The Centers for Medicare & Medicaid Services (CMS) final rule “Reform of Hospital and Critical Access Hospital Conditions of Participation [CoPs],” issued in May, resulted in CoP changes that became effective July 16, 2012 (see July 2012 Perspectives, page 6, for an article highlighting the changes). After reviewing these changes, The Joint Commission developed some new and revised elements of performance (EPs) for—and deleted others from—the hospital and critical access hospital programs. However, because many of the CoP revisions support The Joint Commission’s existing standards and survey process, changes to Joint Commission requirements were not necessary in all cases and resulted in the elimination of requirements in other cases.

These revisions address the following issues:

- Deletion of the requirement regarding qualifications of staff administering blood transfusions and intravenous medications (HR.01.02.01)
- Hospital-wide quality assessment (LD.01.02.01; MM.07.01.03)
- The inclusion of a doctor of podiatric medicine to be responsible for the organization and conduct of the medical staff (LD.01.05.01)
- Responsibility for outpatient services (LD.04.01.05)
- Pre-printed and electronic standing orders, order sets, and protocols for medication orders (MM.04.01.01)
- Verbal or written medication or other orders of a practitioner other than a licensed independent practitioner (MM.05.01.07; PC.02.01.03)
- Reporting requirements regarding death of a patient in restraints (PC.03.05.19)
- Authentication of a verbal or written order by the ordering practitioner or another practitioner who is responsible for the care of the patient (RC.01.02.01)
- Elimination of the requirement for authentication of a verbal order within 48 hours (RC.02.03.07)
Elimination of the requirement for critical access hospitals to directly provide diagnostic and therapeutic services, laboratory services, radiology services, and emergency procedures (LD.04.03.01). These services can now be provided directly or through arrangement.

For psychiatric and rehabilitation distinct part units in critical access hospitals to meet the hospital CoPs, the addition of two EPs related to self-administration of medication that are currently in the hospital accreditation manual but not in the critical access hospital accreditation requirements (MM.06.03.01)

The new and revised requirements became effective September 1, 2012, and have been published in the recently mailed 2012 Update 2 to the Comprehensive Accreditation Manual for Hospitals and the Comprehensive Accreditation Manual for Critical Access Hospitals. They will also appear in the E-dition® for both manuals this fall. To view the new and revised requirements, visit http://www.jointcommission.org/assets/1/18/PREPUB-08-27-2012-HAP-deeming.pdf for hospitals and http://www.jointcommission.org/assets/1/18/PREPUB-08-27-2012-CAH-deeming.pdf for critical access hospitals.

Please note that any additional changes based on CMS final review and approval will be communicated in future issues of Perspectives and Joint Commission Online. For more information, contact Laura Smith, associate project director, Department of Standards and Survey Methods, at lsmith@jointcommission.org or 630-792-5098.