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May 25, 2017

VIA ELECTRONIC TRANSMISSION

Mr. Mark R. Chassin
President and Chief Executive Officer
The Joint Commission
601 13th St. NW #506S
Washington, DC 20005

Dear Mr. Chassin,

Thank you for your April 27, 2017, response and May 12, 2017 update. Unfortunately, both responses failed to answer several questions, including what corrective steps The Joint Commission required of Shadow Mountain in light of its numerous performance issues. Specifically, your letter noted that The Joint Commission identified 27 performance issues at Shadow Mountain but failed to address how and whether those issues were resolved.

Although the transmittal email noted that as a result of the BuzzFeed article, The Joint Commission started a “review” of the Shadow Mountain facility, your letter failed to indicate any of the steps taken pursuant to that review. For example, your letter notes that during the course of a review the problematic facility can be subject to penalties, conference calls, and written questions. Your letter did not indicate if any of those steps have been taken.

Your letter also notes that,

facilities can be placed on preliminary denial of accreditation status for noncompliance or for any deficiencies that constitute an immediate threat to health or safety of patients and the public, which is subject to further review and appeals. Finally, health care organizations can be ultimately denied accreditation when they have failed to demonstrate compliance with The Joint Commission standards.

In addition, your follow-up email on May 12 noted that,

[o]n May 11, an Immediate Threat to Life was called based on concerns from our survey team. Evidence of non-compliance of

standards were documented by our survey team in the following areas: Environment of Care, National Patient Safety Goals, Leadership, Medication Management, Provision of Care, Treatment, and Services, Human Resources, and Performance Improvement. The facility took immediate action to mitigate the risks that were posed by the concerns that our surveyors identified.

However, The Joint Commission neither provided examples of the evidence of non-compliance nor steps it took to “mitigate the risks.” It is also unclear whether this particular facility’s accreditation has ever been suspended for threats to the health and safety of its patients.

Given the reported conduct occurring at Shadow Mountain, it is imperative that The Joint Commission explain in detail what steps it has taken to address the problems at the facility. Please answer the following:

1. Your response generally stated each performance issue rather than clearly articulating each one. For each of the 27 “performance issues” identified by The Joint Commission at Shadow Mountain, please describe the scope of each performance issue you addressed, details sufficient to understand the actual problem, how many have been fixed, and how each was fixed.
2. After learning of the problematic activity at Shadow Mountain, please explain what steps The Joint Commission took to investigate and impose remedial action, including the following:
 - a. Since learning of the problematic activity at Shadow Mountain, has The Joint Commission asked the facility to provide a root cause analysis of causal factors, underlying conditions, or to take corrective actions? If so, what was the result? If not, why not?
 - b. Since learning of the problematic activity at Shadow Mountain, including the immediate threat to life, has The Joint Commission preliminary suspended or denied its accreditation status? If so, when? If not, why not?
3. Please describe the facts and circumstances that led your survey team to conclude there was an immediate threat to life.
4. Your May 12 email generally stated each performance issue rather than clearly articulating each one. For each performance issue, please describe the scope and provide details sufficient to understand the actual problem.
5. Your May 12 email stated, “[t]he facility took immediate action to mitigate the risks that were posed by the concerns that our surveyors identified.” What actions were taken?

6. Since the inception of The Joint Commission, how many facilities have been subject to a preliminary denial of accreditation or had their accreditation revoked?
7. CMS has proposed a rule (82 FR 19796) that would require accrediting organizations like The Joint Commission to make final accreditation survey reports public. Will you make the Shadow Mountain accreditation report public and any other related reports ahead of the proposed rule? If so, please provide a copy. If not, why not?

Please respond by June 8, 2017. If you have any questions, please contact Josh Flynn-Brown of my Judiciary Committee staff at (202) 224-5225.

Sincerely,



Charles E. Grassley
Chairman
Committee on the Judiciary