

CLARIFICATION: Reducing Infection Risks Associated with Medical Equipment, Devices, and Supplies

The Joint Commission has edited Infection Prevention and Control (IC) Standard IC.02.02.01 and its Elements of Performance (EP) 1 and 2 for **ambulatory care, behavioral health care, critical access hospitals, home care, hospitals, laboratories, long term care, and office-based surgery**. These changes are **effective immediately**. A new rationale for Standard IC.02.02.01, and revisions to EPs 1 and 2, clarify requirements to reduce the risks associated with medical equipment, devices, and supplies.

In the last year, several significant issues have emerged related to cleaning, disinfecting, and sterilizing medical equipment, devices, and supplies (for example, the proper use of steam sterilization, as discussed in *Perspectives*, July 2009, page 8, and adequate high-level disinfection of endoscopes). Furthermore, medical technology and instrumentation is a rapidly changing field; new devices and new or resistant pathogens are emerging at an unprecedented pace.


There has been confusion in the field about the applicability of Standard IC.02.02.01. Because EP 1 refers to cleaning and disinfection, it applies to lower-risk processes. The current assignment of scoring category “C” reflects the level of potential


impact on individuals served, patients, and residents.

EP 2 refers to sterilization and applies to higher-risk processes. EP 2 has been revised to show that, specifically, intermediate- and high-level disinfection are included with sterilization. The current assignment of scoring category “A” reflects the direct and serious potential impact on patients and residents.

Joint Commission surveyors will continue to survey for the following:

- Orientation, training, and competency of the health care workers who process medical equipment, devices, and supplies
- Levels of staffing and supervision of the health care workers who process medical equipment, devices, and supplies
- Standardization of the process regardless of whether it is centralized or decentralized
- Ongoing quality monitoring
- Observation against the manufacturer’s guidelines and the organization’s procedures

The revisions to IC.02.02.01 are shown in the box below and on pages 5 and 6 with additions in underlined text and deletions in ~~struckthrough~~ text. 



Official Publication of Joint Commission Requirements
Revisions to Standard IC.02.02.01

Effective Immediately
APPLICABLE TO PROGRAMS IDENTIFIED IN BLUE

IC.02.02.01
The [organization] reduces the risk of infections associated with medical equipment, devices, and supplies.

Applicable to Ambulatory Care, Critical Access Hospitals, Hospitals, and Office-Based Surgery

Rationale for Standard IC.02.02.01
The Centers for Disease Control and Prevention (CDC) estimate that 46.5 million surgical procedures are performed in hospitals and ambulatory settings each year; this includes approximately 5 million gastrointestinal endoscopies. * Each of these procedures involves contact with a medical device or surgical instrument. A major risk of all such procedures is

the introduction of pathogens that can lead to infection. Additionally, many more people are at risk of developing an infection from contact with medical equipment, devices, or supplies while seeking other health services. Failure to properly clean, disinfect, or sterilize, and use or store medical equipment, devices, and supplies not only poses risks for the person seeking health services, but also carries the risk for person-to-person transmission of infections.

There are numerous steps involved in the cleaning, disinfecting, and sterilizing of medical equipment, devices, and supplies. It is critical that health care workers follow standardized practices to minimize infection risks related to medical equipment, devices, and supplies. In order to maintain a reliable system for controlling this process, organizations pay attention to the following:

- Orientation, training, and competency of health care

* http://www.cdc.gov/ncidod/dhqp/pdf/guidelines/Disinfection_Nov_2008.pdf

Revisions to Standard IC.02.02.01 (continued)

workers who are processing medical equipment, devices, and supplies

- Levels of staffing and supervision of the health care workers who are processing medical equipment, devices, and supplies
- Standardization of process regardless of whether it is centralized or decentralized
- Reinforcing the process (for example, the use of placards which list the steps to be followed, according to manufacturer's guidelines)
- Ongoing quality monitoring

Applicable to Behavioral Health Care

Rationale for Standard IC.02.02.01

Individuals served are at risk of developing an infection from contact with medical supplies and devices. Failure to properly clean or disinfect, and use or store, medical supplies and devices not only poses risks for the individual seeking services, but also carries the risk for person-to-person spread of infections.

There are several steps involved in the cleaning and disinfecting of medical supplies and devices. It is critical that staff follow standardized practices to minimize infection risks related to medical supplies and devices. In order to maintain a reliable system for controlling this process, organizations pay attention to the following:

- Orientation, training, and competency of health care workers who are processing medical supplies and devices
- Supervision of the health care workers who are processing medical supplies and devices
- Standardization of process regardless of whether it is centralized or decentralized
- Reinforcing the process (for example, the use of placards which list the steps to be followed, according to manufacturer's guidelines)
- Ongoing quality monitoring

Applicable to Laboratories

Rationale for Standard IC.02.02.01

People are at risk of developing an infection from contact with laboratory equipment, devices, or supplies. Failure to properly clean, disinfect, or sterilize, and use or store, laboratory equipment, devices, and supplies poses the risk for person-to-person transmission of infections.

There are numerous steps involved in the cleaning, disinfecting, and sterilizing of laboratory equipment, devices, and supplies. It is critical that health care workers follow standardized practices to minimize infection risks related to laboratory equipment, devices, and supplies. In order to maintain a reliable system for controlling this process, organizations pay attention to the following:

- Orientation, training, and competency of health care workers who are processing laboratory equipment, devices, and supplies
- Levels of staffing and supervision of the health care workers who are processing laboratory equipment, devices, and supplies
- Standardization of process regardless of whether it is centralized or decentralized
- Reinforcing the process (for example, the use of placards which list the steps to be followed, according to manufacturer's guidelines)
- Ongoing quality monitoring

Applicable to Long Term Care

Rationale for Standard IC.02.02.01

Residents are at risk of developing an infection from contact with medical equipment, devices, or supplies while seeking health services. Failure to properly clean, disinfect, or sterilize, and use or store, medical equipment, devices, and supplies not only poses risks for the resident receiving health services, but also carries the risk for person-to-person spread of infections.

There are numerous steps involved in the cleaning, disinfecting, and sterilizing of medical equipment, devices, and supplies. It is critical that health care workers follow standardized practices to minimize infection risks related to medical equipment, devices, and supplies. In order to maintain a reliable system for controlling this process, organizations pay attention to the following:

- Orientation, training, and competency of health care workers who are processing medical equipment, devices, and supplies
- Levels of staffing and supervision of the health care workers who are processing medical equipment, devices, and supplies
- Standardization of process regardless of whether it is centralized or decentralized
- Reinforcing the process (for example, the use of placards which list the steps to be followed, according to manufacturer's guidelines)
- Ongoing quality monitoring

Applicable to Home Care

Rationale for Standard IC.02.02.01

People are at risk of developing an infection from contact with medical equipment, devices, or supplies while seeking health services. Failure to properly clean or disinfect, and use or store, medical equipment, devices, and supplies not only poses risks for the person seeking health services, but also carries the risk for person-to-person spread of infections.

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Clarification: Reducing Infection Risks Associated with Medical Equipment, Devices, and Supplies (continued)

Continued from page 5

Revisions to Standard IC.02.02.01 (continued)

There are numerous steps involved in the cleaning and disinfecting of medical equipment, devices, and supplies. It is critical that health care workers follow standardized practices to minimize infection risks related to medical equipment, devices, and supplies. In order to maintain a reliable system for controlling this process, organizations pay attention to the following:

- Orientation, training, and competency of health care workers who are processing medical equipment, devices, and supplies
- Levels of staffing and supervision of the health care workers who are processing medical equipment, devices, and supplies
- Standardization of process regardless of whether it is centralized or decentralized
- Reinforcing the process (for example, the use of placards which list the steps to be followed, according to manufacturer's guidelines)
- Ongoing quality monitoring

Elements of Performance for Standard IC.02.02.01

Applicable to Ambulatory Care, Critical Access Hospitals, Home Health, Hospitals, Long Term Care, and Office-Based Surgery

- 1 The [organization] implements infection prevention and control activities when doing the following: Cleaning and ~~disinfecting~~ performing low-level disinfection of medical equipment, devices, and supplies.

Applicable to Ambulatory Care, Critical Access Hospitals, Home Health, Hospitals, Office-Based Surgery

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/residents who are isolated as part of implementing transmission-based precautions.

Footnote: For further information regarding cleaning and performing low-level disinfection of medical equipment, devices, and supplies, refer to the Web site of the Centers for Disease Control and Prevention (CDC) at <http://www.cdc.gov/ncidod/dhqp/sterile.html> (Sterilization and Disinfection in Healthcare Settings).

Applicable to Behavioral Health Care

- 1 The organization implements infection prevention and control activities when doing the following: Cleaning and ~~disinfecting~~ performing low-level disinfection of medical supplies and devices.

Note: Low-level disinfection is used for items such as blood glucose meters. Additional cleaning and disinfecting is required for medical supplies and devices used by individuals who require the use of other precautions in addition to standard precautions. These "other precautions" are also known as "transmission-based" precautions.

Footnote: For further information regarding cleaning and performing low-level disinfection of medical supplies, refer to the Web site of the Centers for Disease Control and Prevention (CDC) at <http://www.cdc.gov/ncidod/dhqp/sterile.html> (Sterilization and Disinfection in Healthcare Settings).

Applicable to Laboratories

- 1 The laboratory implements infection prevention and control activities when doing the following: Cleaning and ~~disinfecting~~ performing low-level disinfection of laboratory equipment, devices, and supplies.

Note: Low-level disinfection is used for items such as blood glucose meters. Additional cleaning and disinfecting is required for laboratory equipment, devices, and supplies used by patients who are isolated as part of implementing transmission-based precautions.

Footnote: For further information regarding cleaning and performing low-level disinfection of medical equipment, devices, and supplies, refer to the Web site of the Centers for Disease Control and Prevention (CDC) at <http://www.cdc.gov/ncidod/dhqp/sterile.html> (Sterilization and Disinfection in Healthcare Settings).

Applicable to Ambulatory Care, Critical Access Hospitals, Hospitals, Laboratories, Long Term Care, and Office-Based Surgery

- 2 The [organization] implements infection prevention and control activities when doing the following: ~~Sterilizing~~ Performing intermediate and high-level disinfection and sterilization of medical equipment, devices, and supplies. (See also EC.02.04.03, EP 4)

Note: High-level disinfection is used for items such as respiratory equipment and specula. Sterilization is used for items such as implants and surgical instruments. High-level disinfection may also be used if sterilization is not possible, as is the case with flexible endoscopes.

Footnote: For further information regarding performing intermediate and high-level disinfection of medical equipment, devices, and supplies, refer to the Web site of the Centers for Disease Control and Prevention (CDC) at <http://www.cdc.gov/ncidod/dhqp/sterile.html> (Sterilization and Disinfection in Healthcare Settings).