GoToWebinar Housekeeping

Your Participation

Join audio:
- Choose “Mic & Speakers” to use VoIP
- Choose “Telephone” and dial using the information provided

Questions/Comments:
- Submit questions and comments via the Questions panel.

Note: Today’s presentation is being recorded and will be posted on the Joint Commission website.
Preparing for Your First Triennial Re-survey

What to Expect and Lessons Learned
Presenters

From The Joint Commission:

Julia Finken BSN, MBA, CPHQ, CSSBB, Associate Director, Home Care
Dea Greathouse RN, MSHA, Associate Director, Standards Interpretation Group
Joe Misenko, Associate Director, Intra-cyle Monitoring

Guest Presenters

Rachel Shepherd, RN, Director of Clinical Services for Caring Angels Home Health
Kari Wooten, RN, BSN, Clinical Director, Brightstar

February 17, 2015
The Joint Commission

- Founded in 1951, The Joint Commission accredits and certifies more than 20,500 health care organizations and programs in the United States
- An independent, not-for-profit organization, The Joint Commission is the nation’s oldest and largest standards-setting and accrediting body in health care.
- Home Care Accreditation was established in 1986
- Home Care Accredited Segments include:
  - Hospice
  - Home Health
  - Personal Care/Support Services
  - DME
  - Pharmacy
Objectives

 Identify three actions to take to prepare for your re-survey
 Identify Potential Gaps in Continuous Readiness
 Name three TJC Tools to assist your organization to maintain ongoing compliance
Take a Moment
Take a Moment (cont)

- Identify key people to perform the review and assess staff compliance
- Review the requirements for annual review of specific policies i.e. Emergency Management
- Focus on implementation of the structure and foundation that was laid with the first/previous survey
Take a Moment

- Determine that you have the updated manual with the latest inserts, or
- Access the E-dition for the most current version
- Have a current Survey Activity Guide 2015
- Review the previous report findings and determine that you are still in compliance with your submitted ESC’s.
Leadership
Leadership

- Prepare an updated organizational chart
- Make sure the Professional Advisory Committee has the full compliment of members and has met according to your policy time frame.
- Meeting minutes should be documented with content, not agendas.
Leadership (cont)

- Make sure that all organization licenses and permits are current
- Be able to provide budgets for the previous three years
- Review contracts for content against requirements and be able to demonstrate evaluation of contracts (LD.04.03.09)
- Review marketing materials for content
Performance improvement
Performance Improvement

- Describe how Performance improvement opportunities were determined from data and analysis
- Review the prioritized performance improvement projects
- The projects should show the identification of the issue, actions taken, evaluation, and improvement
Be able to demonstrate a performance improvement project that:

- was undertaken
- demonstrated improvement
- reprioritized if necessary
- sustained for at least 3 quarters
Robust Process Improvement
Conducting Vulnerability Assessments Through Tracer Activity
Provision of Care

- Perform Individual Tracers with all disciplines to determine compliance in the field with hand hygiene, bag technique, education and specialty care such as wound and infusion care
- Make sure staff have supplies and equipment that are to be provided by the organization
Provision of Care (cont)

- Home health or Hospice aide tracers
- Care plan is current and specific with duties on frequency or type
- Visit notes reflect what is ordered on the plan of care
- Perform supervisory visits every 14 days after start of aide service
Provision of Care

PC.01.03.01 – The plan of care

- Individualized for each patient
- Pertinent diagnosis and related medications
- Interventions specific to the patients needs
- Goals that are reasonable and measurable for the patient and services being provided.
Provision of Care

PC.02.01.03 – providing care according to orders as required by law/regulation

- Top scored standard in 2014 at 41%
- Staff not obtaining appropriate orders for care from physician
- Staff not following orders when delivering care
- Orders are incomplete
Infection Prevention and Control
Infection Prevention and Control

26% IC.02.04.01 The organization offers vaccination against influenza to licensed independent practitioners and staff.

- Establishes annual vaccination program
- Education
- Provides vaccine at accessible sites
- Plan to improve influenza vaccination rates
- Sets incremental goals consistent with achieving 90% by 2020
- Written methodology to establish influenza vaccination rates
- Evaluates reasons for declinations at least annually
- Rates improve annually based on annual goals
- Vaccination rate data is provided to leaders, LIPs, staff
Infection Control (cont)

- 20% IC.02.01.01 The organization implements the infection prevention and control activities it has planned.
  - Infection risks according to your service area, type of care provided, and patients
  - Prioritize those risks
  - Monitor hand hygiene goal
  - Monitor influenza vaccination goal
Human Resources
Human Resources

- 24% HR.01.06.01 Staff are competent to perform their responsibilities.
  - Competency applies to all direct care disciplines, including volunteers and contract staff
  - Aides must be observed with a patient upon hire, prior to performing care
  - Different methods of assessing competency
Human Resources

23% HR.01.02.05 The organization verifies staff qualifications.

- Licensure, certification, registration verified with primary source upon hire and at time of renewal and document
- Verify and document education and experience as required by job requirements
- Criminal background check when required by law, regulation and organization
- Health screening per law, regulation and organization policy and documented
- The organization maintains copies or other verification of licenses, registrations, and certifications for personnel who provide patient care, treatment, or services.
Record of Care, Treatment, and Services
Record of Care

- 24% RC.02.01.01 The patient record contains information that reflects the patient’s care, treatment, or services.
  - EP 2 – many bullet points

- RC.01.04.01 – The organization audits its records.
  - Review for accuracy, legibility, and completion on time
  - Assists you in identifying improvement areas
Top Standards Compliance Issues for First Half of 2014 Home Care

- **41% PC.02.01.03** The organization provides care, treatment, or services in accordance with orders or prescriptions, as required by law and regulation.
- **28% PC.01.03.01** The organization plans the patient’s care.
- **26% IC.02.04.01** The organization offers vaccination against influenza to licensed independent practitioners and staff.
- **24% HR.01.06.01** Staff are competent to perform their responsibilities.
- **24% RC.02.01.01** The patient record contains information that reflects the patient’s care, treatment, or services.
Top Standards Compliance Issues for First Half of 2014 Home Care

- **23% HR.01.02.05** The organization verifies staff qualifications.
- **20% IC.02.01.01** The organization implements the infection prevention and control activities it has planned.
- **19% NPSG.07.01.01** Comply with either the current Centers for Disease Control and Prevention (CDC) hand hygiene guidelines or the current World Health Organization (WHO) hand hygiene guidelines.
- **18% EM.03.01.03** The organization evaluates the effectiveness of its Emergency Operations Plan.
- **18% LS.02.01.10** Building and fire protection features are designed and maintained to minimize the effects of fire, smoke, and heat.
Organization Preparation and Assessment

- Methods and Styles Vary
  - Time and Resources
  - Staff Involvement
  - Organization is Key

- Focus Assessment on Most Important Processes (Use FSA)

- Prioritize, Prioritize, Prioritize
Continuous Readiness and Improvement Resources

- Survey Report
- Free Webinars and Webinar Replays
- Standards Interpretation Group (SIG)
- Dedicated Account Executive (AE)
- FSA Tool – Focused Standard Assessment
- Perspectives (Top 10 Standards)
- Home Care Bulletin
Extranet Site
Continuous Readiness

ARE WE READY?
Intracycle Monitoring (ICM) Profile

ICM Goal

To help organizations identify and proactively manage risk

- By focusing activities on identified risk points
- By providing tools/resources/solutions for addressing these risk points
Extranet Site
### What's New

- FAQs -- ICM-FSA
- Perspectives - Current Issue Topics
- ICM Profile Review Form
- Instructions - ICM Profile Review Form
- Program Specific Risk Icon Standards & EPs

### Your Current Intracycle Activities

**General**
- Next Touchpoint Due: 03/06/2015
- Last Touchpoint Submitted: 03/26/2014

**Lab**
- Next Touchpoint Due: 04/19/2016
- Last Touchpoint Submitted: 04/23/2014

### If You Need Assistance

**General**
- Mary Armstrong
  - marmstrong@jointcommission.org
  - (630) 792 - 5714
- Stephanie Scott
  - sscott@jointcommission.org
  - (630) 792 - 5844

**Lab**
- Complimentary ICM Profile Overview Webinar
  - Click Here for schedule and access information

### ICM Touchpoint Details

- Conference Call Instructions
- Enter Conference Call Contacts

### General Information

- ICM Overview Slides with Notes
- ICM Submission Options
- After an ICM Option 2 Survey
- ICM Submission Validation Requirements
- ICM Option 2/3 Survey Agenda

### Organization ICM Contact(s)

**General**
- Jane Doe
  - jdoe@organization.org
  - 555-555-5555

**Lab**
- Mary Roberts
  - mroberts@organization.org
  - 555-555-1234

**Main Telephone:** 555-555-0000

**Organization Website**

**Update Contacts/Access**
The Joint Commission
Accreditation
Home Care

Dashboard

What's New
- FAQs -- ICM-FSA
- Perspectives - Current Issue Topics
- ICM Profile Review Form
- Instructions - ICM Profile Review Form
- Program-Specific Risk Icon Standards & EPs

Your Current Intracycle Activities

General
- Next Touchpoint Due: 03/06/2015
- Last Touchpoint Submitted: 03/26/2014
- Start General Profile

Lab
- Next Touchpoint Due: 04/19/2016
- Last Touchpoint Submitted: 04/23/2014
- Start Lab Profile

If You Need Assistance

Contact your Account Executive
- Mary Armstrong
  - marmstrong@jointcommission.org
  - (630) 792 - 5714
- Stephanie Scott
  - sscott@jointcommission.org
  - (630) 792 - 5844

Complimentary ICM Profile Overview Webinar
Click Here for schedule and access information

ICM Touchpoint Details
- Conference Call Instructions
- Enter Conference Call Contacts

To access Adobe Connect for your TouchPoint call, click this link:
TouchPoint Call

General Information
- ICM Overview Slides with Notes
- ICM Submission Options
- After an ICM Option 2 Survey
- ICM Submission Validation Requirements
- ICM Option 2/3 Survey Agenda

Organization ICM Contact(s)

- General
  - Jane Doe
  - jdoe@organization.org
  - 555-555-5555

- Lab
  - Mary Roberts
  - mroberts@organization.org
  - 555-555-1234

Main Telephone: 555-555-0000
Organization Website
Update Contacts/Access

© Copyright, The Joint Commission
## Accreditation Status

**Last EAPP Submission Date (General):** 05/12/2014  
**Last EAPP Update to Central Database (General):** 05/12/2014

### Accreditation Program(s)

<table>
<thead>
<tr>
<th>Accreditation Program(s)</th>
<th>Accreditation Decision</th>
<th>Deemed Status</th>
<th>Accreditation Decision Date</th>
<th>Last Full Survey Date</th>
<th>Last Onsite Survey Date</th>
<th>Certification Add On</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home Care</td>
<td>Accredited</td>
<td>Yes</td>
<td>04/13/2012</td>
<td>04/12/2012</td>
<td>04/12/2012</td>
<td></td>
</tr>
</tbody>
</table>

### Accreditation Events

<table>
<thead>
<tr>
<th>Accreditation Program(s)</th>
<th>Cycle</th>
<th>Events</th>
<th>Status</th>
<th>Due Date</th>
<th>Requirement For Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home Care</td>
<td>2012</td>
<td>Unannounced Full Event</td>
<td>Completed</td>
<td></td>
<td>View Report</td>
</tr>
<tr>
<td>Home Care</td>
<td>2012</td>
<td>60-day Evidence of Standards Compliance</td>
<td>Completed</td>
<td></td>
<td>View Report</td>
</tr>
<tr>
<td>Home Care</td>
<td>2009</td>
<td>Initial Unannounced Full Event</td>
<td>Completed</td>
<td></td>
<td>View Report</td>
</tr>
<tr>
<td>Home Care</td>
<td>2009</td>
<td>45-day Evidence of Standards Compliance</td>
<td>Completed</td>
<td></td>
<td>View Report</td>
</tr>
<tr>
<td>Home Care</td>
<td>2009</td>
<td>Measure of Success</td>
<td>Completed</td>
<td></td>
<td>View Report</td>
</tr>
<tr>
<td>Home Care</td>
<td>2009</td>
<td>60-day Evidence of Standards Compliance</td>
<td>Completed</td>
<td></td>
<td>View Report</td>
</tr>
</tbody>
</table>
### Accreditation Status

**Help**

For more information on the Accreditation Status tab, [click here](#).

### Useful Links

**Solutions Tools**

- Leading Practice Library
- Core Measures Solutions Exchange
- Targeted Solutions Tool

**High Reliability**

- Health Care-Associated Infections Portal
- Transitions of Care Portal
- Accreditation Quality Report
- Electronic Application (E-App)
- Customer Value Assessment
- Sample ICM Survey Agenda Option 2 and 3
- JCR Products and Services

### Accreditation Program(s) Overview

<table>
<thead>
<tr>
<th>Accreditation Program(s)</th>
<th>Accreditation Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home Care</td>
<td>Accredited</td>
</tr>
</tbody>
</table>

### Accreditation Event Report

<table>
<thead>
<tr>
<th>Accreditation Program(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home Care</td>
</tr>
<tr>
<td>Home Care</td>
</tr>
<tr>
<td>Home Care</td>
</tr>
<tr>
<td>Home Care</td>
</tr>
<tr>
<td>Home Care</td>
</tr>
</tbody>
</table>

### Quality Check Summary Page

- Accreditation Quality Report
- Accreditation Due Date: 04/12/2012
- Certification Add On: View Report

---

© Copyright, The Joint Commission
Accreditation Program Specific Risk Areas

Risk Areas Identified by The Joint Commission

Joint Commission identified risk areas are established at the accreditation program level. These high risk areas and the related standards are not based on any information specific to your organization. Standards and elements of performance (EPs) associated with each risk area are denoted with the "R" risk icon in the FSA tool. To access an Excel spreadsheet with program-specific tabs listing the current R-icon standards and EPs, click here.

- Home Care
- Contract Services
- Coordination of Care
- Disparities in Care, Health Equity
- Fraud
- Information Technology
- Patient Centered Communication
Accreditation Program Specific Risk Areas

Risk Areas Identified by The Joint Commission

Joint Commission identified risk areas are established at the accreditation program level. These high risk areas and the related standards are not based on any information specific to your organization. Standards and elements of performance (EPs) associated with each risk area are denoted with the “R” risk icon in the FSA tool. To access an Excel spreadsheet with program-specific tabs listing the current R-icon standards and EPs, click here.

- Home Care
- Contract Services
- Coordination of Care
- Disparities in Care
- Fraud
- Information Technology
- Patient Centered Care

LD 04.01.05-The organization effectively manages its programs, services, sites, or departments.

PC 01.03.01-The organization plans the patient’s care.

PC 02.01.03-The organization provides care, treatment, or services in accordance with orders or prescriptions, as required by law and regulation.

PC 02.01.05-The organization provides interdisciplinary, collaborative care, treatment, or services.

PC 02.02.01-The organization coordinates the patient’s care, treatment, or services based on the patient’s needs.

PC 04.01.01-The organization has a process that addresses the patient’s need for continuing care, treatment, or services after discharge or transfer.

PC 04.01.03-The organization discharges or transfers the patient based on his or her assessed needs and the organization’s ability to meet those needs.

PC 04.01.05-The organization discharges or transfers a patient, it informs and educates the patient about his or her follow-up care, treatment, or services.

PC 04.02.01-When a patient is discharged or transferred, the organization gives information about the care, treatment, or services provided to the
**Organization Specific Risk Areas**

Risk areas and standards listed in this section are based on data specific to your organization. Standards listed under Past Survey Findings (current accreditation cycle surveys) are denoted with the “R” risk icon in the FSA tool.

**Past Survey Findings**

<table>
<thead>
<tr>
<th>Event(s)</th>
<th>Standard Label</th>
<th>Standard Text</th>
<th>Impact Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Full Event</td>
<td>HR.01.07.01</td>
<td>The organization evaluates staff performance.</td>
<td>Indirect</td>
</tr>
</tbody>
</table>

**Organization Identified Risk Areas**

List any risk areas that are important/specific to your organization.
Integrated into the Manuals, E-dition, AMP, & FSA Tool

All of these products display the R-icon at the EP level for three of the four major risk-focused categories:

1. National Patient Safety Goals
2. Accreditation program-specific risk area standards
3. Selected direct/indirect impact standards

In addition, the FSA Tool will use the R icon to identify the fourth risk category:

4. RFI standards from current cycle survey events.

Risk Icon

Risk
- Proximity to patient
- Probability of harm
- Severity of harm
- Number of patients at risk
The Medicare-Medicaid Certified Long Term Care (LT2) accreditation program will be retired as of January 1, 2016. Listed below are three links to the standards for Nursing Care Center accreditation program options available for your organization to convert to:

- [Nursing Care Accreditation - 2014 Update 2](#)
- [Post-Acute Care Certification - 2014 Update 1](#)
- [Memory Care Certification - 2014 Update 1](#)
Access the Focused Standards Assessment Tool

FSA Tool User Guide

Upload From AMP

- The AMP Upload process only uploads data from AMP into the Open FSA tool.
- After uploading, access the Open FSA tool and verify data uploaded as you expected.
- Exit the FSA tool and access the ICM Profile Submission tab to complete the submission process.

AMP Export-FSA Upload Guide
You must score all EPs for a standard in order to aggregate a standard-level score.

Accreditation Program: Home Care  View: All
Chapter: Leadership
Chapter Features:
Score All Standards: Compliant  Score All Standards: Not Applicable  Score All Standards: Not Scored

<table>
<thead>
<tr>
<th>Options</th>
<th>Score</th>
<th>Tier</th>
<th>Doc</th>
<th>Risk</th>
<th>CMS</th>
<th>Std Label</th>
<th>Standard Text</th>
</tr>
</thead>
<tbody>
<tr>
<td>Show Standard Detail</td>
<td>✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>CMS LD.01.01.01</td>
<td>The organization has a leadership structure.</td>
</tr>
<tr>
<td>Show Standard Detail</td>
<td>✔️</td>
<td>❌</td>
<td>□</td>
<td></td>
<td></td>
<td>CMS LD.01.03.01</td>
<td>Governance is ultimately accountable for the safety and quality of care, treatment, or services.</td>
</tr>
<tr>
<td>Show Standard Detail</td>
<td>✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>CMS LD.01.04.01</td>
<td>A chief executive manages the organization.</td>
</tr>
<tr>
<td>Show Standard Detail</td>
<td>✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>LD.01.07.01</td>
<td>Individual leaders have the knowledge needed for their roles in the organization or they seek guidance to fulfill their roles.</td>
</tr>
<tr>
<td>Show Standard Detail</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>LD.02.01.01</td>
<td>The mission, vision, and goals of the organization support the safety</td>
</tr>
</tbody>
</table>
Accreditation Program: Home Care
Chapter: Leadership

Standard Details Page

Accreditation Program: Home Care
Chapter: Leadership

View: All

Standard Features:
Score All EPs: Compliant  Score All EPs: Not Applicable  Score All EPs: Not Scored

LD.01.03.01 Governance is ultimately accountable for the safety and quality of care, treatment, or services.

Governance’s ultimate responsibility for safety and quality derives from its legal responsibility and operational authority for organization performance. In this context, governance provides for internal structures and resources, including staff, that support safety and quality.

<table>
<thead>
<tr>
<th>EP Scores</th>
<th>SC</th>
<th>Tier</th>
<th>Doc</th>
<th>MOS</th>
<th>Risk</th>
<th>CMS</th>
<th>Elements of Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Satisfactory Compliance</td>
<td>A</td>
<td>4</td>
<td>D</td>
<td></td>
<td></td>
<td>CMS</td>
<td>1. Governance defines in writing its responsibilities.</td>
</tr>
<tr>
<td>Satisfactory Compliance</td>
<td>A</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2. Governance provides for organization management and planning.</td>
</tr>
<tr>
<td>Satisfactory Compliance</td>
<td>A</td>
<td>4</td>
<td>D</td>
<td></td>
<td></td>
<td></td>
<td>3. Governance approves the organization’s written scope of services. (See also PC.01.01.01, EP 7)</td>
</tr>
<tr>
<td>Satisfactory Compliance</td>
<td>A</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>4. Governance selects the chief executive.</td>
</tr>
<tr>
<td>Satisfactory Compliance</td>
<td>A</td>
<td>3</td>
<td></td>
<td></td>
<td>R</td>
<td></td>
<td>5. Governance provides for the resources needed to maintain safe, quality care, treatment, or services.</td>
</tr>
<tr>
<td>Satisfactory Compliance</td>
<td>A</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>6. Governance works with other leaders to annually evaluate this.</td>
</tr>
</tbody>
</table>
Back to My Dashboard | ICM History

Submission

Click here to view complete ICM Submission Option descriptions

SHARING OPTIONS

While surveyors assigned to conduct regular surveys have access to your organization's ICM Profile including the Focused Standards Assessment (FSA) Submission History, they do not have access to submitted FSA scoring data unless you authorize such access.

May surveyors conducting regular accreditation surveys have access to submitted FSA data (historical, current accreditation cycle FSA submissions only)?

☐ Yes ☐ No

ICM SUBMISSION OPTION (Select One)

☐ FULL (self-assessed FSA data IS INCLUDED in the submission)

☐ OPTION 1 (self-assessed FSA data IS NOT INCLUDED in the submission)

The organization attests that it has self-assessed its compliance with at least the minimum risk/required standards identified by The Joint Commission required for submission, developed Plan(s) of Action for identified areas of standards non-compliance, and identified Measures of Success for all such standards.

☐ OPTION 2 (on-site educational survey with documented findings)

Following the on-site survey event your organization will have 30 days to develop and submit plans of action for any findings documented by the surveyor. You may request a conference call with a SIG reviewer to discuss your submitted plans of action.

☐ OPTION 3 (on-site educational survey without documented findings)

The on-site survey event completes the process.
### Dashboard

#### What's New
- FAQs -- ICM-FSA
- Perspectives - Current Issue Topics
- ICM Profile Review Form
- Instructions - ICM Profile Review Form
- Program-Specific Risk Icon Standards & EPs

#### Your Current Intracycle Activities

**General**
- Next Touchpoint Due: 03/06/2015
- Last Touchpoint Submitted: 03/26/2014

**Lab**
- Next Touchpoint Due: 04/19/2016
- Last Touchpoint Submitted: 04/23/2014

#### If You Need Assistance

**General**
- Mary Armstrong
- marmstrong@jointcommission.org
- (630) 792-5714

**Lab**
- Stephanie Scott
- sscott@jointcommission.org
- (630) 792-5844

Complimentary ICM Profile Overview Webinar [Click Here](#) for schedule and access information

### ICM Touchpoint Details

- Conference Call Instructions
- Enter Conference Call Contacts

### General Information

- ICM Overview Slides with Notes
- ICM Submission Options
- After an ICM Option 2 Survey
- ICM Submission Validation Requirements
- ICM Option 2/3 Survey Agenda

### Organization ICM Contact(s)

**General**
- Jane Doe
- jdoe@organization.org
- 555-555-5555

**Lab**
- Mary Roberts
- mroberts@organization.org
- 555-555-1234

**Main Telephone:** 555-555-0000

- Organization Website
- Update Contacts/Access

---

© Copyright, The Joint Commission
Guest Speaker Q&A

- What steps did you take to prepare for your resurvey that were critical to your success?
- How was the FSA Tool helpful in your preparation?
- What benefits did you derive from the ICM Consultative Call?
- What other Joint Commission resources did you utilize to prepare for your resurvey (e.g., Standards Help Group, Leading Practice Library, Standards Booster Pak, Perspectives Newsletter, Webinars, Bibliographies, other)?
Questions
Submitting Your Questions

Attendee Participation

- Please continue to submit your text questions and comments using the Questions Panel

Note: Today’s presentation is being recorded and will be posted on the Joint Commission website.
Home Care Team Contacts

Joint Commission Home Care Program
Help Desk: 630-792-5070 or homecare@jointcommission.org
www.jointcommission.org/accreditation/home_care.aspx

Margherita Labson
BSN, MSHSA, CPHQ, CCM, CGB
Executive Director
630-792-5284 or mlabson@jointcommission.org

Julia Finken
BSN, MBA, CPHQ, CSSBB
Associate Director
630-792-5283 or jfinken@jointcommission.org

Brenda Lamberti, BS
Business Development Specialist
630-792-5252 or blamberti@jointcommission.org

Account Executive
Standards Interpretation Help Desk: 630-792-5900
Joint Commission Resources: 877-223-6866 or www.jcrinc.com