NEW A360

Top 25 Survey Findings

The 25 most frequently cited findings from 2025 Joint Commission surveys, with each former Environment of Care and Life Safety citation mapped to its new classification under Accreditation 360.

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Standardizing Healthcare Compliance

OVERVIEW

How to Read the New A360 Findings

Accreditation 360 consolidates the former Environment of Care and Life Safety standards into the new Physical Environment chapters.

Each finding shows the former EC or LS citation and its new PE equivalent, so existing compliance work carries forward.

Observations come from Joint Commission surveys conducted in 2025 across patient care, clinical support, and building systems.

AREA ONE

Environment of Care and Cleanliness

AREA TWO

Utility and Power Systems

AREA THREE

Fire and Life Safety

AREA FOUR

Hazardous Materials and Programs

FINDING 01 | ENVIRONMENT OF CARE

Interior Spaces Safe and Suitable

WAS
EC.02.06.01 EP 1

→

NOW
PE.01.01.01 EP 1

WHAT SURVEYORS FOUND

- Stained ceiling tiles, peeling paint, wall holes, and exposed drywall in patient rooms, ORs, corridors, and storage areas.
- Restroom pull cords tied up, wrapped around grab bars, or mounted 4 to 6 inches too high, out of reach from the floor.
- Unsecured carts and cabinets holding sharps, needles, and supplies accessible to patients and visitors.
- Conditions raise concerns for cleanability, infection control, and overall maintenance.
- A hole or missing tile in a floor with black debris observed.

FINDING 02 | UTILITY SYSTEMS

Utility Systems Control Labels

WAS
EC.02.05.01 EP 9

→

NOW
PE.04.01.01 EP 1

WHAT SURVEYORS FOUND

- Electrical panels labeled with spare breakers were found turned on.
- All main utilities must be labeled to support emergency response.
- Bad legends prevent staff from safely performing a partial or complete emergency shutdown.
- Shutoff valves for oxygen, natural gas, and other utilities were found unlabeled.
- One panel had an incomplete legend and a second had an incorrect legend.

FINDING 03 | ENVIRONMENT OF CARE

Clean Environment, No Odors

WAS
EC.02.06.01 EP 20

→

NOW
PE.01.01.01 EP 3

WHAT SURVEYORS FOUND

- Dust on equipment, vents, monitors, ceiling tiles, warmers, refrigerators, and high and low surfaces across EDs, ICUs, pharmacies, and kitchens.
- Unsanitary kitchen spaces and inconsistent cleaning workflows.
- Furnishings and equipment not safe or in good repair.
- Growth around drains and dirty utility rooms.
- This is where surveyors score all soiled and dirty items.

FINDING 04 | UTILITY SYSTEMS

Non-High Risk Utility System Testing

WAS
EC.02.05.05 EP 6

→

NOW
PE.04.01.01 EP 2

WHAT SURVEYORS FOUND

- Electrical panels, line isolation monitors, and disconnect switches blocked by carts, bins, equipment, and furniture across ORs, storage rooms, hallways, and kitchens.
- Electrical panels left unlocked in public or semi-public spaces such as waiting rooms, corridors, and nurse stations, allowing unauthorized access.
- Exposed wiring and uncovered junction boxes above ceilings, in mechanical rooms, and in patient care corridors.
- No GFCI within 6 feet of a sink or ice machine.

FINDING 05 | FIRE AND LIFE SAFETY

NFPA Automatic Extinguishment

WAS
LS.02.01.35 EP 14

→

NOW
PE.03.01.01 EP 3

WHAT SURVEYORS FOUND

- Extinguishers and sprinkler heads blocked by desks, carts, furniture, racks, or equipment in supply rooms, kitchens, mechanical rooms, and hallways.
- Misaligned sprinkler heads, mixed head types in one compartment, and nozzles not aimed at the hazard area.
- Pneumatic tube penetrations through a fire-rated wall left unprotected.
- Missing ceiling tiles or gaps over 1/8 inch around pipes and conduits.
- Unsealed penetrations in fire-rated walls and ceilings, including new conduit and IT cabling resting on sprinkler piping.
- Corridor clutter blocking egress and missing tethers on kitchen gas appliances.

FINDING 06 | FIRE AND LIFE SAFETY

Documentation of Fire Protection Equipment Maintenance

WAS
EC.02.03.05 EP 28

→

NOW
PE.04.01.01 EP 2

WHAT DOCUMENTATION MUST INCLUDE

- The activity title, completion date, and required frequency.
- The inspector name and contact information.
- Inspector license information on file.
- An itemized inventory of every device inspected.
- The applicable NFPA standard referenced in the current EC standard.

FINDING 07 | UTILITY SYSTEMS

Air Flow, Pressure, Temperature, and Humidity in Critical Spaces

WAS
EC.02.05.01 EP 15

→

NOW
PE.04.01.01 EP 3

WHAT SURVEYORS FOUND

- Rooms requiring positive or negative pressure not held in the correct relationship.
- Humidity must stay between 30% and 60%.
- Temperatures out of range; must align with NFPA 99 and ASHRAE 170.
- A categorical waiver down to 20% is allowed only with a completed risk assessment.

FINDING 08 | UTILITY SYSTEMS

Power Strips (RPTs) in the Patient Care Vicinity

WAS
EC.02.05.01 EP 23

→

NOW
PE.04.01.01 EP 1

WHAT SURVEYORS FOUND

- Power strips within 6 feet of the patient care vicinity (bed, stretcher, exam table) must be UL 1363A or UL 60601-1.
- Wall-mounted RPTs are not permitted; strips are for mobile equipment only.
- These strips must be permanently affixed to the mobile device they serve.
- Strips outside the patient vicinity must meet UL 1363 requirements.

FINDING 09 | FIRE AND LIFE SAFETY

Fire Drills

WAS
EC.02.03.03 EP 3

→

NOW
PE.03.01.01 EP 3

WHAT SURVEYORS FOUND

- Drills run at expected times; keep at least one hour between drills on the same shift.
- No evidence of simulated activity or alarm signal transmission.
- No evidence of one drill per shift, per quarter.
- Drill spacing not followed; use a 90-day cycle from the previous drill with a plus or minus 10-day allowance.
- CMS requires confirmation that the monitoring service received the alarm.

FINDING 10 | FIRE AND LIFE SAFETY

Sprinkler Systems Do Not Support Other Items

WAS
LS.02.01.35 EP 4

→

NOW
PE.03.01.01 EP 3

WHAT SURVEYORS FOUND

- Low-voltage cabling in any contact with sprinkler piping is a deficiency.
- Conduit and piping must not support other building systems.
- Ceilings and ductwork must not be supported by sprinkler piping.

FINDING 11 | FIRE AND LIFE SAFETY

Fire Barrier Penetration Seals

WAS
LS.02.01.10 EP 14

→

NOW
PE.03.01.01 EP 3

WHAT SURVEYORS FOUND

- Pipes, conduits, cable trays, and ductwork through fire-rated barriers often left unsealed or sealed incorrectly.
- Follow the UL listed assembly for each barrier penetration.
- Scab patches, sheetrock mounted over penetrated sheetrock, are not compliant.
- Penetrations must use compliant fire-rated sealants or approved firestop systems.
- Non-compliant materials such as expanding polyurethane foam and non-fire-rated caulking were used.

FINDING 12 | FIRE AND LIFE SAFETY

Fire Rated Door Requirements

WAS
LS.02.01.10 EP 11

→

NOW
PE.03.01.01 EP 3

WHAT SURVEYORS FOUND

- Doors not closing or latching.
- Improperly rated doors: missing or painted labels, and ratings that do not match the opening, such as a 45-minute door in a 2-hour opening.
- Physical deficiencies such as gaps, plates over 16 inches, and unsealed holes.
- Doors propped open with wedges or objects that defeat the door function.

FINDING 13 | FIRE AND LIFE SAFETY

Sprinkler Maintenance

WAS
LS.02.01.35 EP 5

→

NOW
PE.03.01.01 EP 3

WHAT SURVEYORS FOUND

- Missing escutcheon plates and gaps around heads.
- Dust, debris, or rust on sprinkler heads.
- Corrosion, paint, or ice buildup, all non-compliant with NFPA standards.

FINDING 14 | FIRE AND LIFE SAFETY

Ceiling Membrane Integrity

WAS
LS.02.01.34 EP 9

→

NOW
PE.03.01.01 EP 3

WHAT SURVEYORS FOUND

- Unsealed penetrations and missing tiles with gaps over 1/8 inch.
- Gaps create risk to fire suppression and smoke detection.
- The ceiling membrane is part of the rated assembly and must stay continuous.

FINDING 15 | UTILITY SYSTEMS

Non-Critical Pressure Relationships

WAS
EC.02.05.01 EP 16

→

NOW
PE.04.01.01 EP 3

WHAT SURVEYORS FOUND

- Incorrect pressure in non-critical areas such as clean and dirty utility rooms, linen storage, and soiled linen areas.
- Temperature, humidity, and air changes per hour out of range; see ASHRAE 170 in effect during construction.
- Missing or outdated records of air exchanges, performance testing, environmental monitoring, and corrective action.

FINDING 16 | UTILITY SYSTEMS

Cylinder Handling Policy

WAS		NOW
EC.02.05.09 EP 12	→	PE.04.01.01 EP 1

WHAT SURVEYORS FOUND

- Unsecured gas cylinders.
- Improper labeling and segregation; signage must follow NFPA standards.
- Cylinders stored outdoors without weather protection or placed directly on the floor.

FINDING 17 | UTILITY SYSTEMS

Emergency Power System Testing

WAS
EC.02.05.07 EP 1 + EP 6

→

NOW
PE.04.01.01 EP 2 + PE.04.01.03 EP 3

WHAT SURVEYORS FOUND

- No monthly testing of battery-powered egress lighting.
- Generator testing is required weekly and monthly.
- Missed testing timeframes for the emergency generator.
- The annual generator test is due within plus or minus 30 days of the last service date.

FINDING 18 | UTILITY SYSTEMS

Water Management Plan

WAS
EC.02.05.02 EP 2

→

NOW
PE.04.01.05 EP 1

WHAT SURVEYORS FOUND

- No water management plan was implemented.
- No documentation of water temperature checks required by the plan.
- The existing plan was not followed.
- No annual review of the water management plan (EP 4).

FINDING 19 | FIRE AND LIFE SAFETY

Interim Life Safety Measures (ILSM)

WAS
LS.01.02.01 EP 2

→

NOW
PE.03.01.01 EP 8 + PE.03.02.01 EP 2

WHAT SURVEYORS FOUND

- ILSM applies when Life Safety Code deficiencies cannot be corrected immediately or during construction.
- No evidence that ILSM was implemented.
- ILSM compensates for reduced life safety protection until full correction.

FINDING 20 | HAZARDOUS MATERIALS

Hazardous Chemical Management

WAS
EC.02.02.01 EP 5

→

NOW
PE.02.01.01 EP 4

WHAT SURVEYORS FOUND

- Safety data sheets not readily available to staff where chemicals were stored.
- Labeling of hazardous materials not evident.
- Sharps containers overfilled beyond the fill line.
- Eyewash stations blocked, untested, or missing, with no risk assessment.
- Secondary containers without proper labeling.

FINDING 21 | HAZARDOUS MATERIALS

DOT Training

WAS
EC.02.01.01 EP 11

→

NOW
PE.02.01.01 EP 2

WHAT SURVEYORS FOUND

- No DOT training on file for employees signing hazardous waste manifests.
- Staff who sign or certify hazardous waste manifests must hold current DOT hazardous materials training.
- Training must be documented and kept current.

FINDING 22 | FIRE AND LIFE SAFETY

Fire Pump

WAS
EC.02.06.01 EP 26

→

NOW
PE.04.01.01 EP 2

WHAT SURVEYORS FOUND

- The fire pump was not maintaining one drop per second.
- Continuous low flow of one drop per second prevents stagnation and verifies readiness.

FINDING 23 | ENVIRONMENT OF CARE

ICRA and PCRA Assessments

WAS		NOW
EC.02.06.05 EP 2	→	PE.01.01.01 EP 1

WHAT SURVEYORS FOUND

- The ICRA form posted outside the construction area was not up to date.
- Infection Control and Pre-Construction Risk Assessments must stay current and posted for active work.

FINDING 24 | FIRE AND LIFE SAFETY

Operating Room Fire Drill

WAS		NOW
EC.02.03.03 EP 7	→	PE.04.01.01 EP 1

WHAT SURVEYORS FOUND

- No annual fire exit drill completed for the OR or surgical suite.
- Surgical suites require their own annual fire exit drill, separate from general fire drills.

FINDING 25 | PROGRAMS

Workplace Violence Prevention Program

WAS
EC.02.01.01 EP 17

→

NOW
NPG.02.04.01 EP 3

WHAT SURVEYORS FOUND

- No annual worksite analysis tied to the workplace violence prevention program.
- An annual worksite analysis is required to identify and reduce violence risks.

SURVEY READINESS · ACCREDITATION SERVICES

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