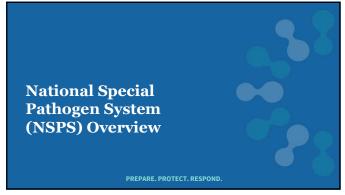


Agenda Item	Facilitator	Time	
National Special Pathogen System (NSPS) Overview	Laura Hillard, MA	10 mins	- 5
Identify, Isolate and Inform and the New Joint Commission Standards	Natalya Rosenberg, PhD, RN	15 min	9
Region 2 Patient Transport Concept of Operations (CONOPs) Review	Laura Hillard, MA	5 min	00
Resources Overview	Patricia Ann (Trish) Tennill, RN, DON	15 min	000
Q & A	All	Remaining time	



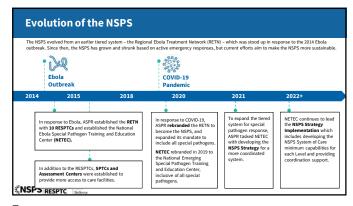


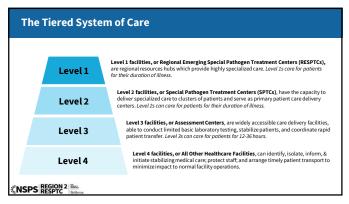
What is the NSPS? The National Special Pathogen System (NSPS) is a tiered System of Care with four facility levels (e.g., Level 1, Level 2, Level 3, Level 4) that have increasing capabilities to care for suspected or confirmed patients with High Consequence Infectious Diseases (HCIDs).

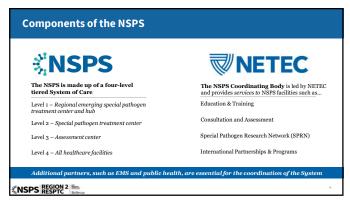
5

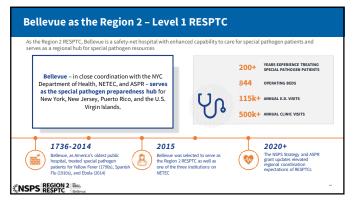
NSPS REGION 2 Bellev

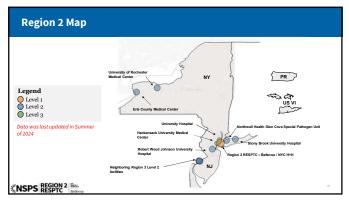












11

Joint Commission Infection Control
Standard IC.07.01.01 to Support
Preparedness for High Consequence
Infectious Diseases (HCIDs)/Special
Pathogens

Natalya Rosenberg, PhD, RN
Senior Product Director
Global Accreditation and Certification Product Development
Innovations, The Joint Commission

September 30, 2024

The Joint Commission Disclaimer

- This presentation reflects information as of the date it was originally presented and is intended only as a high-level overview for discussion purposes. The Joint Commission reserves the right to update, modify, or revise the information as needed.
- needed.

 The content herein is intended to highlight key topics for informational purposes only. This content does not represent all the supplementary verbal discussion from the original live presentation. Relying only on the written content here may not provide a full account of the complete discussion and range of viewpoints that were shared. No representations or warranties are made concerning the accuracy, completeness, or suitability of the information for a particular purpose. Joint Commission, or other requirements, should not be interpreted or implemented based solely on this presentation.
- This content and intellectual property are copyrighted and intended for the original presentation purposes only. Further use, sharing, reproduction, or distribution is prohibited without express permission from The Joint Commission.



© 2022 The Joint Commission. All Rights Reserved

13

The Joint Commission - The Gold Standard

Who we are

- Recognized worldwide as the preeminent accreditor, The Joint Commission accredits and certifies more than 22,000 health care organizations and programs throughout the United States and an additional 1000 across the globe
- ✓ Recognized by CMS for deeming authority in select care settings and by numerous states for licensure requirements



14

The Joint Commission - Accreditation Standards

- Processes to minimize patient harm
- Processes to support safe working practices
- Conditions that are reasonably necessary to prepare for hazards and manage them as effectively as possible
- Mechanisms for performance evaluation and improvement



The Joint Commission

IC.07.01.01 History

- Informed by past outbreaks and the national experience with COVID-19
- Incorporates recommendations of the Joint Commission Technical Advisory Panel on Preparedness for Emerging Infectious Diseases (March 2023)
- Went into effect on July 1, 2024



The Joint Commission

16

IC.07.01.01 Intent

Post COVID-19, grow in our ability to manage a full spectrum of infectious threats from routine/prevalent infections to serious rare infections through the following:

- Consistently practicing early detection and management of potentially infectious persons at initial points of encounter
- Continuing to be adept at deploying IC measures such as passive and active screening and hierarchy of controls
- Making it routine to identify ongoing risks e.g., through staying connected to the local alert system and\or the CDC's Health Alert Network



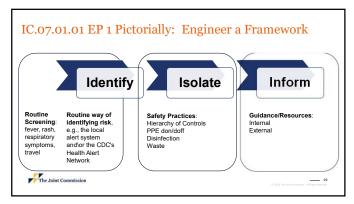
17

IC.07.01.01 The hospital implements processes to support preparedness for high-consequence infectious diseases or special pathogens

EP 1. The hospital develops and implements protocols for high-consequence infectious diseases or special pathogens. The protocols are readily available for use at the point of care and address the following:

- <u>Identify:</u> Procedures for screening at the points of entry to the hospital for respiratory symptoms, fever, rash, and travel history to identify or initiate evaluation for high-consequence infectious diseases or special pathogens Note: Points of entry may include the emergency department, urgent care, and ambulatory clinics.
- Isolate: Procedures for transmission-based precautions
- Inform: Procedures for informing public health authorities and key hospital staff
- Required personal protective equipment and proper donning and doffing techniques
- Infection control procedures to support continued and safe provision of care while the patient is in isolation and to reduce exposure among staff, patients, and visitors using the hierarchy of controls Note: See the Glossary for a definition of hierarchy of controls.
- Procedures for waste management and cleaning and disinfecting patient care spaces, surfaces, and equipment EP 2. The hospital develops and implements education and training and assesses competencies for the staff who will implement protocols for high-consequence infectious diseases or special pathogens.





Definition of HCIDs or Special Pathogens

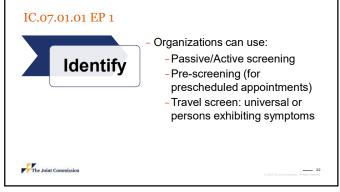
- The Joint Commission has not endorsed a standard definition
- · Defer to public health authorities and their definitions and resources
- R3 Report: "..novel or reemerging infectious agents that are easily transmitted from person-to-person, have limited or no medical countermeasures (such as an effective vaccine or prophylaxis), have a high mortality, require prompt identification and implementation of infection control activities (for example, isolation, special personal protective equipment), and require rapid notification to public health authorities and special action."
- List of pathogens may change to reflect current regional or global outbreaks or to include future emerging agents

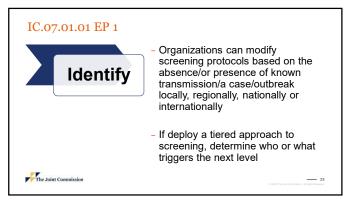


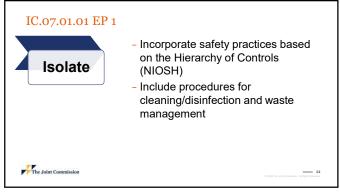
© 2022 The Joint Commission. All Rights Reserved.

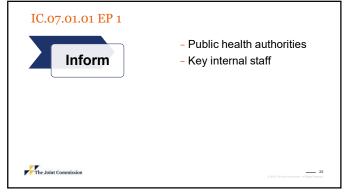
20

IC.07.01.01 EP 1 - Implement screening: fever, rash, respiratory symptoms, travel - Implement a routine way of identifying current risk, e.g., the local alert system and\or the CDC's Health Alert Network









IC.07.01.01 EP 2: Support Consistent and Correct Practices Through Training and Competency

- What, when, who: per organization procedures
- Competency:
- Observable and measurable knowledge, skills, and abilities
- Can someone use specific knowledge or skills correctly?
- Examples: training with a post-test, demonstration
- Organizations can define which aspects of policies and procedures or protocols require a competency assessment



26

0 2022 The Joint Commission. All Rights Reserved.

26

How We Validate Compliance with IC.07.01.01:

- Review of protocols
- Direct observation/staff interview/patient record review to verify implementation of screening
- Review of personnel files for evidence of training and competencies



27



