


Required Written Documentation (RWD)

This chapter provides you with a list of elements of performance (EPs) that require written documentation. You may find it useful to use this document as a checklist to maintain continuous compliance with the requirements. You should use this list to identify the EPs that require written documentation for your particular service. The following services appear in this chapter:*

- Medical/Dental Centers (page RWD-3)
- Ambulatory Surgical Centers (page RWD-8)
- Endoscopy (page RWD-13)
- Diagnostic/Therapeutic (page RWD-18)
- Diagnostic Sleep Centers (page RWD-23)
- Diagnostic Imaging Services (page RWD-26)
- Telehealth/Surgical (page RWD-31)
- Telehealth/Nonsurgical (page RWD-34)
- Urgent Care (page RWD-37)
- Convenient Care (page RWD-55)

The Joint Commission's focus is on performance and implementation rather than documentation. The standards, consequently, require documentation only when it is essential. The documentation icon——is used to identify data collection and documentation requirements that are in addition to information found in the clinical record. For example, the documentation icon is applied to an EP that requires a written procedure, but the icon is not applied to an EP that lists the required components of the clinical record. Other examples in which the documentation icon is applied are EPs that require a policy, a written plan, a license, evidence of testing, data, performance improvement reports, medication labels, Material Safety Data Sheets, and meeting minutes. Documentation can be on paper or in an electronic format.

While documentation is important, the primary emphasis of the survey will be on how your organization carries out the functions described in the *Comprehensive Accreditation Manual for Ambulatory Care (CAMAC)*. The surveyors may use a combination of data

* Effective immediately.

sources, including interviews with leaders of the organization, staff, patients, and patient family members; visits to patient care settings; and review of documentation to arrive at an assessment of the organization's compliance with a standard.

Note: *This list is meant to be a guide for you in preparing for the survey. The names and format of specific documents may vary from organization to organization.*

Ambulatory Surgical Centers

Accreditation Participation Requirements (APR)

APR.01.03.01

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APR.03.01.01

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APR.05.01.01

EP 1

Environment of Care (EC)

EC.01.01.01

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EC.02.05.01

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EC.02.05.05

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EC.02.05.07

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EC.02.02.01

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EC.02.03.01

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EC.02.03.05

EP 1

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EC.02.04.01

EP 2

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EC.02.04.03

EP 2

EP 3

EP 4

EC.02.05.09

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Emergency Management (EM)

EM.02.01.01

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EP 4

EM.02.02.13

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EM.02.02.15

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EP 4
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EM.03.01.03

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Human Resources (HR)

HR.01.02.05

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HR.01.05.03

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HR.02.01.03

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HR.01.04.01

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HR.01.06.01

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HR.02.01.05

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HR.01.07.01

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HR.02.02.01

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* Effective immediately.

Infection Prevention and Control (IC)

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IC.01.04.01

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Information Management (IM)

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IM.02.01.03

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Leadership (LD)

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LD.04.01.03

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LD.04.02.03

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LD.03.01.01

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LD.04.01.05

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LD.04.03.09

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LD.04.01.01

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* Effective January 1, 2010.

Life Safety (LS)

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Medication Management (MM)

MM.01.01.01

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MM.04.01.01

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MM.06.01.01

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MM.01.01.03

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MM.06.01.05

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MM.01.02.01*

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MM.07.01.03

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MM.02.01.01

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MM.05.01.17

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National Patient Safety Goals (including the Universal Protocol)

NPSG.08.04.01

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UP.01.01.01

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UP.01.02.01*

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* Effective January 1, 2010.

Provision of Care, Treatment, and Services (PC)

PC.01.02.01

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EP 2

PC.01.02.09

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PC.03.02.03

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PC.01.02.03

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PC.02.01.07

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PC.04.01.01

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PC.02.01.09

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Performance Improvement (PI)

PI.01.01.01

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Record of Care, Treatment, and Services (RC)

RC.01.03.01

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RC.01.05.01*

EP 1*

RC.02.03.07

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Rights and Responsibilities of the Individual (RI)

RI.01.01.01

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RI.01.03.03

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RI.01.05.01

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RI.01.01.03

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RI.01.03.05

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RI.01.07.01

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* Effective immediately.

Transplant Safety (TS)

TS.03.01.01

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TS.03.02.01

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Waived Testing (WT)

WT.01.01.01

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WT.03.01.01

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WT.04.01.01

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WT.05.01.01

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WT.02.01.01

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EP 2

Endoscopy

Accreditation Participation Requirements (APR)

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APR.05.01.01

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