

Prepublication Requirements

• Issued January 25, 2016 •

The Joint Commission has approved the following revisions for prepublication. While revised requirements are published in the semiannual updates to the print manuals (as well as in the online E-dition®), accredited organizations and paid subscribers can also view them in the monthly periodical The Joint Commission Perspectives®. To begin your subscription, call 800-746-6578 or visit <http://www.jcrinc.com>.



Community-Based Palliative Care Certification Option for Home Care

APPLICABLE TO HOME CARE

Effective July 1, 2016

HR.01.02.01

The organization defines staff qualifications.

Elements of Performance for HR.01.02.01

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| 27. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Program staff have palliative care education, experience, training, and/or certification consistent with the program's policies and its philosophy and scope of care, treatment, and services. (For more information, refer to HR.01.02.01, EPs 1 and 3) | <table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | C | | | |
| C | | | | | |
| 28. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: For programs that provide care for pediatric patients: Members of the interdisciplinary team have expertise in providing care for children. | <table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">A</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px; text-align: center;">⚠₃</td> </tr> </table> | A | | | ⚠ ₃ |
| A | | | ⚠ ₃ | | |
| 29. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: For programs that provide care for pediatric patients: Health care professionals with experience in the developmental stages and needs of infants, children, and adolescents perform and document the psychosocial and developmental assessment. | <table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px; text-align: center;">⚠₃</td> </tr> </table> | C | | | ⚠ ₃ |
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HR.01.02.07

The organization determines how staff function within the organization.

Elements of Performance for HR.01.02.07

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| 9. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Program staff are knowledgeable about their roles and responsibilities relative to patient safety in the home. | <table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | C | | | |
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Key: **A** indicates scoring category A; **C** indicates scoring category C; **D** indicates that documentation is required; **M** indicates Measure of Success is needed; **⚠** indicates an Immediate Threat to Health or Safety; **⚠** indicates situational decision rules apply; **⚠** indicates direct impact requirements apply; **Ⓡ** indicates an identified risk area

10. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program's core interdisciplinary team is comprised of the following:
- Physician(s) (doctor of medicine or osteopathy) who has specialized training in palliative care and/or hospice care; clinical experience in palliative medicine and/or hospice care; or is board-certified or board-eligible for certification in Hospice and Palliative Medicine
 - Registered nurse(s) or advanced practice nurse(s) who has training in palliative care and/or hospice care; clinical experience in hospice or palliative care; or one who has, or is eligible for, palliative care certification
 - Chaplain(s) who has training in palliative care and/or hospice care; experience in hospice or palliative care; or one who has or is eligible for board certification; or, a spiritual care professional(s)* who has training in palliative care and/or hospice care or experience in hospice or palliative care
- Note: The program may choose to have a full- or part-time chaplain or spiritual care provider on staff; they may utilize a chaplain or spiritual care provider from another program within the organization, such as the hospital or hospice; or, they may utilize chaplains and/or spiritual care providers in the local community, including parish nurses. The patient also has the right to involve his or her personal spiritual care provider (such as a pastor, priest, rabbi, or religious leader), rather than the program's chaplain.
- Social worker(s) who has training in palliative care and/or hospice care; experience in hospice or palliative care; or one who has, or is eligible for, palliative care certification
- Note: The program may choose to have a full- or part-time social worker on staff; they may utilize a social worker from another program within the organization, such as the hospital or hospice; or, they may utilize social workers from other organizations in the community if they are available.
- Footnote *: Spiritual care professionals are recognized as specialists who provide spiritual counseling. Source: Dahlin, C., editor, The National Consensus Project for Quality Palliative Care Clinical Practice Guidelines for Quality Palliative Care, 3rd edition, 2013, p. 26.
11. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Based on the care, treatment, and services provided, the population served, and the patient's and family's needs, the palliative care program's interdisciplinary team may utilize additional individuals from other healthcare disciplines.
12. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program defines in writing the interdisciplinary team members' responsibilities.

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HR.01.04.01

The organization provides orientation to staff.

Elements of Performance for HR.01.04.01

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24. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program provides or facilitates access to orientation for the interdisciplinary team members, program staff, and volunteers as needed to fulfill their responsibilities. The orientation plan and specific content are defined by the program leaders and include, but are not limited to, the following areas:
- The domains of palliative care
- Note: The eight domains of palliative care are described in the Clinical Practice Guidelines for Quality Palliative Care by the National Consensus Project for Quality Palliative Care, 3rd edition (2013).
- Assessment and management of pain and other physical symptoms
 - Assessment and management of psychological symptoms and psychiatric diagnoses
 - Communication skills
 - Cross-cultural knowledge and skills
 - Information on specific population(s) served
 - Grief and bereavement
 - Ethical principles that guide provision of palliative care
 - Community resources for patients and families
 - Hospice care
- Note: Orientation may be provided over a period of time and in a variety of methods, including live and video presentations; electronic or written materials; clinical experience with a preceptor or mentor; or education at a seminar or other organization.
25. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: For programs that provide care for pediatric patients: The program provides access to pediatric-specific orientation and ongoing education for the interdisciplinary team members, staff, and volunteers that provide care for pediatric patients.
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HR.01.05.03

Staff participate in ongoing education and training.

Elements of Performance for HR.01.05.03

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27. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Program leaders identify and respond to the specific learning needs of the interdisciplinary team and program staff. This includes determining education topics and number of hours of continuing education and providing or arranging for needed education. (For more information, refer to HR.01.05.03, EP 5)

HR.01.06.01

Staff are competent to perform their responsibilities.

Elements of Performance for HR.01.06.01

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| 26. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Program leaders, or designees, determine and evaluate the qualifications, training, and experience of individuals who are considered for membership on the program interdisciplinary team and staff. (For more information, refer to HR.01.02.07, EP 10) | A | | | |
| 27. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Program leaders assess each program staff member's competence to perform job responsibilities through observation within program-defined time frames. This assessment is documented. (For more information, refer to HR.01.06.01, EP 1) | A | D | | |

IM.02.01.03

The organization maintains the security and integrity of health information.

Elements of Performance for IM.02.01.03

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| 10. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program informs staff and patients about its policy on privacy and security of health information. | A | | | |
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IM.02.02.01

The organization effectively manages the collection of health information.

Elements of Performance for IM.02.02.01

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| 5. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program assists the patient in collecting, organizing, and communicating important health information that is needed by staff to provide safe, quality care. | C | | | |
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IM.03.01.01

Knowledge-based information resources are available, current, and authoritative.

Elements of Performance for IM.03.01.01

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| 7. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program assists staff in obtaining palliative care references that are necessary for the patient's care and self-management and information on community resources that are available to the patient and family. | C | | | |
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LD.01.03.01

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

Elements of Performance for LD.01.03.01

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| 23. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program defines its leaders' accountabilities. (For more information, refer to LD.04.01.05, EP 3) | A <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| 24. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program defines its scope of care, treatment, and services. | A <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| 25. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The organization provides program leaders with opportunities for sharing best practices with leaders of other palliative care programs. | C <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| 26. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program evaluates whether its activities for identifying and minimizing risks to patients meets its objectives. | C <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |

LD.02.01.01

The mission, vision, and goals of the organization support the safety and quality of care, treatment, or services.

Elements of Performance for LD.02.01.01

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| 6. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program leaders describe the philosophy that guides its provision of care, treatment, and services. The program's philosophy is aligned with the organization's mission. | A <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| 7. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Program leaders and organization leaders work together to formulate the program's goals for providing care, treatment, and services to patients. | A <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| 8. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program's leaders are empowered by the organization's leaders to provide care, treatment, and services. | A <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |

LD.03.02.01

The organization uses data and information to guide decisions and to understand variation in the performance of processes supporting safety and quality.

Elements of Performance for LD.03.02.01

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| 8. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program uses patient satisfaction data that are specific to the care, treatment, and services it provides in order to improve care of patients and families. | C <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
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LD.03.03.01

Leaders use organizationwide planning to establish structures and processes that focus on safety and quality.

Elements of Performance for LD.03.03.01

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| 8. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program leaders communicate with and educate the organization in order to gain recognition of and support for the program. | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">A</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | A | | | |
| A | | | | | | |
| 9. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program leaders secure the resources it requires from the organization in order to meet the scope of care, treatment, and services it provides. | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">A</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px; text-align: center;">3</td> </tr> </table> | A | | | 3 |
| A | | | 3 | | | |
| 10. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Organization and program leaders support participation in continuing education by providing or facilitating access to ongoing continuing education in palliative care for the interdisciplinary team members and program staff. | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | C | | | |
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LD.03.04.01

The organization communicates information related to safety and quality to those who need it, including staff, patients, families, and external interested parties.

Elements of Performance for LD.03.04.01

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| 8. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Upon request, the program provides the public with information about its performance improvement activities.
Note: This information can be general in nature and consist of patient satisfaction data or general information about how the program improves its performance. | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | C | | | |
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LD.03.06.01

Those who work in the organization are focused on improving safety and quality.

Elements of Performance for LD.03.06.01

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| 10. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program has dedicated leadership and staff necessary to meet the scope of care, treatment, and services it provides. | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">A</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | A | | | |
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| 11. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program leaders coach and mentor staff in order to improve their ability to provide care, treatment, and services in a manner that builds mutual trust with the patient and family. | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | C | | | |
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| 12. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Program leaders provide clinical support and guidance to promote staff's confidence in their ability to provide palliative care for patients. | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | C | | | |
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13. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program provides for emotional support for leaders, members of the interdisciplinary team, staff, and volunteers.
 Note: Emotional support is especially important in helping manage the stress of caring for seriously ill palliative care patients and their families.

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LD.04.01.05

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

Elements of Performance for LD.04.01.05

14. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program makes staff throughout the organization aware of the program’s objectives and the process for referring patients to the program.
15. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Program leaders integrate the care, treatment, and services provided by the program with those of the organization.

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LD.04.01.07

The organization has policies and procedures that guide and support patient care, treatment, or services.

Elements of Performance for LD.04.01.07

11. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program has policies and procedures that support its clinical practices.

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LD.04.03.03

The organization provides for its planned scope and level of care, treatment, or services.

Elements of Performance for LD.04.03.03

34. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Programs have a process for making referrals to one or more hospices that will accept palliative care patient referrals.

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LD.04.03.09

Care, treatment, or services provided through contractual agreement are provided safely and effectively.

Elements of Performance for LD.04.03.09

24. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Program leaders evaluate care, treatment, and services provided through contractual arrangement to ascertain whether the scope and level of care, treatment, and services are consistently provided. (For more information, refer to LD.04.03.09, EP 4)

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LD.04.04.01

Leaders establish priorities for performance improvement. (Refer to the "Performance Improvement" [PI] chapter.)

Elements of Performance for LD.04.04.01

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| 27. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program has a written performance improvement plan. | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">A</td> <td style="width: 20px; text-align: center;">ⓓ</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | A | ⓓ | | |
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| 28. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program sets performance improvement priorities and describes how the priorities are adjusted in response to unusual or urgent events. | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">A</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | A | | | |
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| 29. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program plans process and performance improvement activities to encompass multiple disciplines and/or settings. | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | C | | | |
| C | | | | | | |
| 30. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program implements its performance improvement plan. | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">A</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | A | | | |
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| 31. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program's performance improvement plan, including its data analysis, is communicated at least annually to the organization's leaders. | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">A</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | A | | | |
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LD.04.04.03

New or modified services or processes are well designed.

Elements of Performance for LD.04.04.03

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| 8. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Program leaders create opportunities for staff to participate in the design of the care, treatment, and services provided. | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">A</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | A | | | |
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LD.04.04.09

For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program uses current clinical practice guidelines and evidence-based practices to guide the provision of palliative care services.

Note: Clinical practice guidelines and evidence-based practices include both nationally recognized guidelines and practices and guidelines and practices developed by individual organizations to address their particular circumstances.

Elements of Performance for LD.04.04.09

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| 7. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program reviews and revises its clinical practices in response to changes in evidence-based national guidelines or expert consensus, or results of its performance improvement activities. | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">A</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | A | | | |
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PC.01.01.01

The organization accepts the patient for care, treatment, or services based on its ability to meet the patient's needs.

Elements of Performance for PC.01.01.01

49. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program has a process to identify patients for whom community-based palliative care services are indicated and communicates this to appropriate staff and interdisciplinary team members.

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PC.01.02.01

The organization assesses and reassesses its patients.

Elements of Performance for PC.01.02.01

44. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The patient's preferences about how he or she wants to receive information is communicated to staff across the care continuum who are involved in the patient's care.

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45. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Program staff evaluate and revise the plan of care to meet the patient's and family's ongoing needs and document the revisions in the patient's medical record.

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46. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: A member of the interdisciplinary team conducts and documents an initial patient assessment, including a clinical assessment that is defined by the program and based on the patient's needs.

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47. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: As part of the initial assessment, the interdisciplinary team assesses and documents the patient's pain, dyspnea, constipation, and other symptoms; standardized scales should be used when they are available. The scope of this assessment is defined by the program and based on patient needs.

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48. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: As part of the initial assessment, the interdisciplinary team assesses and documents the patient's functional status. The scope of this assessment is defined by the program and based on patient needs.

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49. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: As part of the initial assessment, the interdisciplinary team completes and documents a psychosocial assessment of the patient and family. The scope of this assessment is defined by the program and based on patient needs.

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50. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: As part of the initial assessment, the interdisciplinary team identifies and documents the cultural, spiritual, and religious beliefs and practices important to the patient and family that influence care, treatment, and services. The scope of this assessment is defined by the program and based on patient needs.

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51. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: As part of the initial assessment, the interdisciplinary team assesses and documents the patient's anxiety, stress, grief, coping, and other psychological symptoms using standardized scales when they are available. The scope of this assessment is defined by the program and based on patient needs.
52. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: For programs that provide care for pediatric patients: Assessment of infants, children, and adolescents must consider both the age and cognitive development of the patient.

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PC.01.02.03

The organization assesses and reassesses the patient and his or her condition according to defined time frames.

Elements of Performance for PC.01.02.03

27. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The interdisciplinary team completes the initial assessment within its defined time frame.
28. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The interdisciplinary team reassesses the patient on a regular basis, including whenever there is a change in the patient's condition or goals, when there is a change in the patient's or family's preferences, and as defined by the program. The reassessment is documented in the patient's medical record.
29. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The interdisciplinary team assesses and then refers patients with symptoms of psychiatric diagnoses such as depression, anxiety, and suicidal ideation.

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PC.01.03.01

The organization plans the patient's care.

Elements of Performance for PC.01.03.01

49. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The documented plan of care is developed and updated by the interdisciplinary team in collaboration with the patient, his or her family, and other health care providers involved in the care of the patient.
50. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The plan of care is based on the patient's assessed needs in conjunction with the patient's strengths, limitations, values, and goals.
51. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program communicates the plan of care to staff involved in the patient's care.

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| 52. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program arranges spiritual care as needed by the patient and family through the program's chaplain or spiritual care provider, through the patient's own relationship(s) with clergy, or through community spiritual care resources. | C <input type="text"/> <input type="text"/> <input type="text"/> |
| 53. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program has a process for providing or making referrals for bereavement services for the patient's family prior to the patient's death. Note: The process includes attention to children and adolescents who are family members of the patient. | A <input type="text"/> <input type="text"/> <input type="text"/> |
| 54. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program leaders and staff participate in the evaluation of the provision of care, treatment, and services. | C <input type="text"/> <input type="text"/> <input type="text"/> |

PC.02.01.01

The organization provides care, treatment, or services for each patient.

Elements of Performance for PC.02.01.01

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| 20. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program delivers care, treatment, and services according to the patient's individualized plan of care. | A <input type="text"/> <input type="text"/> <input type="text"/>  |
| 21. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program has a process to provide the patient with or refer the patient for emergency/urgent care. | A <input type="text"/> <input type="text"/> <input type="text"/> |
| 22. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The interdisciplinary team provides compassionate care consistent with the patient's quality of life needs, while preserving the patient's comfort and dignity. | C <input type="text"/> <input type="text"/> <input type="text"/> |
| 23. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The interdisciplinary team manages the patient's physical symptoms according to the patient's plan of care by utilizing pharmacological and/or nonpharmacological methods according to their effectiveness in minimizing pain and suffering. These symptoms include, but are not limited to, the following:
- Anorexia
- Confusion
- Constipation
- Dyspnea
- Fatigue
- Insomnia
- Nausea
- Pain
- Restlessness | C <input type="text"/> <input type="text"/> <input type="text"/>  |
| 24. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The patient's psychological symptoms, including anxiety, stress, delirium, behavioral changes, and anticipatory grief are managed according to the patient's plan of care. | C <input type="text"/> <input type="text"/> <input type="text"/>  |

PC.02.01.05

The organization provides interdisciplinary, collaborative care, treatment, or services.

Elements of Performance for PC.02.01.05

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| 33. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: For programs that provide care for pediatric patients: The interdisciplinary team provides family-centered care for the child and family. | C | | | |
| 34. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program and the organization promote and support a collaborative and trusting environment. | A | | | |
| 35. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Program leaders facilitate communication among the interdisciplinary team members and other organization staff who are involved in the patient's care. | C | | | |
| 36. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program demonstrates teamwork among the interdisciplinary team members and other organization staff who are involved in the patient's care. | C | | | |
| 37. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Patients and staff mutually agree upon patient-centered goals of care. | C | | | |
| 38. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Patients' co-occurring conditions, if present, are managed. Note: If the patient's co-occurring conditions are managed by the patient's primary care physician, or staff from a setting(s) outside the program, the information necessary for its management is communicated to program staff and setting(s) across the continuum of care. | C | | M | 3 |

PC.02.02.01

The organization coordinates the patient's care, treatment, or services based on the patient's needs.

Elements of Performance for PC.02.02.01

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| 24. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Program staff assist patients and families with identifying and accessing community resources that are available to meet patients' physical, psychosocial, and spiritual needs. Note: Examples of such resources may include, but are not limited to, community service providers, transportation companies, legal assistance, local school personnel, respite care providers, and spiritual care providers. | C | | | |
| 25. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Staff have the patient's health information available for use in clinical decision making to provide care, treatment, and services. | C | | | |

26. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program facilitates the exchanging of the patient's health information among staff, both internal and external to the program, and other health care providers and organizations involved in the patient's care, to coordinate care.
 Note: If the patient's primary care physician is involved in the care of the patient, the program should communicate with the physician to plan and coordinate the patient's care.

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27. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The interdisciplinary team conducts regular patient care conferences with its members and other program staff members as needed to discuss patient-centered goals of care, disease prognosis, and advance care planning. The frequency of these patient care conferences is defined by the program and based on the needs of the patients.
 Note: Patient care conferences include members of the interdisciplinary team and other program staff members as required to meet the needs of the program's patients and families. These conferences may be done in a variety of formats, including face to face, via teleconference, or videoconference.

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PC.02.02.05

The organization provides the patient with access to care, treatment, or services during nonbusiness hours.

Elements of Performance for PC.02.02.05

5. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program informs patients and families of how to access care, treatment, and services during business hours.
6. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program informs patients and families of how to contact staff in the case of an emergent situation during or after business hours.

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PC.02.03.01

The organization provides patient education and training based on each patient's needs and abilities.

Elements of Performance for PC.02.03.01

32. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program provides education and support to the patient and family based on their needs and the plan of care.

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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.

Elements of Performance for PC.04.01.01

28. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program has a process that addresses the patient's need for continuing care, treatment, and services after discharge or transfer.

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PC.04.02.01

When a patient is discharged or transferred, the organization gives information about the care, treatment, or services provided to the patient to other service providers who will provide the patient with care, treatment, or services.

Elements of Performance for PC.04.02.01

9. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: At the time a patient is transferred to a different care setting, information about the patient's goals, preferences, advanced care plan, and the patient's clinical condition are communicated to staff in the new setting.

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PI.01.01.01

The organization collects data to monitor its performance.

Elements of Performance for PI.01.01.01

49. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program collects the data it needs to improve processes and outcomes.
50. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program uses consistent data sets, definitions, codes, classifications, and terminology.
51. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Data collection is timely, accurate, complete, and relevant to the program.
52. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program selects valid, reliable performance measures based on evidence-based national guidelines or, in the absence of such guidelines, expert consensus, and in the absence of both, a review of the health care literature.
53. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program collects data related to processes and outcomes at the level of the individual patient.
54. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program collects patient satisfaction data that is specific to the care, treatment, and services it provides. (For more information, refer to LD.03.02.01, EP 8)
 Note: A variety of methods may be used to collect this data, such as an organization-wide patient satisfaction survey, a program-specific satisfaction survey, or a telephone survey of patients in the program.
55. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program monitors the quality of data collected.

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PI.02.01.01

The organization compiles and analyzes data.

Elements of Performance for PI.02.01.01

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| 15. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: When useful, the program uses statistical tools and techniques to analyze data. | C | | | |
| 16. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program identifies and evaluates variables that affect outcomes. | C | | | |
| 17. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program uses its data analysis to improve and sustain its performance. | C | | | |

PI.03.01.01

The organization improves performance.

Elements of Performance for PI.03.01.01

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| 13. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Patients have a defined role in the evaluation of the provision of care, treatment, and services. | C | | | |
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RC.02.01.01

The patient record contains information that reflects the patient's care, treatment, or services.

Elements of Performance for RC.02.01.01

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| 31. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: If the patient has an advance directive, a copy is included in the patient's medical record. | A | | 3 | |
| 32. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: If the patient has expressed preferences for treatment as his or her disease progresses, the interdisciplinary team will document these preferences in the medical record. | C | | | |

RI.01.01.01

The organization respects, protects, and promotes patients' rights.

Elements of Performance for RI.01.01.01

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| 33. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program provides care, treatment, and services in a manner that meets the patient's communication needs. | C | | | |
| 34. | For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: While providing care, treatment, and services, program staff accommodate the patient's and family's cultural preferences and practices unless they are contraindicated or the accommodations affect the care of others. | C | | | |

RI.01.01.03

The organization respects the patient's right to receive information in a manner he or she understands.

Elements of Performance for RI.01.01.03

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| 6. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Program staff discuss with patients how they want to receive information, including the type of information, the method in which it is provided, which family members are to receive this information, and whether a surrogate decision-maker is involved in care, treatment, and service. (For more information on the role of surrogate decision-makers, see standard RI.01.02.01) | <table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | C | | | |
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| 7. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program respects the patient's right to be informed about his or her care by providing information in a manner tailored to the patient's age, language, and ability to understand. | <table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">A</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | A | | | |
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RI.01.02.01

The organization respects the patient's right to participate in decisions about his or her care, treatment, or services.

Elements of Performance for RI.01.02.01

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| 36. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Program staff educate the patient and family on disease processes and prognosis so that they are able to make informed care decisions. | <table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | C | | | |
| C | | | | | |
| 37. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: In instances in which the patient has a designated surrogate decision-maker, a member of the interdisciplinary team documents the surrogate decision-maker's name and contact information in the medical record. | <table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">A</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | A | | | |
| A | | | | | |
| 38. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: For programs that provide care for pediatric patients: When developmentally appropriate, the child's opinions and preferences are considered when making decisions and providing care. | <table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | C | | | |
| C | | | | | |
| 39. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: For programs that provide care for pediatric patients: When developmentally appropriate and proper for the clinical circumstance, the program provides age-appropriate information about the child's illness, as well as potential treatments and outcomes, to the child as decided by the child's family. | <table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | C | | | |
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RI.01.05.01

The organization addresses patient decisions about care, treatment, or services received at the end of life.

Elements of Performance for RI.01.05.01

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| 23. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: As defined by the program, staff provide information and education about advance care planning to the patient and family as appropriate to the patient's clinical status, based on the patient's expressed values, religious or spiritual beliefs, cultural practices, and preferences for care. This information is documented in the medical record and shared with the interdisciplinary team. | <table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | C | | | |
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RI.01.07.01

The patient and his or her family have the right to have complaints reviewed by the organization.

Elements of Performance for RI.01.07.01

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| 30. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program encourages patients to express any concerns or complaints about their care to staff. | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | C | | | |
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| 31. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Program staff are aware of how to handle patients' or families' concerns or complaints about the program or their care. | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">A</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | A | | | |
| A | | | | | |
| 32. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program's leaders inform staff, patients, and families about the organization's process to address concerns and resolve ethical concerns that may occur in the provision of community-based palliative care. (For more information, refer to Standard RI.01.07.01 in the Home Care E-dition or the Comprehensive Accreditation Manual for Home Care.)
Note: Examples of ethical concerns that may occur include, but are not limited to, changing or withdrawing treatments, conflict with advance directives and advance care planning decisions, and use of sedation and pain medications. (For more information, refer to LD.04.02.03, EP 1, in the Home Care E-dition or the Comprehensive Accreditation Manual for Home Care.) | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | C | | | |
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RI.02.01.01

The organization informs the patient about his or her responsibilities related to his or her care, treatment, or services.

Elements of Performance for RI.02.01.01

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| 4. For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: Program staff inform patients and families of their responsibility to provide information that is important to care, treatment, and services. | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | C | | | |
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