

Prepublication Requirements



Revisions to Eliminate Term “Licensed Independent Practitioner”

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>.

Please note: Where applicable, this report shows deleted language struckthrough and new language underlined.

APPLICABLE TO THE BEHAVIORAL HEALTH CARE AND HUMAN SERVICES ACCREDITATION PROGRAM

Effective January 1, 2024

Revised Glossary Definitions

clinical staff

~~Individuals such as employees, licensed independent practitioners, contractors, volunteers, or temporary agency personnel.~~ Staff members who provide or have provided clinical services to the ~~organization's~~ organization's patients or individuals served. See also staff.

licensed independent practitioner

~~Any practitioner permitted by law and by the organization to provide care, treatment, or services, without direction or supervision, within the scope of the practitioner license and consistent with assigned clinical responsibilities.~~

licensed practitioner

An individual who is licensed and qualified to direct or provide care, treatment, and services in accordance with state law and regulation, applicable federal law and regulation, and organizational policy.

practitioner

~~Any individual who is licensed and qualified to practice a health care profession (for example, physician, nurse, social worker, clinical psychologist, psychiatrist, respiratory therapist) and is engaged in the provision of care, treatment, or services. See also licensed independent practitioner.~~

provider

A licensed individual or organization that provides health care services outside the accredited organization.

Note: The term “provider” is a general reference to a person or entity providing services that are not within the oversight and management of the accredited organization.

staff

~~As appropriate to their roles and responsibilities, all~~ people who provide care, treatment, or services ~~for~~ the organization, including ~~those receiving pay (for example, licensed practitioners; permanent, temporary, and part-time personnel, as well as; contract employees);~~ volunteers; and ~~behavioral~~ health profession students. ~~When employed by the organization, licensed independent practitioners are considered staff.~~

Additional Revisions Based on Revised Definitions**admission**

The process by which an individual comes into a service or program, including screening and/or assessment by the organization or the licensed practitioner, in order to determine the capacity of the organization or licensed practitioner to provide the care, treatment, or services required to meet the individual's needs.

clinical responsibilities

Authorization assigned by the appropriate authority to a physician or other licensed practitioner to provide specific care, treatment, or services in an organization within well-defined limits, based on the following factors, as applicable: license, education, training, experience, competence, health status, and judgment.

coordination of care, treatment, or services

The process of coordinating care, treatment, or services provided by an organization, including referral to appropriate community resources and liaison with others involved in care, treatment, or services (such as an individual's physician or other licensed practitioner, primary care provider, or another health care organization/agency) to meet the ongoing identified needs of the individual served, to ensure implementation of the plan of care, treatment, or services, and to avoid unnecessary duplication of services.

credentials verification organization (CVO)

Any entity that provides information on an individual's professional credentials. An organization that bases a decision in part on information obtained from a CVO should have confidence in the completeness, accuracy, and timeliness of information. To achieve this level of confidence, the organization should evaluate the entity providing the information initially and then periodically as appropriate. The 10 principles that guide such an evaluation include the following:

1. The entity makes known to the user the data and information it can provide.
2. The entity provides documentation to the user describing how its data collection, information development, and verification process(es) is performed.
3. The user is given sufficient, clear information on database functions, including any limitations of information available from the entity (such as practitioners/individuals not included in the database), the time frame for entity responses to requests for information, and a summary overview of quality control processes related to data integrity, security, transmission accuracy, and technical specifications.
4. The user and entity agree on the format for transmitting credentials information about an individual from the CVO.
5. The user can easily discern what information transmitted by the CVO is from a primary source and what is not.
6. For information transmitted by the agency that can go out of date (for example, licensure, board certification), the CVO provides the date the information was last updated from the primary source.
7. The CVO certifies that the information transmitted to the user accurately represents the information obtained by it.
8. The user can discern whether the information transmitted by the CVO from a primary source is all the primary source information in the CVO's possession pertinent to a given item or, if not, where additional information can be obtained.

9. The user can engage the CVO's quality control processes when necessary to resolve concerns about transmission errors, inconsistencies, or other data issues that may be identified from time to time.

10. The user has a formal arrangement with the CVO for communicating changes in credentialing information.

evidence-based practices

Integrating the best research evidence with licensed practitioner expertise and other resources, and with the characteristics, needs, values, and preferences of the population(s) served, to make decisions about how to promote health or provide care, treatment, or services.

integrated care team

The staff in the behavioral health home who provide or facilitate the provision of integrated care to the individual served. The team members include the behavioral and physical health care licensed practitioner providing care, treatment, or service providers. The team members work together and communicate closely with one another in order to provide or facilitate the provision of integrated, comprehensive, and coordinated care, treatment, or services to the individual served. The team members understand the individual's needs, strengths, preferences, and goals regarding the individual's behavioral health and physical health and use that information to plan and deliver the individual's integrated care. Depending on the structure of the behavioral health home, the integrated team members may all be members of the behavioral health care organization's staff, or they may be split between the behavioral health care organization and another organization; regardless of the home's structure and the location of the team members, they are expected to function as a single integrated team. See also integrated care.

medication management

The process an organization uses to provide medication therapy to individuals served by the organization. The components of the medication management process include the following:

- procurement - The task of obtaining selected medications from a source outside the organization. It does not include obtaining a medication from the organization's own pharmacy, which is considered part of the ordering and dispensing processes.
- storage - The task of appropriately maintaining a supply of medications on the organization's premises.
- secure - In locked containers, in a locked room, or under constant surveillance.
- prescribing or ordering - The process of a physician or other licensed independent ~~practitioner or prescriber~~ transmitting a legal order or prescription to an organization, directing the preparing, dispensing, and administration of a specific medication to a specific individual. It does not include requisitions for medication supplies.
- transcribing - The process by which an order from a physician or other licensed independent practitioner is documented either in writing or electronically.
- preparing - Compounding, manipulating, or in some way getting a medication ready for administration, exactly as ordered by the physician or other licensed independent practitioner.
- dispensing - Providing, furnishing, or otherwise making available a supply of medications to the individual for whom it was ordered (their representative) by a licensed pharmacy according to a specific prescription or medication order, or by a physician or other licensed independent practitioner authorized by law to dispense. Dispensing does not involve providing an individual a dose of medication previously dispensed by the pharmacy.
- administration - The provision of a prescribed and prepared dose of an identified medication to the individual for whom it was ordered to achieve its pharmacological effect. This includes directly introducing the medication into or onto the individual's body.

neglect

The absence of the minimal services or resources required to meet basic needs. Neglect includes withholding or inadequately providing medical care and, consistent with usual care, treatment, or services, food and hydration

(without approval from the individual, physician or other licensed practitioner, or surrogate), clothing, or good hygiene. It may also include placing an individual in unsafe or unsupervised conditions. See also abuse.

orientation

A process used to provide initial training and information while assessing the competence of clinical staff relative to job responsibilities and the organization's mission and goals.

peer recommendation

Information submitted by a physician or other licensed practitioner(s) in the same professional discipline as an applicant and/or with the same clinical responsibility, reflecting their perception of the applicant's clinical practice, ability to work as part of a team, and ethical behavior; or the documented peer evaluation of practitioner-specific data collected from various sources for the purpose of evaluating current competence.

prescriber

A physician or other licensed practitioner authorized by law and organizational policy to order medications for individuals served.

primary source

The original source or an approved agent of that source of a specific credential that can verify the accuracy of a qualification reported by ~~an individual~~ a physician or other licensed practitioner. Examples include medical schools, nursing schools, graduate education, state medical boards, federal and state licensing boards, universities, colleges, and community colleges.

program sponsor, opioid treatment programs

The person named in the application for certification of an opioid treatment program who is responsible for the operation of the program and who assumes responsibility for all its employees. These employees include any licensed practitioners, agents, and other persons providing medical, rehabilitative, or counseling services at the program or any of its medication units.

social worker

~~A practitioner~~ An individual who provides a range of counseling, case management, and advocacy services to individuals served in various settings. Social workers may work in or with community-based programs, schools, residential and foster care programs, or independently as private practice psychotherapists. A social worker has at least a bachelor's degree in social work plus documentation of any additional training, education, or experience commensurate with their responsibilities.