

Prepublication Requirements

• Issued March 19, 2021 •



New Water Management Requirements

The Joint Commission has approved the following revisions for prepublication. While revised requirements are published in the semiannual updates to the print manuals (as well as in the online *E-dition*®), accredited organizations and paid subscribers can also view them in the monthly periodical *The Joint Commission Perspectives*®. To begin your subscription, call 800-746-6578 or visit <http://www.jcrinc.com>.

Please note: Where applicable, this report shows current standards and EPs first, with deleted language struck-through. Then, the revised requirement follows in bold text, with new language underlined.

APPLICABLE TO THE HOSPITAL ACCREDITATION PROGRAM

Effective January 1, 2022

Environment of Care (EC) Chapter

EC.02.05.01

The hospital manages risks associated with its utility systems.

Element(s) of Performance for EC.02.05.01

~~14. The hospital minimizes pathogenic biological agents in cooling towers, domestic hot and cold water systems, and other aerosolizing water systems.~~

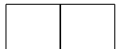


EC.02.05.02

The hospital has a water management program that addresses Legionella and other waterborne pathogens.
Note: The water management program is in accordance with law and regulation.

Element(s) of Performance for EC.02.05.02

1. The water management program has an individual or team responsible for the oversight and implementation of the program, including but not limited to, development, management, and maintenance activities.



Key: **(D)** indicates that documentation is required;

(R) indicates an identified risk area;

2. The individual or team responsible for the water management program develops the following: D
- A basic diagram that maps all water supply sources, treatment systems, processing steps, control measures, and end-use points
- Note:** An example would be a flow chart with symbols showing sinks, showers, water fountains, ice machines, and so forth.
- A water risk management plan based on the diagram that includes an evaluation of the physical and chemical conditions of each step of the water flow diagram to identify any areas where potentially hazardous conditions may occur (these conditions can most likely occur in areas with slow or stagnant water)
- Note:** Refer to the Centers for Disease Control and Prevention’s “Water Infection Control Risk Assessment (WICRA) for Healthcare Settings” tool as an example for conducting a water-related risk assessment.
- A plan for addressing the use of water in areas of buildings where water may have been stagnant for a period. (for example, unoccupied or temporarily closed areas)
 - An evaluation of the patient populations served to identify patients who are immunocompromised
 - Monitoring protocols and acceptable ranges for control measures
- Note:** Hospitals should consider incorporating basic practices for water monitoring within their water management programs that include monitoring of water temperature, residual disinfectant, and pH. Additionally, protocols should include specificity around the parameters measured, locations where measurements are made, and appropriate corrective actions taken when parameters are out of range.
3. The individual or team responsible for the water management program manages the following: D
- Documenting results of all monitoring activities
 - Corrective actions and procedures to follow if a test result outside of acceptable limits is obtained, including when a probable or confirmed waterborne pathogen(s) indicates action is necessary
 - Documenting corrective actions taken when control limits are not maintained
- Note:** See EC.04.01.01, EP 1 for the process of monitoring, reporting, and investigating utility system issues.
4. The individual or team responsible for the water management program reviews the program annually and when the following occurs: D
- Changes have been made to the water system that would add additional risk.
 - New equipment or at-risk water system(s) has been added that could generate aerosols or be a potential source for Legionella. This includes the commissioning of a new wing or building.
- Note 1:** The Joint Commission and the Centers for Medicare & Medicaid Services (CMS) do not require culturing for Legionella or other waterborne pathogens. Testing protocols are at the discretion of the hospital unless required by law or regulation.
- Note 2:** Refer to ASHRAE Standard 188-2018 “Legionellosis: Risk Management for Building Water Systems” and the Centers for Disease Control and Prevention Toolkit “Developing a Water Management Program to Reduce Legionella Growth and Spread in Buildings” for additional guidance on creating a water management plan. For additional guidance, consult ANSI/ASHRAE Guideline 12-2020 “Managing the Risk of Legionellosis Associated with Building Water Systems.”

Key: **D** indicates that documentation is required; **R** indicates an identified risk area;