Sentinel event statistics released for first half of 2014

The Joint Commission recently updated its sentinel event statistics with new summary data for January 1 through June 30, 2014. Data from the 8,275 incidents reviewed from 2004 through the first half of 2014 show that a total of 8,495 patients have been affected by these events, with 4,984 (58.7 percent) resulting in the patient’s death, 801 (9.4 percent) resulting in loss of function, and 2,710 (31.9 percent) resulting in unexpected additional care and/or psychological impact. The Joint Commission reviewed a total of 394 sentinel events during the first half of 2014; the 10 most frequently reported types are shown in the box.

The Joint Commission Sentinel Event database is designed to increase the general knowledge about sentinel events, their contributing factors, and strategies for prevention. The Joint Commission learns of sentinel events either voluntarily from accredited organizations, or through other mechanisms such as the complaint process or media coverage. It is estimated that fewer than 2 percent of all sentinel events are reported to The Joint Commission and that only about two-thirds of these are voluntarily reported by the organization. As these data are not an epidemiologic data set, no conclusions should be drawn about the actual relative frequency of events or trends in events over time. For more information, visit The Joint Commission Sentinel Event Web page.

(Contact: Gerard Castro, gcastro@jointcommission.org)

Reminder: Hospitals have until November 30 to update next year’s ORYX selections

On November 1, 2014, hospitals can begin updating their ORYX measure reporting options, along with their selections of measure sets on which data will be reported for 2015. All updates to 2015 elections must be completed by November 30, 2014. Accredited general medical/surgical hospitals are required to collect and transmit data to The Joint Commission on a minimum of six core measure sets.

Effective January 1, 2015, hospitals will no longer be required to report on four mandatory measure sets (acute myocardial infarction, heart failure, pneumonia and surgical care improvement project). Only one measure set – perinatal care – will remain mandatory in calendar year 2015 as one of the six measure sets for hospitals with at least 1,100 live births per year. Next year, hospitals will meet ORYX reporting requirements through one of three options.

- Option 1: Vendor submission of quarterly data on six sets of chart-abstracted measures.
Option 2: Vendor submission of quarterly data on six sets of electronic clinical quality measures (eCQMs).
Option 3: Vendor submission of quarterly data on six measure sets using a combination of chart-abstracted measures and eCQMs.

For more information, see the September 24 issue of Joint Commission Online, or the 2015 Flexible ORYX® Performance Measure Reporting Options. Questions about ORYX core measure reporting requirements and measure set selections can be sent to the ORYX Information Line at HCOOryx@jointcommission.org or call 630-792-5992. (Contact: Frank Zibrat, fzibrat@jointcommission.org)

Accreditation and certification

All accredited nursing care centers must complete ICM process

All organizations currently accredited under the Nursing Care Center Accreditation program, as well as those currently accredited under the Medicare/Medicaid long term care option, are reminded that they need to submit the Intracycle Monitoring (ICM) process, including the Focused Standards Assessment (FSA), prior to their next full survey. Before the due date, a notification email is sent to the primary accreditation contact to prompt an organization to complete and submit the ICM on The Joint Commission Connect extranet site under the “What’s Due” section. The Joint Commission’s ICM process, including the FSA (which replaced the Periodic Performance Review), helps all organizations identify and manage risk. Once completed, the ICM fields will automatically pre-populate when accessed again.

In addition, as of July 31, 2014, the Nursing Care Center accreditation standards and the Post-Acute Care and Memory Care certification standards are available in the ICM profile on The Joint Commission Connect extranet site. The standards are provided in PDF format in the “Resources and Measures” tab of the ICM Profile and “Focused Standards Assessment” tab. More information about the ICM process, including a free one-hour webinar, is available on the extranet on an organization’s dedicated Intracycle Monitoring Profile dashboard. (Contact: intracycle@jointcommission.org)

UnitedHealthcare recognizes Joint Commission laboratory accreditation in Florida

Effective October 1, 2014, Joint Commission accredited laboratories will be recognized as meeting UnitedHealthcare’s requirements for certain complex pathology tests. The requirements are published in the UnitedHealthcare Laboratory Benefit Management Program Administrative Protocol. (Contact: Stacy Olea, solea@jointcommission.org)

Resources

New on the Web
- Newsletters:
  - Quick Safety Issue 6, Reviewing maternal morbidity
  - Lab Focus Issue 2

Learn more about Joint Commission Resources’ education programs and publications at www.jcrinc.com or call 877-223-6866.