

# History Tracking Report: 2009 to 2010 Requirements

## Accreditation Program: Laboratory

### 2009 Chapter: Management of the Environment of Care

#### Standard EC.1.10

##### 2009 Standard Text:

The {jc}organization{/2} manages safety risks.

#### Standard EC.01.01.01

##### 2010 Standard Text:

The laboratory plans activities that minimize risks in the environment of care.  
 Note: One or more persons can be assigned to manage risks associated with the management plans described in this standard.

**2009 Standard:** EC.1.10

**2009 EP:** 1

##### 2009 EP Text:

The {jc}organization{/2} develops and maintains a written management plan describing the processes it implements to effectively manage the environmental safety (including physical, chemical, biochemical, and electrical hazards) of {jc}patients{/6}, staff, and other people coming to the {jc}organization{/2}'s facilities.

**Revision Type:** Retain

**2010 Standard:** EC.01.01.01

**2010 EP:** 3

##### 2010 EP Text:

The laboratory has a written plan for providing a safe environment for everyone who enters the laboratory's facilities. (See also EC.04.01.01, EP 15)

**2009 Standard:** EC.1.10

**2009 EP:** 2

##### 2009 EP Text:

The {jc}organization{/2} identifies a person(s), as designated by leadership, to coordinate the development, implementation, and monitoring of the safety management activities.

**Revision Type:** Consolidate

**2010 Standard:** EC.01.01.01

**2010 EP:** 1

##### 2010 EP Text:

Laboratory leaders identify an individual(s) to manage risk, coordinate risk reduction activities in the environment of care, collect information on deficiencies, and disseminate summaries of actions and results.  
 Note 1: This information is disseminated to individuals with responsibility for the issues being addressed.  
 Note 2: Deficiencies include injuries, problems, or use errors.

**2009 Standard:** EC.1.10

**2009 EP:** 3

##### 2009 EP Text:

The {jc}organization{/2} identifies a person(s) to intervene whenever conditions immediately threaten life or health or threaten damage to equipment or buildings.

**Revision Type:** Retain

**2010 Standard:** EC.01.01.01

**2010 EP:** 2

##### 2010 EP Text:

Laboratory leaders identify an individual(s) to intervene whenever environmental conditions immediately threaten life or health or threaten to damage equipment or buildings.

<p><b>2009 Standard:</b> EC.1.10  <b>2009 EP Text:</b>                  The {jc}organization{/2} conducts comprehensive proactive risk assessments that evaluate the potential adverse impact of buildings, grounds, equipment, occupants, and internal physical systems on the safety and health of {jc}patients{/6}, staff, and other people coming to the {jc}organization{/2}'s facilities.</p>	<p><b>2009 EP:</b> 4  <b>Revision Type:</b> Consolidate</p>	<p><b>2010 Standard:</b> EC.02.01.01  <b>2010 EP:</b> 1  <b>2010 EP Text:</b>                  The laboratory identifies safety and security risks associated with the environment of care.                  Note: Risks are identified from internal sources such as ongoing monitoring of the environment, results of root cause analyses, results of proactive risk assessments of high-risk processes, and from credible external sources such as Sentinel Event Alerts. (See also EC.04.01.01, EP 14)</p>
<p><b>2009 Standard:</b> EC.1.10  <b>2009 EP Text:</b>                  The {jc}organization{/2} uses the risks identified to select and implement procedures and controls to achieve the lowest potential for adverse impact on the safety and health of {jc}patients{/6}, staff, and other people coming to the {jc}organization{/2}'s facilities.</p>	<p><b>2009 EP:</b> 5  <b>Revision Type:</b> Consolidate</p>	<p><b>2010 Standard:</b> EC.02.01.01  <b>2010 EP:</b> 3  <b>2010 EP Text:</b>                  The laboratory takes action to minimize or eliminate identified safety and security risks associated with the physical environment.</p>
<p><b>2009 Standard:</b> EC.1.10  <b>2009 EP Text:</b>                  The {jc}organization{/2} establishes safety policies and procedures that are distributed, practiced, enforced, and reviewed as frequently as necessary.</p>	<p><b>2009 EP:</b> 7  <b>Revision Type:</b> Retain</p>	<p><b>2010 Standard:</b> EC.02.01.01  <b>2010 EP:</b> 12  <b>2010 EP Text:</b>                  The laboratory establishes safety policies and procedures that are distributed, practiced, enforced, and reviewed as defined by the laboratory.</p>
<p><b>2009 Standard:</b> EC.1.10  <b>2009 EP Text:</b>                  The {jc}organization{/2} ensures a process exist for responding to product safety recalls by appropriate {jc}organization{/2} staff.</p>	<p><b>2009 EP:</b> 8  <b>Revision Type:</b> Consolidate</p>	<p><b>2010 Standard:</b> EC.02.01.01  <b>2010 EP:</b> 11  <b>2010 EP Text:</b>                  The laboratory acts in accordance with product notices and recalls.</p>
<p><b>2009 Standard:</b> EC.1.10  <b>2009 EP Text:</b>                  The {jc}organization{/2} ensures that all grounds and equipment are maintained appropriately.</p>	<p><b>2009 EP:</b> 9  <b>Revision Type:</b> Retain</p>	<p><b>2010 Standard:</b> EC.02.01.01  <b>2010 EP:</b> 5  <b>2010 EP Text:</b>                  The laboratory maintains all grounds and equipment.                  Note 1: When the laboratory is located within a hospital, the hospital is responsible for maintenance of the grounds.                  Note 2: For additional requirements regarding laboratory equipment, please refer to EC.02.04.01 and EC.02.04.03.</p>

**Standard EC.1.20****2009 Standard Text:**

The {jc}organization{/2} maintains a safe environment.

**2009 Standard:** EC.1.20

**2009 EP:** 1

**2009 EP Text:**

**Revision Type:** Retain

The {jc}organization{/2} conducts environmental tours to identify environmental deficiencies, hazards, and unsafe practices.

**2009 Standard:** EC.1.20

**2009 EP:** 4

**2009 EP Text:**

**Revision Type:** Retain

The {jc}organization{/2} conducts environmental tours at least annually.

**Standard EC.04.01.01****2010 Standard Text:**

The laboratory collects information to monitor conditions in the environment.

**2010 Standard:** EC.04.01.01

**2010 EP:** 14

**2010 EP Text:**

The laboratory uses its tours to identify environmental deficiencies, hazards, and unsafe practices. (See also EC.02.01.01, EP 1; EC.04.01.03, EP 1)

**2010 Standard:** EC.04.01.01

**2010 EP:** 13

**2010 EP Text:**

The laboratory conducts environmental tours at least annually.

**Standard EC.1.30****2009 Standard Text:**

The {jc}organization{/2} develops and implements a policy to prohibit smoking except in specified circumstances.

**2009 Standard:** EC.1.30**2009 EP:** 8**2009 EP Text:**

Smoking is not permitted in the laboratory and areas under the control of the laboratory.

**Revision Type:** Retain**Standard EC.02.01.03****2010 Standard Text:**

The laboratory prohibits smoking.

**2010 Standard:** EC.02.01.03**2010 EP:** 1**2010 EP Text:**

Smoking is not permitted in the laboratory and areas under the control of the laboratory.

**Standard EC.2.10**

**2009 Standard Text:**

The {jc}organization{/2} identifies and manages its security risks.

**2009 Standard:** EC.2.10

**2009 EP Text:**

The {jc}organization{/2} develops and maintains a written management plan describing the processes it implements to effectively manage the security of {jc}patients{/6}, staff, and other people coming to the {jc}organization{/2}'s facilities.

**2009 Standard:** EC.2.10

**2009 EP Text:**

The {jc}organization{/2} identifies a person(s), as designated by leadership, to coordinate the development, implementation, and monitoring of the security management activities.

**2009 Standard:** EC.2.10

**2009 EP Text:**

The {jc}organization{/2} conducts proactive risk assessments that evaluate the potential adverse impact of the external environment and the services provided on the security of {jc}patients{/6}, staff, and other people coming to the {jc}organization{/2}'s facilities.

**2009 Standard:** EC.2.10

**2009 EP Text:**

The {jc}organization{/2} uses the risks identified to select and implement procedures and controls to achieve the lowest potential for adverse impact on security.

**2009 EP:** 1

**Revision Type:** Retain

**2009 EP:** 2

**Revision Type:** Delete:NE

**2009 EP:** 3

**Revision Type:** Consolidate

**2009 EP:** 4

**Revision Type:** Consolidate

**Standard EC.01.01.01**

**2010 Standard Text:**

The laboratory plans activities that minimize risks in the environment of care. Note: One or more persons can be assigned to manage risks associated with the management plans described in this standard.

**2010 Standard:** EC.01.01.01

**2010 EP:** 4

**2010 EP Text:**

The laboratory has a written plan for providing a secure environment for everyone who enters the laboratory's facilities. (See also EC.04.01.01, EP 15)

**2010 Standard:** N/A

**2010 EP Text:**

No EP

**2010 Standard:** EC.02.01.01

**2010 EP:** 1

**2010 EP Text:**

The laboratory identifies safety and security risks associated with the environment of care. Note: Risks are identified from internal sources such as ongoing monitoring of the environment, results of root cause analyses, results of proactive risk assessments of high-risk processes, and from credible external sources such as Sentinel Event Alerts. (See also EC.04.01.01, EP 14)

**2010 Standard:** EC.02.01.01

**2010 EP:** 3

**2010 EP Text:**

The laboratory takes action to minimize or eliminate identified safety and security risks associated with the physical environment.

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**2009 Standard:** EC.2.10**2009 EP:** 5**2010 Standard:** EC.02.01.01**2010 EP:** 7**2009 EP Text:****Revision Type:** Retain**2010 EP Text:**

The {jc}organization{/2} identifies, as appropriate, {jc}patients{/6}, staff, and other people entering the {jc}organization{/2}'s facilities.

The laboratory identifies individuals permitted to enter its facilities.  
Note: Determination of those individuals requiring identification and the method for doing so is at the laboratory's discretion.

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**2009 Standard:** EC.2.10**2009 EP:** 6**2010 Standard:** EC.02.01.01**2010 EP:** 8**2009 EP Text:****Revision Type:** Retain**2010 EP Text:**

The {jc}organization{/2} controls access to and egress from security-sensitive areas, as determined by the {jc}organization{/2}.

The laboratory controls access to and from areas it identifies as security sensitive.

**Standard EC.3.10**

**2009 Standard Text:**

The {jc}organization{/2} manages its hazardous materials and waste risks.

**Standard EC.01.01.01**

**2010 Standard Text:**

The laboratory plans activities that minimize risks in the environment of care.  
 Note: One or more persons can be assigned to manage risks associated with the management plans described in this standard.

**2009 Standard:** EC.3.10

**2009 EP:** 1

**2009 EP Text:**

The {jc}organization{/2} develops and maintains a written management plan describing the processes it implements to effectively manage hazardous materials and wastes.

**Revision Type:** Retain

**2010 Standard:** EC.01.01.01

**2010 EP:** 5

**2010 EP Text:**

The laboratory has a written plan for managing the following: Hazardous materials and waste. (See also EC.04.01.01, EP 15)

**2009 Standard:** EC.3.10

**2009 EP:** 2

**2009 EP Text:**

The {jc}organization{/2} creates and maintains an inventory that identifies hazardous materials and waste used, stored, or generated using criteria consistent with applicable law and regulation (for example, the Environmental Protection Agency [EPA] and the Occupational Safety and Health Administration [OSHA]).

**Revision Type:** Retain

**2010 Standard:** EC.02.02.01

**2010 EP:** 1

**2010 EP Text:**

The laboratory maintains a written, current inventory of hazardous materials and waste that it uses, stores, or generates. The only materials that need to be included on the inventory are those whose handling, use, and storage are addressed by law and regulation. (See also IC.02.01.01, EP 6)

**2009 Standard:** EC.3.10

**2009 EP:** 3

**2009 EP Text:**

The {jc}organization{/2} establishes and implements processes for selecting, handling, storing, transporting, using, and disposing of hazardous materials and waste from receipt or generation through use and/or final disposal, including managing the following: Chemicals

**Revision Type:** Split

**2010 Standard:** EC.02.02.01

**2010 EP:** 5

**2010 EP Text:**

The laboratory minimizes risks associated with selecting, handling, storing, transporting, using, and disposing of hazardous chemicals.

**2009 Standard:** EC.3.10

**2009 EP:** 3

**2009 EP Text:**

The {jc}organization{/2} establishes and implements processes for selecting, handling, storing, transporting, using, and disposing of hazardous materials and waste from receipt or generation through use and/or final disposal, including managing the following: Chemicals

**Revision Type:** Split

**2010 Standard:** EC.02.02.01

**2010 EP:** 7

**2010 EP Text:**

The laboratory minimizes risks associated with the selection and use of hazardous energy sources.  
 Note: Hazardous energy sources include, but are not limited to, those generated while using electron microscopy.

**2009 Standard:** EC.3.10**2009 EP:** 3**2010 Standard:** EC.02.02.01**2010 EP:** 9**2009 EP Text:****Revision Type:** Split**2010 EP Text:**

The {jc}organization{/2} establishes and implements processes for selecting, handling, storing, transporting, using, and disposing of hazardous materials and waste from receipt or generation through use and/or final disposal, including managing the following: Chemicals

The laboratory implements processes to minimize risks associated with the selection, handling, storage, transport, use, and disposing of hazardous gases and vapors.

Note: Hazardous gases and vapors include, but are not limited to, glutaraldehyde, formalin, and xylene.

**2009 Standard:** EC.3.10**2009 EP:** 4**2010 Standard:** N/A**2009 EP Text:****Revision Type:** Delete:NE**2010 EP Text:**

The {jc}organization{/2} establishes and implements processes for selecting, handling, storing, transporting, using, and disposing of hazardous materials and waste from receipt or generation through use and/or final disposal, including managing the following: Chemotherapeutic materials

No EP

**2009 Standard:** EC.3.10**2009 EP:** 5**2010 Standard:** EC.02.02.01**2010 EP:** 6**2009 EP Text:****Revision Type:** Retain**2010 EP Text:**

The {jc}organization{/2} establishes and implements processes for selecting, handling, storing, transporting, using, and disposing of hazardous materials and waste from receipt or generation through use and/or final disposal, including managing the following: Radioactive materials

The laboratory minimizes risks associated with selecting, handling, storing, transporting, using, and disposing of radioactive materials. (See also QSA.19.01.01, EP 2)

**2009 Standard:** EC.3.10**2009 EP:** 6**2010 Standard:** IC.02.01.01**2010 EP:** 6**2009 EP Text:****Revision Type:** Retain**2010 EP Text:**

The {jc}organization{/2} establishes and implements processes for selecting, handling, storing, transporting, using, and disposing of hazardous materials and waste from receipt or generation through use and/or final disposal, including managing the following: Infectious and regulated medical wastes, including sharps

The laboratory minimizes the risk of infection when storing and disposing of infectious waste. (See also EC.02.02.01, EP 1)

**2009 Standard:** EC.3.10**2009 EP:** 7**2010 Standard:** N/A**2009 EP Text:****Revision Type:** Delete:Redun**2010 EP Text:**

The {jc}organization{/2} provides adequate and appropriate space and equipment for safely handling and storing hazardous materials and waste.

No EP

<p><b>2009 Standard:</b> EC.3.10  <b>2009 EP Text:</b>                  The {jc}organization{/2} monitors and disposes of hazardous gases and vapors.</p>	<p><b>2009 EP:</b> 8  <b>Revision Type:</b> Split</p>	<p><b>2010 Standard:</b> EC.02.02.01  <b>2010 EP:</b> 9  <b>2010 EP Text:</b>                  The laboratory implements processes to minimize risks associated with the selection, handling, storage, transport, use, and disposing of hazardous gases and vapors.                  Note: Hazardous gases and vapors include, but are not limited to, glutaraldehyde, formalin, and xylene.</p>
<p><b>2009 Standard:</b> EC.3.10  <b>2009 EP Text:</b>                  The {jc}organization{/2} monitors and disposes of hazardous gases and vapors.</p>	<p><b>2009 EP:</b> 8  <b>Revision Type:</b> Split</p>	<p><b>2010 Standard:</b> EC.02.02.01  <b>2010 EP:</b> 10  <b>2010 EP Text:</b>                  The laboratory monitors levels of hazardous gases and vapors to determine that they are in safe range.                  Note: Law and regulation determine the frequency of monitoring hazardous gases and vapors as well as acceptable ranges.                  Footnote: See <a href="http://www.osha.gov">http://www.osha.gov</a> and <a href="http://www.cdc.gov/niosh/">http://www.cdc.gov/niosh/</a> for guidance in establishing safe ranges.</p>
<p><b>2009 Standard:</b> EC.3.10  <b>2009 EP Text:</b>                  The {jc}organization{/2} identifies and implements emergency procedures that include the specific precautions, procedures, and protective equipment used during hazardous materials and waste spills or exposures.</p>	<p><b>2009 EP:</b> 9  <b>Revision Type:</b> Split</p>	<p><b>2010 Standard:</b> EC.02.02.01  <b>2010 EP:</b> 3  <b>2010 EP Text:</b>                  The laboratory has written procedures, including the use of precautions and personal protective equipment, to follow in response to hazardous material and waste spills or exposures. (See also IC.02.01.01, EP 3)</p>
<p><b>2009 Standard:</b> EC.3.10  <b>2009 EP Text:</b>                  The {jc}organization{/2} identifies and implements emergency procedures that include the specific precautions, procedures, and protective equipment used during hazardous materials and waste spills or exposures.</p>	<p><b>2009 EP:</b> 9  <b>Revision Type:</b> Split</p>	<p><b>2010 Standard:</b> EC.02.02.01  <b>2010 EP:</b> 4  <b>2010 EP Text:</b>                  The laboratory implements its procedures in response to hazardous material and waste spills or exposures.</p>
<p><b>2009 Standard:</b> EC.3.10  <b>2009 EP Text:</b>                  The {jc}organization{/2} maintains documentation, including required permits, licenses, and adherence to other regulations.</p>	<p><b>2009 EP:</b> 10  <b>Revision Type:</b> Consolidate</p>	<p><b>2010 Standard:</b> EC.02.02.01  <b>2010 EP:</b> 11  <b>2010 EP Text:</b>                  For managing hazardous materials and waste, the laboratory has the permits, licenses, manifests, and material safety data sheets required by law and regulation.</p>

<p><b>2009 Standard:</b> EC.3.10  <b>2009 EP Text:</b>                  The {jc}organization{/2} maintains required manifests for handling hazardous materials and waste.</p>	<p><b>2009 EP:</b> 11  <b>Revision Type:</b> Consolidate</p>	<p><b>2010 Standard:</b> EC.02.02.01  <b>2010 EP Text:</b>                  For managing hazardous materials and waste, the laboratory has the permits, licenses, manifests, and material safety data sheets required by law and regulation.</p>
<p><b>2009 Standard:</b> EC.3.10  <b>2009 EP Text:</b>                  The {jc}organization{/2} properly labels hazardous materials and waste.</p>	<p><b>2009 EP:</b> 12  <b>Revision Type:</b> Retain</p>	<p><b>2010 Standard:</b> EC.02.02.01  <b>2010 EP Text:</b>                  The laboratory labels hazardous materials and waste. Labels identify the contents and hazard warnings.                  Footnote: The National Fire Protection Association (NFPA) and the Occupational Safety and Health Administration's (OSHA) Bloodborne Pathogens and Hazard Communications Standards provide details on labeling requirements.</p>
<p><b>2009 Standard:</b> EC.3.10  <b>2009 EP Text:</b>                  The {jc}organization{/2} effectively separates hazardous materials and waste storage and processing areas from other areas of the facility.</p>	<p><b>2009 EP:</b> 13  <b>Revision Type:</b> Delete:NE</p>	<p><b>2010 Standard:</b> N/A  <b>2010 EP Text:</b>                  No EP</p>

**Standard EC.4.10****2009 Standard Text:**

The {jc}organization{/2} addresses emergency management.

**Standard EM.01.01.01****2010 Standard Text:**

The laboratory engages in planning activities prior to developing its Emergency Operations Plan.

Note: An emergency is an unexpected or sudden event that significantly disrupts the laboratory's environment of care or its ability to provide services. At times, an emergency results in a sudden, increased demand for the laboratory's services. Emergencies can be either human-made or natural (such as an electrical system failure or a tornado), or a combination of both, and they exist on a continuum of severity. A disaster is a type of emergency that, due to its complexity, scope, or duration, threatens the laboratory's capabilities and requires outside assistance to sustain patient care, safety, or security functions.

**2009 Standard:** EC.4.10**2009 EP:** 1**2009 EP Text:**

The {jc}organization{/2} conducts a hazard vulnerability analysis\* to identify potential emergencies that could affect the need for its services or its ability to provide those services.\*Hazard vulnerability analysis The identification of potential emergencies and the direct and indirect effects these emergencies may have on the {jc}organization{/2}'s operations and the demand for its services.

**Revision Type:** Split**2010 Standard:** EM.01.01.01**2010 EP:** 2**2010 EP Text:**

The laboratory identifies potential emergencies and the direct and indirect effects that these emergencies may have on the need for its services or its ability to provide those services. (See also IC.01.06.01, EP 4)  
Note 1: Some organizations refer to this process as a hazard vulnerability analysis (HVA).  
Note 2: The potential of an emergency situation stemming from a surge in infectious patients is addressed in the "Infection Prevention and Control" (IC) chapter.

**2009 Standard:** EC.4.10**2009 EP:** 1**2009 EP Text:**

The {jc}organization{/2} conducts a hazard vulnerability analysis\* to identify potential emergencies that could affect the need for its services or its ability to provide those services.\*Hazard vulnerability analysis The identification of potential emergencies and the direct and indirect effects these emergencies may have on the {jc}organization{/2}'s operations and the demand for its services.

**Revision Type:** Split**2010 Standard:** EM.02.02.05**2010 EP:** 1**2010 EP Text:**

The Emergency Operations Plan describes how security will be provided during an emergency.

**2009 Standard:** EC.4.10

**2009 EP:** 1

**2010 Standard:** EM.02.02.05

**2010 EP:** 10

**2009 EP Text:**

**Revision Type:** Split

**2010 EP Text:**

The {jc}organization{/2} conducts a hazard vulnerability analysis\* to identify potential emergencies that could affect the need for its services or its ability to provide those services.\*Hazard vulnerability analysis The identification of potential emergencies and the direct and indirect effects these emergencies may have on the {jc}organization{/2}'s operations and the demand for its services.

The laboratory implements the components of its Emergency Operations Plan that require advance preparation to support internal security during an emergency.

Note: Some components of the Emergency Operations Plan are not implemented unless an emergency is imminent. Other components, however, can and should be implemented in advance so that the laboratory is as prepared as possible.

**2009 Standard:** EC.4.10

**2009 EP:** 2

**2010 Standard:** EM.01.01.01

**2010 EP:** 3

**2009 EP Text:**

**Revision Type:** Split

**2010 EP Text:**

The {jc}organization{/2} establishes the following with the community:Priorities among the potential emergencies identified in the hazard vulnerability analysis The {jc}organization{/2}'s role in relation to a communitywide emergency management programAn “all-hazards” command structure within the {jc}organization{/2} that links with the community’s command structure

The laboratory prioritizes the potential emergencies it has identified.

**2009 Standard:** EC.4.10

**2009 EP:** 2

**2010 Standard:** EM.01.01.01

**2010 EP:** 4

**2009 EP Text:**

**Revision Type:** Split

**2010 EP Text:**

The {jc}organization{/2} establishes the following with the community:Priorities among the potential emergencies identified in the hazard vulnerability analysis The {jc}organization{/2}'s role in relation to a communitywide emergency management programAn “all-hazards” command structure within the {jc}organization{/2} that links with the community’s command structure

The laboratory, either as an independent organization or as part of another organization, communicates its needs and vulnerabilities to community emergency response agencies and identifies the community’s capability to meet its needs.

Note: A laboratory, either as part of an accredited organization or as an independent organization, may communicate and integrate with the National Incident Management System, the Laboratory Response Network, or other planning and response entities serving its community.

**2009 Standard:** EC.4.10

**2009 EP:** 3

**2010 Standard:** EM.02.01.01

**2010 EP:** 8

**2009 EP Text:**

**Revision Type:** Retain

**2010 EP Text:**

The {jc}organization{/2} develops and maintains a written emergency management plan describing the process for disaster readiness and emergency management, and implements it when appropriate.

If the laboratory experiences an actual emergency, the laboratory implements its response procedures related to laboratory services for its patients.

<p><b>2009 Standard:</b> EC.4.10  <b>2009 EP Text:</b>                  At a minimum, an emergency management plan is developed with the involvement of the {jc}organization{/2}'s leaders.</p>	<p><b>2009 EP:</b> 4  <b>Revision Type:</b> Split</p>	<p><b>2010 Standard:</b> EM.01.01.01  <b>2010 EP Text:</b>                  The laboratory's leaders participate in planning activities prior to developing an Emergency Operations Plan.</p>	<p><b>2010 EP:</b> 1</p>
<p><b>2009 Standard:</b> EC.4.10  <b>2009 EP Text:</b>                  At a minimum, an emergency management plan is developed with the involvement of the {jc}organization{/2}'s leaders.</p>	<p><b>2009 EP:</b> 4  <b>Revision Type:</b> Split</p>	<p><b>2010 Standard:</b> EM.02.01.01  <b>2010 EP Text:</b>                  The laboratory's leaders participate in the development of the Emergency Operations Plan.</p>	<p><b>2010 EP:</b> 1</p>
<p><b>2009 Standard:</b> EC.4.10  <b>2009 EP Text:</b>                  The plan identifies specific procedures that describe mitigation,* preparedness,** response, and recovery strategies, actions, and responsibilities for each priority emergency. *Mitigation activities Those activities {jc}an organization{/5} undertakes in attempting to lessen the severity and impact of a potential emergency.**Preparedness activities Those activities {jc}an organization{/5} undertakes to build capacity and identify resources that may be used if an emergency occurs.</p>	<p><b>2009 EP:</b> 5  <b>Revision Type:</b> Split</p>	<p><b>2010 Standard:</b> EM.01.01.01  <b>2010 EP Text:</b>                  The laboratory uses its prioritized emergencies as a basis for defining mitigation activities (that is, activities designed to reduce the risk of and potential damage from an emergency).                  Note: Mitigation, preparedness, response, and recovery are the four phases of emergency management. They occur over time: Mitigation and preparedness generally occur before an emergency, and response and recovery occur during and after an emergency.</p>	<p><b>2010 EP:</b> 5</p>
<p><b>2009 Standard:</b> EC.4.10  <b>2009 EP Text:</b>                  The plan identifies specific procedures that describe mitigation,* preparedness,** response, and recovery strategies, actions, and responsibilities for each priority emergency. *Mitigation activities Those activities {jc}an organization{/5} undertakes in attempting to lessen the severity and impact of a potential emergency.**Preparedness activities Those activities {jc}an organization{/5} undertakes to build capacity and identify resources that may be used if an emergency occurs.</p>	<p><b>2009 EP:</b> 5  <b>Revision Type:</b> Split</p>	<p><b>2010 Standard:</b> EM.01.01.01  <b>2010 EP Text:</b>                  The laboratory uses its prioritized emergencies as a basis for defining the preparedness activities that will organize and mobilize essential resources. (See also IM.01.01.03, EPs 1-4)</p>	<p><b>2010 EP:</b> 6</p>

**2009 Standard:** EC.4.10

**2009 EP:** 5

**2010 Standard:** EM.02.01.01

**2010 EP:** 2

**2009 EP Text:**

**Revision Type:** Split

**2010 EP Text:**

The plan identifies specific procedures that describe mitigation,\* preparedness,\*\* response, and recovery strategies, actions, and responsibilities for each priority emergency. \*Mitigation activities Those activities {jc}an organization{/5} undertakes in attempting to lessen the severity and impact of a potential emergency.\*\*Preparedness activities Those activities {jc}an organization{/5} undertakes to build capacity and identify resources that may be used if an emergency occurs.

The laboratory has a written Emergency Operations Plan that describes the response procedures to follow when emergencies occur.  
 Note: The response procedures address the prioritized emergencies but can also be adapted to other emergencies that the laboratory may experience. Response procedures could include the following:

- Maintaining or expanding services
- Conserving resources
- Curtailing services
- Relocating services to an alternative site
- Supplementing resources from outside the local community
- Closing the laboratory to new patients
- Staged evacuation
- Total evacuation

**2009 Standard:** EC.4.10

**2009 EP:** 5

**2010 Standard:** EM.02.01.01

**2010 EP:** 4

**2009 EP Text:**

**Revision Type:** Split

**2010 EP Text:**

The plan identifies specific procedures that describe mitigation,\* preparedness,\*\* response, and recovery strategies, actions, and responsibilities for each priority emergency. \*Mitigation activities Those activities {jc}an organization{/5} undertakes in attempting to lessen the severity and impact of a potential emergency.\*\*Preparedness activities Those activities {jc}an organization{/5} undertakes to build capacity and identify resources that may be used if an emergency occurs.

The laboratory has a written Emergency Operations Plan that describes the recovery strategies, actions, and individual responsibilities necessary to restore the laboratory's services after an emergency.

**2009 Standard:** EC.4.10

**2009 EP:** 5

**2010 Standard:** EM.02.02.01

**2010 EP:** 17

**2009 EP Text:**

**Revision Type:** Split

**2010 EP Text:**

The plan identifies specific procedures that describe mitigation,\* preparedness,\*\* response, and recovery strategies, actions, and responsibilities for each priority emergency. \*Mitigation activities Those activities {jc}an organization{/5} undertakes in attempting to lessen the severity and impact of a potential emergency.\*\*Preparedness activities Those activities {jc}an organization{/5} undertakes to build capacity and identify resources that may be used if an emergency occurs.

The laboratory implements the components of its Emergency Operations Plan that require advance preparation to support communications during an emergency.  
 Note: Some components of the Emergency Operations Plan are not implemented unless an emergency is imminent. Other components, however, can and should be implemented in advance so that the laboratory is as prepared as possible.

**2009 Standard:** EC.4.10

**2009 EP:** 5

**2010 Standard:** EM.02.02.03

**2010 EP:** 12

**2009 EP Text:**

**Revision Type:** Split

**2010 EP Text:**

The plan identifies specific procedures that describe mitigation,\* preparedness,\*\* response, and recovery strategies, actions, and responsibilities for each priority emergency. \*Mitigation activities Those activities {j}an organization{/5} undertakes in attempting to lessen the severity and impact of a potential emergency. \*\*Preparedness activities Those activities {j}an organization{/5} undertakes to build capacity and identify resources that may be used if an emergency occurs.

The laboratory implements the components of its Emergency Operations Plan that require advance preparation to provide for resources and assets during an emergency. (See also EM.02.02.11, EP 1)

Note: Some components of the Emergency Operations Plan are not implemented unless an emergency is imminent. Other components, however, can and should be implemented in advance so that the laboratory is as prepared as possible.

**2009 Standard:** EC.4.10

**2009 EP:** 5

**2010 Standard:** EM.02.02.07

**2010 EP:** 10

**2009 EP Text:**

**Revision Type:** Split

**2010 EP Text:**

The plan identifies specific procedures that describe mitigation,\* preparedness,\*\* response, and recovery strategies, actions, and responsibilities for each priority emergency. \*Mitigation activities Those activities {j}an organization{/5} undertakes in attempting to lessen the severity and impact of a potential emergency. \*\*Preparedness activities Those activities {j}an organization{/5} undertakes to build capacity and identify resources that may be used if an emergency occurs.

The laboratory implements the components of its Emergency Operations Plan that require advance preparation to manage staff during an emergency.

Note: Some components of the Emergency Operations Plan are not implemented unless an emergency is imminent. Other components, however, can and should be implemented in advance so that the laboratory is as prepared as possible.

**2009 Standard:** EC.4.10

**2009 EP:** 5

**2010 Standard:** EM.02.02.11

**2010 EP:** 11

**2009 EP Text:**

**Revision Type:** Split

**2010 EP Text:**

The plan identifies specific procedures that describe mitigation,\* preparedness,\*\* response, and recovery strategies, actions, and responsibilities for each priority emergency. \*Mitigation activities Those activities {j}an organization{/5} undertakes in attempting to lessen the severity and impact of a potential emergency. \*\*Preparedness activities Those activities {j}an organization{/5} undertakes to build capacity and identify resources that may be used if an emergency occurs.

The laboratory implements the components of its Emergency Operations Plan that require advance preparation to manage patients during an emergency.

Note: Some components of the Emergency Operations Plan are not implemented unless an emergency is imminent. Other components, however, can and should be implemented in advance so that the laboratory is as prepared as possible.

**2009 Standard:** EC.4.10

**2009 EP:** 6

**2010 Standard:** EM.02.01.01

**2010 EP:** 5

**2009 EP Text:**

**Revision Type:** Split

**2010 EP Text:**

The plan provides processes for initiating the response and recovery phases of the plan, including a description of how, when, and by whom the phases are to be activated.

The Emergency Operations Plan describes the processes for initiating and terminating the laboratory's response and recovery phases of the emergency, including under what circumstances these phases are activated.

Note: Mitigation, preparedness, response, and recovery are the four phases of emergency management. They occur over time: Mitigation and preparedness generally occur before an emergency, and response and recovery occur during and after an emergency.

**2009 Standard:** EC.4.10**2009 EP:** 6**2010 Standard:** EM.02.01.01**2010 EP:** 6**2009 EP Text:****Revision Type:** Split**2010 EP Text:**

The plan provides processes for initiating the response and recovery phases of the plan, including a description of how, when, and by whom the phases are to be activated.

The Emergency Operations Plan identifies the individual(s) responsible for activating the response and recovery phases of the emergency response. Note: Although a primary individual should be designated by role or title, an alternative individual may also be identified to assume this responsibility should the primary individual not be available at the time of an emergency.

**2009 Standard:** EC.4.10**2009 EP:** 7**2010 Standard:** EM.02.02.01**2010 EP:** 1**2009 EP Text:****Revision Type:** Retain**2010 EP Text:**

The plan provides processes for notifying staff when emergency response measures are initiated.

The Emergency Operations Plan describes how staff and licensed independent practitioners (such as pathologists) will be notified when emergency response procedures have been initiated.

**2009 Standard:** EC.4.10**2009 EP:** 8**2010 Standard:** EM.02.02.01**2010 EP:** 3**2009 EP Text:****Revision Type:** Retain**2010 EP Text:**

The plan provides processes for notifying external authorities of emergencies, including possible community emergencies identified by the organization.

The Emergency Operations Plan describes how the laboratory will notify external authorities that emergency response measures have been initiated.

**2009 Standard:** EC.4.10**2009 EP:** 9**2010 Standard:** EM.02.02.07**2010 EP:** 2**2009 EP Text:****Revision Type:** Split**2010 EP Text:**

The plan provides processes for identifying and assigning staff to cover all essential staff functions under emergency conditions.

The Emergency Operations Plan describes the following: The roles and responsibilities of staff during an emergency.

**2009 Standard:** EC.4.10**2009 EP:** 9**2010 Standard:** EM.02.02.07**2010 EP:** 3**2009 EP Text:****Revision Type:** Split**2010 EP Text:**

The plan provides processes for identifying and assigning staff to cover all essential staff functions under emergency conditions.

The Emergency Operations Plan describes the following: The process for assigning staff to all essential staff functions.

<p><b>2009 Standard:</b> EC.4.10  <b>2009 EP Text:</b>                  When required by the {jc}organization{/2}'s role within their community, the plan provides processes for establishing the means and methods to continue care, treatment, and services during the potential emergencies.</p>	<p><b>2009 EP:</b> 11  <b>Revision Type:</b> Retain</p>	<p><b>2010 Standard:</b> EM.02.02.11  <b>2010 EP Text:</b></p>	<p><b>2010 EP:</b> 1                  The Emergency Operations Plan describes how the laboratory will manage services during an emergency. (See also EM.02.02.03, EP 12)                  Note: Activities related to laboratory services might include scheduling, modifying, or discontinuing services; controlling information about patients; referring specimens or testing to other facilities; and providing security. Laboratories may need to do testing for hospital inpatients and ambulatory patients, or as a public health function.</p>
<p><b>2009 Standard:</b> EC.4.10  <b>2009 EP Text:</b>                  The plan provides processes for evacuating the entire building (both horizontally and, when applicable, vertically) when the environment cannot support adequate care, treatment, and services.</p>	<p><b>2009 EP:</b> 12  <b>Revision Type:</b> Retain</p>	<p><b>2010 Standard:</b> EM.02.02.11  <b>2010 EP Text:</b></p>	<p><b>2010 EP:</b> 3                  The Emergency Operations Plan describes how the laboratory will evacuate its staff and equipment from its occupied space (that is, relocate from one section or floor to another within the building, or completely outside the building) when deemed necessary by emergency circumstances.</p>
<p><b>2009 Standard:</b> EC.4.10  <b>2009 EP Text:</b>                  The plan provides processes for managing space, supplies, and security.</p>	<p><b>2009 EP:</b> 16  <b>Revision Type:</b> Retain</p>	<p><b>2010 Standard:</b> EM.02.02.03  <b>2010 EP Text:</b></p>	<p><b>2010 EP:</b> 11                  The Emergency Operations Plan provides processes for managing space and equipment.</p>
<p><b>2009 Standard:</b> EC.4.10  <b>2009 EP Text:</b>                  The plan provides processes for providing for back-up services if necessary.</p>	<p><b>2009 EP:</b> 17  <b>Revision Type:</b> Retain</p>	<p><b>2010 Standard:</b> EM.02.02.11  <b>2010 EP Text:</b></p>	<p><b>2010 EP:</b> 9                  The Emergency Operations Plan establishes processes for providing backup services, if necessary.</p>
<p><b>2009 Standard:</b> EC.4.10  <b>2009 EP Text:</b>                  The plan identifies backup internal and external communication systems in the event of failure during emergencies.</p>	<p><b>2009 EP:</b> 18  <b>Revision Type:</b> Retain</p>	<p><b>2010 Standard:</b> EM.02.02.01  <b>2010 EP Text:</b></p>	<p><b>2010 EP:</b> 14                  The laboratory establishes backup communication systems or technologies for use in the event that internal or external systems fail during an emergency.</p>
<p><b>2009 Standard:</b> EC.4.10  <b>2009 EP Text:</b>                  The plan identifies alternate roles and responsibilities of staff during emergencies, including to whom they report in the {jc}organization{/2}'s command structure and, when activated, in the community's command structure.</p>	<p><b>2009 EP:</b> 19  <b>Revision Type:</b> Retain</p>	<p><b>2010 Standard:</b> EM.02.02.07  <b>2010 EP Text:</b></p>	<p><b>2010 EP:</b> 4                  The Emergency Operations Plan identifies the individual(s) to whom staff report in emergencies.</p>

<p><b>2009 Standard:</b> EC.4.10  <b>2009 EP Text:</b>                  The plan identifies an alternative means of meeting essential building utility needs when the {c}organization{/2} is designated by its emergency management plan to provide continuous service during an emergency (for example, electricity, water, ventilation, fuel sources, medical gas/vacuum systems).</p>	<p><b>2009 EP:</b> 20  <b>Revision Type:</b> Split</p>	<p><b>2010 Standard:</b> EM.02.02.03  <b>2010 EP Text:</b>                  For laboratories that plan to provide service during an emergency: The Emergency Operations Plan describes how the laboratory will obtain and replenish laboratory reagents and related supplies (for example, testing media and plates) that will be required throughout the response and recovery phases of an emergency.</p>	<p><b>2010 EP:</b> 2</p>
<p><b>2009 Standard:</b> EC.4.10  <b>2009 EP Text:</b>                  The plan identifies an alternative means of meeting essential building utility needs when the {c}organization{/2} is designated by its emergency management plan to provide continuous service during an emergency (for example, electricity, water, ventilation, fuel sources, medical gas/vacuum systems).</p>	<p><b>2009 EP:</b> 20  <b>Revision Type:</b> Split</p>	<p><b>2010 Standard:</b> EM.02.02.03  <b>2010 EP Text:</b>                  For laboratories that plan to provide service during an emergency: The Emergency Operations Plan describes how the laboratory will obtain and replenish nonmedical supplies (for example, batteries, soap, towels) that will be required throughout the response and recovery phases of an emergency.</p>	<p><b>2010 EP:</b> 3</p>
<p><b>2009 Standard:</b> EC.4.10  <b>2009 EP Text:</b>                  The plan identifies an alternative means of meeting essential building utility needs when the {c}organization{/2} is designated by its emergency management plan to provide continuous service during an emergency (for example, electricity, water, ventilation, fuel sources, medical gas/vacuum systems).</p>	<p><b>2009 EP:</b> 20  <b>Revision Type:</b> Split</p>	<p><b>2010 Standard:</b> EM.02.02.09  <b>2010 EP Text:</b>                  The Emergency Operations Plan describes how the laboratory will provide for alternative means of meeting essential building utility needs when the laboratory needs to provide continuous service during an emergency.                  Note: Examples of utility needs include electricity, water, fuel, and medical gas/vacuum systems.</p>	<p><b>2010 EP:</b> 1</p>
<p><b>2009 Standard:</b> EC.4.10  <b>2009 EP Text:</b>                  The plan identifies an alternative means of meeting essential building utility needs when the {c}organization{/2} is designated by its emergency management plan to provide continuous service during an emergency (for example, electricity, water, ventilation, fuel sources, medical gas/vacuum systems).</p>	<p><b>2009 EP:</b> 20  <b>Revision Type:</b> Split</p>	<p><b>2010 Standard:</b> EM.02.02.09  <b>2010 EP Text:</b>                  The laboratory implements the components of its Emergency Operations Plan that require advance preparation to provide for utilities during an emergency.                  Note: Some components of the Emergency Operations Plan are not implemented unless an emergency is imminent. Other components, however, can and should be implemented in advance so that the laboratory is as prepared as possible.</p>	<p><b>2010 EP:</b> 8</p>

**Standard EC.4.20**

**2009 Standard Text:**

The {jc}organization{/2} regularly tests its emergency management plan.

**2009 Standard:** EC.4.20

**2009 EP:** 1

**2009 EP Text:**

**Revision Type:** Retain

The {jc}organization{/2} tests its emergency management plan once a year, either in response to an actual emergency or in a planned exercise.\*Note 2: Tabletop sessions, though useful, are not acceptable substitutes for exercises.\*If the laboratory is part of an accredited organization, the frequency of the exercises is based on the organizational plan.

**2009 Standard:** EC.4.20

**2009 EP:** 15

**2009 EP Text:**

**Revision Type:** Split

All exercises are critiqued to identify deficiencies and opportunities for improvement based upon all monitoring activities and observations during the exercise.

**2009 Standard:** EC.4.20

**2009 EP:** 15

**2009 EP Text:**

**Revision Type:** Split

All exercises are critiqued to identify deficiencies and opportunities for improvement based upon all monitoring activities and observations during the exercise.

**Standard EM.03.01.03**

**2010 Standard Text:**

The laboratory evaluates the effectiveness of its Emergency Operations Plan.

**2010 Standard:** EM.03.01.03

**2010 EP:** 1

**2010 EP Text:**

As an emergency response exercise, the laboratory activates its Emergency Operations Plan twice a year at each site included in the plan; laboratories that are independent organizations (not owned by or affiliated with a health care organization, such as reference laboratories) are required to activate the plan only once each year.

Note 1: If the organization activates its Emergency Operations Plan in response to one or more actual emergencies, these emergencies can serve in place of emergency response exercises.

Note 2: Tabletop sessions, though useful, are not acceptable substitutes for these exercises.

Note 3: If the laboratory is part of a Joint Commission–accredited organization, the frequency of the emergency response exercise is based on the organizational plan. Because most laboratories accredited by The Joint Commission are in hospitals, they will follow the hospital requirement for two tests.

**2010 Standard:** EM.03.01.03

**2010 EP:** 13

**2010 EP Text:**

Representatives from administrative, support, and laboratory services participate in the evaluation of all emergency response exercises and all responses to actual emergencies.

**2010 Standard:** EM.03.01.03

**2010 EP:** 14

**2010 EP Text:**

The evaluation of all emergency response exercises and all responses to actual emergencies includes the identification of deficiencies and opportunities for improvement. This evaluation is documented.

**Standard EC.5.10**

**2009 Standard Text:**

The {jc}organization{/2} manages fire safety risks.

**Standard EC.01.01.01**

**2010 Standard Text:**

The laboratory plans activities that minimize risks in the environment of care.  
 Note: One or more persons can be assigned to manage risks associated with the management plans described in this standard.

**2009 Standard:** EC.5.10

**2009 EP:** 1

**2009 EP Text:**

The {jc}organization{/2} develops and maintains a written management plan describing the processes it implements to effectively manage fire safety.

**Revision Type:** Retain

**2010 Standard:** EC.01.01.01

**2010 EP:** 6

**2010 EP Text:**

The laboratory has a written plan for managing the following: Fire safety. (See also EC.04.01.01, EP 15)

**2009 Standard:** EC.5.10

**2009 EP:** 2

**2009 EP Text:**

The {jc}organization{/2} identifies proactive processes for protecting {jc}patients{/6}, staff, and others coming to the {jc}organization{/2}'s facilities, as well as protecting property from fire, smoke, and other products of combustion.

**Revision Type:** Retain

**2010 Standard:** EC.02.03.01

**2010 EP:** 1

**2010 EP Text:**

The laboratory minimizes the potential for harm from fire, smoke, and other products of combustion.

**2009 Standard:** EC.5.10

**2009 EP:** 3

**2009 EP Text:**

The {jc}organization{/2} identifies processes for regularly inspecting, testing, and maintaining fire protection and fire safety systems, equipment, and components.

**Revision Type:** Delete:NE

**2010 Standard:** N/A

**2010 EP Text:**

No EP

**2009 Standard:** EC.5.10

**2009 EP:** 4

**2009 EP Text:**

The {jc}organization{/2} develops and implements a fire response plan that addresses the following: Facilitywide fire response Area-specific needs including fire evacuation routes Specific roles and responsibilities of staff, and volunteers at a fire's point of origin Specific roles and responsibilities of staff, and volunteers away from a fire's point of origin Specific roles and responsibilities of staff, and volunteers in preparing for building evacuation

**Revision Type:** Split

**2010 Standard:** EC.02.03.01

**2010 EP:** 9

**2010 EP Text:**

For independent laboratories that are not owned by or affiliated with a health care organization, such as a reference lab: The laboratory has a written fire response plan.

**2009 Standard:** EC.5.10

**2009 EP:** 4

**2010 Standard:** EC.02.03.01

**2010 EP:** 10

**2009 EP Text:**

**Revision Type:** Split

**2010 EP Text:**

The {jc}organization{/2} develops and implements a fire response plan that addresses the following: Facilitywide fire response Area-specific needs including fire evacuation routes Specific roles and responsibilities of staff, and volunteers at a fire's point of origin Specific roles and responsibilities of staff, and volunteers away from a fire's point of origin Specific roles and responsibilities of staff, and volunteers in preparing for building evacuation

The written fire response plan describes the specific roles of staff and licensed independent practitioners at and away from a fire's point of origin, including when and how to sound fire alarms, how to contain smoke and fire, how to use a fire extinguisher, and how to evacuate to areas of refuge. (See also EC.02.03.03, EP 5)

**2009 Standard:** EC.5.10

**2009 EP:** 6

**2010 Standard:** EC.02.03.01

**2010 EP:** 4

**2009 EP Text:**

**Revision Type:** Retain

**2010 EP Text:**

The {jc}organization{/2} maintains a free and unobstructed access to all exits.

The laboratory maintains free and unobstructed access to all exits.

**Standard EC.5.20****2009 Standard Text:**

Newly constructed and existing environments are designed and maintained to comply with the Life Safety Code®.

**2009 Standard:** EC.5.20

**2009 EP:** 3

**2009 EP Text:**

The laboratory works with the accredited organization in which it is located to take part in and understand the laboratory's role in life safety. Note: When the laboratory is located in an accredited organization's building(s), compliance with the LSC for the laboratory falls under the accredited organization's responsibility. The laboratory should, however, request information on any LSC deficiencies that might compromise its safety.

**Revision Type:** Retain

**Standard EC.02.03.01****2010 Standard Text:**

The laboratory manages fire risks.

**2010 Standard:** EC.02.03.01

**2010 EP:** 3

**2010 EP Text:**

When a laboratory is part of an accredited organization, it works with the accredited organization to establish mutual responsibilities for fire safety activities.

Note: When the laboratory is located in an accredited organization's building(s), compliance with the Life Safety Code for the laboratory is the responsibility of the accredited organization. The laboratory should, however, request information on any Life Safety Code deficiencies that might compromise its safety.

**Standard EC.5.30****2009 Standard Text:**

The {jc}organization{/2} conducts fire drills regularly.

**2009 Standard:** EC.5.30

**2009 EP:** 3

**2009 EP Text:**

Fire drills are conducted annually.

**Revision Type:** Retain

**2009 Standard:** EC.5.30

**2009 EP:** 6

**2009 EP Text:**

All fire drills are critiqued to identify deficiencies and opportunities for improvement.

**Revision Type:** Retain

**Standard EC.02.03.03****2010 Standard Text:**

The laboratory conducts fire drills.

**2010 Standard:** EC.02.03.03

**2010 EP:** 2

**2010 EP Text:**

The laboratory conducts fire drills every 12 months from the date of the last drill in all freestanding buildings classified as business occupancies and in which patients are seen or treated.

Note 1: When a laboratory shares a building with others, drills need to be conducted only in areas that the laboratory occupies.

Note 2: An organization-wide fire drill meets this requirement for laboratories that are part of an accredited organization.

**2010 Standard:** EC.02.03.03

**2010 EP:** 5

**2010 EP Text:**

The laboratory critiques fire drills to evaluate fire safety equipment, fire safety building features, and staff response to fire. The critiques are documented. (See also EC.02.03.01, EP 10)

**Standard EC.5.40**

**2009 Standard Text:**

The {jc}organization{/2} maintains fire-safety equipment and building features.

**Standard EC.02.03.05**

**2010 Standard Text:**

The laboratory maintains fire safety equipment and fire safety building features.

Note: This standard does not require laboratories to have the types of fire safety equipment and building features described in the elements of performance of this standard. However, if these types of equipment or features exist within the building, then the following maintenance, testing, and inspection requirements apply.

**2009 Standard:** EC.5.40

**2009 EP:** 17

**2009 EP Text:**

All fire-alarm and fire-detection systems are tested and all components receive annual preventive maintenance, when applicable.

**Revision Type:** Split

**2010 Standard:** EC.02.03.05

**2010 EP:** 21

**2010 EP Text:**

The laboratory tests fire-alarm and fire-detection systems in time frames it establishes. The completion date of the tests is documented.

**2009 Standard:** EC.5.40

**2009 EP:** 17

**2009 EP Text:**

All fire-alarm and fire-detection systems are tested and all components receive annual preventive maintenance, when applicable.

**Revision Type:** Split

**2010 Standard:** EC.02.03.05

**2010 EP:** 22

**2010 EP Text:**

Every 12 months, the laboratory performs preventive maintenance on fire-alarm and fire-detection system components. The completion date of the maintenance is documented.

**2009 Standard:** EC.5.40

**2009 EP:** 18

**2009 EP Text:**

Automatic fire-extinguishing systems are inspected and tested (with or without discharge) annually, when applicable.

**Revision Type:** Retain

**2010 Standard:** EC.02.03.05

**2010 EP:** 23

**2010 EP Text:**

Every 12 months, the laboratory inspects and tests (with or without discharge) automatic fire-extinguishing systems. The completion date of the tests is documented.

**2009 Standard:** EC.5.40

**2009 EP:** 19

**2009 EP Text:**

Fans or dampers in air-handling and smoke-management systems are functional at all times.

**Revision Type:** Retain

**2010 Standard:** EC.02.03.05

**2010 EP:** 24

**2010 EP Text:**

Fans or dampers in air-handling and smoke-management systems are functional.

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**2009 Standard:** EC.5.40**2009 EP:** 20**2010 Standard:** EC.02.03.05**2010 EP:** 15**2009 EP Text:**

Portable fire extinguishers are clearly identified, inspected monthly, and maintained annually.

**Revision Type:** Split**2010 EP Text:**

At least monthly, the laboratory inspects portable fire extinguishers. The completion dates of the inspections are documented.

Note 1: There are many ways to document the inspections, such as using bar-coding equipment, using check marks on a tag, or using an inventory.

Note 2: Inspections involve a visual check for the presence and correct type of extinguisher, broken parts, full charge, and ease of access.

Note 3: For additional guidance on inspection of fire extinguishers, see NFPA 10, Standard for Portable Fire Extinguishers, 1998 edition (Sections 1-6, 4-3, and 4-4).

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**2009 Standard:** EC.5.40**2009 EP:** 20**2010 Standard:** EC.02.03.05**2010 EP:** 16**2009 EP Text:**

Portable fire extinguishers are clearly identified, inspected monthly, and maintained annually.

**Revision Type:** Split**2010 EP Text:**

Every 12 months, the laboratory performs maintenance on portable fire extinguishers. The completion date of the maintenance is documented.

Note 1: There are many ways to document the maintenance, such as using bar-coding equipment, using check marks on a tag, or using an inventory.

Note 2: For additional guidance on maintaining fire extinguishers, see NFPA 10, 1998 edition (Sections 1-6, 4-3, and 4-4).

**Standard EC.6.10**

**2009 Standard Text:**

The {jc}organization{/2} manages {jc}medical/laboratory{/3} equipment risks.

**Standard EC.01.01.01**

**2010 Standard Text:**

The laboratory plans activities that minimize risks in the environment of care. Note: One or more persons can be assigned to manage risks associated with the management plans described in this standard.

**2009 Standard:** EC.6.10

**2009 EP:** 1

**2009 EP Text:**

The {jc}organization{/2} develops and maintains a written management plan describing the processes it implements to manage the effective, safe, and reliable operation of {jc}medical/laboratory{/3} equipment.

**Revision Type:** Retain

**2010 Standard:** EC.01.01.01

**2010 EP:** 7

**2010 EP Text:**

The laboratory has a written plan for managing the following: Laboratory equipment. (See also EC.04.01.01, EP 15)

**2009 Standard:** EC.6.10

**2009 EP:** 2

**2009 EP Text:**

The {jc}organization{/2} identifies and implements a process(es) for selecting and acquiring {jc}medical/laboratory{/3} equipment. \*\*Note: The acquisition process includes initially evaluating the condition and function of the equipment when received and evaluating the training of users before use on {jc}patients{/6}.

**Revision Type:** Retain

**2010 Standard:** EC.02.04.01

**2010 EP:** 1

**2010 EP Text:**

The laboratory solicits input from individuals who operate and service equipment when it selects and acquires laboratory equipment.

**2009 Standard:** EC.6.10

**2009 EP:** 3

**2009 EP Text:**

The {jc}organization{/2} establishes and uses risk criteria for identifying, evaluating, and creating an inventory of equipment to be included in the {jc}medical/laboratory{/3} equipment management plan before the equipment is used. These criteria address the following: Equipment function (diagnosis, care, treatment, life support and monitoring) Physical risks associated with use Maintenance requirements

**Revision Type:** Retain

**2010 Standard:** EC.02.04.01

**2010 EP:** 2

**2010 EP Text:**

The laboratory maintains a written inventory of laboratory equipment and equipment incident history. The laboratory evaluates new types of equipment before initial use to determine whether they should be included in the inventory.

**2009 Standard:** EC.6.10

**2009 EP:** 4

**2010 Standard:** EC.02.04.01

**2010 EP:** 3

**2009 EP Text:**

**Revision Type:** Retain

**2010 EP Text:**

The {jc}organization{/2} identifies appropriate inspection and maintenance strategies (including functional checks) for all equipment on the inventory for achieving effective, safe, and reliable operation of all equipment in the inventory.\*Note: For equipment, instruments or test systems where function check protocols are not provided by the manufacturer, a function check protocol is defined that ensures equipment, instrument, and test system performance that is necessary for accurate and reliable test results and test result reporting. \*Note: {jc}Organizations{/14} may use different strategies for different items as appropriate. For example, strategies such as predictive maintenance, interval-based inspections, corrective maintenance, or metered maintenance may be selected to ensure reliable performance.

The laboratory identifies, in writing, the activities and frequencies for inspecting, testing (including function checks), and maintaining laboratory equipment based on the following:

- Manufacturers' recommendations when available
- Identified risks
- Clinical Laboratory Improvement Amendments of 1988 (CLIA '88) guidelines
- History and experience with the laboratory equipment (See also EC.02.04.03, EPs 7-9; QSA.02.02.01, EP 5)

Note: This requirement also applies whenever the laboratory modifies commercially available equipment or for equipment that is used in a test system developed by the laboratory.

**2009 Standard:** EC.6.10

**2009 EP:** 5

**2010 Standard:** EC.02.04.01

**2010 EP:** 4

**2009 EP Text:**

**Revision Type:** Retain

**2010 EP Text:**

The {jc}organization{/2} defines intervals for inspecting, testing, and maintaining appropriate equipment on the inventory (that is, those pieces of equipment on the inventory benefiting from scheduled activities to minimize the clinical and physical risks) that are based upon criteria such as manufacturers' recommendations, risk levels, Clinical Laboratory Improvement Amendments of 1988 (CLIA'88) guidelines, and current {jc}organization{/2} experience.

The laboratory identifies, in writing, frequencies for inspecting, testing, and maintaining laboratory equipment on the inventory based on criteria such as manufacturers' recommendations, risk levels, or current laboratory experience.

**2009 Standard:** EC.6.10

**2009 EP:** 6

**2010 Standard:** EC.02.01.01

**2010 EP:** 11

**2009 EP Text:**

**Revision Type:** Consolidate

**2010 EP Text:**

The {jc}organization{/2} identifies and implements processes for monitoring and acting on equipment hazard notices and recalls.

The laboratory acts in accordance with product notices and recalls.

**2009 Standard:** EC.6.10

**2009 EP:** 7

**2010 Standard:** EC.02.04.01

**2010 EP:** 5

**2009 EP Text:**

**Revision Type:** Retain

**2010 EP Text:**

The {jc}organization{/2} identifies and implements processes for monitoring and reporting incidents in which a medical device\* is suspected or attributed to the death, serious injury, or serious illness of any individual, as required by the Safe Medical Devices Act of 1990.\* Medical device Includes instruments, machines, and in vitro reagents intended for use in diagnosing disease or other conditions.

The laboratory monitors and reports all incidents in which laboratory equipment is suspected in or attributed to the death, serious injury, or serious illness of any individual, as required by the Safe Medical Devices Act of 1990. Note: Laboratory equipment includes instruments and machines intended for use in diagnosing disease or other conditions.

**Standard EC.6.20****2009 Standard Text:**

{c}Medical/laboratory{/3} equipment is maintained, tested, and inspected.

**2009 Standard:** EC.6.20

**2009 EP:** 5

**2009 EP Text:**

The {c}organization{/2} documents and retains performance testing of all sterilizers used.

**Revision Type:** Retain

**2009 Standard:** EC.6.20

**2009 EP:** 7

**2009 EP Text:**

The {c}organization{/2} documents and retains a historical record for each instrument or piece of equipment in the {c}organization{/2}.

**Revision Type:** Delete:Redun

**2009 Standard:** EC.6.20

**2009 EP:** 8

**2009 EP Text:**

The {c}organization{/2} documents and retains, for at least two years, any daily, weekly, monthly, quarterly, or semi-annual performance testing and function checks.\* \* See the "Quality Control" chapter for details of CLIA'88 requirements for calibration and calibration verification.

**Revision Type:** Retain

**2009 Standard:** EC.6.20

**2009 EP:** 9

**2009 EP Text:**

The {c}organization{/2} documents and retains major repairs, parts replacement, and annual maintenance for the life of the instrument or equipment.

**Revision Type:** Retain

**2009 Standard:** EC.6.20

**2009 EP:** 10

**2009 EP Text:**

The {c}organization{/2} inspects, tests, and maintains equipment including performing preventive maintenance, periodic inspection, and performance testing of equipment and instruments.

**Revision Type:** Retain

**Standard EC.02.04.03****2010 Standard Text:**

The laboratory inspects, tests, and maintains laboratory equipment.

**2010 Standard:** EC.02.04.03

**2010 EP:** 4

**2010 EP Text:**

The laboratory conducts performance testing of and maintains all sterilizers (autoclaves). These activities are documented. (See also IC.02.02.01, EP 2)

**2010 Standard:** N/A

**2010 EP Text:**

No EP

**2010 Standard:** EC.02.04.03

**2010 EP:** 11

**2010 EP Text:**

For each instrument or piece of equipment, the laboratory retains any daily, weekly, monthly, quarterly, or semiannual performance testing and function checks for at least two years.

**2010 Standard:** EC.02.04.03

**2010 EP:** 6

**2010 EP Text:**

The laboratory documents major repairs and parts replacement for each instrument or piece of equipment, for the life of the instrument or equipment.

**2010 Standard:** EC.02.04.03

**2010 EP:** 7

**2010 EP Text:**

The laboratory performs preventive maintenance, periodic inspection, and performance testing of each instrument or piece of equipment. These activities are documented. (See also EC.02.04.01, EP 3)

**2009 Standard:** EC.6.20**2009 EP:** 11**2010 Standard:** EC.02.04.03**2010 EP:** 8**2009 EP Text:****Revision Type:** Retain**2010 EP Text:**

The {jc}organization{/2} inspects, tests, and maintains equipment including evaluating analytical measuring equipment and instruments with respect to all critical operating characteristics.

The laboratory evaluates analytical measuring equipment and instruments for all critical operating characteristics. This evaluation is documented. (See also EC.02.04.01, EP 3)

**2009 Standard:** EC.6.20**2009 EP:** 12**2010 Standard:** EC.02.04.03**2010 EP:** 9**2009 EP Text:****Revision Type:** Retain**2010 EP Text:**

The {jc}organization{/2} inspects, tests, and maintains equipment including evaluating automated volumetric equipment using maintenance protocols and frequencies of at least those established by the manufacturer. Note: For equipment, instruments, or test systems developed in-house, commercially available and modified by the laboratory, a maintenance protocol is established that ensures equipment, instrument, and test system performance that is necessary for accurate and reliable test results and test result reporting.

The laboratory evaluates automated volumetric equipment. This evaluation is documented. (See also EC.02.04.01, EP 3)

**2009 Standard:** EC.6.20**2009 EP:** 13**2010 Standard:** N/A**2009 EP Text:****Revision Type:** Delete:NE**2010 EP Text:**

The {jc}organization{/2} tests and operates instruments within temperature and humidity required for proper performance.

No EP

**2009 Standard:** EC.6.20**2009 EP:** 14**2010 Standard:** EC.02.04.03**2010 EP:** 10**2009 EP Text:****Revision Type:** Retain**2010 EP Text:**

The {jc}organization{/2} documents monitoring of temperature-controlled spaces and equipment. \*\*For blood warmers and blood bank storage alarms, the activation temperature is recorded and remedial action is taken when the results are outside the acceptable range.

The laboratory monitors temperature-controlled spaces and equipment at frequencies established by the laboratory, using manufacturers' guidelines. The temperature is documented.

**Standard EC.7.10**

**2009 Standard Text:**

The {jc}organization{/2} manages its utility risks.

**2009 Standard:** EC.7.10

**2009 EP Text:**

The {jc}organization{/2} develops and maintains a written management plan describing the processes it implements to manage the effective, safe, and reliable operation of utility systems.

**2009 Standard:** EC.7.10

**2009 EP Text:**

The {jc}organization{/2} establishes risk criteria\* for identifying, evaluating, and creating an inventory of operating components of systems before the equipment is used. These criteria address the following: Infection control, Support of the environment, Equipment support, Communication\*  
**Note:** The {jc}organization{/2} may choose not to use risk criteria to limit the types of utility systems to be included in the utility management plan, but rather include all utility systems.

**2009 Standard:** EC.7.10

**2009 EP Text:**

The {jc}organization{/2} develops appropriate strategies for all utility systems equipment on the inventory for ensuring effective, safe, and reliable operation of all equipment in the inventory. **\*\*Note:** {jc}organizations{/14} may use different strategies as appropriate. For example, strategies such as predictive maintenance, interval-based inspections, corrective maintenance, or metered maintenance may be selected to ensure reliable performance.

**2009 EP:** 7

**Revision Type:** Retain

**2009 EP:** 9

**Revision Type:** Consolidate

**2009 EP:** 10

**Revision Type:** Retain

**Standard EC.01.01.01**

**2010 Standard Text:**

The laboratory plans activities that minimize risks in the environment of care.  
**Note:** One or more persons can be assigned to manage risks associated with the management plans described in this standard.

**2010 Standard:** EC.01.01.01

**2010 EP Text:**

The laboratory has a written plan for managing the following: Utility systems. (See also EC.04.01.01, EP 15)

**2010 Standard:** EC.02.05.01

**2010 EP Text:**

The laboratory maintains a written inventory of all operating components of utility systems or maintains a written inventory of selected operating components of utility systems based on risks for infection, occupant needs, and systems critical to laboratory services. The laboratory evaluates new types of utility components before initial use to determine whether they should be included in the inventory. (See also EC.02.05.05, EPs 1 and 5)  
**Note:** A laboratory within an accredited organization that has an inventory can substitute that inventory for its own, as long as the laboratory has input into its formation.

**2010 Standard:** EC.02.05.01

**2010 EP Text:**

The laboratory identifies, in writing, the activities for inspecting, testing, and maintaining all operating components of utility systems on the inventory. The activities are based on criteria such as manufacturers' recommendations, risk levels, and laboratory experience. (See also EC.02.05.05, EP 5)  
**Note:** Laboratories may use different approaches to maintenance. For example, activities such as predictive maintenance, reliability-centered maintenance, interval-based maintenance, corrective maintenance, or metered maintenance may be selected to provide for dependable performance.

**2010 EP:** 8

**2010 EP:** 2

**2010 EP:** 3

**2009 Standard:** EC.7.10**2009 EP:** 11**2010 Standard:** EC.02.05.01**2010 EP:** 4**2009 EP Text:****Revision Type:** Retain**2010 EP Text:**

The {jc}organization{/2} defines intervals for inspecting, testing, and maintaining appropriate utility systems equipment on the inventory (that is, those pieces of equipment on the inventory benefiting from scheduled activities to minimize the clinical and physical risks) that are based upon criteria such as manufacturers' recommendations, risk levels, and current {jc}organization{/2} experience.

The laboratory identifies, in writing, the intervals for inspecting, testing, and maintaining all operating components of the utility systems on the inventory, based on criteria such as manufacturers' recommendations, risk levels, or laboratory experience. (See also EC.02.05.05, EP 5)

**2009 Standard:** EC.7.10**2009 EP:** 12**2010 Standard:** EC.02.05.01**2010 EP:** 9**2009 EP Text:****Revision Type:** Split**2010 EP Text:**

The {jc}organization{/2} identifies and implements emergency procedures for responding to utility system disruptions or failures that address the following:What to do if utility systems malfunctionIdentification of an alternative source of {jc}organization{/2}-defined essential utilitiesShutting off the malfunctioning systems and notifying staff in affected areasHow and when to perform emergency clinical interventions when utility systems fail Obtaining repair services

The laboratory has written procedures for responding to utility system disruptions.

**2009 Standard:** EC.7.10**2009 EP:** 12**2010 Standard:** EC.02.05.01**2010 EP:** 10**2009 EP Text:****Revision Type:** Split**2010 EP Text:**

The {jc}organization{/2} identifies and implements emergency procedures for responding to utility system disruptions or failures that address the following:What to do if utility systems malfunctionIdentification of an alternative source of {jc}organization{/2}-defined essential utilitiesShutting off the malfunctioning systems and notifying staff in affected areasHow and when to perform emergency clinical interventions when utility systems fail Obtaining repair services

The laboratory's procedures address shutting off the malfunctioning system and notifying staff in affected areas.

**2009 Standard:** EC.7.10**2009 EP:** 12**2010 Standard:** EC.02.05.01**2010 EP:** 11**2009 EP Text:****Revision Type:** Split**2010 EP Text:**

The {jc}organization{/2} identifies and implements emergency procedures for responding to utility system disruptions or failures that address the following:What to do if utility systems malfunctionIdentification of an alternative source of {jc}organization{/2}-defined essential utilitiesShutting off the malfunctioning systems and notifying staff in affected areasHow and when to perform emergency clinical interventions when utility systems fail Obtaining repair services

The laboratory's procedures address performing emergency clinical interventions during utility system disruptions.

<p><b>2009 Standard:</b> EC.7.10  <b>2009 EP Text:</b>                  The {jc}organization{/2} identifies and implements emergency procedures for responding to utility system disruptions or failures that address the following:What to do if utility systems malfunctionIdentification of an alternative source of {jc}organization{/2}-defined essential utilitiesShutting off the malfunctioning systems and notifying staff in affected areasHow and when to perform emergency clinical interventions when utility systems fail Obtaining repair services</p>	<p><b>2009 EP:</b> 12  <b>Revision Type:</b> Split</p>	<p><b>2010 Standard:</b> EC.02.05.01  <b>2010 EP Text:</b>                  The laboratory's procedures address how to obtain emergency repair services.</p>	<p><b>2010 EP:</b> 12</p>
<p><b>2009 Standard:</b> EC.7.10  <b>2009 EP Text:</b>                  The {jc}organization{/2} identifies and implements emergency procedures for responding to utility system disruptions or failures that address the following:What to do if utility systems malfunctionIdentification of an alternative source of {jc}organization{/2}-defined essential utilitiesShutting off the malfunctioning systems and notifying staff in affected areasHow and when to perform emergency clinical interventions when utility systems fail Obtaining repair services</p>	<p><b>2009 EP:</b> 12  <b>Revision Type:</b> Split</p>	<p><b>2010 Standard:</b> EC.02.05.01  <b>2010 EP Text:</b>                  The laboratory responds to utility system disruptions as described in its procedures.</p>	<p><b>2010 EP:</b> 13</p>
<p><b>2009 Standard:</b> EC.7.10  <b>2009 EP Text:</b>                  The {jc}organization{/2} maps the distribution of utility systems.</p>	<p><b>2009 EP:</b> 13  <b>Revision Type:</b> Retain</p>	<p><b>2010 Standard:</b> EC.02.05.01  <b>2010 EP Text:</b>                  The laboratory maps the distribution of its utility systems.</p>	<p><b>2010 EP:</b> 7</p>
<p><b>2009 Standard:</b> EC.7.10  <b>2009 EP Text:</b>                  The {jc}organization{/2} labels controls for a partial or complete emergency shutdown.</p>	<p><b>2009 EP:</b> 14  <b>Revision Type:</b> Retain</p>	<p><b>2010 Standard:</b> EC.02.05.01  <b>2010 EP Text:</b>                  The laboratory labels utility system controls so that staff are able to partially or completely shut down systems in emergencies.</p>	<p><b>2010 EP:</b> 8</p>

**2009 Standard:** EC.7.10**2009 EP:** 16**2010 Standard:** EC.02.05.01**2010 EP:** 6**2009 EP Text:****Revision Type:** Retain**2010 EP Text:**

The {jc}organization{/2} designs, installs, and maintains ventilation equipment to provide appropriate pressure relationships, air-exchange rates, and filtration efficiencies for ventilation systems serving areas specially designed\* to control air-borne contaminants (such as biological agents, gases, fumes, and dust). \* Areas specially designed Include spaces such as rooms for {jc}patients{/6} diagnosed or suspected of having airborne communicable diseases (for example, pulmonary or laryngeal tuberculosis), {jc}patients{/6} in ""protective isolation"" rooms (for example, those receiving bone marrow transplants), laboratories, pharmacies, and sterile supply rooms.

In areas designed to control airborne contaminants (such as biological agents, gases, fumes, dust), the ventilation system provides appropriate pressure relationships, air-exchange rates, and filtration efficiencies.

**Standard EC.7.20**

**2009 Standard Text:**

The {jc}organization{/2} provides an emergency electrical power source.

**2009 Standard:** EC.7.20

**2009 EP:** 1

**2009 EP Text:**

**Revision Type:** Retain

The {jc}organization{/2} provides a reliable emergency power system\*, as required by the LSC occupancy requirements, that supplies electricity to the following areas when normal electricity is interrupted: Alarm systems \*Reliable emergency power system For guidance in establishing a reliable emergency power system (Essential Electrical Distribution System), see NFPA 99-2002 edition (chapters 13 and 14).

**2009 Standard:** EC.7.20

**2009 EP:** 2

**2009 EP Text:**

**Revision Type:** Consolidate

The {jc}organization{/2} provides a reliable emergency power system, as required by the LSC occupancy requirements, that supplies electricity to the following areas when normal electricity is interrupted: Exit route illumination

**2009 Standard:** EC.7.20

**2009 EP:** 3

**2009 EP Text:**

**Revision Type:** Retain

The {jc}organization{/2} provides a reliable emergency power system, as required by the LSC occupancy requirements, that supplies electricity to the following areas when normal electricity is interrupted: Emergency communication systems

**2009 Standard:** EC.7.20

**2009 EP:** 4

**2009 EP Text:**

**Revision Type:** Consolidate

The {jc}organization{/2} provides a reliable emergency power system, as required by the LSC occupancy requirements, that supplies electricity to the following areas when normal electricity is interrupted: Illumination of exit signs

**Standard EC.02.05.03**

**2010 Standard Text:**

The laboratory has a reliable emergency electrical power source.

**2010 Standard:** EC.02.05.03

**2010 EP:** 1

**2010 EP Text:**

The laboratory has emergency power for the following: Alarm systems, as required by the Life Safety Code.

Note: For guidance in establishing a reliable emergency power system (that is, an essential electrical distribution system), see NFPA 99, 1999 edition (Section 13-3.3).

**2010 Standard:** EC.02.05.03

**2010 EP:** 2

**2010 EP Text:**

The laboratory provides emergency power for the following: Exit route and exit sign illumination, as required by the Life Safety Code.

**2010 Standard:** EC.02.05.03

**2010 EP:** 3

**2010 EP Text:**

The laboratory provides emergency power for the following: Emergency communication systems, as required by the Life Safety Code.

**2010 Standard:** EC.02.05.03

**2010 EP:** 2

**2010 EP Text:**

The laboratory provides emergency power for the following: Exit route and exit sign illumination, as required by the Life Safety Code.

**2009 Standard:** EC.7.20

**2009 EP:** 6

**2010 Standard:** EC.02.05.03

**2010 EP:** 7

**2009 EP Text:**

**Revision Type:** Retain

**2010 EP Text:**

The {jc}organization{/2} provides a reliable emergency power system, as required by the services provided and {jc}patients{/6} served, that supplies electricity to the following areas when normal electricity is interrupted: Blood, bone, and tissue storage units and all assisted reproductive storage units

The laboratory provides emergency power for the following: Blood, bone, and tissue storage units.

**2009 Standard:** EC.7.20

**2009 EP:** 12

**2010 Standard:** EC.02.05.03

**2010 EP:** 8

**2009 EP Text:**

**Revision Type:** Retain

**2010 EP Text:**

The {jc}organization{/2} provides a reliable emergency power system, as required by the services provided and {jc}patients{/6} served, that supplies electricity to the following areas when normal electricity is interrupted: Essential refrigeration and heating (for example, designated refrigerators, freezers, incubators)

The laboratory provides emergency power for the following: Essential refrigeration and heating as identified by the laboratory, such as designated refrigerators, freezers, and incubators.

**2009 Standard:** EC.7.20

**2009 EP:** 13

**2010 Standard:** EC.02.05.03

**2010 EP:** 9

**2009 EP Text:**

**Revision Type:** Retain

**2010 EP Text:**

The {jc}organization{/2} provides a reliable emergency power system, as required by the services provided and {jc}patients{/6} served, that supplies electricity to the following areas when normal electricity is interrupted: Essential equipment, for example, blood gas equipment in a stat lab

The laboratory provides emergency power for the following: Essential laboratory equipment as identified by the laboratory, such as blood gas equipment in a stat lab.

**Standard EC.7.30****2009 Standard Text:**

The {jc}organization{/2} maintains, tests, and inspects its utility systems.

**2009 Standard:** EC.7.30

**2009 EP:** 1

**2009 EP Text:**

**Revision Type:** Consolidate

The {jc}organization{/2} maintains documentation of a current, accurate, and separate inventory of utility components identified in the utility management plan.

**2009 Standard:** EC.7.30

**2009 EP:** 2

**2009 EP Text:**

**Revision Type:** Retain

The {jc}organization{/2} maintains documentation of performance and safety testing of each critical component identified in the plan before initial use.

**2009 Standard:** EC.7.30

**2009 EP:** 5

**2009 EP Text:**

**Revision Type:** Retain

The {jc}organization{/2} maintains documentation of maintenance of critical components on the inventory consistent with maintenance strategies identified in the utility management plan (see standard EC.7.10).

**Standard EC.02.05.01****2010 Standard Text:**

The laboratory manages risks associated with its utility systems.

**2010 Standard:** EC.02.05.01

**2010 EP:** 2

**2010 EP Text:**

The laboratory maintains a written inventory of all operating components of utility systems or maintains a written inventory of selected operating components of utility systems based on risks for infection, occupant needs, and systems critical to laboratory services. The laboratory evaluates new types of utility components before initial use to determine whether they should be included in the inventory. (See also EC.02.05.05, EPs 1 and 5)  
Note: A laboratory within an accredited organization that has an inventory can substitute that inventory for its own, as long as the laboratory has input into its formation.

**2010 Standard:** EC.02.05.05

**2010 EP:** 1

**2010 EP Text:**

The laboratory tests utility system components on the inventory before initial use. The completion date of the tests is documented. (See also EC.02.05.01, EP 2)

**2010 Standard:** EC.02.05.05

**2010 EP:** 5

**2010 EP Text:**

The laboratory inspects, tests, and maintains the following: Non-life-support utility system components on the inventory. These activities are documented. (See also EC.02.05.01, EPs 2-4)

**Standard EC.7.40****2009 Standard Text:**

The {jc}organization{/2} maintains, tests, and inspects its emergency power systems.

**Standard EC.02.05.07****2010 Standard Text:**

The laboratory inspects, tests, and maintains emergency power systems.  
 Note: This standard does not require laboratories to have the types of emergency power equipment described in the elements of performance of this standard. However, if these types of equipment exist within the building, then the following maintenance, testing, and inspection requirements apply.

**2009 Standard:** EC.7.40**2009 EP:** 1**2009 EP Text:****Revision Type:** Split

The {jc}organization{/2} tests each generator 12 times a year with testing intervals not less than 20 days and not more than 40 days apart. These tests shall be conducted for at least 30 continuous minutes under a dynamic load that is at least 30% of the nameplate rating of the generator. Note: {jc}Organizations{/14} may choose to test to less than 30% of the emergency generator's nameplate. However, these {jc}organizations{/14} shall (in addition to performing a test for 30 continuous minutes under operating temperature at the intervals described above) revise their existing documented management plan to conform to NFPA 110 (2005 edition) testing and maintenance activities. These activities shall include inspection procedures for assessing the prime movers' exhaust gas temperature against the minimum temperature recommended by the manufacturer. If diesel-powered generators do not meet the minimum exhaust gas temperatures as determined during these tests, they shall be exercised for 30 continuous minutes at the intervals described above with available Emergency Power Supply Systems (epss) load, and exercised annually with supplemental loads of 25% of name plate rating for 30 minutes, followed by 50% of name plate rating for 30 minutes, followed by 75% of name plate rating for 60 minutes for a total of two continuous hours.

**2010 Standard:** EC.02.05.07**2010 EP:** 4**2010 EP Text:**

Twelve times a year, at intervals of not less than 20 days and not more than 40 days, the laboratory tests each emergency generator for at least 30 continuous minutes. The completion dates of the tests are documented.

**2009 Standard:** EC.7.40**2009 EP:** 1**2009 EP Text:**

The {jc}organization{/2} tests each generator 12 times a year with testing intervals not less than 20 days and not more than 40 days apart. These tests shall be conducted for at least 30 continuous minutes under a dynamic load that is at least 30% of the nameplate rating of the generator. Note: {jc}Organizations{/14} may choose to test to less than 30% of the emergency generator's nameplate. However, these {jc}organizations{/14} shall (in addition to performing a test for 30 continuous minutes under operating temperature at the intervals described above) revise their existing documented management plan to conform to NFPA 110 (2005 edition) testing and maintenance activities. These activities shall include inspection procedures for assessing the prime movers' exhaust gas temperature against the minimum temperature recommended by the manufacturer. If diesel-powered generators do not meet the minimum exhaust gas temperatures as determined during these tests, they shall be exercised for 30 continuous minutes at the intervals described above with available Emergency Power Supply Systems (epss) load, and exercised annually with supplemental loads of 25% of name plate rating for 30 minutes, followed by 50% of name plate rating for 30 minutes, followed by 75% of name plate rating for 60 minutes for a total of two continuous hours.

**Revision Type:** Split**2010 Standard:** EC.02.05.07**2010 EP:** 5**2010 EP Text:**

The emergency generator tests are conducted with a dynamic load that is at least 30% of the nameplate rating of the generator or meets the manufacturer's recommended prime movers' exhaust gas temperature. If the laboratory does not meet either the 30% of nameplate rating or the recommended exhaust gas temperature during any test in EC.02.05.07, EP 4, then it must test each emergency generator once every 12 months using supplemental (dynamic or static) loads of 25% of nameplate rating for 30 minutes, followed by 50% of nameplate rating for 30 minutes, followed by 75% of nameplate rating for 60 minutes, for a total of 2 continuous hours.

**2009 Standard:** EC.7.40**2009 EP:** 2**2009 EP Text:**

The {jc}organization{/2} tests all automatic transfer switches 12 times a year with testing intervals not less than 20 days and not more than 40 days apart.

**Revision Type:** Retain**2010 Standard:** EC.02.05.07**2010 EP:** 6**2010 EP Text:**

Twelve times a year, at intervals of not less than 20 days and not more than 40 days, the laboratory tests all automatic transfer switches. The completion date of the tests is documented.

**2009 Standard:** EC.7.40**2009 EP:** 3**2009 EP Text:**

The {jc}organization{/2} tests all battery-powered lights required for egress. Testing includes (a) a functional test at 30-day intervals for a minimum of 30 seconds; and (b) an annual test for a duration of 1.5 hours.

**Revision Type:** Split**2010 Standard:** EC.02.05.07**2010 EP:** 1**2010 EP Text:**

At 30-day intervals, the laboratory performs a functional test of battery-powered lights required for egress for a minimum duration of 30 seconds. The completion date of the tests is documented.

**2009 Standard:** EC.7.40

**2009 EP:** 3

**2010 Standard:** EC.02.05.07

**2010 EP:** 2

**2009 EP Text:**

**Revision Type:** Split

**2010 EP Text:**

The {jc}organization{/2} tests all battery-powered lights required for egress. Testing includes (a) a functional test at 30-day intervals for a minimum of 30 seconds; and (b) an annual test for a duration of 1.5 hours.

Every 12 months, the laboratory either performs a functional test of battery-powered lights required for egress for a duration of 1 1/2 hours; or the laboratory replaces all batteries every 12 months and, during replacement, performs a random test of 10% of all batteries for 1 1/2 hours. The completion date of the tests is documented.

**2009 Standard:** EC.7.40

**2009 EP:** 4

**2010 Standard:** EC.02.05.07

**2010 EP:** 3

**2009 EP Text:**

**Revision Type:** Retain

**2010 EP Text:**

The {jc}organization{/2} tests Stored Emergency Power Supply Systems (SEPSS) whose malfunction may severely jeopardize the occupants' life and safety.\*Testing includes (a) a quarterly functional test for 5 minutes or as specified for its class,\*\* whichever is less; and (b) an annual test at full load for 60% of the full duration of its class.\*Stored Emergency Power Supply Systems (SEPSS) Are intended to automatically supply illumination or power to critical areas and equipment essential for safety to human life. Included are systems that supply emergency power for such functions as illumination for safe exiting, ventilation where it is essential to maintain life, fire detection and alarm systems, public safety communications systems, and processes where the current interruption would produce serious life safety or health hazards to {jc}patients{/6}, the public, or staff. Note: Other non-SEPSS battery back-up emergency power systems that an {jc}organization{/2} has determined to be critical for operations during a power failure (for example, laboratory equipment, electronic medical records) should be properly tested and maintained in accordance with manufacturer's recommendations.\*\*Class Defines the minimum time for which the SEPSS is designed to operate at its rated load without being recharged (for additional guidance, see NFPA 111 (1996 edition) Standard on Stored Electrical Energy Emergency and Standby Power Systems).

Every quarter, the laboratory performs a functional test of stored emergency power supply systems (SEPSS) for 5 minutes or as specified for its class (whichever is less). The laboratory performs an annual test at full load for 60% of the full duration of its class. The completion dates of the tests are documented.

Note 1: Non-SEPSS battery backup emergency power systems that the laboratory has determined to be critical for operations during a power failure (for example, laboratory equipment or electronic medical records) should be properly tested and maintained in accordance with manufacturers' recommendations.

Note 2: SEPSS are intended to automatically supply illumination or power to critical areas and equipment essential for safety to human life. Included are systems that supply emergency power for such functions as illumination for safe exiting, ventilation where it is essential to maintain life, fire detection and alarm systems, public safety communications systems, and processes where the current interruption would produce serious life safety or health hazards to patients, the public, or staff.

Note 3: Class defines the minimum time for which the SEPSS is designed to operate at its rated load without being recharged. For additional guidance, see NFPA 111, Standard on Stored Electrical Energy Emergency and Standby Power Systems, 1996 edition.

**2009 Standard:** EC.7.40**2009 EP:** 5**2010 Standard:** EC.02.05.07**2010 EP:** 7**2009 EP Text:****Revision Type:** Split**2010 EP Text:**

Facilities that have a generator providing emergency power for the services listed in Elements of Performance 6 through 13 of Standard EC.7.20: The organization tests each emergency generator at least once every 36 months for a minimum of four continuous hours. This test shall be conducted under a load (dynamic or static) that is at least 30% of the nameplate rating of the generator. \* \*\* Note 1: To be in initial compliance with this Element of Performance, organizations must have performed this test by July 1, 2007. Organizations that have successfully operated their generator(s) since July 1, 2004, according to the test criteria described above, will be considered to be in initial compliance with this Element of Performance and are required to retest before the three year anniversary date of such occurrence. Note 2: Organizations that cannot achieve a minimum load of 30% of the emergency generator's nameplate rating, must assess the prime movers' exhaust gas temperature and meet the minimum temperature recommended by the manufacturer. \* This test may satisfy one of the tests required by Element of Performance 1. \*\* After the test, the fuel supply should be replenished. Any problems identified during the test shall be resolved promptly. For additional guidance, see NFPA 110 (2005 edition) Standard for Emergency & Standby Power Systems.

At least once every 36 months, laboratories with a generator providing emergency power for the services listed in EC.02.05.03, EPs 5 and 6, test each emergency generator for a minimum of 4 continuous hours. The completion date of the tests is documented.  
Note: For additional guidance, see NFPA 110, 2005 edition, Standard for Emergency & Standby Power Systems.

**2009 Standard:** EC.7.40**2009 EP:** 5**2010 Standard:** EC.02.05.07**2010 EP:** 8**2009 EP Text:****Revision Type:** Split**2010 EP Text:**

Facilities that have a generator providing emergency power for the services listed in Elements of Performance 6 through 13 of Standard EC.7.20: The {jc}organization{/2} tests each emergency generator at least once every 36 months for a minimum of four continuous hours. This test shall be conducted under a load (dynamic or static) that is at least 30% of the nameplate rating of the generator.\* \*\* Note 1: To be in initial compliance with this Element of Performance, organizations must have performed this test by July 1, 2007. Organizations that have successfully operated their generator(s) since July 1, 2004, according to the test criteria described above, will be considered to be in initial compliance with this Element of Performance and are required to retest before the three year anniversary date of such occurrence.Note 2: {jc}Organizations{/14} that cannot achieve a minimum load of 30% of the emergency generator's nameplate rating, must assess the prime movers' exhaust gas temperature and meet the minimum temperature recommended by the manufacturer.\*This test may satisfy one of the tests required by Element of Performance 1. \*\*After the test, the fuel supply should be replenished. Any problems identified during the test shall be resolved promptly. For additional guidance, see NFPA 110 (2005 edition) Standard for Emergency & Standby Power Systems.

The 36-month emergency generator test uses a dynamic or static load that is at least 30% of the nameplate rating of the generator or meets the manufacturer's recommended prime movers' exhaust gas temperature.

**2009 Standard:** EC.7.40**2009 EP:** 6**2010 Standard:** EC.02.05.07**2010 EP:** 9**2009 EP Text:****Revision Type:** Retain**2010 EP Text:**

If a test(s) required by EC.7.40 fails, the organization implements interim measures to compensate for the risk to {jc}patients{/6}, visitors, and staff until necessary repairs or corrections are completed.

If a required emergency power system test fails, the laboratory implements measures to protect patients, visitors, and staff until necessary repairs or corrections are completed.

**2009 Standard:** EC.7.40**2009 EP:** 7**2010 Standard:** EC.02.05.07**2010 EP:** 10**2009 EP Text:****Revision Type:** Retain**2010 EP Text:**

If a test(s) required by EC.7.40 fails, the organization performs a retest after making the necessary repairs or corrections.

If a required emergency power system test fails, the laboratory performs a retest after making the necessary repairs or corrections.

**Standard EC.8.10**

**2009 Standard Text:**

The {jc}organization{/2} establishes and maintains an appropriate environment.

**2009 Standard:** EC.8.10

**2009 EP:** 7

**2009 EP Text:**

**Revision Type:** Retain

Ventilation provides for acceptable levels of temperature and humidity and eliminates odors.

**2009 Standard:** EC.8.10

**2009 EP:** 17

**2009 EP Text:**

**Revision Type:** Retain

All laboratory work areas are safe for staff and visitors.

**2009 Standard:** EC.8.10

**2009 EP:** 18

**2009 EP Text:**

**Revision Type:** Retain

Appropriate and sufficient equipment, instruments, reagents, materials, and supplies is provided for the type and volume of testing the laboratory performs so as not to adversely affect test outcomes.

**2009 Standard:** EC.8.10

**2009 EP:** 19

**2009 EP Text:**

**Revision Type:** Retain

Sufficient workspace exists and is configured to efficiently handle and house equipment and reagents so as not to adversely affect test outcomes or compromise staff safety.

**2009 Standard:** EC.8.10

**2009 EP:** 35

**2009 EP Text:**

**Revision Type:** Retain

Molecular amplification procedures that are not contained in closed systems have a uni-directional workflow that includes separate areas for: Specimen preparation Amplification and product detection Reagent preparation, as applicable

**Standard EC.02.06.01**

**2010 Standard Text:**

The laboratory establishes and maintains a safe, functional environment.

**2010 Standard:** EC.02.06.01

**2010 EP:** 13

**2010 EP Text:**

The laboratory maintains ventilation, temperature, and humidity levels suitable for the laboratory services provided.

**2010 Standard:** EC.02.06.01

**2010 EP:** 30

**2010 EP Text:**

All laboratory areas are safe for staff and visitors.

**2010 Standard:** EC.02.06.01

**2010 EP:** 29

**2010 EP Text:**

Equipment, instruments, reagents, materials, and supplies are provided for the type and volume of testing the laboratory performs.

**2010 Standard:** EC.02.06.01

**2010 EP:** 28

**2010 EP Text:**

Work areas have enough space and are configured to efficiently handle and house equipment and reagents. The features of work areas do not adversely affect test outcomes or compromise staff safety.

**2010 Standard:** EC.02.06.01

**2010 EP:** 31

**2010 EP Text:**

Molecular amplification procedures that are not contained in closed systems have a unidirectional workflow that includes separate areas for specimen preparation, amplification and product detection, and reagent preparation.

**Standard EC.8.30****2009 Standard Text:**

The {jc}organization{/2} manages the design and building of the environment when it is renovated, altered, or newly created.

**2009 Standard:** EC.8.30

**2009 EP:** 5

**2009 EP Text:**

**Revision Type:** Retain

When planning for the size, configuration, and equipping of the space of renovated, altered, or new construction, the laboratory uses one of the following as applicable: applicable state rules and regulations; Laboratory Design guidelines published by the NCCLS; Guidelines for Design and Construction of Hospitals and Health Care Facilities, 2001 edition, published by the American Institute of Architects; or similar standards or guidelines that provide equivalent design criteria.

**2009 Standard:** EC.8.30

**2009 EP:** 6

**2009 EP Text:**

**Revision Type:** Retain

When site conditions or specific clinical needs require deviation from the referenced guidelines or standards, the laboratory identifies, when appropriate, the need for specialized staff training to effectively use the space and equipment provided.

**Standard EC.02.06.05****2010 Standard Text:**

The laboratory manages its environment during demolition, renovation, or new construction to reduce risk to those in the laboratory.

**2010 Standard:** EC.02.06.05

**2010 EP:** 1

**2010 EP Text:**

When planning for new, altered, or renovated space, the laboratory uses one of the following design criteria:

- State rules and regulations
- Laboratory design guidelines published by the Clinical Laboratory Standards Institute
- Guidelines for Design and Construction of Hospitals and Health Care Facilities, 2001 edition, published by the American Institute of Architects

When the above rules, regulations, and guidelines do not meet specific design needs, the laboratory uses other reputable standards and guidelines that provide equivalent design criteria.

**2010 Standard:** EC.02.06.05

**2010 EP:** 5

**2010 EP Text:**

When site conditions or specific clinical needs require modification of design criteria, the laboratory identifies the need to train staff about using space and equipment.

**Standard EC.9.10**

**2009 Standard Text:**

The {jc}organization{/2} monitors conditions in the environment.

**2009 Standard:** EC.9.10

**2009 EP:** 1

**2009 EP Text:**

**Revision Type:** Split

The {jc}organization{/2} establishes and implements process(es) for reporting and investigating the following:  
 \*Injuries to {jc}patients{/6} or others coming to the {jc}organization{/2}'s facilities as well as incidents of property damage  
 Occupational illnesses and injuries to staff  
 Security incidents involving {jc}patients{/6}, staff, or others coming to the {jc}organization{/2}'s facilities or property  
 Hazardous materials and waste spills, exposures, and other related incidents  
 Fire-safety management problems, deficiencies, and failures  
 Equipment-management problems, failures, and user errors  
 Utility systems management problems, failures, or user errors  
 \*{jc}Organizations{/14} have the flexibility to develop a single reporting method that addresses one or more of the items listed.

**Standard EC.04.01.01**

**2010 Standard Text:**

The laboratory collects information to monitor conditions in the environment.

**2010 Standard:** EC.04.01.01

**2010 EP:** 1

**2010 EP Text:**

The laboratory establishes a process(es) for continually monitoring, internally reporting, and investigating the following:

- Injuries to patients or others within the laboratory
- Occupational illnesses and staff injuries
- Incidents of damage to its property or the property of others in locations it controls
- Security incidents involving patients, staff, or others in locations it controls
- Hazardous materials and waste spills and exposures
- Fire safety management problems, deficiencies, and failures
- Laboratory equipment management problems, failures, and use errors
- Utility systems management problems, failures, or use errors

Note 1: All the incidents and issues listed above may be reported to staff in quality assessment, improvement, or other functions. A summary of such incidents may also be shared with the person designated to coordinate safety management activities.

Note 2: Review of incident reports often requires that legal processes be followed to preserve confidentiality. Opportunities to improve laboratory services, or to prevent similar incidents, are not lost as a result of following the legal process.

**2009 Standard:** EC.9.10

**2009 EP:** 1

**2010 Standard:** EC.04.01.01

**2010 EP:** 3

**2009 EP Text:**

**Revision Type:** Split

**2010 EP Text:**

The {jc}organization{/2} establishes and implements process(es) for reporting and investigating the following: \*Injuries to {jc}patients{/6} or others coming to the {jc}organization{/2}'s facilities as well as incidents of property damageOccupational illnesses and injuries to staffSecurity incidents involving {jc}patients{/6}, staff, or others coming to the {jc}organization{/2}'s facilities or propertyHazardous materials and waste spills, exposures, and other related incidentsFire-safety management problems, deficiencies, and failuresEquipment-management problems, failures, and user errorsUtility systems management problems, failures, or user errors\*{jc}Organizations{/14} have the flexibility to develop a single reporting method that addresses one or more of the items listed.

The laboratory reports and investigates the following: Injuries occurring in the laboratory. (See also EC.04.01.03, EP 1)

**2009 Standard:** EC.9.10

**2009 EP:** 1

**2010 Standard:** EC.04.01.01

**2010 EP:** 4

**2009 EP Text:**

**Revision Type:** Split

**2010 EP Text:**

The {jc}organization{/2} establishes and implements process(es) for reporting and investigating the following: \*Injuries to {jc}patients{/6} or others coming to the {jc}organization{/2}'s facilities as well as incidents of property damageOccupational illnesses and injuries to staffSecurity incidents involving {jc}patients{/6}, staff, or others coming to the {jc}organization{/2}'s facilities or propertyHazardous materials and waste spills, exposures, and other related incidentsFire-safety management problems, deficiencies, and failuresEquipment-management problems, failures, and user errorsUtility systems management problems, failures, or user errors\*{jc}Organizations{/14} have the flexibility to develop a single reporting method that addresses one or more of the items listed.

The laboratory reports and investigates the following: Occupational illnesses and staff injuries. (See also EC.04.01.03, EP 1)

**2009 Standard:** EC.9.10**2009 EP:** 1**2010 Standard:** EC.04.01.01**2010 EP:** 5**2009 EP Text:****Revision Type:** Split**2010 EP Text:**

The {jc}organization{/2} establishes and implements process(es) for reporting and investigating the following: \*Injuries to {jc}patients{/6} or others coming to the {jc}organization{/2}'s facilities as well as incidents of property damageOccupational illnesses and injuries to staffSecurity incidents involving {jc}patients{/6}, staff, or others coming to the {jc}organization{/2}'s facilities or propertyHazardous materials and waste spills, exposures, and other related incidentsFire-safety management problems, deficiencies, and failuresEquipment-management problems, failures, and user errorsUtility systems management problems, failures, or user errors\*{jc}Organizations{/14} have the flexibility to develop a single reporting method that addresses one or more of the items listed.

The laboratory reports and investigates the following: Incidents of damage to its property or the property of others in locations it controls. (See also EC.04.01.03, EP 1)

**2009 Standard:** EC.9.10**2009 EP:** 1**2010 Standard:** EC.04.01.01**2010 EP:** 6**2009 EP Text:****Revision Type:** Split**2010 EP Text:**

The {jc}organization{/2} establishes and implements process(es) for reporting and investigating the following: \*Injuries to {jc}patients{/6} or others coming to the {jc}organization{/2}'s facilities as well as incidents of property damageOccupational illnesses and injuries to staffSecurity incidents involving {jc}patients{/6}, staff, or others coming to the {jc}organization{/2}'s facilities or propertyHazardous materials and waste spills, exposures, and other related incidentsFire-safety management problems, deficiencies, and failuresEquipment-management problems, failures, and user errorsUtility systems management problems, failures, or user errors\*{jc}Organizations{/14} have the flexibility to develop a single reporting method that addresses one or more of the items listed.

The laboratory reports and investigates the following: Security incidents involving patients, staff, or others in locations it controls. (See also EC.04.01.03, EP 1)

**2009 Standard:** EC.9.10**2009 EP:** 1**2010 Standard:** EC.04.01.01**2010 EP:** 8**2009 EP Text:****Revision Type:** Split**2010 EP Text:**

The {jc}organization{/2} establishes and implements process(es) for reporting and investigating the following: \*Injuries to {jc}patients{/6} or others coming to the {jc}organization{/2}'s facilities as well as incidents of property damageOccupational illnesses and injuries to staffSecurity incidents involving {jc}patients{/6}, staff, or others coming to the {jc}organization{/2}'s facilities or propertyHazardous materials and waste spills, exposures, and other related incidentsFire-safety management problems, deficiencies, and failuresEquipment-management problems, failures, and user errorsUtility systems management problems, failures, or user errors\*{jc}Organizations{/14} have the flexibility to develop a single reporting method that addresses one or more of the items listed.

The laboratory reports and investigates the following: Hazardous materials and waste spills and exposures. (See also EC.04.01.03, EP 1)

**2009 Standard:** EC.9.10**2009 EP:** 1**2010 Standard:** EC.04.01.01**2010 EP:** 9**2009 EP Text:****Revision Type:** Split**2010 EP Text:**

The {jc}organization{/2} establishes and implements process(es) for reporting and investigating the following: \*Injuries to {jc}patients{/6} or others coming to the {jc}organization{/2}'s facilities as well as incidents of property damageOccupational illnesses and injuries to staffSecurity incidents involving {jc}patients{/6}, staff, or others coming to the {jc}organization{/2}'s facilities or propertyHazardous materials and waste spills, exposures, and other related incidentsFire-safety management problems, deficiencies, and failuresEquipment-management problems, failures, and user errorsUtility systems management problems, failures, or user errors\*{jc}Organizations{/14} have the flexibility to develop a single reporting method that addresses one or more of the items listed.

The laboratory reports and investigates the following: Fire safety management problems, deficiencies, and failures. (See also EC.04.01.03, EP 1)

**2009 Standard:** EC.9.10**2009 EP:** 1**2010 Standard:** EC.04.01.01**2010 EP:** 10**2009 EP Text:****Revision Type:** Split**2010 EP Text:**

The {jc}organization{/2} establishes and implements process(es) for reporting and investigating the following: \*Injuries to {jc}patients{/6} or others coming to the {jc}organization{/2}'s facilities as well as incidents of property damageOccupational illnesses and injuries to staffSecurity incidents involving {jc}patients{/6}, staff, or others coming to the {jc}organization{/2}'s facilities or propertyHazardous materials and waste spills, exposures, and other related incidentsFire-safety management problems, deficiencies, and failuresEquipment-management problems, failures, and user errorsUtility systems management problems, failures, or user errors\*{jc}Organizations{/14} have the flexibility to develop a single reporting method that addresses one or more of the items listed.

The laboratory reports and investigates the following: Laboratory equipment management problems, failures, and use errors. (See also EC.04.01.03, EP 1)

**2009 Standard:** EC.9.10**2009 EP:** 1**2010 Standard:** EC.04.01.01**2010 EP:** 11**2009 EP Text:****Revision Type:** Split**2010 EP Text:**

The {jc}organization{/2} establishes and implements process(es) for reporting and investigating the following: \*Injuries to {jc}patients{/6} or others coming to the {jc}organization{/2}'s facilities as well as incidents of property damageOccupational illnesses and injuries to staffSecurity incidents involving {jc}patients{/6}, staff, or others coming to the {jc}organization{/2}'s facilities or propertyHazardous materials and waste spills, exposures, and other related incidentsFire-safety management problems, deficiencies, and failuresEquipment-management problems, failures, and user errorsUtility systems management problems, failures, or user errors\*{jc}Organizations{/14} have the flexibility to develop a single reporting method that addresses one or more of the items listed.

The laboratory reports and investigates the following: Utility systems management problems, failures, or use errors. (See also EC.04.01.03, EP 1)

**2009 Standard:** EC.9.10**2009 EP:** 2**2010 Standard:** EC.01.01.01**2010 EP:** 1**2009 EP Text:****Revision Type:** Consolidate**2010 EP Text:**

The {jc}organization{/2}'s leaders assign a person(s) (hereafter referred to as the "assigned person[s]") to monitor and respond to conditions in the {jc}organization{/2}'s environment. The assigned individual performs the following tasks: Coordinates the on-going, organizationwide collection of information about deficiencies and opportunities for improvement in the environment of careCoordinates the on-going collection and dissemination of other sources of information, such as published hazard notices or recall reportsCoordinates the preparation of summaries of deficiencies, problems, failures, and user errors related to managing the environment of care\*Coordinates the preparation of summaries on findings, recommendations, actions taken, and results of performance improvement (PI) activitiesParticipates in hazard surveillance and incident reporting Participates in developing safety policies and procedures\*Note: Incidents involving {jc}patients{/6} may be reported to appropriate staff such as staff in quality assessment, improvement, or other functions. However, at least a summary of incidents is shared with the person designated to coordinate safety management activities (see standard EC.1.10). Review of incident reports often requires that various legal processes be followed to preserve confidentiality. Opportunities to improve care, treatment, and services or to prevent future similar incidents are not lost as a result of the legal process followed.

Laboratory leaders identify an individual(s) to manage risk, coordinate risk reduction activities in the environment of care, collect information on deficiencies, and disseminate summaries of actions and results.  
 Note 1: This information is disseminated to individuals with responsibility for the issues being addressed.  
 Note 2: Deficiencies include injuries, problems, or use errors.

**2009 Standard:** EC.9.10**2009 EP:** 3**2009 EP Text:**

The {jc}organization{/2} establishes and implements a process(es) for on-going monitoring of performance regarding actual or potential risk(s) in each of the environment of care management plans.\*\*The environment of care plans are for managing safety, security, hazardous materials and waste, emergency management, fire safety, and utilities.

**Revision Type:** Consolidate**2010 Standard:** EC.04.01.01**2010 EP:** 1**2010 EP Text:**

The laboratory establishes a process(es) for continually monitoring, internally reporting, and investigating the following:

- Injuries to patients or others within the laboratory
- Occupational illnesses and staff injuries
- Incidents of damage to its property or the property of others in locations it controls
- Security incidents involving patients, staff, or others in locations it controls
- Hazardous materials and waste spills and exposures
- Fire safety management problems, deficiencies, and failures
- Laboratory equipment management problems, failures, and use errors
- Utility systems management problems, failures, or use errors

Note 1: All the incidents and issues listed above may be reported to staff in quality assessment, improvement, or other functions. A summary of such incidents may also be shared with the person designated to coordinate safety management activities.

Note 2: Review of incident reports often requires that legal processes be followed to preserve confidentiality. Opportunities to improve laboratory services, or to prevent similar incidents, are not lost as a result of following the legal process.

**2009 Standard:** EC.9.10**2009 EP:** 4**2009 EP Text:**

Each of the environment of care management plans are evaluated at least annually.

**Revision Type:** Consolidate**2010 Standard:** EC.04.01.01**2010 EP:** 15**2010 EP Text:**

Every 12 months, the laboratory evaluates each environment of care management plan, including a review of the plan's objectives, scope, performance, and effectiveness. (See also EC.01.01.01, EPs 3-8; EC.04.01.03, EP 1)

**2009 Standard:** EC.9.10**2009 EP:** 5**2009 EP Text:**

The objectives, scope, performance, and effectiveness of each of the environment of care management plans are evaluated at least annually.

**Revision Type:** Consolidate**2010 Standard:** EC.04.01.01**2010 EP:** 15**2010 EP Text:**

Every 12 months, the laboratory evaluates each environment of care management plan, including a review of the plan's objectives, scope, performance, and effectiveness. (See also EC.01.01.01, EPs 3-8; EC.04.01.03, EP 1)

**Standard EC.9.20**

**2009 Standard Text:**

The {jc}organization{/2} analyzes identified environment issues and develops recommendations for resolving them.

**2009 Standard:** EC.9.20

**2009 EP:** 3

**2009 EP Text:**

**Revision Type:** Retain

The {jc}organization{/2} analyzes environment of care issues in a timely manner.

**2009 Standard:** EC.9.20

**2009 EP:** 4

**2009 EP Text:**

**Revision Type:** Retain

Recommendations are developed and approved as appropriate.

**2009 Standard:** EC.9.20

**2009 EP:** 6

**2009 EP Text:**

**Revision Type:** Delete:Redun

Environment of care issues are communicated to the {jc}organization{/2}'s leaders and person(s) responsible for PI activities.

**2009 Standard:** EC.9.20

**2009 EP:** 8

**2009 EP Text:**

**Revision Type:** Retain

A recommendation for one or more PI activities is communicated at least annually to the {jc}organization{/2}'s leaders based on the on-going performance monitoring of the environment of care management plans.

**Standard EC.04.01.03**

**2010 Standard Text:**

The laboratory analyzes identified environment of care issues.

**2010 Standard:** EC.04.01.03

**2010 EP:** 1

**2010 EP Text:**

Representatives from the laboratory participate in the analysis of environment of care data. (See also EC.04.01.01, EPs 3-6, 8-11, and 14-15)

**2010 Standard:** EC.04.01.03

**2010 EP:** 2

**2010 EP Text:**

The laboratory uses the results of data analysis to identify opportunities to resolve environmental safety issues. (See also EC.04.01.05, EP 1)

**2010 Standard:** N/A

**2010 EP Text:**

No EP

**2010 Standard:** EC.04.01.03

**2010 EP:** 3

**2010 EP Text:**

Annually, representatives from the laboratory recommend one or more priorities for improving the environment of care.

**Standard EC.9.30**

**2009 Standard Text:**

The {jc}organization{/2} improves the environment.

**2009 Standard:** EC.9.30

**2009 EP:** 1

**2009 EP Text:**

Appropriate staff participates in implementing recommendations.

**Revision Type:** Retain

**2009 Standard:** EC.9.30

**2009 EP:** 2

**2009 EP Text:**

Appropriate staff monitors the effectiveness of the recommendation's implementation.

**Revision Type:** Retain

**2009 Standard:** EC.9.30

**2009 EP:** 5

**2009 EP Text:**

Results of monitoring are reported (when appropriate) to those responsible for managing the {jc}patient{/1} safety program required in the "Leadership" chapter of this manual.

**Revision Type:** Delete:Redun

**Standard EC.04.01.05**

**2010 Standard Text:**

The laboratory improves its environment of care.

**2010 Standard:** EC.04.01.05

**2010 EP:** 1

**2010 EP Text:**

The laboratory takes action on the identified opportunities to resolve environmental safety issues. (See also EC.04.01.03, EP 2)

**2010 Standard:** EC.04.01.05

**2010 EP:** 2

**2010 EP Text:**

The laboratory evaluates changes to determine if they resolved environmental safety issues.

**2010 Standard:** N/A

**2010 EP Text:**

No EP