Joint Commission issues new Sentinel Event Alert on the risks of tubing misconnections

The Joint Commission issued a new Sentinel Event Alert, "Managing risk during transition to new ISO tubing connector standards," that addresses the risks of accidental medical tubing misconnections that can cause severe patient injury or death. Examples of potentially fatal misconnections include a feeding administration tube mistakenly connected to a tracheostomy tube, or an intravenous tube connected to an epidural site. In an effort to prevent dangerous tubing misconnections, the International Organization for Standardization (ISO) has developed new international manufacturing standards for connectors. The standards are being introduced in phases and include engineering specifications for small-bore connectors with an inner diameter of less than 8.5 millimeters. The new connectors manufactured under the ISO standards will make it nearly impossible to connect tubing delivery systems that serve different functions.

Although connectors manufactured to the new specifications are expected to enter the marketplace by October 2014, the old connectors will remain in use until supplies are depleted. The Joint Commission is alerting health care organizations to begin preparing for the changes in connectors and do everything possible during the transitional period to avoid tubing misconnections. The benefit of the transition is that, ultimately, the engineered solutions will make systems safer for all patients. (Contact: Ana Mckee, amckee@jointcommission.org)

Accreditation

Effective September 29: Standards changes align with CMS' burden reduction final rule

The Joint Commission has made revisions to requirements for hospitals and critical access hospitals (CAHs) to align with the Centers for Medicare & Medicaid Services' (CMS') Conditions of Participation (CoPs). The revisions are part of CMS' efforts to remove unnecessary, obsolete or excessively burdensome requirements. These changes, effective September 29, 2014, include:

- New requirements for hospitals and critical access hospitals with distinct part rehabilitation and psychiatric distinct part units that allow multihospital systems with separately certified hospitals to have a unified, integrated medical staff.
- New and revised requirements for hospitals that have swing beds used for long term care.
- A revision to the element of performance (EP) for outpatient services orders for hospitals and critical access hospitals with rehabilitation and psychiatric distinct part units.

The revised EPs are available on the website and will appear in the 2015 Update 1 to the hospital and critical access hospital accreditation manuals. (Contact: Laura Smith, lsmith@jointcommission.org)

Effective August 25: Two requirements deleted from home care standards

Two elements of performance (EPs) have been deleted from the home care accreditation standards because the patient safety concerns they address are sufficiently covered in other EPs. Although the requirements will continue to appear in accreditation manuals and the E-dition™ until the January 2015
update, the EPs will not be scored and will not result in Requirements for Improvement after August 25, 2014. The EPs are:

- Standard RC.01.02.01, EP 5: **The individual identified by the signature stamp or method of electronic authentication is the only individual who uses it.**
- Standard PC.04.01.05, EP 5: **Before the patient is transferred, the organization provides the patient with information about any alternatives to the transfer.**

(Contact: Lynne Bergero, lbergero@jointcommission.org)

**Resources**

**Safety Alert urges organizations to plan for changes to tubing connectors**
The lead article in the August issue of the Institute for Safe Medication Practices (ISMP) Medication Safety Alert! urges health care organizations to prepare for the upcoming changes to all enteral device connectors. The new ISO enteral connector design will no longer be luer-compatible and will require major changes in enteral nutrition practices, policies, procedures and processes. The article summarizes the changes, takes a look at unresolved process dilemmas, and provides safe practice recommendations. Read the entire article on the ISMP website.

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