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High Level Disinfection Control Alert for Health Centers

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Our surveyors at community health centers are observing many serious infection control-related risks concerning high-level disinfection and sterilization practices during recent onsite survey events.

Any immediate threat to the health or safety of patients or staff that is identified during your onsite survey can lead to a Preliminary Denial of Accreditation decision.

Resources for This Year's Survey

If your health center is due for survey this year, be sure to review the specific concerns our surveyors are identifying below. Also, be sure to utilize BoosterPak (available to accredited organizations through the secure Extranet site), a key resource that includes helpful information and strategies relating to infection control processes. You may also find that reviewing our past educational teleconferences and presentation materials related to infection control is helpful. These are accessible via phone and audio stream on The Joint Commission's [website](#).

Top Non-Compliance Item

The No. 1 standard found out of compliance is *IC.02.02.01, EP 2: The organization implements infection prevention and control activities when doing the following: Performing intermediate and high-level disinfection and sterilization of medical equipment, devices, and supplies.*

Specific infection control-related breaches recently identified by our survey teams in medical and dental sterilization processes tend to follow certain themes.

Poor Training

- lack of documented frontline staff competency and training specific to the sterilization processes
- lack of documented training for staff specific to the sterilization process

Overlooking Evidence

- little use or adherence to any sterilization Evidence Based Guidelines (EBGs); chemical indicators for high-level disinfectant used to disinfect ultrasound probes expired
- poor adherence to manufacturers' Instructions for Use (IFU) for reprocessing medical and dental instruments and use of supplies lack of leadership oversight and accountability for reprocessing of surgical instruments
- detergents not diluted according to manufacturer's instructions

Ignoring Indicators

- inconsistent use of chemical indicators in paper-plastic peel pouches used for sterilization
- inadequate documentation that physical/mechanical sterilization parameters were met (time, temperature, pressure)

Non-Compliant Use of Instruments

- failure to use personal protective equipment (PPE) including protective gowns or eye shields during decontamination activities
- instruments being cleaned, decontaminated and left to dry in the procedure room. No clean sink available for hand hygiene
- lack of physical or defined separation of contaminated and clean instruments within the dental decontamination room

Broken Processes

- lack of documentation of sterilizer preventative maintenance and cleaning as required per manufacturer instructions for use
- reuseable brushes used in the decontamination area were cleaned and disinfected in accordance with manufacturer's instructions
- unsatisfactory tracking of sterilizer maintenance (blanks on logs)
- inadequate tracking/monitoring parameters for sterilization cycles

If you have any questions regarding your processes or policies and procedures, please contact our Standards Interpretation Department directly via the [standards online question form](#). Patient safety is being compromised by all these sterilization issues and we are here to help reverse this trend.

Pam Komperda has worked at The Joint Commission for 10 years, as an account executive, then was promoted to manager of accreditation programs. She has been in project management since 2011.