Medxcel

Healthcare Physical Environment and Emergency Management

October 9, 2025

Agenda

01 Healthcare Safety and Emergency Management Overview

02 FM Processes with Integration of Safety/EM

03 Importance of Data

04 Future of The Physical Environment (TJC)

05 Open Discussion and Questions

Presentation Goals

What I hope to share with you today.

Engaging Content that you can take back to your hospital/ business.

- Overview of TJC today and tomorrow regarding to the Physical Environment and Emergency Management Programs
- As Facilities leaders, how the Physical Environment and Emergency Management Programs support your work and vice versa
- Tools and ideas that our team has developed that can be easily adopted to your work/ role/ organization
- How to make data *SEXY* and how to use this data to support your work. *We are our worst enemy.*

Healthcare Physical Environment (Safety) & Emergency Management Overview

Healthcare Safety and Emergency Management Scope

What is the role of the Safety Officer?

The Medxcel Physical Environment Safety Officers are responsible for the oversight of the Physical Environment and Emergency Management Programs

In that role we lead:

- EC and EM Committees
- Physical Environment and Emergency Management Rounding
- Environmental Safety Risk Assessments
- Emergency Management Prevention, Preparedness, Response, Recovery, and Mitigation Actions, including training and exercises

We participate in:

- Root/apparent cause analysis and accident investigations recommending remedial and corrective action
- Development and implementation of education programs and materials to train associates to detect, mitigate, and avoid workplace hazards
- We also provide technical guidance and support for things like surveys and policy decisions related to standards and regulation.

Physical Environment

Safety
Security
HazMat and Waste
Fire Safety
Medical Equipment
Utility Management
Water Management
Life Safety

Emergency Management

Prevention
Preparedness
- Planning
- Equipping
- Training
- Exercise

Response
Recovery
Mitigation

Did you know?

Between the Environment of Care, Emergency Management, and Life Safety chapters for the Joint Commission there are over 524 individual elements of performance that must be compliant (Pre Jan 2026)

Post Jan 2026-
EC-LS → PE: Standards-8; EP-50
EM: Standards-13; EP-39
NPSG → NPG: Standards-16; EP- 40
(WPV, EM, HCID, Suicide, PE)

NEW TOTALS
27 Standards
129 EPs

REQUIREMENTS

Regulatory Requirements

Center for Medicare and Medicaid
The Joint Commission

MIOSHA

Nuclear Regulatory Commission

Environmental Protection Agency (EPA) & MI EGLE

State of Michigan Bureau of Fire Service

LARA/ MDHHS

Federal Aviation Agency (Helipad)

Federal Communication Commission (Radios)

Center for Disease Control and Prevention

Hospital Requirements

Environment of Care (EC) Committee

Emergency Management (EM) Committee

Physical Environment and Emergency Management Rounding (6/12 Months)

Ligature Risk Assessments

Infant Abduction Prevention

Eyewash Station Risk Assessments

Workplace Violence Committee Member
ASHRM Risk Assessment

Associate Safety Committee Member
Needlestick
Patient Mobilization
Slip, Trips, and Falls

Respiratory Protection Plan and Risk Assessment (Support)

CSHA Survey (Mock TJC)

Site Level Mock TJC Surveys (Clinical Focus)

Safety and EM Dept Initiatives
Performance Goals
Professional Development

Additional Tasks

County Emergency Management Local Emergency Planning Committee

Regional Healthcare Coalition (ASPR HPP Grant Management)

Medical Control Authority

EMS Coordination

Trauma Program Coordination

Construction Safety- Planning and Rounding

Mass Notification

SDS Management

Recall Management

Incident Investigation

Emergency Preparedness Tips

Handwashing Assessments (LEAP FROG)

Disaster Recovery/ Insurance Recovery Tracking

Intelligence/ Information Sharing (Local, Market, National, and International Incidents)

WHO TO WORK WITH

Support Services

- Environmental Services
- Food and Nutrition Services
- BioMed
- Patient Registration
- Lab
- Supply Chain
- Facilities
- Construction
- Real Estate
- Occupational Health
- Security
- Accreditation
- Risk
- Patient Safety
- EMS Coordination

Clinicians

- Employed
- Independent Practitioners
- Specialized Service Lines
  - Trauma
  - Emergency Department
  - Neuro
  - Ortho
  - Cardiology
  - Oncology

Hospital Executives

- President
- CNO
- COO
- CMO
- Hospital Department
  - Directors
  - Managers
  - Supervisors

External Partners

Federal

- CDC
- DHS
- FEMA
- DHHS
- FBI
- CISA
- NRC
- EPA
- DOT
- NIOSH

State

- MDHHS
- MIOSHA
- LARA
- EGLE
- MSP-EMHSD
- MIOC
- MPSCS

Regional

- Healthcare Coalitions
- Regional EM/HS Committee

Local

- County LEPC/LEPT
- Medical Control Authority
- Area First Responders

PHYSICAL ENVIRONMENT *(Environment of Care)*

REQUIREMENTS FREQUENCY

Annual Requirements

Management Plans *(NO LONGER REQUIRED)*
- x7 with Key Performance Indicators *(Cannot be Regulatory Requirement)*

Management Plan Evaluation
- x7 of Key Performance Indicators

Risk Assessments
- Safety Program
- Security Program
- Workplace Violence Prevention
- Respiratory Protection
- Eyewash Stations

Fire Drills
- Business Occupancy (Clinics)
- Operating Rooms
- Hyperbaric Facilities

Board Quality/ Safety Report

SARA Title III Reporting and RCRA Waste Assessment/ Evaluation

Compliance Review- TJC ICM

Semi Annual Requirements

PE/EM Rounding
(Multidisciplinary)
- Clinical Departments
- Non-Clinical Depts
- High Risk Ambulatory Clinics
- Low Risk Clinics

Note: EC Rounding is conducted weekly throughout the year to meet the semi-annual and annual requirements
- 108 Questions Available to be Assessed

Ligature Risk Assessment
Inpatient BH, ED, Medical Acute Care, and Outpatient BH Settings

Quarterly Requirements

Fire Drills *(Healthcare and Ambulatory Healthcare Occupancy)*

Compliance Support Visits
- Fire Safety Testing
- Utility Management Testing

Monthly Requirements

Environment of Care Committee *(Membership)*
- Administration
- Safety and Emergency Mgt
- Security
- Environmental Services
- Facilities Management
- Infection Prevention
- Biomedical (TriMedx)
- Radiology
- Clinical/ Nursing
- Patient Safety/ Quality Improvement
- Risk Management
- Associate Health
- Accreditation/ Regulatory
- Pharmacy
- Laboratory
- Laser Safety
- Off Sites (AMG)

PHYSICAL ENVIRONMENT MEETING

Standard Meeting Agenda

Regulatory/ Accreditation Requirements

- Occupational injuries or illnesses and trends
- Injuries to patients or others
- Incidents of damage to hospital property or property of others
- Infection Control
- Construction/Renovation Updates
- Product Recalls (Supplies, Equipment, Food, and Medications)
- Workplace Violence
- Chemical Spills or Exposures
- Hazardous waste audit results, trends, regulatory updates
- Radiation Safety
- Lab– Equipment problems, Failures or use errors
- Fire Drills
- Fire Safety Equipment Testing
- Utility Equipment Preventative Maintenance and Corrective Maintenance Testing Results
- Medical Equipment Preventative Maintenance and Corrective Maintenance Testing Results
- Policy / Plan reviews (as needed)
- All Sites of Care included on the hospital's accreditation program

Hospital Requirements

- Sentinel Event Review
- Physical Environment Rounding and Finding Trends
- Environment of Care Management Plans with KPIs
- Annual EC Mgt Plan Evaluations
- Ligature Risk Assessments (Semi Annual)
- EVS and Dietary Process Reports
- Pharmacy Safety
- Regulatory News/ Education/ Updates

EXAMPLE: Standard and Recurring Physical Environment Reports

	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
Safety Management	Annual Program Evaluations includes December Reports	X	X	X	X	X	X	X	X	X	X	X
Security Management		X	X	X	X	X	X	X	X	X	X	X
Fire Safety Management		X	X	X	X	X	X	X	X	X	X	X
Hazardous Materials & Waste Management		X	X	X	X	X	X	X	X	X	X	X
Medical Equipment Management		X	X	X	X	X	X	X	X	X	X	X
Utilities Management		X	X	X	X	X	X	X	X	X	X	X
Water Management		X	X	X	X	X	X	X	X	X	X	X
Lab Safety (A)				X								
OR Safety/ WAGD (A)			X									
Radiation Safety (S)		X					X					
Laser Safety (A)			X									
Pharmacy Safety/ Pharmaceutical Waste (A)		X										
Ambulatory and Physician Practices (A)						X						
Regulatory Updates (S)				X						X		
Infection Control (S)			X			X			X			
Associate Safety Committee Initiatives (Q)		X			X			X			X	
Workplace Violence Committee (Q)		X			X			X			X	
Touchpoint (EVS and FNS Report) (S)				X						X		

PHYSICAL ENVIRONMENT ROUNDING

Rounding Team

Required

- Safety Officer
- Department Leader
- EVS
- Facilities
- Infection Prevention

Optional/ Ad Hoc

- Security
- Pharmacy (Clinical areas only)
- Accreditation/ Regulatory
- Associate Health
- Department Director
- BioMed
- COO (Informational)
- CNO (Informational- clinical areas only)

Rounding Questions

- Safety (15 Questions)
- Security (7 Questions)
- Fire Safety (19 Questions)
- HazMat and Waste (13 Questions)
- Medical Equipment (6 Questions)
- Utility (16 Questions)
- Emergency Management (5 Questions)
- Infection Control (16 Questions)
- Staff Knowledge (11 Questions)

TOTAL- 108 Questions

Finding Types and Expectations

Best in Class Metrics

- Department Leader/ Contact
  - <14 Days to Correct
- Facility Management (Work Orders)
  - <30 Days to Correct

EMERGENCY MANAGEMENT

REQUIREMENTS FREQUENCY

Annual Requirements

Emergency Operations Plan (EOP)
- Communications
- Staffing
- Patient Clinical and Support Services
- Safety and Security
- Resources and Assets
- Utilities

Hazard Vulnerability Assessment (HVA)/ Threat and Hazard Assessment (THAM)

96 Hour Sustainability Plan

Emergency Management Equipment and Supplies Inventory

Multi Year Training and Exercise Plan

EM Program Evaluation

After Action Reporting/ Improvement Planning

Semi Annual Requirements

Exercises
- Operations Based
  - Full Scale (Movement of People)
  - Functional (Hospital Command Center)
- Discussion Based
  - Tabletop
  - Drill
- Clinic/ Business Occupancy (Annual)

Decontamination Tent Mobilization

Preventative Maintenance on Emergency Management Respiratory Equipment

Contact List Management
- 3 Deep List

Monthly Requirements

Emergency Management Committee

(Membership)
- Administration (Exec Leadership)
- Safety and Emergency Mgt
- Security
- Environmental Services
- Nutrition Services
- Facilities Management
- Infection Prevention
- Radiology
- Clinical/ Nursing (House Supv, ED, ICU, and OR)
- Pharmacy
- Laboratory
- Trauma and Trauma Surgeon *(ACS Requirement)*
- EMS Coordination
- Pastoral Care
- Marketing and Communication
- Off Sites
- Information Technology
- Volunteer Services

EMERGENCY MANAGEMENT MEETING

Standard Meeting Agenda

Regulatory/ Accreditation Requirements

- Annual & Semiannual EM Requirements Dispersed throughout the Year (Previous Slide)
  - EOP Development/ Maintenance
  - HVA/THAM
  - 96 Hour Plan
  - Inventory
  - MYTEP
  - Exercises (x2) + x1 Business Occupancy
- Leadership EM Training including ICS Training
- Emergency Management Exercise Design and Development
- Incident and Exercise After Action Reports and Improvement Plans
- Trauma Program Coordination

Hospital Requirements

- Decontamination Tent Mobilization (x2 Year)- Check your manufacture specs
- Decontamination Response Team Training (HERT)
- County Emergency Management Local Emergency Planning Committee
- Regional Healthcare Coalition (ASPR HPP Grant Management)
- Medical Control Authority
- EMS Coordination

Other Tasks

- Other Company, State, and Federal Training Opportunities
- Intelligence/ Information Sharing (Local, Market, National, and International Incidents)
- Emergency Preparedness Tips

FM Processes with Integration of Safety/EM

FM Processes with Integration of Safety/EM

What are Facilities processes that Safety/ EM Supports?

Construction/ Project Safety

- Preconstruction Risk Assessment (PCRA)
- Interim Life Safety Measures (ILSM)
- Infection Control Risk Assessment (ICRA 2.0)
- Contractor Safety
- Construction Site Safety Rounding/ Inspections
- Contractor/ Hospital Safety Policy Deconfliction

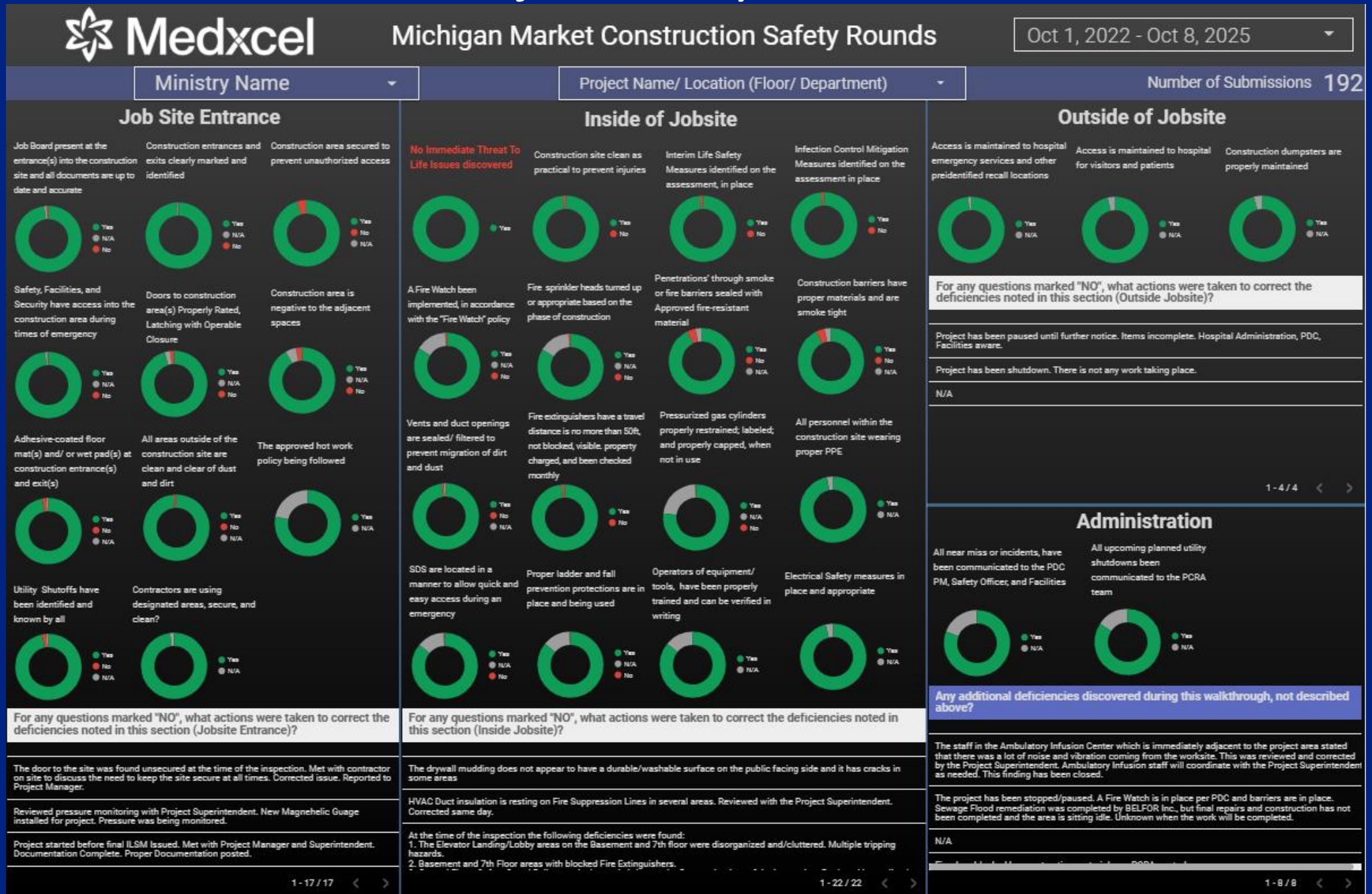
Planned Utility Downtime

- Coordination of Facilities, Contractor, Impacted Departments
- 14 Day, 7 Day, 3 Day, 1 Day, Go Day Coordination
- Hospital Command Center Activation (Emergency Management)
- Go; No Go Decision Making
- Back Up Dates
- After Action Review

OSHA/ MIOSHA

- Lock Out Tag Out
- Arc Flash
- Heavy Equipment
- Roof and Elevated Surfaces
- Ladder Safety
- Hearing Conservation/ Protection
- Respiratory Protection
- Walking/ Working Surfaces

EXAMPLE- Construction/ Project Safety cont.



EXAMPLE- Planned Utility Downtime

REQUEST

- GC completes form and forwards to Fac Mgr and PDC PM via email (separate email for each request)
- Include supporting documents (i.e. MOP, plans, specs)
- If needed, outline deliverable dates
- Submit no earlier than 30 days prior and no later than 7 days prior to last responsible moment to start the work

Permit Form

Identify Stakeholders

- Administration
- AT
- Infection Control
- Mgrs/Dirs of Affected Depts
- PDC PM
- Safety
- BioMed
- Facilities
- MOPs should identify on-call POCs

PRE WORK

Facilities

- Identify who's leading the team (PDC/Safety/FM)
- 14-day review (dep on complexity)
- Internal MOP (incl Medxcel and Sub activities)
- Architect/Engineer review
- Identify support equipment needs
- Communication
  - Breakout meetings
  - Routine updates
  - Floor plans showing impacted areas
  - Staff announcement (PDC PM)

PM/GC

Staff Communication

- Permits
- Subcontractor coord (MOP development)
- Floor plans
- Panel schedules

GC MOP

- PCRA*
- ICRA*
- ILSM*
- Valve book review*
- Isolation*

WORK

Safety/ EM

- Activate HCC*
- Communication
  - Routine updates during work *(Send Word Now)*
  - Operator
  - Radios
  - Landline or cell phone
  - IT
  - BioMed

GC

- Subcontractor coordination
  - Spot coolers*
  - Generators*
  - Med gas bottles*
  - Other equipment
- Radios

<u>Other considerations:</u>

- This process is generic. Larger/more complex projects may require separate breakout calls and/or longer lead times for appropriate pre-work.
- PDC PM has lead on the PDC projects
- Architect/Engineer should be engaged in design with shut down impacts
- Onboarding

CLOSE OUT

- Sr authorized Medxcel leader signs original request form
- Completed forms maintained for facility records
- Hard copy filed in appropriate binder
- Retrospective

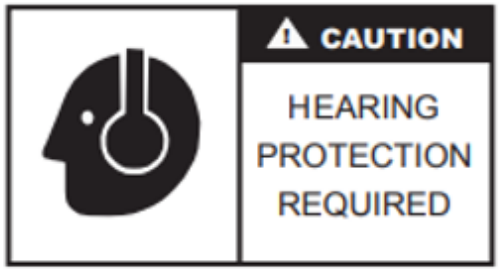
Permit Form

* If necessary

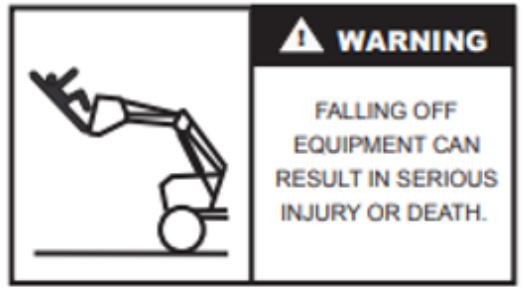
EXAMPLE- OSHA/ MIOSHA cont.

Safety Messages and Signs

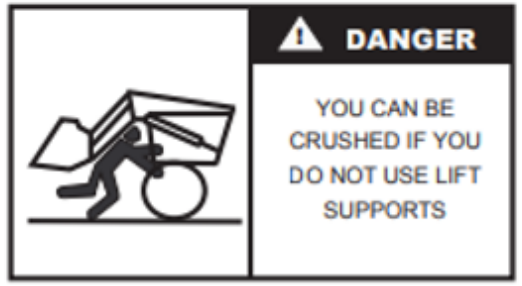
CAUTION means you need to be careful. Follow the directions on the sign or you could get hurt



DANGER is the most serious safety message. If you don't follow the directions, you will be seriously injured or killed



WARNING is more serious and means you need to follow the directions on the sign or you could be badly hurt or killed



FM Processes with Integration of Safety/EM cont.

What are Facilities processes that Safety/ EM Supports?

Hazardous Materials and Waste

- Globally Harmonized System (GHS)
- Safety Data Sheet (SDS) Management/ Inventory
- Spill Prevention/ Response
- Eyewash Stations
- Waste Profile/ Removal
- Manifesting/ Training
- Generator Status/ Other Administrative Tasks
- Indoor Air Quality Testing/ Assessments

Water Incursion (Flood Response)

- Types of Water (Category)
- Types of Damages (Class)
- Water Hazards/ Electrical Hazards
- Hospital Command Center Activation/ Messaging Coordination
- Setting Timelines/ Expectations
- Moisture Mapping *(If Trained)*

**IICRC Water Restoration Technician*

Facilities Training

FM to Teach Safety

- Electrical Systems
- Plumbing Systems
- HVAC Systems
- Medical Gas Systems
- Fire Alarm and Suppression Systems
- Life Safety Systems
- Horizontal & Vertical Transport Systems

EXAMPLE- Hazardous Materials and Waste

Regulatory Standards	Accreditation Standards
Michigan Occupational Safety and Health Administration (MIOSHA) Parts 42, 92, 430, 6, 33, 433, 451, +Many others	The Joint Commission Environment of Care • Management Plan • Annual Program Evaluation • Environment of Care Reporting • Environment of Care Rounding • Inventory • Eyewash Station Management • Sustainability • Spill Response • HazMat Waste Management
MI EGLE: Part 111- Hazardous Waste Management	
MI EGLE: Part 115: Solid Waste Management	
MI EGLE: Part 121, Liquid Industrial By-Products (formerly Liquid Industrial Waste) of Michigan's Natural Resources and Environmental Protection Act, 1994 PA 451 (Act 451), as amended	
Resource Conservation and Recovery Act (RCRA)	
Michigan's Medical Waste Regulatory Act (MWRA), Part 138 of the Public Health Code, 1978 PA 368, as amended	
Michigan's motor carrier safety act, Act No. 181 of the Public Acts of 1963, as amended, being §§480.11 to 480.22 of the Michigan Compiled Laws (MDOT)/ Department of Transportation 49 CFR 172.700–172.704	
Public Act (PA) 105 of 2024, on July 23 (Extends the timeline for the disposal of sharps containers)	
SARA Title III/ Tier II Reporting	
Hazardous Drugs- Handling in Healthcare Settings (USP 800)	
Radioactive Wastes (MI EGLE) 10 CFR 61.55	
Nuclear Regulatory Commission (NRC) for Healthcare Facilities	
Eyewash Station Inventory, Risk Assessment, and Testing (ANSI Z358.1-2014)	

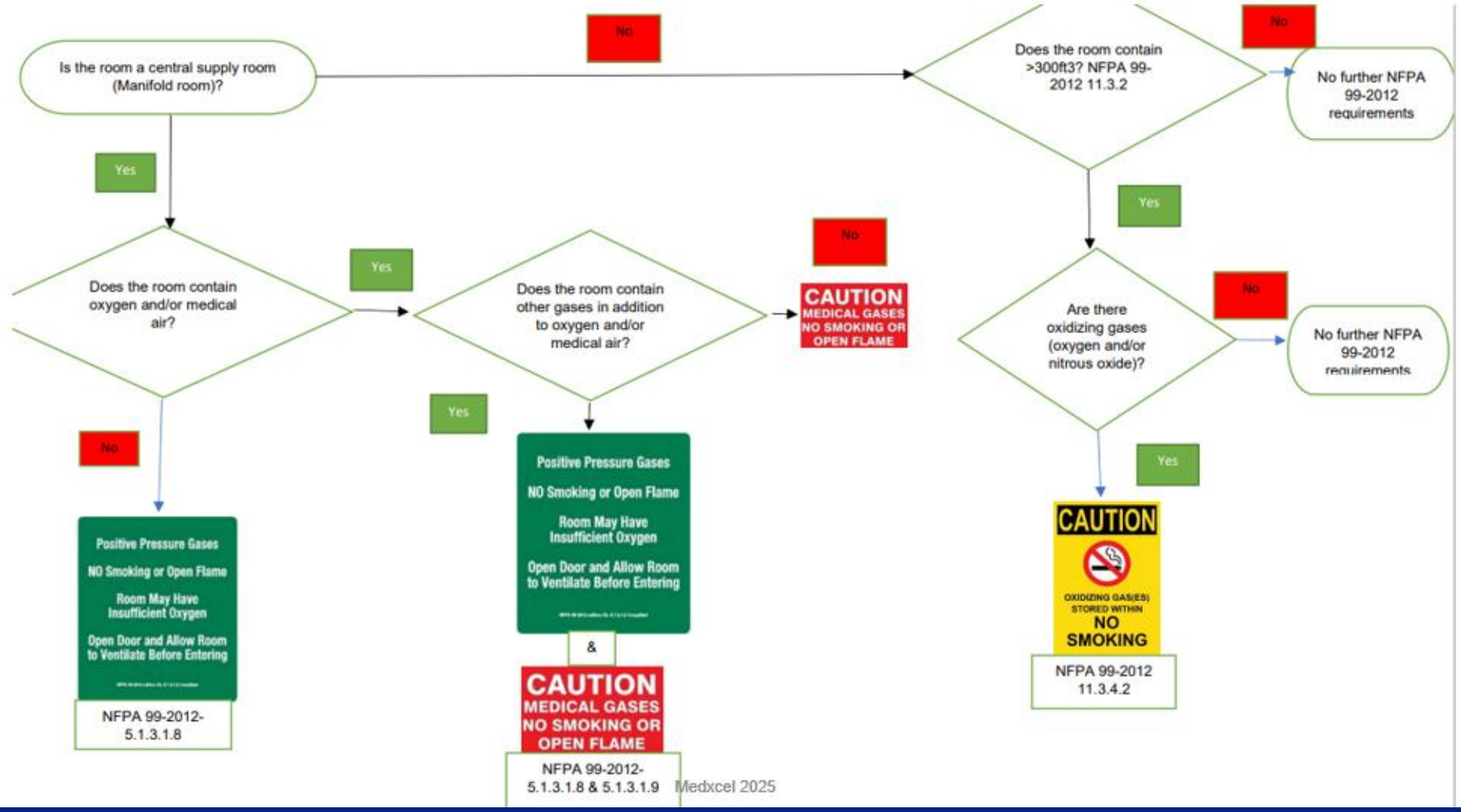
EXAMPLE- Water Incursion (Flood Response)

Internal Flooding Escalation Information

- When you get notified of a water intrusion incident the following information is needed for escalation:
  - Is everyone ok? Anyone hurt?
  - Location(s)?
  - Patient Care Impacted?
  - Known Cause?
  - Category of Water (1, 2, 3)
  - How much is affected
    - (Square footage or number of rooms)?
  - Leak Stopped?
  - Restoration Company Notified?
  - Have your site leaders been notified?
    - Admin, AOC, IP, Safety, EVS, etc.

EXAMPLE- Facilities Training cont.

Med Gas Room Signage



Importance of Data

Importance of Data

What and Why Should We Collect Data?

Book of Business

- Hospital Demographic Information
- Important Contacts (Internal and External)
- # of Beds (Staffed/ Licensed)
  - Average Census
- Infrastructure Information
  - Generator
- Important Links
- Important Meetings
- Weather Info
- System Dashboards

Rounding Data

- Scheduled Rounds vs Completed Rounds
  - Rounds are based on policy
  - Hospital and Off Sites
- Number of Findings
  - Unresolved (Length)
- Most Common Findings
  - Identifies Education Needs

Monthly Operating Reviews

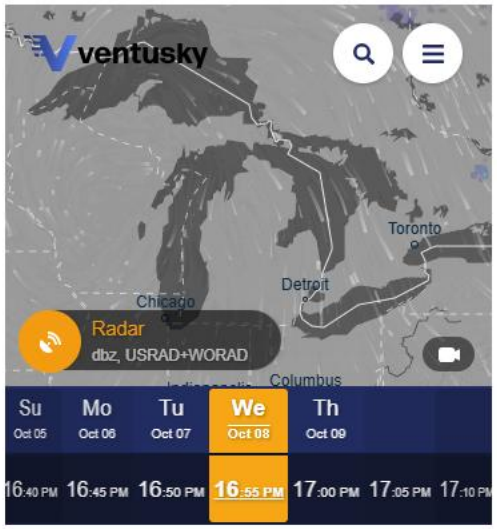
- Rounding Data
- EC (PE) and EM Committee Top 3 Items (for Leadership)
- EC/EM Incidents
- Training and Exercises
- Priorities/ Initiatives (Current Month/ Next + Month)
- Barriers/ Conversation
- PE/EM Key Performance Indicators

* EM Water Calculator Excel Sheet

EXAMPLE– Book of Business

Medxcel Michigan Safety & EM

Home | Regional Safety Director | Regional Emergency Manage... | Legacy Ascension/SEMI (Henr... | Weather | Michigan Market Status | Resource Links



MI Weather

Click the photo above to access live weather and air quality information

Resources

Click the photo above to access resources and other valuable links

MI Market Status

Click the photo above to access the MI Market Status

Physical Environment and Emergency Management Team Communications and Proactive Rounding

Communication to Site Leaders

- Daily
  - Site Safety Huddles
  - System/ Enterprise Huddle
- Monthly
  - Environment of Care and Emergency Management Committees (Monthly/ Every Other Month)
  - Monthly Operating Report
- As Required
  - Incident Response
  - Education (EM, Physical Environment, Other Support)

Rounding

- Weekly
  - EC Rounding (Annual/ Semi Annual Frequency)
    - Safety Officer Leads
    - Site Leaders Attend- Dept Leader; EVS, BioMed, FM, Security, Accreditation, C Suite
- Monthly
  - Safety/EM Team Onsite Visits *(Entire Team)*
    - Document Review and Building Tour
    - Different Topic Each Month
- Quarterly
  - Leaders Onsite Visits to support individual site needs
  - Leader Checks in with COO and CNO on exact needs/ requests
- Annually
  - Life Safety Assessment

*As Needed
- Incident Investigations/ EM Responses
- Projects/ Policy Updates
- Accreditation/ Regulatory Trends/ Changes

EXAMPLE- Physical Environment and Emergency Management Team Monthly Site Visits

Compliance. Collaboration. Sharing Best Practices

January	**TJC Survey Review-** • Review previous TJC/ICM including the findings, open findings, and sustainment of corrections. **TJC Physical Environment Checklist-** • Complete a building tour related to the parade route
February	**Document Review-** • Ligature Risk Assessments (Q6 Month) Signatures; SharePoint Upload **Building Tour-** • Review LRA in the physical environment
March	**Document Review-** • Previous CY Program Evaluations • Current Year Management Plans and KPIs **Building Tour-** • EC Rounding Clinical Closure Validations/ Assist with Closure of Findings
April	**Document Review-** • Hazardous Materials and Waste Profiles • Manifests and DOT Training Records • SQG and LQG Weekly Checks Audit • SARA Title 3 Report (Due March) **Building Tour-** • CAAs and SAAs • Trash Compactors
May	**Document Review-** • Utility Systems: Previous 12 Months of Protected Environments Temp, Humidity, Pressure Relationships and Corrections **Building Tour-** • Validate Protected Environments Temp, Humidity, Pressure Relationships and Corrections
June	**Document Review-** • Book of Business Review/ Updates **Building Tour-** • General Site Tour
July	**Document Review-** • Review Life Safety Assessment Open Work Orders **Building Tour-** • Above the Ceiling and Doors (Penetrations, Sprinkler Lines, Etc.) (Based on LSA)
August	**Document Review-** • Exterior Building Risk Assessment **Building Tour-** • Exterior Building Risk Assessment (Help Complete or Validate)
September	**Document Review-** • Safety and Security Risk Assessment • Actions to Reduce Risk **Building Tour-** • TJC Physical Environment Checklist- Complete a building tour related to the TJC Prep Checklist
October	**Document Review-** • Eyewash Inventory and Risk Assessments **Building Tour-** • Eyewash Stations
November	**Document Review-** • Water Management Review (Quarterly Meetings, Reports to EC Committee, Reports and Corrections) • Review Ice Machine Inventory and PM Records **Building Tour-** • Ice Machine Spot Checks and Drinking Fountains (GFCIs)
December	**Off Due to Holiday**

*Different Site Each Month

EM Water Calculator Excel Sheet

Hospital Boil Water Advisory/ Loss of Water/ Water Contamination – Water Needs Calculator

Incident Start Date		**Expected Incident End Date**		**Operational Period Date:_____ Time:_____**
Duration (# of Days)	0			

Inputs

	Potable Water	Non Potable Water	EGLE Sterile Water	Dialysis Water
Number of people (# of Patients and Associates)	0	0		0
Drinking water need (gal/person/day)*	1.00			
Avg toilet flushes per person per day**		5.05		
Gallons per flush (non-potable)***		1.00		
Lab Analyzers (gal/day)			0	
Boilers (gal/day)		0.00		
Cooling Towers (gal/day)		0.00		
Chillers (gal/day)		0.00		
Dialysis (gal/patient/day)				0

Outputs

Category	Gallons	Ounces	20 fl oz bottles (rounded up)	Formula details
Potable Water	0	0	0	Gallons = people × days × gal/person/day; Ounces = gallons × 128
Non Potable Water (Toilets)	0			Gallons = people × days × flushes/person/day × gallons/flush
Non Potable Water (Equiment)	0			Gallons = days × gallons
Non Potable Water	0			Gallons = toilets + equipment
EGLE Sterile Water	0			Gallons = people × days × flushes/person/day × gallons/flush
Dialysis Water	0			Gallons = people × days × gallons per day
TOTALS	**0**	**0**	**0**	**Sums of the above**

How to use:

1) Enter your counts in the yellow input cells on the right (Cells H4 thru H12)
2) Adjust the defaults if needed (e.g., increase gallons/flush if using buckets or known volumes) Cells B7; C8; C9 (Defaults *1 gallon; **5.05 toilet flushes; ***1 gallon per flush)
3) Results update automatically, showing totals in gallons, ounces, and 20 fl oz bottles.

Notes:

Future of The Physical Environment (TJC)

Future of The Physical Environment (TJC)

As of January 1, 2026

Revised TJC Standards (SAME REQUIREMENTS; IF NOT MORE)

- Environment of Care & Life Safety combined into the **Physical Environment**
  - Standards-8
  - EP-50
- **Emergency Management**
  - Standards-13
  - EP-39
- National Patient Safety Goals renamed to **National Patient Goals**
  - Standards-16
  - EP- 40
    - *(WPV, EM, HCID, Suicide, PE)*

Open Discussion/ Questions?