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 LABORATORY ACCREDITATION PROGRAM**

**Effective February 19, 2023**

**RETIRED ELEMENTS OF PERFORMANCE**

**Environment of Care (EC) Chapter**

**Standard EC.02.01.03**
The laboratory prohibits smoking.

**EC.02.01.03, EP 1**
Smoking is not permitted in the laboratory and areas under the control of the laboratory.

Note: The scope of this EP is concerned with all smoking types—tobacco, electronic, or other.

**Human Resources (HR) Chapter**

**Standard HR.01.02.07**
The laboratory determines how staff function within the organization.

**HR.01.02.07, EP 5**
Staff supervise and observe students when they are performing laboratory procedures.

**Standard HR.01.07.01**
The laboratory evaluates staff performance.
HR.01.07.01, EP 5
When an employee brings a nonemployee individual into the laboratory to provide care, treatment, and services (for example, when a pathologist brings a pathology assistant into the laboratory to assist with histology specimen processing), the laboratory reviews the individual’s competencies and performance at the same frequency as individuals employed by the hospital.
Note: This review can be accomplished either through the laboratory’s regular process or with the employee who brought staff into the hospital.

Leadership (LD) Chapter

Standard LD.03.06.01
Those who work in the laboratory are focused on improving safety and quality.

LD.03.06.01, EP 5
Those who work in the laboratory adapt to changes in the environment.

Standard LD.04.02.03
Ethical principles guide the laboratory’s business practices.

LD.04.02.03, EP 1
The laboratory follows a process that allows staff, patients, and families to address ethical issues or issues prone to conflict.

Waived Testing (WT) Chapter

Standard WT.04.01.01
The organization performs quality control checks for waived testing on each procedure.
Note: Internal quality controls may include electronic, liquid, or control zone. External quality controls may include electronic or liquid.

WT.04.01.01, EP 1
The person from the organization whose name appears on the Clinical Laboratory Improvement Amendments of 1988 (CLIA ’88) certificate approves a written quality control plan for waived testing that specifies the method(s) for controlling procedures for quality, establishes timetables, and explains the rationale for choice of procedures and timetables.
REVISED ELEMENTS OF PERFORMANCE

Standard WT.02.01.01
The person from the organization whose name appears on the Clinical Laboratory Improvement Amendments of 1988 (CLIA ’88) certificate identifies the staff responsible for performing and supervising waived testing.
Note 1: Responsible staff may be employees of the organization, contracted staff, or employees of a contracted service.
Note 2: Responsible staff may be identified within job descriptions or by listing job titles or individual names.

WT.02.01.01, EP 1
The person from the organization whose name appears on the Clinical Laboratory Improvement Amendments of 1988 (CLIA ’88) certificate, or a qualified designee, identifies in writing the staff responsible for performing and supervising waived testing.