

The Joint Commission

NSM 2025 Re-accreditation Survey

*Observations, Responses and
Employee Re-education/Training*



**NATIONAL
SEATING &
MOBILITY**

The Joint Commission 2025 Survey Observations, *Re-education & Training*

NSM is accredited by [The Joint Commission](#), the premier accrediting agency for providers of healthcare. Accreditation demonstrates that we're providing safe, quality care for our clients.

As part of maintaining our accreditation, The Joint Commission (TJC) performs site surveys periodically, typically every 3 years. We recently completed our site surveys and, while they went very well, [the final step in the process is to address their observations](#). For each item they noted, we're required to respond with our plan of correction.

The observations this time were primarily misses on policies we already have in place. Our response to that is to provide re-education and reminders on how to comply with the existing policies. A couple of the observations required some clarification of our existing policies, followed by education and instructions on compliance. Each of the observations and the actions required to satisfy The Joint Commission are explained here.



The Joint Commission 2025 Survey Observations, Re-education & Training

The Joint Commission has a list of **Standards** that we are required to meet. Within each standard, there are **Elements of Performance or EPs**. Think of the EPs as a list of things we must do to maintain compliance with each Standard.

Each observation is something the surveyors saw when they were in the branches that didn't quite meet an Element of Performance within a Standard.

Please review the following items observed during the survey. Each item will list the Standard and EP that we missed, followed by our response. **Review them carefully to remind yourselves of existing policies that need a reminder and to understand the minor updates to policies that were required.**

Once you're comfortable that you understand the observations and our responses, *sign the In-Service Form your manager will provide* so that we may complete our response and finalize the survey process with The Joint Commission.

If you have any questions, send them to Compliance@nsm-seating.com



Standard, EP and our Response

The Joint Commission Standard and Element of Performance

EC.02.02.01 EP12

Unmarked spray bottles that contained unidentified chemicals were present in the warehouse. This was observed at three different branches.

NSM's Response

There is an existing NSM policy that states, "Labels are required on chemical containers, and safety data sheets that convey hazard information must be present." A separate requirement states that "all chemical containers, including cleaning supplies, are to be clearly labeled as to contents."

Compliance is to be confirmed on NSM's site self-survey checklist that is required to be completed semi-annually at a minimum and by random audits by Compliance.

The appropriate manager must complete the site self-surveys accurately and correct any items that are non-compliant.

The policy and the checklist have been updated to include the following:

During any inspection or survey, misrepresenting or documenting items as compliant when they are not violates policy and our Code of Conduct and can result in disciplinary action.



Standard, EP and our Response

The Joint Commission Standard and Element of Performance

IC 06.01.01 EP 3

A surveyor observed that staff did not remove gloves after patient interaction nor wash hands or use hand sanitizer after removing gloves or before touching phone, laptop or even when returning to the vehicle.

NSM's Response

NSM has an existing Hand Hygiene policy that requires employees to clean their hands

- before having direct contact with patients
- after having direct contact with a patient's skin
- after having contact with body fluids, wounds or broken skin
- after touching equipment or furniture near the client
- after removing gloves
- upon re-entering the client care area if leaving the area was necessary during the appointment

All employees should review the instructions on Hand Hygiene provided on the posters above sinks in your branch. If you don't see the poster, let Compliance know.



Standard, EP and our Response

The Joint Commission Standard and Element of Performance

IC 06.01.01 EP 3

A surveyor observed expired hand sanitizer and eye wash in one or more locations.

NSM's Response

NSM has an existing policy that states no expired materials are to be present in the warehouse or facility. A qualified manager, as part of regular inspections, is required to check dates on all chemicals and supplies. If no date is present, the chemicals or supplies must be discarded after 5 years.

The appropriate manager must complete the site self-surveys accurately and correct any items that are non-compliant.

The policy and the checklist have been updated to include the following:

During any inspection or survey, misrepresenting or documenting items as compliant when they are not violates policy and our Code of Conduct and can result in disciplinary action.



Standard, EP and our Response

The Joint Commission Standard and Element of Performance

IC 06.01.01 EP 3

A surveyor observed that staff moved a chair brought into the branch by a client into a clean area and began repairs without disinfecting it.

NSM's Response

NSM has an existing Infection Control policy that states: All equipment must be sprayed with the appropriate hospital-grade disinfectant solution that is effective on the surface being disinfected and thoroughly cleaned prior to placement in any Clean area. Cleaning must take place in a clearly designated Cleaning Area.

A later section of the policy states: all equipment must be cleaned with the appropriate hospital-grade disinfectant, using either spray or wipes, prior to performing adjustments or repairs.



Standard, EP and our Response

The Joint Commission Standard and Element of Performance

EC.02.01.01 EP1

During the surveys, an exit door was blocked by multiple boxes and power wheelchairs.

NSM's Response

There is an existing NSM policy that states, “All doors/entryways are to remain **clear of obstructions**, secured/locked as appropriate...” Compliance is to be confirmed on NSM's site self-survey checklist that must be completed semi-annually at a minimum.

The appropriate manager must complete the site self-surveys accurately and correct any items that are non-compliant.

The policy and checklist have been updated to include the following:

During any inspection or survey, misrepresenting or documenting items as compliant when they are not violates policy and our Code of Conduct and can result in disciplinary action.



Standard, EP and our Response

The Joint Commission Standard and Element of Performance

EC.02.01.01 EP1

During the surveys, it was observed that the eyewash station was positioned more than 50' from the area where chemicals are used. This was observed in multiple branches.

NSM's Response

While NSM has a requirement that eye wash stations must be located by the cleaning area and must be unobstructed and not expired, clarification has been added to the policy. The clarification states that it is preferred to have the eye wash station by or within the cleaning area, but it is **required** that it be located within 50 feet of the chemicals used there.

Compliance is to be confirmed on NSM's site self-survey checklist that must be completed semi-annually at a minimum.

The appropriate manager must complete the site self-surveys accurately and correct any items that are non-compliant.

The policy and the checklist have been updated to include the following:

During any inspection or survey, misrepresenting or documenting items as compliant when they are not violates policy and our Code of Conduct and can result in disciplinary action.



Standard, EP and our Response

The Joint Commission Standard and Element of Performance

IM 02.02.01 EP 6

It was observed that after a chair that was dropped off at the branch was repaired, the employee put a tag with the client's full first and last name on it then placed the chair by the window for pick up, which potentially exposed the client's full name to passersby.

NSM's Response

There is an existing NSM policy that states, "While client equipment and boxes may be labelled when stored in the warehouse, the label must contain the minimum amount of information necessary. Full client names or any identifier beyond first initial, first three letters of the last name, must be removed from view on boxes and equipment prior to leaving the warehouse."

The requirement regarding client names was clarified on the self-survey checklist which the appropriate manager must complete accurately and correct any items that are non-compliant.

The policy and the checklist have been updated to include the following:

During any inspection or survey, misrepresenting or documenting items as compliant when they are not violates policy and our Code of Conduct and can result in disciplinary action.



Standard, EP and our Response

The Joint Commission Standard and Element of Performance

EQ.01.05.01 EP3

Multiple surveyors noted a cleaning and disinfecting area, separate from the dirty area, was not clearly defined and that some employees cleaned equipment within the dirty area. This was observed in multiple branches.

NSM's Response

NSM has an existing policy that states, "The To Be Cleaned/Dirty area is where any equipment that has not been disinfected must be located. There must be a **clearly marked, separate** Cleaning/Disinfecting Area containing a table or surface where the cleaning supplies (in well labeled bottles) are kept and where cleaning activities will take place.

The policy was updated to include, "Cleaning/Disinfecting cannot be done within the "Dirty" Area," for clarification.

The site-inspection checklist was updated to include, "A "Cleaning/Disinfecting" Area, separate from but near the 'Dirty' area, is clearly defined."

The policy and the checklist have been updated to include the following:

During any inspection or survey, misrepresenting or documenting items as compliant when they are not violates policy and our Code of Conduct and can result in disciplinary action.



Standard, EP and our Response - R

The Joint Commission Standard and Element of Performance

HR 01.06.01 EP 3

Multiple surveyors observed that competency assessments for ATPs had been conducted by a manager or other employee who did not have the background and knowledge to assess those competencies.

NSM's Response

While there is an existing policy that states, “An RTS/ATP Proficiency/Competency Assessment checklist MUST be on file with Human Resources before an RTS/ATP is allowed to perform job duties involving direct client care unsupervised. RTS/ATP assessments must be completed by a certified ATP.” It further states, “RTS/ATP and Technician competency will be assessed at a minimum of once each three years by the appropriate person as defined in the policy above.”

It is unclear when the practice of allowing managers to perform the assessment began but the requirement of having a certified ATP perform RTS/ATP assessments must be followed effective immediately. Compliance will be confirmed by a review of the assessments.

The policy was also updated to read, “When an in-person assessment by a certified ATP is not possible or practical, the assessment may be completed remotely.”



Standard, EP and our Response

The Joint Commission Standard and Element of Performance

APR 09.01.01 EP2

A surveyor observed in one location that the client was not provided with information on how to contact TJC with concerns about safety and/or quality of care.

NSM's Response

NSM has an existing policy in place that states “All clients will be presented their rights and responsibilities at or prior to delivery and the process to communicate issues and complaints will be explained. The Rights and Responsibilities ideally will be presented at evaluation and reviewed at delivery as further education for clients. This information will be discussed so the client and/or their family members or care providers clearly understand their rights and responsibilities relating to equipment and services provided by NSM. The client will sign a Delivery Checklist at delivery of the equipment which also indicates that they have received the Rights and Responsibilities..”

An additional section of the policy and the Client Rights & Responsibilities form itself include the client right to, “contact the Office of Quality Monitoring of the Joint Commission on Accreditation of Healthcare Organizations (The Joint Commission) if you have any concerns about patient care and safety that National Seating & Mobility has not addressed. The Joint Commission can be reached by calling 1-800-994-6610 or emailing complaint@jointcommission.org. (Matters concerning billing, insurance and payment disputes are not within the authority of the Joint Commission).”



Standard, EP and our Response

The Joint Commission Standard and Element of Performance

EC 02.02.01 EP 1

A surveyor noted the book of Safety Data Sheets contained SDSs for chemicals no longer in use at the branch.

NSM's Response

NSM has an existing policy that states in part, "Safety Data Sheets (SDS) will be maintained for every hazardous chemical used at National Seating & Mobility

The Branch Manager, Regional Area Director, or their designee is responsible for obtaining and **maintaining** the file of SDSs for all hazardous chemicals used at National Seating & Mobility, as well as maintaining the SDS Inventory List. The Inventory List must be reviewed at least annually. **SDSs for chemicals no longer in use must be removed.** SDSs for chemicals still in use must be reviewed to ensure they are the current version."

Compliance with this policy is reviewed and confirmed as part of the site-survey that is required to be completed semi-annually at a minimum.

The policy regarding the site-survey and the checklist have been updated to include the following:

During any inspection or survey, misrepresenting or documenting items as compliant when they are not violates policy and our Code of Conduct and can result in disciplinary action.



Standard, EP and our Response

The Joint Commission Standard and Element of Performance

EQ.01.05.01 EP 1

A surveyor observed three power wheelchairs stored in a clean area that were bagged, but one appeared dusty and none had tags identifying their clean/dirty status or indicating where they belonged.

NSM's Response

NSM has an existing Equipment Infection Control policy that requires equipment be tagged with a red tag when dirty and a green tag once it's disinfected. If the equipment is small, it can be stored in an area marked with a green tag, at a minimum, but wheelchairs and larger items must have their own green tag.

Compliance with this policy is reviewed and confirmed as part of the site-survey that is required to be completed semi-annually at a minimum.

The policy regarding the site-survey and the checklist have been updated to include the following:

During any inspection or survey, misrepresenting or documenting items as compliant when they are not violates policy and our Code of Conduct and can result in disciplinary action.



Standard, EP and our Response

The Joint Commission Standard and Element of Performance

LD.04.01.01 EP 10

Multiple observations were made during the survey of licenses being posted on a bulletin board but not in a public area where clients can see them.

NSM's Response

While it has long been common best practice and verbal instruction has been given to display licenses in an area where they can be viewed by clients and the public, there was no specific mention of this requirement in the Policies & Procedures. That has been updated to state in the Services Offered by NSM section to state:

“NSM will only provide services for which they hold the appropriate licenses and/or permits. Current licenses and/or permits will be displayed in an area that can be viewed by our clients and the public.”

Compliance with this policy is reviewed and confirmed as part of the site-survey that is required to be completed semi-annually at a minimum.

The policy regarding the site-survey and the checklist have been updated to include the following:

During any inspection or survey, misrepresenting or documenting items as compliant when they are not violates policy and our Code of Conduct and can result in disciplinary action.



Standard, EP and our Response

The Joint Commission Standard and Element of Performance

NPSG.07.01.01 EP 3

Surveyors noted that while we do provide education on Infection Control that includes Hand Hygiene and instructions on proper hand cleaning technique, our Hand Hygiene program did not collect data to measure improvement towards a stated goal.

NSM's Response

NSM does have an existing Hand Hygiene program that includes education on Infection Control and instructions on hand cleaning technique. However, the mechanism to measure compliance and improvement towards a stated goal had been paused. The data section is now reactivated, and collection will be accomplished by surveying groups of employees on a rotating basis to determine our average compliance percentage. Our stated goal is 82% compliance.



Standard, EP and our Response

The Joint Commission Standard and Element of Performance

RI.01.01.01 EP 2

During a patient home visit for a delivery, the surveyor observed the client was not provided with information on their Rights & Responsibilities.

NSM's Response

NSM has an existing policy in place that states “All clients will be presented their rights and responsibilities at or prior to delivery and the process to communicate issues and complaints will be explained. The Rights and Responsibilities ideally will be presented at evaluation and reviewed at delivery as further education for clients. This information will be discussed so the client and/or their family members or care providers clearly understand their rights and responsibilities relating to equipment and services provided by NSM. The client will sign a Delivery Checklist at delivery of the equipment which also indicates that they have received the Rights and Responsibilities.”



Standard, EP and our Response

The Joint Commission Standard and Element of Performance

RC 01.01.01 EP 10

A surveyor observed that while a loaner chair was provided to a client, there was no loaner document that listed the equipment type, serial number and the client's signature and delivery date.

NSM's Response

Documents were provided to prove compliance with this EP and our policy that meets it so this observation, so it was removed from our report. As a reminder, though, the loaner information including the serial number should be entered on the main page of the work order the loaner is attached to and a Loaner agreement should be signed and scanned into the order.



Site Inspection Re-assignments

For all Standards and EPs responses that refer to the policy update regarding site-surveys and the checklist, part of our response is that Compliance & Safety Self-Surveys will be re-assigned to a **random sampling** of branches during the week of **March 10th**.

If your branch receives the re-assignment, it must be **completed by the next business day**. *This is critical to complete the actions needed to respond to The Joint Commission on our compliance with the Standards and EPs.*



The Joint Commission 2025 Survey Observations Your Commitment to Compliance

Because our accreditation is **required by Medicare** and **most of our other payers**, it is vital that you understand and agree to comply with the policies and procedures designed to both meet The Joint Commission Standards and to provide **safe, quality care**.

Without accreditation, we would be unable to provide that care to most of our clients.

Be sure you've read and completely understand the observations and the policy reminders and updates made during this year's survey. Once you're completely comfortable that you can comply and that you understand why it's important, ***please sign the document your manager will provide.***

Send any questions to Compliance@nsm-seating.com.

Thank you for your commitment to maintaining our accreditation so we can continue to provide great care to our clients now and for many years to come!



LET'S GET *moving*

