

The Joint Commission

Appendix

Report Section Information



Unannounced Full Event: 2/12/2018 - 2/13/2018

Low

Limited

Pattern

Widespread

Scope

Requirements for Improvement

Program: Ambulatory

Standard	EP	SAFER™ Placement	EP Text	Observation	
APR.09.04.01	1	ITL ITL	The organization provides care, treatment, services, and an environment that pose no risk of an “Immediate Threat to Health or Safety,” also known as “Immediate Threat to Life” or ITL situation.	1). Observed in Leadership Session at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . Care, treatment and/or services were provided in a manner and in an environment that posed risk of an “Immediate Threat to Health or Safety,” also known as “Immediate Threat to Life” or ITL situation. Evidence of non-compliance were documented in the following chapters: Leadership, Infection Control, Human Resources and Environment of Care.	This is the overview for participation in the accreditation process and for maintain an accreditation award. All items are part of this of this in order to correct this all the other items have to be corrected.

The Joint Commission

Appendix

Report Section Information

EC.02.02.01	12	ITL ITL	<p>The organization labels hazardous materials and waste. Labels identify the contents and hazard warnings. * (See also IC.02.01.01, EP 6)</p> <p>Footnote *: The Occupational Safety and Health Administration's (OSHA) Bloodborne Pathogens and Hazard Communications Standards and the National Fire Protection Association (NFPA) provide details on labeling requirements</p>	<p>1). Observed in Infection Control System Tracer at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. Transport of contaminated instruments from the surgical area to the cleaning area was done in a basket not marked with a biohazard marker. Immediately implemented mitigation actions: containers with covers and with biohazard labels.</p>	<p>Corrected Containers have been purchased for both Dental and Medical with a sealed closure and biohazard labels have been placed on them</p>
-----------------------------	--------------------	------------	--	---	--

The Joint Commission

Appendix

Report Section Information

<p>EC.02.04.03</p>	<p>4</p>	<p>ITL ITL</p>	<p>The organization conducts performance testing of and maintains all sterilizers. These activities are documented. (See also IC.02.02.01, EP 2)</p>	<p>1). Observed in Infection Control Tracer at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. The dental clinic had two M11 Midmark sterilizers. The manufacture recommend daily, weekly and monthly maintenance. The monthly maintenance included checking the pressure release valve. The maintenance log contained checkmarks for all the three intervals. However, when the surveyor asked the dental assistant to show him the location of the pressure release valve, she could not locate it. This observation was discussed with the dental assistant and the director of nursing. Immediately implemented mitigation actions: discontinue dental and medical procedures that required sterilized instruments, follow manufacturer's instructions for use and get access to local health district for additional expertise.</p>	<p>Corrected Staff received training from the Mid Mark 11 manufacturer representative. Also, staff has watched the specific vendor video training from MidMark 11 Autoclave manufacturer. A MidMark M11 Autoclave Maintenance procedure consistent with the manufacturer guidelines has been developed, staff has been trained and the maintenance logs have been revised. Printers for the MidMark M11 Autoclaves were purchased which will capture the temperature, pressure and time and will be noted as part of the maintenance.</p>
------------------------------------	--------------------------	--------------------	--	---	--

The Joint Commission

Appendix

Report Section Information

<p>EC.02.04.03</p>	<p>4</p>	<p>ITL ITL</p>	<p>The organization conducts performance testing of and maintains all sterilizers. These activities are documented. (See also IC.02.02.01, EP 2)</p>	<p>1). Observed in Infection Control Tracer at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. The dental clinic had two M11 Midmark sterilizers. The manufacture recommend daily, weekly and monthly maintenance. The monthly maintenance included checking the pressure release valve. The maintenance log contained checkmarks for all the three intervals. However, when the surveyor asked the dental assistant to show him the location of the pressure release valve, she could not locate it. This observation was discussed with the dental assistant and the director of nursing. Immediately implemented mitigation actions: discontinue dental and medical procedures that required sterilized instruments, follow manufacturer's instructions for use and get access to local health district for additional expertise.</p>	<p>Corrected Staff received training from the Mid Mark 11 manufacturer representative. Also, staff has watched the specific vendor video training from MidMark 11 Autoclave manufacturer. A MidMark M11 Autoclave Maintenance procedure consistent with the manufacturer guidelines has been developed, staff has been trained and the maintenance logs have been revised. Printers for the MidMark M11 Autoclaves were purchased which will capture the temperature, pressure and time and will be noted as part of the maintenance.</p>
------------------------------------	----------	--------------------	--	--	--

The Joint Commission

Appendix

Report Section Information

				<p>2). Observed in Infection Control System Tracer at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. Instrument reprocessing was reviewed with a dental assistant. When reviewing the maintenance records for the Ritter sterilizer (MidMark 11) there was no documented evidence that the sterilizer had received monthly maintenance from May 2017 to December 2017 per manufacturer's recommendations. This was the only sterilizer at this location. The daily and weekly maintenance was documented. Immediately implemented mitigation actions: discontinue dental and medical procedures that required sterilized instruments, follow manufacturer's instructions for use and get access to local health district for additional expertise.</p>	<p>Corrected Staff received training from the Mid Mark 11 manufacturer representative. A MidMark M11 Autoclave Maintenance procedure consistent with the manufacturer guidelines has been developed, staff has been trained and the maintenance logs have been revised. Printers for the MidMark M11 Autoclaves were purchased which will capture the temperature, pressure and time and will be noted as part of the maintenance. Random weekly audits will be performed and reported to Infectious Disease Control Committee</p>
<p>EC.02.06.01</p>	<p>1</p>	<p>ITL ITL</p>	<p>Interior spaces meet the needs of the patient population and are safe and suitable to the care, treatment, or services provided.</p>	<p>1). Observed in Infection Control System Tracer at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. The reprocessing of dental instruments was reviewed with a dental assistant. The organization had not adopted any evidence-based guidelines to follow. The design and flow of the instrument processing area was problematic for the following reasons: (1)The decontamination, cleaning, inspection and packaging of instruments occurred in each of the four operatories next to the dental chair rather than in a separate area to</p>	<p>Corrected CHW Infection Control Policy has been approved and is based on CDC evidence based guidelines. In Galveston Operatory 4 has been transformed in a central sterilization area with a numeric dirty to clean flow mirroring the revised system in Texas City.</p>

The Joint Commission

Appendix

Report Section Information

					<p>minimize contamination to the sterile environments.</p> <p>(2)The sink for decontamination and cleaning was the only sink in the operatory so no place for hand-hygiene.</p> <p>(3)Space limitations had packing supplies next to the ultrasonic machine and the area where instruments were packaged.</p> <p>(4) No drying space for instruments prior to packaging because of space limitations. Instruments were left in the ultrasonic basket and placed in the sink to dry.</p> <p>Immediately implemented mitigation actions: discontinue dental and medical procedures that required sterilized instruments until the problem is fixed correctly, adapt CDC guidelines, reconsider the flow of reprocessing and get access to local health district for additional expertise.</p>
--	--	--	--	--	---

Standard	EP	SAFER™ Placement	EP Text	Observation	
				<p>2). Observed in Infection Control System Tracer at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. The reprocessing of medical instruments was reviewed with a medical assistant. The organization had not adopted any evidence-based guidelines to follow. The design and flow of the instrument processing area was</p>	<p>Corrected This process was stopped and when services resume all sterilization will be centralized in the dental area where training has been done and procedures are documented</p>

**The Joint Commission
Appendix
Report Section Information**

			<p>problematic for the following reasons: (1)A continuous flow from dirty to clean could not be maintained.</p> <p>(2)The total space for the sink used for decontaminating and manual cleaning; and counter space used for drying and packaging the instruments so they could be transported via courier to the Texas City clinic for sterilizing was at most 4'. No separation of activities to prevent contamination.</p> <p>Immediately implemented mitigation actions: discontinue dental and medical procedures that required sterilized instruments until the problem is fixed correctly, adapt CDC guidelines, reconsider the flow of reprocessing and get access to local health district for additional expertise.</p>	

The Joint Commission
Appendix
Report Section Information

The Joint Commission
Appendix
Report Section Information

Standard	EP	SAFER™ Placement	EP Text	Observation	

The Joint Commission

Appendix

Report Section Information

HR.01.01.01	1	ITL ITL	The organization defines staff qualifications specific to	1). Observed in Competency Session at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is	Corrected This process was stopped and when services resume all sterilization will be centralized in the dental area where training has been done and procedures are documented
-----------------------------	---	------------	---	---	--

Standard	EP	SAFER™ Placement	EP Text	Observation	
			their job responsibilities. (See also HR.01.01.01, EP 32; IC.01.01.01, EP 3) Note: Qualifications for infection control may be met through ongoing education, training, experience, and/or certification (such as that offered by the Certification Board for Infection Control).	related to the ITL and cannot be clarified. A lab technician/XR technician was doing sterilization for the last few years. There was no job description of sterilization of instruments for her. There was no evidence of training in sterilization. Immediately implemented mitigation actions: reach out to local health district for additional expertise.	Corrected This process was stopped and when services resume all sterilization will be centralized in the dental area where training has been done and procedures are documented
				2). Observed in Competency Session at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. The three positions responsible for overseeing the sterilization process at the time of survey were the Dental Director, Nursing Director and the Lab/X-ray Director. These three files were reviewed with the Recruitment Specialist. None of the job descriptions included qualifications or responsibilities specific to infection control and specifically sterilization. Immediately implemented mitigation actions: reached out to local health district for additional expertise.	Corrected Job description verbiage has been submitted to include infection control is being added to add all clinical staff and sterilization for the positions responsible for overseeing sterilization.

The Joint Commission

Appendix

Report Section Information

HR.01.06.01	3	ITL ITL	<p>An individual with the educational background, experience, or knowledge related to the skills being reviewed assesses competence.</p> <p>Note: When a suitable individual cannot be found to assess staff competence, the organization can utilize an outside individual for this task. If a suitable individual inside or outside the organization cannot be found, the organization may consult the competency guidelines from an appropriate professional organization to make its assessment.</p>	<p>1). Observed in Competency Session at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. The files for the three individuals responsible for overseeing sterilization were reviewed. There was no documented evidence of education, training and knowledge related to sterilization in any file. Immediately implemented mitigation actions include reaching out to the local health district for additional expertise to build the necessary infrastructure.</p>	<p>Corrected Dental Director and Nursing Director received training from the MidMark 11 Autoclave Manufacturer Representative how to properly utilize the equipment and documentation is in their personnel file</p>
HR.01.06.01	6	ITL ITL	<p>Staff competence is assessed and documented</p>	<p>1). Observed in Competency Session at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is</p>	<p>Corrected Staff has received training and documentation of the training have been filed in their personnel files and competency checklist have been updated and will be done annual with evaluation or more frequently if needed or new equipment is purchased.</p>

The Joint Commission

Appendix

Report Section Information

Standard	EP	SAFER™ Placement	EP Text	Observation	
			once every three years, or more frequently as required by organization policy or in accordance with law and regulation.	related to the ITL and cannot be clarified. The files for two dental assistants and two medical assistants performing sterilization activities were reviewed with the Recruitment Specialist. Four of four files lacked documented competencies related to sterilization. Immediately implemented mitigation actions included reaching out to the local health district for additional expertise to build the necessary infrastructure.	
IC.01.02.01	3	ITL ITL	The organization provides equipment and supplies to support infection prevention and control activities.	1). Observed in Infection Control System Tracer at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. Gloves worn during the reprocessing of instruments were exam gloves. No utility-type glove, fitted at the wrist so fluids do not enter the glove were available to medical and dental staff. Immediately implemented mitigation actions: supplies being purchased for staff.	Corrected recommend type gloves have been purchased and are readily available in the central sterilization areas at both clinics.
				2). Observed in Medical Management Session at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. No measuring devices for instrument processing solutions were available to medical and dental staff. Immediately implemented mitigation actions included purchasing the necessary measuring devices.	Corrected Measuring cups with actual numbers have been purchased and are readily available in the central sterilization area for staff to use and the chemical / water ratios documented as to manufacturer guidelines
				3). Observed in Competency Session at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. No gowns/aprons were available to dental and medical assistants responsible for instrument processing to protect scrubs and lab coats worn during dental chair side assignments	Corrected There were gowns moved to the central sterilization area so that they are readily available for staff.

The Joint Commission

Appendix

Report Section Information

				and medical exams. Immediately implemented mitigation actions: necessary PPE ordered for staff.	
IC.01.05.01	1	ITL ITL	When developing infection prevention and control activities, the organization uses evidence-based national guidelines or, in the absence of such guidelines, expert consensus. For ambulatory surgical centers that elect to use The Joint Commission deemed status option: The organization considers, selects, and implements nationally recognized infection control program guidelines.	1). Observed in Infection Control System Tracer at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. In discussion with the Director of Nursing, Executive Director and the Risk Safety Coordinator it was learned the organization had not used or adopted any evidence-based guidelines. The organization lacked an infection control plan that it could follow. The Nursing Director was in the processing of collecting all of the instructions for use so they could be used and followed. Immediately implemented mitigation actions included reaching out to the local health district for additional expertise and adopting CDC guidelines for dental and medical.	Corrected There was an Infection Control Plan approved by the Board in September 2017. There wasn't an Infection Control Policy which has now been developed and approved by the Board stating the CDC evidence based guidelines will be followed.
IC.02.01.01	1	ITL ITL	The organization implements its planned infection prevention and control activities and practices, including surveillance, to reduce the risk of infection.	1). Observed in Infection Control System Tracer at Coastal Health & Wellness - Mobile Clinic (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. The individual responsible for infection control (Dental Director, Lab Supervisor and the Director of Nursing) conduct infection control related surveillance monthly; however there is no specific surveillance over the sterilization process. Immediately implemented mitigation actions include reaching out to the local health district for additional expertise to build the necessary infrastructure	Corrected The monthly surveys have been updated and the Infection Control Goals and Responsibilities that had expired were updated and reviewed by the newly formed Infectious Disease Control Committee for implementation

The Joint Commission
Appendix
Report Section Information

--	--	--	--

Standard	EP	SAFER™ Placement	EP Text	Observation	

The Joint Commission

Appendix

Report Section Information

<p>IC.02.02.01</p>	<p>1</p>	<p>ITL ITL</p>	<p>The organization implements infection prevention and control activities when doing the following: Cleaning and performing low-level disinfection of medical equipment, devices, and supplies. *</p> <p>Note: Low-level disinfection is used for items such as stethoscopes and blood glucose meters. Additional cleaning and disinfecting is required for medical equipment, devices, and supplies used by patients who are isolated as part of implementing transmissionbased precautions. Footnote *: For further information regarding cleaning and performing low -level disinfection of medical equipment, devices, and supplies, refer to the website of the Centers for Disease Control and Prevention (CDC) at http://www.cdc.gov/hicpac/Disinfection_Sterilization/acknowledg.html.</p>	<p>1). Observed in Individual Tracer at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. While reviewing the breakdown of a dental operatory with the dental assistant, the use of disinfectant wipes was discussed. The dental assistant was not knowledgeable about the required contact time (wet time) for disinfecting. The product in use required 2 minutes; however, the dental assistant stated 10 seconds which was the time for sanitizing. Immediately implemented mitigation actions included reaching out to the local health district for additional expertise to build the necessary infrastructure needed.</p>	<p>Corrected A standardize procedure has been adopted and documented for all Dental Assistants to follow for Setting Up and Tearing Down an Operatory and the product wet time has been trained on with the procedure as well.</p>
<p>IC.02.02.01</p>	<p>2</p>	<p>ITL ITL</p>	<p>The organization implements infection prevention and control activities when doing the following: Performing</p>	<p>1). Observed in Infection Control Tracer at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. When discussing the reprocessing of medical instruments with a medical assistant and the reprocessing of dental instruments with the dental assistant it was learned they estimated both the chemical ounces and water volumes used with the</p>	<p>Corrected Measuring cups with actual numbers have been purchased and are readily available in the central sterilization area for staff to use and the chemical / water ratios documented as to manufacturer guidelines</p>

The Joint Commission

Appendix

Report Section Information

				<p>2). Observed in Infection Control Tracer at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. The infection control tracer was conducted at the dental clinic and at the medical clinic , both clinics being located at the main site. The containers which dental assistants and medical assistants used to carry soiled instruments to the reprocessing room did not have the biohazard labels. The ratio for the ultrasonic cleanser was not accurate; the dental assistant did not know how much water the ultrasonic cleanser hold. The load number, the physical characteristics, such as temperature, pressure and time, and the chemical indicator results were not documented. Biological indicator final reading was read 24 hours at the medical clinic but 48 hours at the dental clinic; the manufacturer recommended the final reading at 24 hours. Some forceps in the dental clinic were sterilized in the closed position. At the medical clinic, the sterilizer was sitting on a desk</p> <p>Corrected Containers have been purchased for both Dental and Medical with a sealed closure and biohazard labels have been placed on them Staff has been trained by the Manufacturer representative, equipment manual guideline and training videos available on the correct method for ratio of ultrasonic cleanser and staff has been quizzed by Dentist.</p> <p>Printers for the MidMark M11 Autoclaves were purchased which will capture the tempature, pressure and time and will be noted as part of the maintenance. Random weekly audits will be performed and reported to Infectious Disease Control Committee</p> <p>Staff have been trained on Spore testing, a procedure has been written based on the CDC evidence based guidelines and a revised log has been created for both locations. The Dental Assistant Supervisor or Designee will perform random audits and report compliance to the Infectious Disease Control Committee quarterly</p>
--	--	--	--	---

Standard	EP	SAFER™ Placement	EP Text	Observation
----------	----	------------------	---------	-------------

The Joint Commission

Appendix

Report Section Information

			<p>next to phlebotomy pods where circulation of staff, patients and family member was high, without any separate and distinct separation. This observation was discussed with the dental assistant, the medical assistant and the director of nursing. Immediately implemented mitigation actions: discontinue procedures in the dental service and the medical service until the problem is fixed correctly.</p>	<p>The autoclave in the Lab area was removed since the Lab Supervisor will not be performing sterilization</p>
			<p>3). Observed in Infection Control System Tracer at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and can not be clarified. Medical staff transported instruments in a rigid container that was uncovered and instruments were not kept moist during transport to the supply/reprocessing room. Immediately implemented mitigation actions: discontinued procedures in the dental service and the medical service until the problem is fixed correctly.</p>	<p>Corrected Containers have been purchased for both Dental and Medical with a sealed closure and biohazard labels have been placed on them. Staff have been trained on transporting instruments and equipment to the central sterilization area from both the dental and medical areas</p>
			<p>4). Observed in Infection Control System Tracer at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and can not be clarified. The Ritter (MidMark 11) did not have a print-out of the machines parameters (time, temperature, pressure) and the organization did have another method for documenting this information. Immediately implemented mitigation actions: discontinue procedures in the dental service and the medical service until the problem is fixed correctly.</p>	<p>Printers for the MidMark M11 Autoclaves were purchased which will capture the tempature, pressure and time and will be noted as part of the maintenance. Random weekly audits will be performed and reported to Infectious Disease Control Committee</p>
			<p>5). Observed in Infection Control System Tracer at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and can not be clarified. While reviewing the biological spore testing log book with the dental assistant, it was noted that the final readings for the last three weekly spore tests occurred prior to the manufacturer's required 24 hour time frame. For example the spore test was placed at 9:00 AM and the reading was taken the next morning at 8:00 AM (23 hours). Immediately implemented mitigation</p>	<p>Corrected Staff have been trained on Spore testing, a procedure has been written based on the CDC evidence based guidelines and a revised log has been created for both locations. The Dental Assistant Supervisor or Designee will perform random audits and report compliance to the</p>

The Joint Commission

Appendix

Report Section Information

				actions: discontinue procedures in the dental service and the medical service until the problem is fixed correctly.	Infectious Disease Control Committee quarterly
				6). Observed in Infection Control System Tracer at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. While reviewing instrument reprocessing with the dental assistant three different cleaning brushes were noted. The nylon and metal bristles were bent and worn. The dental assistant did not have access to IFU and there was no organizational policy for disposing of single use brushes or cleaning/disinfecting reusable brushes at least daily.	Corrected New brushes were purchased and are readily available to staff in the central sterilization area. A procedure has been written for Using Single Use and Multi-Use Cleaning Brushes.
				7). Observed in Infection Control System Tracer at Coastal Health & Wellness (9850-C, Suite C-103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and can not be clarified. When reviewing the storage of sterilized instruments in the dental lab with the dental assistant the first three peel packages pulled from the drawer had (1) no internal chemical indicators;	

Standard	EP	SAFER™ Placement	EP Text	Observation	
----------	----	------------------	---------	-------------	--

The Joint Commission

Appendix

Report Section Information

LD.04.01.05	<u>2</u>	ITL ITL	Programs, services, or sites providing patient care are directed by one or more qualified professionals or by a qualified licensed independent practitioner with clinical privileges.	1). Observed in Patient Home at Coastal Health & Wellness (9850-C, Suite C103.3 Emmett F. Lowry Expressway, Texas City, TX) site . This is related to the ITL and cannot be clarified. Lack of leadership knowledge, education, and training to effectively oversee the infection control program and it's decentralized sterilization process. No time allocated to those who perform infection control oversight for meetings to aggregate and analyze data for improvement efforts (e.g. no infection control meetings). Immediately implemented mitigation actions include reaching out to the local health department for additional expertise and creating a committee for Infection Control.	Corrected As part of the Infection Control Policy an Infectious Disease Control Committee has been form and will meet monthly to review procedures, data and compliance with logs, procedures and infection control goals
-----------------------------	----------	------------	---	--	--

The Joint Commission
Appendix
Report Section Information