultrasound – 7C patient	6/11/2021	Pending Visit
48. FRI	HVAC Fan Malfunction, B-Wing, Building 5	6/12/2021	Documents requested

V. NEW FACILITY REPORTED INCIDENTS (FRI)

COMPLAINT: submitted by public.

FRI: Facility Reported Incident.

ABUSE: Long Term Care CMS self report

1. Privacy Breach	Patient's EKG results sent to wrong cell phone number	6/15/2021
2. Privacy Breach	Ward 92 Staff gave the incorrect AVS to patient	5/13/2021
3. Privacy Breach	Merged information records with a different patient	5/7/2021

The Joint Commission Hospital Accreditation Program & Nursing Care Center Survey Summary
Survey Dates: 5/4/21-5/7/21
Evidence of Standards Compliance (ESC) Action Plans
Submission of ESC: 7/19/21

Hospital Accreditation Program

Chapter: Environment of Care- 14 Standards/EPs

Major ESC Actions for-

- Installation of eyewash sink and ensuring monthly inspections are documented
- Ensuring documentation of fire door inspections, availability of fire response plans, and placement of fire extinguishers
- Repair of environment, including sealing penetrations and tears and repairing smoke detector
- Ensuring medical gas tanks are stored in a secure manner.

Chapter: Infection Prevention and Control- 3 Standards/EPs (1 of 3 Scored at Conditional Level)

Major ESC Actions for-

- Deep cleaning of stands in 2 clinical areas, including removal of tape. Memorandum was issued to ZSFG & UCSF staff to avoid using tape on stands, instruments, and equipment.
- Revision of workflow for cleaning scopes. **(Part of Condition Level)**
- Implementation of process to clean the conveyor cart that transports clean instruments from Sterile Processing Department (SPD) to the OR. **(Part of Condition Level)**
- Implementation of system to maintain instruments outside of the OR. **(Part of Condition Level)** This included:
 - Joint collaboration by SPD, Ambulatory Specialties and Maternal/Child Health
 - Vigorous cleaning and sterilizing efforts of instruments outside the OR, removal of instruments in unacceptable conditions, and expedited ordering of new instruments to replace stock
 - Creation of standard work on the process for inspection of instruments at the unit-level with identification of instrument champions
 - Rounding by SPD/Ambulatory/Maternal Child Health leadership for education and 1:1 just-in-time training with front line staff
- **Of note: Condition Level rankings will have a re-visit survey**
- Process and education to ensure supplies are not opened and “ready for use”
- Implementation of solid barriers on the bottom shelves of wire rack units to prevent dust, debris and cleaning solutions from contaminating supplies.

Chapter: Leadership- 2 Standards/EPs

Major ESC Actions for-

- Restructuring of Radiation Safety Committee and dosimetry monitoring program
- EPIC build to include availability of autopsy authorization form

Chapter: Life Safety- 7 Standards/EPs

Major ESC Actions for-

- Additional line item to bi-monthly EOC rounds to ensure data and electrical junction boxes are closed
- Routine monitoring to ensure integrity of sprinkler head

Chapter: Medication Management- Standards/EPs

Major ESC Actions for-

- Implementation of temperature monitoring for an implantable device
- Removal of a COVID medication cart, that is no longer needed at this point, from circulation and monitoring to ensure medications are stored in a secure manner
- Revised policy and provided staff education for procedure involving disinfecting gloves during sterile compounding
- Reinforcement with staff regarding adhering to best practice for medication administration and documentation.

Chapter: National Patient Safety Goals- 1 Standards/EPs

Major ESC Actions for-

- Updates to the environment addressing mitigation of suicide risks
- Update to the Environmental Risk Assessment to include gurneys as a line item for mitigation of suicide risks

Chapter: Provision of Care, Treatment and Services- 3 Standards/EPs

Major ESC Actions for-

- EPIC build to include a documentation template addressing patient communication needs
- Reinforcement with staff regarding documentation expectations surrounding pain assessments
- Reinforcement with staff and providers regarding expectations for restraint order renewals

Chapter: Rights and Responsibilities of the Individual- 2 Standards/EPs

Major ESC Actions for-

- Reinforcement with staff regarding documentation expectations for use of an interpreter
- Creation of a tip sheet and training of staff have been completed to address our process for notifying the patient's physician of their admission

Nursing Care Center

Chapter: Environment of Care- 1 Standards/EPs

Major ESC Actions for-

- Inspection and replacement of stained ceiling tiles

Chapter: Infection Prevention and Control- 1 Standards/EPs

Major ESC Actions for-

- Established a schedule for cleaning the vents on the unit

Chapter: Provision of Care, Treatment and Services- 4 Standards/EPs

Major ESC Actions for-

- Reinforcement with staff regarding the expectations for individualizing and updating care plans, notifying the provider when a resident refuses medication on multiple occasions
- Updated process to provide patient education for 1st dose administration of newly prescribed medications.