

APPROVED: Phase I Revisions to Update Behavioral Health Care Requirements

The Joint Commission is reviewing the *Comprehensive Accreditation Manual for Behavioral Health Care (CAMBHC)* and identifying any standards that require maintenance. This review project, which is occurring in two phases, includes making clarifications to existing language, adding new elements of performance (EPs), and revising notes.

Phase I revisions, which are **effective July 1, 2017**, consist of the following:

- Note 2 for Care, Treatment, and Services (CTS) Standards CTS.02.01.05 and CTS.02.01.06 has been rewritten to improve its clarity.
- Standard CTS.03.01.03, EP 2 has been revised to require that organizations identify the criteria and process for each individual's transfer and/or discharge; discuss these with the individual; and incorporate this information into the individual's plan for care, treatment, or services. These revisions are designed to improve organizations' support of the individual's progress in achieving these particular goals.
- Standard CTS.03.01.07, EP 5, has been revised to require opioid treatment programs to provide education about neonatal abstinence syndrome not only to all mothers but to all women of child-bearing age. (This revision meets and exceeds a recently issued Substance Abuse and Mental

Health Services Administration requirement for opioid treatment programs to educate all mothers about neonatal abstinence syndrome.)

- The applicability of Environment of Care (EC) Standard EC.02.04.03, EP 3 (on inspecting, testing, and maintaining medical equipment) for Behavioral Health Home–certified organizations has been expanded to include all behavioral health care organizations. In addition, a definition of *medical equipment* has been added to the glossary.
- Human Resources Management (HRM) Standard HRM.01.06.01, EP 3 has been rewritten to improve its clarity.

These revisions are shown below (new text is underlined and deleted text is shown with ~~strikethrough~~) and will be posted on The Joint Commission website at http://www.jointcommission.org/standards_information/prepublication_standards.aspx. The revisions will be published in the spring 2017 E-dition® and print updates for the *Comprehensive Accreditation Manual for Behavioral Health Care*.

Please contact Lynn Berry, project director, Department of Standards and Survey Methods, at lberry@jointcommission.org for more information. 

Joint Commission



Requirement

Official Publication of Joint Commission Requirements

Phase I Maintenance Revisions to Behavioral Health Care Requirements

APPLICABLE TO BEHAVIORAL HEALTH CARE

Effective July 1, 2017

Care, Treatment, and Services (CTS)

Standard CTS.02.01.05

For organizations providing care, treatment, or services in non-24-hour settings: The organization implements a written process requiring a physical health screening to determine the individual's need for a medical history and physical examination.

Note 1: *This standard does not apply to foster care and therapeutic foster care. (See also CTS.02.04.01, EP 1)*

Note 2: ~~This standard does not apply to if the organizations that provide conducts a physical examinations to on all individuals served as a matter of policy or to comply with law and regulation, it is in compliance with this standard.~~

Standard CTS.02.01.06

For organizations providing residential care: The organization screens all individuals served to determine the

individual's need for a medical history and physical examination.

Note 1: *This standard does not apply to foster care, therapeutic foster care, and emergency shelters. (See CTS.02.04.01, EP 1)*

Note 2: ~~This standard does not apply to if the organizations that provide conducts a physical examinations to on all individuals served as a matter of policy or to comply with law and regulation, it is in compliance with this standard.~~

Note 3: *“Residential care” includes residential settings, group home settings, and 24-hour therapeutic schools.*

Standard CTS.03.01.03

The organization has a plan for care, treatment, or services that reflects the assessed needs, strengths, preferences, and goals of the individual served.

Element of Performance for CTS.03.01.03

2. The plan for care, treatment, or services includes the following:

- Goals that are expressed in a manner that captures the individual's words or ideas

- Goals that build on the individual's strengths
- Factors that support the transition to community integration when identified as a need during assessment
- The criteria and process for the individual's expected successful transfer and/or discharge, which the organization discusses with the individual (For more information, refer to Standard CTS.06.02.01)

Note 1: *Barriers that might need to be considered include co-occurring illnesses, cognitive and communicative disorders, developmental disabilities, vision or hearing disabilities, physical disabilities, and social and environmental factors.*

Note 2: *For opioid treatment programs: For patients receiving interim maintenance treatment, neither an initial treatment plan nor a periodic treatment plan evaluation is required.*

Standard CTS.03.01.07

When individuals served need additional care, treatment, or services not offered by the organization, referrals are made and documented in the clinical/case record. (For more information, refer to Standard CTS.04.01.01.)

Element of Performance for CTS.03.01.07

5. **For opioid treatment programs:** The program educates mothers all women of child-bearing age about neonatal abstinence syndrome, its symptoms, its potential effect on their infants, and the need for treatment should it occur.

Environment of Care (EC)

Standard EC.02.04.03

~~For organizations that elect The Joint Commission Behavioral Health Home option:~~ The organization inspects, tests, and maintains medical equipment.

Element of Performance for EC.02.04.03

3. ~~For organizations that elect The Joint Commission Behavioral Health Home option:~~ The organization has a process for inspecting, testing as needed, and maintaining all medical equipment that it owns and operates, which is based on manufacturers' recommendations, risk levels, or current organization experience. These activities are documented.

Note: *This process does not encompass medical equipment owned by individuals served or other organizations.*

Human Resources Management (HRM)

Standard HRM.01.06.01

Staff are competent to perform their job duties and responsibilities.

Element of Performance for HRM.01.06.01

3. ~~As part of orientation, the~~The organization conducts an initial assessment of staff competence ~~before they assume their responsibilities.~~ This assessment is documented.