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Centralized Sterilization Services Certification

Review Process Guide

2026

Centralized Sterilization Services Certification Review Process Guide

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Centralized Sterilization Services Certification

Review Preparation

The purpose of this activity guide is to inform organizations about how to prepare for the Centralized Sterilization Services certification review, including the following:

- Identifying ways in which the organization can facilitate the onsite review process
- Describing logistical needs for the onsite review

Important Reading

The Certification Review Process Guide describes each activity of a Joint Commission onsite certification review. Organizations should read through each of the following activity descriptions, which include the following:

- Purpose of the activity
- Descriptions of what will happen during the activity
- Discussion topics, if applicable
- Recommended participants
- Any materials required for the session

These descriptions can be shared organizationwide as appropriate.

Pre-Review Contact with Account Executive

A Joint Commission Account Executive will contact your organization by phone or e-mail shortly after receiving your application for certification. The purpose of this call is to do the following:

- Confirm information reported in the application for certification, to verify travel planning information and directions to office(s) and facilities
- Confirm your access to the *Joint Commission Connect* extranet site and the certification-related information available there (onsite visit agenda, Certification Review Process Guide, etc.)
- Answer any organization questions and address any concerns

Logistics

- While onsite, the reviewer will need workspace for the duration of the visit. A desk or table, internet connection and access to an electrical outlet are desirable.

- Some review activities will require a room or area that will accommodate a group of participants. Group activity participants should be limited, if possible, to key individuals that can provide insight on the topic of discussion. Participant selection is left to the organization’s discretion; however, this guide does offer suggestions.

- The reviewer will want to move throughout the facility during Tracer Activity, talking with staff and observing the day-to-day operations of the organization along the way. The reviewer will

rely on organization staff to find locations where discussions can take place that allow confidentiality and privacy to be maintained and that will minimize disruption to the area being visited.

- Your onsite review agenda template, similar to the one presented later in this guide, will be posted to your *Joint Commission Connect* extranet site. The review agenda presents a suggested order of activities and timeframes for each. Discuss with the reviewer any changes to the agenda that may be needed at any time during the onsite visit.

Information Evaluated Prior to the Onsite Certification Review
Joint Commission certification reviewer assigned to perform your organization's onsite visit will receive the following items presented with your organization's Request for Certification:

1. Demographic information
2. Organization-level detail including services provided via contract or written agreement.
3. The name and description of the national standards utilized to derive protocols, policies, and procedures for the organization.

Familiarizing the reviewer with details about your organization before the onsite visit facilitates evaluation of your organization's compliance with standards. Advance analysis makes the onsite review time more efficient, effective, and focused.

Information Needed During Onsite Review
Please note that it is not necessary to prepare documentation just for purposes of the certification review. The reviewer is interested in seeing the resources that staff reference in their day-to-day activity. These items need not be stand-alone documents; the items noted may represent sections contained within other documents. Most of the document review will occur during individual tracer activity.

Following is a list of items that reviewers **REQUEST** to be uploaded to a SharePoint site prior to review:

- The organization's leadership and reporting structure
- The organization's policies and procedures for reprocessing reusable instruments, devices, and equipment (see CSPM.02, EP 3; CSIT.01, EP 2).
- Education and training plan for staff who process or handle medical instruments, equipment, and devices or provide cleaning services to the organization.

Following is a list of additional items that reviewers request to be available onsite the morning of the review:

- Map of the organization
- Organization's mission and scope of services
- Organization chart for the organization
- Emergency and medical equipment management plans

- Current inventory of hazardous materials and waste that it uses, stores, or generates and applicable permits, licenses manifests, and safety data sheets required by law and regulation
- Policies and procedures related to selecting, handling, storing, transporting, and using hazardous chemicals
- Complete maintenance records for all equipment used throughout the reprocessing process (see CSPM.02, EP 2)
- List of all contracts and written agreements related to the reprocessing of medical instruments, equipment, and devices
- Risk assessment results and actions implemented in response
- Meeting minutes and attendance of quarterly quality and performance improvement meetings
- Documentation of reporting aggregate data to internal and external stakeholders, as applicable
- For the Data Session, have slides available with the following data:
    - Process to maintain data quality and integrity (see CSPI.01, EP 1)
    - Aggregate data internally trended over time (see CSPI.01, EP 2)
    - Ongoing performance improvement activities
    - Performance improvement plan

Please note that this is not intended to be a comprehensive list of documentation that may be requested during the survey. Reviewers may ask, on an as needed basis, to see additional documents throughout the survey to further explore or validate observations or discussions with staff.

Who to Call with Questions
If you have a question about a standard or element of performance, please consider reviewing the Standards Interpretation FAQs page: https://www.jointcommission.org/standards_information/jcfaq.aspx prior to submitting a question. To submit a question, login to your organization's Joint Commission extranet site, *Connect*: https://customer.jointcommission.org/TJCPages/TJCHomeEmpty.aspx and click on Resources - Standards Interpretation, to submit your question. If you do not have access to *Connect*, please go to the Standards Interpretation Page: https://www.jointcommission.org/standards_information/jcfaq.aspx to submit a question.

Questions about onsite review process, agenda, scheduling, etc. – Call your Joint Commission Account Executive.

Centralized Sterilization Services Certification

Certification Review Notification and Postponement Policies

Notice of Initial Certification Onsite Review
If this is your organization's first time through the certification process, you will receive a thirty (30) day advance notice of your onsite review date(s). Notice will be provided via e-mail to the individuals identified on your account as the Primary Certification Contact and CEO. Additionally, thirty (30) days prior to your review, the Notification of Scheduled Events section on your organization's extranet site, *Joint Commission Connect*, is populated with the event along with a link to the reviewer's name, biographical sketch, and photograph.

Notice of Re-Certification Onsite Review
Your organization will receive notice from Joint Commission seven (7) business days prior to the first day of the scheduled review date(s) for Centralized Sterilization Services re-certification. The notice will be e-mailed to the individuals identified on your account as the Primary Certification Contact and CEO and will include the specific review date(s) and the program(s) being reviewed. Once the reviewer arrives onsite, the Notification of Scheduled Events section on your organization's extranet site, *Joint Commission Connect*, is populated with the review event including a link to the reviewer's name, biographical sketch, and photograph.

Review Postponement Policy
Joint Commission may not certify a program if the organization does not allow Joint Commission to conduct a review. In rare circumstances, it may be appropriate to request a review postponement. An organization should direct a request for postponement to its Account Executive. A request to postpone a review may be granted if a major, unforeseen event has occurred that has totally or substantially disrupted operations, such as the following:

- A natural disaster or major disruption of service due to a facility failure
- An employment strike
- Cessation of admitting or treating patients
- Inability to treat and care for patients and transference of patients to other facilities

Joint Commission may, at its discretion, approve a request to postpone a review for an organization not meeting any of the criteria listed above.

The format of certification review now requires that documents are uploaded prior to the onsite review to a secure site provided by Joint Commission, and the postponement policy is now inclusive of this requirement. The Centralized Sterilization Services certification program requires organizations to upload documents identified on the document list provided by its account executive not less than 7 business days before the scheduled certification review date. Organizations that do not comply with this requirement will have their certification review rescheduled and will be issued a postponement fee.

Your organization's Joint Commission Account Executive can answer questions about these policies or put you in contact with other Joint Commission staff that can assist you.

Centralized Sterilization Services Certification

Opening Conference and Orientation to Organization

Organization Participants

- Opening Conference – Organization administrative and clinical leadership, individual(s) who will provide the Safety Briefing to the reviewer(s), and others at the discretion of the organization.
- Orientation to Organization – Organization administrative and clinical leadership and others at the discretion of the organization

Overview of the Opening Conference (15 minutes)

Approximately 15-20 minutes in duration that includes the following:

- Reviewer introduction
- Introduction of organization review coordinator and leaders (Please note: Other staff can be introduced as the reviewer encounters them throughout the onsite visit)
- The organization is requested to provide the reviewer(s) with a Safety Briefing (informal, no more than five minutes) sometime during this activity. The purpose of this briefing is to inform the reviewer(s) of any current organization safety or security concerns and how Joint Commission staff should respond if your safety plans are implemented while they are on site. Situations to cover include the following:
  - Fire, smoke, or other emergencies
  - Workplace violence events (including active shooter scenarios)
  - Any contemporary issues the reviewer may experience during the time they are with you (for example, seasonal weather-related events, anticipated or current civil unrest, or labor action)
- Overview of Joint Commission and Centralized Sterilization Services certification
- Agenda review with discussion of any needed changes
- Overview of the SAFER™ portion of the Summary of Certification Review Findings Report
- Mention of the changes to the post-review clarification process
- Questions and answers about the onsite review process.

Overview of the Orientation to the Organization (45 minutes)

This 45-minute session is an exchange between the organization and reviewer about the structure and scope of care and services provided. A brief, approximately 15–20-minute, summary presentation about the organization is very helpful to the reviewer and often to organization staff participating in the review process. Additional discussion with the reviewer following the presentation will help clarify the documentation submitted by the organization with their application for certification. The reviewer will facilitate the discussion and use the information as a base to build on while continuing their review in other activities.

Organization representatives participating in this session should be able to discuss topics such as the following:

- Organizational mission, goals, and objectives

- Organization structure
- Operational management structure
- Scope of services provided, including logistics of interfacility transportation
- Planning, resource allocation, and decision-making process
- The selection and implementation of national accepted standards of practice
- Infection prevention and control
- Performance improvement process, including evaluation of the disease management program's efficacy

Planning Tips

- Consider holding this activity in a space that will accommodate the number of participants and allow for an interactive discussion in the Orientation to the Organization activity that immediately follows the Opening Conference.

- Inform the reviewer of any scheduling issues that could affect activities for the day.

- Inform the reviewer of your organization's expectations for the certification onsite review.

Centralized Sterilization Services Certification

Reviewer Planning & Protocol Review Session

During this activity, the reviewer, in conjunction with organization representatives, will identify areas for tracer activity. In addition, the reviewer will want to know about how much time will be needed to retrieve any staff files. If necessary, the reviewer will identify staff files that they will need for review during the Education and Competence Assessment activity at this time.

The reviewer will evaluate the protocols, policies, and procedures implemented by the organization regarding the reprocessing of medical instruments, equipment, and devices. The reviewer may also review contracts and written agreements related to services provided.

Organization Participants

- Organization representative(s) who will facilitate tracer activity
- Individual(s) responsible for obtaining staff files and protocols, policies, and procedures requested by the reviewer.

Materials Needed for this Activity

- Organization chart
- Protocols, policies, and procedures implemented by the organization
- Contract and written agreements for all services related to the reprocessing of medical instruments, equipment, and devices.

Planning Guidelines – Selecting Education and Competence Files for Review

1. A minimum of 5 files will be selected.

2. The reviewer will inquire about how much time is needed to obtain human resources staff files. If necessary, the reviewer will identify the files they would like to see at this time to facilitate the organization's retrieval efforts.

Individual Tracer Activity

The individual tracer activity is a review method used to evaluate an organization's compliance with standards as they pertain to services provided. During an individual tracer the reviewer will do the following:

- Follow the reprocessing cycle of medical instruments, equipment, and devices from arrival to the organization across the continuum of services provided
- Evaluate the implementation of policies, protocols, and procedures through the reprocessing cycle
- Identify issues that will lead to further exploration during other review activities, such as competence assessment and data sessions
- Look at procedures or other documents, as needed, to verify processes or to further answer questions that still exist after staff discussions

During individual tracer activity, the reviewer may interview staff regarding the following:

- Processes as they relate to standard requirements
- Intradepartmental communication for the coordination of services provided
- Transportation of medical instruments, devices, and equipment and flow throughout the organization
- Orientation, education, and competency of staff
- The record-keeping systems in use for equipment maintenance
- Identification and management of equipment included in an alternative maintenance program
- Reporting of equipment or sterilization failures
- Reporting of staff environmental accident or exposures to hazardous materials or bioburden
- Staffing and workload issues
- Organization's code of conduct/behavior; reporting intimidating behavior or perceived violations of such codes
- Processes to follow in the event of a workplace violence or security incident
- Roles and responsibilities related to the environment of care, for example preventing, responding to, and reporting incidents
- Other topics, as applicable

Organization Participants
Organization staff and leadership who are involved in medical instrument, equipment, and device reprocessing and transportation.

The tracer can lead the reviewer back to the area where the tracer activity began. Upon returning, the reviewer might follow-up on observations either through additional record review or discussions with staff.

At the conclusion of the tracer, the reviewer communicates to the organization leaders and care providers any of the following:

- Specific observations made
- Issues that will continue to be explored in other tracer activity
- Need for additional review
- Issues that have the potential to result in requirements for improvement

Centralized Sterilization Services

System Tracer – Data Use

This session is focused on the organization's use of data in improving safety and quality of services provided. The reviewer and organization representatives will do the following:

- Identify strengths in the use of data, areas for improvement, compliance with performance improvement expectations, and any actions taken or planned to improve quality and safety.
- Identify specific data use topics requiring further exploration as part of subsequent review activities

Organization Participants

Suggested participants include representatives from:

- Quality Assessment and Performance Improvement
- Staff involved in selected performance improvement activities and projects
- Infection Prevention and Control
- Leadership
- Others at the discretion of the organization

Materials Needed for this Activity

- Performance improvement plan
- Risk assessment results and actions taken in response
- Aggregate data reports internally trended over time
- Action plans demonstrating the organization's use of and response to data
- Slides available with the following data:
    - Process to maintain data quality and integrity (see CSPI.01, EP 1)
    - Aggregate data internally trended over time (see CSPI.01, EP 2)
    - Ongoing performance improvement activities
    - Performance improvement plan

Data Use System Tracer Description

During this activity, the reviewer and organization will discuss the following:

- Individuals involved in safety and quality and their responsibilities
- Performance improvement plan and ongoing activities
- Data collection processes, including evaluation of reliability and validity
- Data analysis and evaluation
- Dissemination and communication to internal and external stakeholders
- Data use and actions taken on opportunities for improvement
- Monitoring performance and evaluating improvements

- How data is used in decision-making and in improving the organization's quality and safety
- Strengths and opportunities for improvement in the processes used to obtain data and meet internal and external information needs

The reviewer will want to know about the organization's priorities for performance improvement activities related to services provided and how these fit into the organization's overall performance improvement processes. This discussion may include a review of the following:

- Selection and prioritization of performance improvement activities
- Data reporting – relevant data is reported to identified internal and external stakeholders at regular intervals determined by the organization
    - Internal stakeholders include anyone at the organization involved in reprocessing instruments, equipment, and devices
    - External stakeholders include anyone outside of the organization (hospitals or other organizations that send instruments, equipment, and devices for reprocessing, transportation staff, etc.)
- Type of analyses being conducted – approach to trending data over time, comparing data to an expected level of performance, and looking at data in combination for potential cause and effect relationships

Centralized Sterilization Services

Education & Competence Assessment Process

The purpose of this activity is to discuss how the organization meets the need for qualified and competent staff.

Organization Participants

- Organization leaders
- Organization representatives responsible for human resources processes
- Individuals with authorized access to and familiar with the format of files
- Others at the discretion of the organization

Materials Needed for this Activity

The reviewer will select a minimum of 5 staff files, which may include the following:

- Organization leader(s)
- Staff who process or handle medical instruments, equipment, and devices, including staff who provide interfacility transportation.
- Staff who provide cleaning services to the organization

Note: The reviewer will select these files based on the individuals encountered during tracer activity. Please let the reviewer know if there could be a delay in getting files for review.

Overview of the Competence Assessment and Credentialing Process Session

During the session, the reviewer and organization representatives will do the following:

- Discuss the following competence assessment and credentialing topics as they relate to the program seeking certification:
  - Hiring criteria unique to the program
  - Organization-specific competence and credentials requirements
  - Processes for obtaining team member credentials information
  - Organization-specific credentials evaluation criteria
  - Orientation and training process for staff
  - Methods for assessing competence of staff
  - Unique orientation, on-going education, training and in-service requirements for the organization
- Participate in a facilitated review of selected files for the following:
  - Relevant education, experience, and training or certification
  - Current licensure that has been verified through the primary source prior to expiration, as applicable
  - Competence
  - Evidence reflecting completion of any required continuing education
  - Last signed performance evaluation

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Summary Discussion

This time will be used for a final discussion prior to the reviewer's report preparation and the exit conference.

Organization Participants
Will vary depending upon the issue

Materials Needed for this Activity
Will vary depending upon the issue

Preparation for Issue Resolution
None required

Summary Discussion Description
Topics that may be addressed include the following:

- Any issues not yet resolved
- The identified Requirements for Improvement (RFIs)
- Sharing best practices to inspire quality improvement and/or outcomes
- Determination if RFIs will be discussed in detail at closing

The reviewer will work with the organization's certification contact to organize and conduct the summary discussion.

Reviewer Report Preparation

The reviewer uses this time to compile, analyze, and organize the data they have collected throughout the review into a preliminary report reflecting the organization's compliance with standards.

Organization Participants
None required, unless specifically requested by the reviewer

Materials Needed for this Activity
Private workspace with access to an electrical outlet and an internet connection

Reviewer Report Preparation Description
The reviewer uses this time to analyze their observations and determine if there are any findings that reflect standards compliance issues. If organization interruptions can be kept to a minimum during this time, it will help the reviewer remain on schedule and deliver a report at the appointed time. The reviewer will be using their laptop computer to prepare the preliminary report and plan for the Exit Conference.

Centralized Sterilization Services Certification

Exit Conference

The Exit Conference is the final onsite activity when the organization receives a preliminary report of findings from the reviewer. In addition, reviewers will do the following:

- Review the Summary of Certification Review Findings report, including the SAFER™ matrix feature if determined during the Summary Discussion session
- Discuss any standards compliance issues that resulted in Requirements for Improvement (RFIs)
- Identify best practices
- Allow the organization a final onsite opportunity to question the review findings and provide additional material regarding standards compliance
- Explain the post-review process and required follow-up actions, as applicable

Organization Participants

- Organization leaders
- Other staff at the discretion of the organization

Materials Needed for this Activity

Copies of the certification report—if it is being distributed to staff

Preparation for the Exit Conference

None required

Exit Conference Description

This is a 30-minute activity that takes place at the completion of a review. Administrative and clinical leaders and other organization staff, as invited, will hear a verbal report of review findings, requirements for improvement, and where these are appearing on the SAFER™ matrix. The preliminary certification review findings and printed report are shared with participants in the Exit Conference ONLY with the permission of the CEO. All reports left onsite are preliminary and subject to change upon review by Joint Commission central office staff.

Certification Review Template Agenda

Joint Commission
Centralized Sterilization Services Certification
One Reviewer for One Day

Time	Activity & Topics	Suggested Organization Participants
8:00-8:30 a.m.	**Opening Conference & Reviewer Planning** • Reviewer will begin this session with a few remarks and introduction of themselves, followed by an introduction of the organization staff • Next, organization leadership will present an orientation to the organization • Presentation will be followed by a brief Q&A • Reviewer will end session with an overview of agenda and objectives **Please have the following available for this session**: • Organization chart • Policies, procedures, and protocols implemented by the organization • Contract and written agreements for all services related to the reprocessing of medical instruments, equipment, and devices	Organization's certification contact Organization clinical and administrative leadership Others at organization's discretion Organization representative(s) that can facilitate tracer activity
8:30-9:00 a.m.	**Brief Building Tour** • Tour of facility	
9:00-12:00 p.m.	**Individual Tracer Activity** • Review of organization processes, including staff interview • At the conclusion of tracers, the reviewer will communicate ○ Need for additional interviews, documents, or observations to verify standards compliance, confirm procedures, and/or validate practice	Organization representative(s) who can facilitate tracer activity and escort reviewer through the facility
12:00-12:45 p.m.	**Reviewer Lunch**	
12:45-1:30 p.m.	**System Tracer – Data Use Session** Discuss how data is used by program to track performance and improve quality and safety of services provided.	Individuals involved in Performance Improvement

1:30-2:00 p.m.	**Education & Competence Assessment** This session focuses on staff education and completion of applicable competencies: • Orientation and training process for the organization • Methods for assessing competence of staff • Inservice and other education and training activities provided to staff Staff Files • Licensure (if applicable) • Certification (if applicable) • Job description • Most recent performance evaluation • Program Specific *Orientation* Education/Competencies • Program Specific *Ongoing* Education/Competencies	Organization leaders Organization representatives responsible for human resources processes Individuals with authorized access to and familiar with the format of files Others at the discretion of the organization
2:00-2:30 p.m.	**Continued Document Review & Summary Discussion** This time will be utilized for a final discussion prior to the reviewer's report preparation and the exit conference. Topics that may be discussed include: • Any issues not yet resolved (IOUs)	Will vary; as requested by the reviewer
2:30-4:00 p.m.	**Reviewer Report Preparation** This time will be utilized for the reviewer to prepare the final report of the certification review.	
4:00-4:30 p.m.	**Exit Conference** Reviewer presentation of certification observations and Requirements for Improvement	Organizational leadership Others at the discretion of the organization

Note: This agenda is a guide and may be modified based on organizational need and reviewer discretion.

Centralized Sterilization Services

Intra-cycle Review Process

All organizations participating in the certification process are required to collect, report, and monitor their performance on an ongoing basis. The requirements in the Performance Improvement (CSPI) chapter outline the expectations to identify opportunities to improve the provision of equitable services.

A mid-point (intra-cycle) evaluation of an organization's performance improvement activities and standards compliance will be conducted via conference call with a Joint Commission reviewer.

Prior to the Intra-cycle Event
Organizations should review their priorities for performance improvement activities related to services provided and how these fit into the organization's overall performance improvement processes. Organizations do not need to upload any documents in advance of the intra-cycle event.

Intra-cycle Evaluation Logistics
This Microsoft Teams call will take place as close as possible to the one-year mid-point of the current two-year certification cycle. The call will be completed by a Joint Commission reviewer who will contact the primary certification contact for a time that is convenient to both parties involved. Participation in the intra-cycle conference call is mandatory for all organizations participating in the Centralized Sterilization Services certification program.

Organization Participants

- Staff involved in data collection and analysis
- Organization leaders that implement performance improvement plans

Overview of the Intra-cycle Evaluation Process
During the conference call, the reviewer and organization will discuss

- Data reporting – when it occurs and who receives the information
- Goals of your organization's performance improvement plan
- Results of your performance improvement activities
- Your organization's ongoing approach to performance improvement
- Your questions regarding compliance with Joint Commission standards

While organizations are not required to upload documents in advance of the call, it may be helpful to use the screen share option to display information during the discussion.

This call is your organization's opportunity to have an interactive discussion with Joint Commission's reviewer to assure you are on the right track for ongoing performance improvement and standards compliance.

There are no negative outcomes to the intra-cycle event unless the reviewer identifies that your organization has not actively engaged in performance improvement activities since the time of the most recently completed initial or recertification review.