Center for Transforming Healthcare collaborates with CDC to reduce *C. difficile*-related infections

The Joint Commission Center for Transforming Healthcare has launched its 10th project, which aims to reduce the frequency of *Clostridium difficile*-related infections (CDIs). The Center is working with six hospitals and the Centers for Disease Control and Prevention (CDC) to develop methods to reduce CDIs, with the results targeted for publication in 2015.

CDIs are an increasingly prevalent healthcare-associated condition that leads to patient harm ranging from painful diarrhea to death. The Agency for Healthcare Research and Quality estimates that approximately 337,000 hospitalizations related to CDIs occurred during 2009. This represents a 300 percent increase from 1993 when there were an estimated 86,000 hospital stays related to CDI. The Center is using Robust Process Improvement™ (RPI) methods and tools to identify CDI causes and to develop solutions to reduce their occurrence. RPI is a systematic and data-driven problem-solving methodology incorporating tools and concepts from Lean, Six Sigma and change management. RPI techniques will guide the teams from their initial problem investigation through the deployment of a proven set of targeted solutions. The project team includes:

- Atlantic Health System – Overlook Medical Center, N.J.
- Cleveland Clinic, Ohio
- Kaiser Permanente – Roseville Medical Center, Calif.
- Mayo Clinic, Minn.
- Memorial Hermann – Southeast Hospital, Texas
- VA Connecticut Health System, Conn.

*In collaboration with the Centers for Disease Control and Prevention (CDC)*

For more information, visit the [Reducing *Clostridium difficile* Infections web page](http://www.jointcommission.org). (Contact: Brian Patterson, bpatterson@jointcommission.org)

### Accreditation

**CLARIFICATION: Joint Commission expectations during IQCP education and transition period**

On January 1, 2014, the Centers for Medicare & Medicaid Services (CMS) began a two-year education and transition period for the Individualized Quality Control Plan (IQCP), a new quality control option for clinical laboratories. The IQCP Interpretive Guidelines outline a risk assessment model for establishing a quality control frequency that will replace the current Equivalent Quality Control (EQC). EQC must be phased out by January 1, 2016. The education and transition period provides an opportunity for laboratories to learn about and implement IQCP.

To address the CMS revisions, The Joint Commission changed the Quality System Assessment for Nonwaived Testing (QSA) chapter of the *Comprehensive Accreditation Manual for Laboratory and Point-of-Care Testing (CAMLAB)*. Note 2 was added to the Rationale for Standard QSA.02.04.01 to explain The Joint Commission’s expectations during the education and transition period, and was communicated in the March 2014 *Joint Commission Perspectives*. However, this note raised more questions. In order to minimize confusion, **Note 2 has been removed**. Following is an FAQ to answer additional questions:

www.jointcommission.org
FAQs on Individualized Quality Control Plan (IQCP)

Must my laboratory continue to perform quality control for any test system(s) being considered for an IQCP?

During CMS’ IQCP education and transition period, laboratories must continue to maintain compliance with existing Joint Commission requirements and Clinical Laboratory Improvement Amendments (CLIA) regulations related to quality control for all test systems.

What if my laboratory fails to perform quality control for any test system under consideration for an IQCP?

Failure to maintain compliance with Joint Commission requirements or existing CLIA regulations related to quality control will result in citation for quality control noncompliance.

Does the education and transition period apply to all quality control for all test systems?

The education and transition period applies only to test system(s) being investigated by the laboratory for inclusion in an IQCP.

For more information see the CMS IQCP website, visit the Joint Commission Connect extranet site, or contact your account executive at 630-792-3007. (Contact: Chad Larson, clarson@jointcommission.org)

Patient safety

Medical Laboratory Professionals Week, April 20-26

Medical Laboratory Professionals Week is an annual celebration of the laboratory professionals and pathologists who play a vital role in every aspect of health care. The Joint Commission salutes the more than 300,000 medical laboratory professionals around the country who perform and interpret more than 10 billion laboratory tests in the U.S. every year. Joint Commission laboratory surveys are conducted by Joint Commission-employed medical technologists and pathologists. They must have clinical experience working in three or more technical specialty areas of laboratory medicine and at least five years of laboratory management experience. (Contact: Chad Larson, clarson@jointcommission.org)

People

McKee named a Top 25 Minority Executive in Healthcare

Ana Pujols McKee, M.D., executive vice president and chief medical officer, The Joint Commission, has been named a Top 25 Minority Executive in Healthcare by Modern Healthcare magazine. The biennial awards honor men and women whose leadership has made a difference at their organizations, within their communities and among their peers. To be considered, nominees must have:

- Successfully served as a leader or managed an organization or company.
- Shown the ability or power to effect change in the health care industry.
- Demonstrated a willingness to share expertise with others in the field.
- Served as a role model or mentor to other minority health care executives.
- Assumed a leadership position in the industry outside of the candidate’s own organization or company.

For more information, visit the Modern Healthcare website.

Communication

New Quick Safety newsletter debuts

Next week, look for The Joint Commission’s first Quick Safety newsletter, which outlines an incident, topic or trend in health care that could compromise patient safety. Quick Safety helps Joint Commission-accredited organizations recognize potential safety issues they may encounter. The issues covered in Quick Safety
come from a review of reports to The Joint Commission’s Office of Quality Monitoring, as well as media
stories and personal anecdotes and experiences that are shared with Joint Commission leaders and
other staff. Quick Safety provides helpful links and perspective from The Joint Commission. Quick Safety
publishes monthly. To sign up for email notification of new issues of Quick Safety, create or update your
Joint Commission website E-Alerts. (Contact: Ronald Wyatt, rwyatt@jointcommission.org)

Resources

New on the web
• Standards FAQs:
  o CAMH (Hospitals): Competence of Independent Practitioners to Perform Waived Tests
  o CAMLAB (Laboratory Services): Competence of Independent Practitioners to Perform Waived Tests
• Webinar replay: Adding Behavioral Health Home Services: Considerations for Quality
• Blog posts:
    medical director, The Joint Commission, discusses the high price of health care.
  o @ Home with The Joint Commission: Dinner with a friend, message from an advocate.
  o Musings...Ambulatory Patient Safety: Desperately Seeking (Urgent Care) Patients? Ideas and
    resources to help your urgent care organization think like a retailer.

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