Check in with The Joint Commission.

August 7, 2023
What We’ll Cover Today

What behavioral health care organizations need to know:
- Listen to information about standards changes
- What customers need to know about survey process for behavioral health care
- Common standards challenges, and tips to help your team
- State relations updates
Today’s Behavioral Health Care and Human Services Accreditation Experts

Stacey Paul, APN
Clinical Project Director
Department of Standards and Survey Methods
*The Joint Commission*

Peter Vance, LPCC, CPHQ
Field Director
Accreditation and Certification Operations
*The Joint Commission*

Falguni Shah, PhD, NCC, LCPC, CHCEF
Associate Director
Standards Interpretation Group
*The Joint Commission*

Mark Crafton, MPA, MT(ASCP)
Executive Director
Strategic Alliances
*The Joint Commission*
Standards Update for Behavioral Health Organizations
Changes for July 2023

- Major changes to requirements
- Elevated Leadership (LD) Standard LD.04.03.08 to new National Patient Safety Goal 16.
- Added 81 new requirements for certified community behavioral health clinics (CCBHCs).
- “What’s new” at each manual release
Implemented July 2023- CCBHC

- What is a CCBHC?
  - A Certified Community Behavioral Health Clinic (CCBHC) is a specially-designated clinic that provides a comprehensive range of mental health and substance use services. CCBHCs serve anyone who walks through the door, regardless of their diagnosis and insurance status.

- Joint Commission CCBHC standards reflect the requirements from SAMHSA’s CCBHC criteria

- Recent update to SAMHSAs criteria, updated Joint Commission standards to implement July 1, 2024

- View standards in E-dition or print manual
Standards Simplification Changes

- Effective Aug 27, 2023
- BHC deleted or consolidated EPs, 20
- BHC revised EPs, 5
- Prepublication Standards Page:
Sign up for e-alerts

Here’s the instructions for e-alerts:
https://www.jointcommission.org/e-alerts/

1. Enter the information in the E-Alert Form.
2. Under the “Content Type” section, choose “Customize type”.
3. Select “Standards Field Reviews” from the Content Type list.
Checking in with Survey Process
Checking in with the Field Director

PHE is over!

- We will no longer survey to vaccination requirements.

- While the standard will remain present in the current manual, surveyors have been advised not to evaluate for compliance. The database will be updated and be reflected in the next standards release later this year.

- We no longer require surveyors to wear masks unless your organization requires it. However, surveyors may choose to wear them and we ask that their practice be respected.
Checking in with Field Director - Survey Process

- Offsite Surveys
- Microsoft Teams to Remote Sites
- Treatment Planning
- Clarification
- Binders vs. Laptop
- Policies and Procedures
- Tracer Activity
Checking in with Field Director - Survey Scoring

- NPSG 16
- CCBHC
- Measurement-Based Care
- SAFER Dashboard
Standards Interpretation Group
Top Non-Compliant Standards July 1, 2022 to June 30, 2023
Standards Scored at High-Risk
NPSG.15.01.01 Suicide Prevention

Common Non-Compliance Reasons
- Administering validated screening tool only to those with suicidal ideation
- Assessment does not include required elements
  - Missing risk and protective factors
  - No synthesis and/or documentation of level of risk
- Mitigation not implemented or documented
- Policy does not include required elements
- Lack of monitoring screening, assessment, and mitigation for improvement
Compliance Tips and Tricks—EP 2

- Examples of validated tools for suicide risk screening - Columbia C-SSRS, NIMH - ASQ, PHQ-9, SBQ-R, and PSS-3
- Validated screening tools should not be modified/changed unless the organization can show evidence of written approval from the developer/creator of the tool
- Must be administered at the time of admission as intended by developer

If a patient triages as a "high" or "imminent" risk using a validated screening tool, we would expect 1:1 observation until the full assessment is completed to determine level of risk.
Compliance Tips and Tricks EP 3 and EP 4

- The assessment directly asks about suicidal ideation, plan, intent, suicidal or self-harm behaviors, risk factors, and protective factors.
- Determine a level of suicide risk (e.g. high, moderate, or low).
- Document level of risk with clinical justification (if not using a tool) as well as the plans to mitigate the risk for suicide.
- Organizations determine mitigation strategies for moderate and low levels of risk.
- Patients at high-risk for suicide in an environment with ligature or other safety risks must be on continuous observation with the ability to immediately intervene.
- In ligature resistant environments without additional safety risks identified, continuous observation may be not necessary as allowable by organizational policy.
Compliance Tips and Tricks EP 5

- Policies and/or procedures
  - training and competence assessment of staff
  - guidelines for re-assessment for patients at risk for suicide, and
  - monitoring for patients who are at high risk for suicide.
- It is up to the organization to determine frequency of re-assessments
  - changes in individuals' condition
  - expressing suicidal ideation or making suicidal or self-harm gestures.
Compliance Tips and Tricks EP 7

- Suicide reduction program
  - monitoring of all aspects of suicide prevention
    - screening, assessment, mitigation, and action taken when compliance issues are identified.
LD.04.01.07 EP 1

- Leader’s review and approve policies and procedures
- Provide adequate oversight to ensure implementation
- Educate staff on the policies/procedures including when updates are made
- Adopt law and regulation
- Focus on standards that require written documentation (plan/policies)
LD.04.01.01 EP 1

- The organization is licensed, is certified, or has a permit, in accordance with law and regulation, to provide the care, treatment, or services
  - Active at all times
  - Applied for CLIA certificate and/or made payment?
    - Do not perform waived tests unless you have permission from the state
    - Do not need a CLIA for collecting samples and sending to the laboratory
  - Follow Manufacturer’s instructions for use
LD.04.01.01 EP 2

- Provide care, treatment, or services in accordance with licensure requirements, laws, and rules and regulations
  - Staffing requirements (ratio, RN, medical director etc.)
  - Activities and services performed
    - Diagnosis
    - Bio-psychosocial assessments
    - Medication administration/self-administration
  - Supervision – agreements/contracts
  - Documentation review and sign-off
  - Telehealth
MM.03.01.01 EP 3 and 4

- Safe storage – labelling, temperature, and separation of controlled and non-controlled medications
- Proper handling, wasting, security, disposition, and return to storage
- Diversion control practices
  - Count of between storage and administration
  - Secured versus locked
  - Follow law and regulation
Utilize SIG as a Customer Resource

- Discuss your challenges with SIG and obtain examples for compliance
  - Ask a standards question and request response via email or phone call
  - Questions are confidential and do not impact survey activity or outcome
- During survey activity – Special resolution phone call
FAQ/ – Joint Commission’s Home Page

Standards
Measure, assess, and improve your performance.

Joint Commission standards are the basis of an objective evaluation process that can help health care organizations measure, assess, and improve performance. The standards focus on important patient, individual, or resident care and organization functions that are essential for providing safe, high-quality care. The Joint Commission regularly evaluates new and existing standards to ensure they are relevant and comprehensive. To get started, select a category from the Standards navigation menu on the left side of the screen.

Evolving with Care
Your commitment to patient safety has never wavered, and neither has ours. While we all know the pandemic isn’t behind us, we are learning how to move through it safely and with care. That’s why we are thoughtfully evolving the way we conduct our business to better accommodate yours.

Connect With Us
Joint Commission Connect
Ask a Standards Question
Report a Safety Event
Request a Speaker
Subscribe to E-Alerts
Contact Us
State Relations Update
Updates from State Relations

Workplace Violence
• Criminalization of Threats Against Health Care Workers

Overdose Prevention
• Decriminalize Fentanyl Test Strips
• Increase Access to Naloxone

Suicide Prevention
• Mobile Crisis Services
• Expanded Access to Mental Health Professionals
Thank you for joining us.