As announced in last month’s issue (see January 2014 Perspectives, pages 8–13), The Joint Commission will implement new memory care accreditation requirements for nursing care centers effective July 1, 2014. To build on these new requirements, which have been designed in response to the prevalence of dementia in nursing homes, The Joint Commission will also offer a new optional certification product for accredited nursing care centers.

The optional Memory Care Certification product, also effective July 1, 2014, will recognize accredited organizations for their dementia care specialization—in particular, for specialized dementia care provided in a distinct memory care unit or area. Key areas that distinguish the optional Memory Care Certification requirements from the memory care accreditation requirements include the following:

- The role of the coordinator in coordinating patient and resident activities and communicating the needs of the program to leadership
- Staff participation in annual education and training that aligns with current best practices in dementia care
- Activity programming that stimulates cognition and adapts to each patient’s or resident’s unique abilities and interests
- Particular attention to minimizing noise and confusing visual stimuli and providing access to outdoor space

The new Memory Care Certification option succeeds the Post–Acute Care Certification option (see December 2013 Perspectives, page 5) as the second of several specialty designations planned for accredited nursing care centers. The designations allow nursing care centers to customize their accreditation based on their unique service offerings.

The Memory Care Certification requirements are available on The Joint Commission website at http://www.jointcommission.org/standards_information/prepublication_standards.aspx and will be published in the spring 2014 E-dition® update and the 2014 Comprehensive Accreditation Manual for Nursing Care Centers. The box below displays the new requirements, which all begin with the phrase “For organizations that elect The Joint Commission Memory Care Certification option.” For more information, please contact Beth Ann Brehm, associate project director, Department of Standards and Survey Methods, at bbrehm@jointcommission.org.

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**APPROVED: Second Certification Option for Nursing Care Centers**

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**Official Publication of Joint Commission Requirements**

**Optional Memory Care Certification Requirements**

**APPLICABLE TO NURSING CARE CENTERS**

**Effective July 1, 2014**

**Environment of Care (EC)**

**Standard EC.02.06.01**

The organization establishes and maintains a safe, functional environment.

**Elements of Performance for EC.02.06.01**

**C 40. For organizations that elect The Joint Commission Memory Care Certification option:** The organization provides an environment in which noises that may overstimulate or distress patients and residents with dementia are minimized.

*Note: Examples of noises that may overstimulate or distress patients or residents with dementia include alarms and maintenance activities.*

**C 41. For organizations that elect The Joint Commission Memory Care Certification option:** To minimize over-stimulation and distress for patients and residents with dementia, the organization provides an environment that minimizes confusing visual stimuli.

*Note: Examples of visual stimuli that may cause confusion include lighting that creates shadows or glare; furnishings with busy patterns; lack of color contrast with walls, tables, seating, and floor surfaces.*

**A 42. For organizations that elect The Joint Commission Memory Care Certification option:** The organization provides access to outdoor space(s) for patients and residents with dementia. This space has the following characteristics:

- Safety and security (Refer to EC.02.01.01, EPs 1 and 3)
- Seating for patients and residents
- Pleasant stimulation such as flowers, birds, and sunlight

*Note: If the provision of outdoor space is not possible, organizations may simulate outdoor space, such as a sunroom, to meet this requirement.*

Continued on page 4
Optional Memory Care Certification Requirements (continued)

A 43. For organizations that elect The Joint Commission Memory Care Certification option: To minimize distress for patients and residents with dementia, the organization provides an environment for walking and exploring that is free of obstructions and barriers that may cause falls.

Note: Examples of obstructions or barriers that may cause falls include rugs or floor mats, changes in floor elevation, and movable equipment in corridors.

A 44. For organizations that elect The Joint Commission Memory Care Certification option: To minimize distress for patients and residents with dementia, the organization limits the use of its intercom paging system.

A 45. For organizations that elect The Joint Commission Memory Care Certification option: The organization creates interest points in the physical environment that encourage visual or tactile stimulation for patients and residents with dementia.

Note: Examples of interest points include a fish tank, a colorful tapestry, or objects with varying textures and shapes.

Human Resources (HR)

Standard HR.01.05.03
Staff participate in education and training.

Element of Performance for HR.01.05.03
C 26. For organizations that elect The Joint Commission Memory Care Certification option: Staff participate in annual education and training that aligns with current best practices in dementia care and includes the following:
- Team building
- Creating a therapeutic environment
- Assessing and addressing pain
- Palliative care for advanced dementia

Staff participation is documented.

Information Management (IM)

Standard IM.03.01.01
Knowledge-based information resources are available, current, and authoritative.

Element of Performance for IM.03.01.01
A 6. For organizations that elect The Joint Commission Memory Care Certification option: To remain current with changes in dementia care, the organization participates in activities sponsored by a national organization that relate to dementia care.

Note 1: Examples of national organizations include the Alzheimer’s Association and the Pioneer Network.

Note 2: Examples of activities sponsored by a national organization include participating on a task force or committee or attending an educational webinar or conference.

Provision of Care, Treatment, and Services (PC)

Standard PC.02.01.01
The organization provides care, treatment, and services for each patient or resident.

Element of Performance for PC.02.01.01
A 3. For organizations that elect The Joint Commission Memory Care Certification option: Only patients and residents with a diagnosis of dementia who will benefit from a specialized distinct environment may be admitted to the organization’s secured, distinct dementia care unit or area.

Standard PC.02.02.02
An individual(s) coordinates the provision of care, treatment, and services for patients and residents.

Elements of Performance for PC.02.02.02
A 3. For organizations that elect The Joint Commission Memory Care Certification option: The organization designates a qualified individual(s), experienced and trained in the care of patients or residents with dementia, who coordinates the provision of dementia care and services. (For more information, refer to Standard HR.01.02.01).

Note: Examples of training may include dementia-specific educational conferences, participation in the CARES™ Dementia Basics Program, or CARES™ Dementia Advanced Care Program.

A 4. For organizations that elect The Joint Commission Memory Care Certification option: The individual(s) who coordinates the provision of dementia care and
services does the following:

- Coordinates patient and resident activities that match the individual’s interests, cognitive ability, memory, attention span, language, reasoning ability, and physical function
- Monitors staff performance regarding personalized approaches to address behavioral expressions of unmet needs (See also HR.01.05.03, EP 24)
- Monitors staff performance regarding communication techniques for patients and residents with memory impairment
  
  Note: Examples of communication techniques include speaking clearly, staying calm, using simple sentences, and using visual cues.
- Fosters an authentic learning environment through coaching and modeling of effective dementia care practices (See also IM.03.01.01, EP 5 and HR.01.05.03, EP 24)
- Coordinates internal resources and provides information on how to access external resources in response to family support needs (See also PC.02.01.08, EP 7)
- Communicates the dementia program’s quality and safety needs to leadership (For more information, refer to Standard LD.02.03.01)
- Participates in the evaluation of cognitive devices and equipment to support the care and treatment of patients or residents with dementia
  
  Note: An organization may designate more than one individual to coordinate the provision of dementia care and services as long as each individual performs the roles listed above.

**Standard PC.02.02.03**

The organization makes food and nutrition products available to its patients and residents.

**Elements of Performance for PC.02.02.03**

A 23. For organizations that elect The Joint Commission Memory Care Certification option: The organization engages patients and residents with dementia in the mealtime experience by creating opportunities for them to assist with the mealtime process, according to their abilities. Examples include having the patient or resident help plan the menu or place decorative centerpieces on the tables.

A 24. For organizations that elect The Joint Commission Memory Care Certification option: The organization promotes a social environment during mealtime by seating patients and residents with dementia according to similar abilities or interests.

A 25. For organizations that elect The Joint Commission Memory Care Certification option: To minimize confusion and promote independence for patients and residents with dementia, the organization does the following at mealtime:

- Serves food in a manner that offers visual contrast between the plate, food, and place setting
- Limits how many food choices are provided at once
- Provides finger foods when cutlery use becomes challenging
- Provides other methods of assistance, as needed, such as a cup with a lid and straw

**Standard PC.02.02.09**

Patients and residents are provided with opportunities to participate in social and recreational activities.

**Elements of Performance for PC.02.02.09**

A 5. For organizations that elect The Joint Commission Memory Care Certification option: The organization provides interactive, technology-based activity programming for patients and residents with dementia, according to their abilities, that stimulates cognition and adapts to each patient’s or resident’s unique abilities and interests.

C 6. For organizations that elect The Joint Commission Memory Care Certification option: The organization documents the life story of patients and residents with dementia to create opportunities for meaningful engagement that includes major life events, important people, lifelong occupation, hobbies, interests, favorite music, favorite foods, cultural practices, spiritual practices, and other activities of enjoyment.

A 7. For organizations that elect The Joint Commission Memory Care Certification option: The organization provides opportunities for patients and residents with dementia to go on outings on a routine basis if it is determined that the patient or resident can benefit
Optional Memory Care Certification Requirements (continued)

A 8. For organizations that elect The Joint Commission Memory Care Certification option: The organization provides opportunities for family of patients and residents with dementia to be involved in activity programs.

A 9. For organizations that elect The Joint Commission Memory Care Certification option: The organization provides opportunities for intergenerational activities for patients and residents with dementia.

C 10. For organizations that elect The Joint Commission Memory Care Certification option: The organization provides daily physical activities for patients and residents with dementia, such as dance or exercise. These activities are provided daily, but individual patient’s and resident’s participation is based on what they can tolerate.

Note: Physical activity that involves balance and coordination may ultimately decrease the need for an assistive device and reduce the risk of falls.

Standard PC.02.03.01
The organization provides patient and resident education and training based on each patient’s or resident’s needs and abilities.

Element of Performance for PC.02.03.01
A 29. For organizations that elect The Joint Commission Memory Care Certification option: The organization provides a support group for family members of patients or residents with dementia that meets at a frequency determined by the organization.