Thank you for your interest in The Joint Commission’s proposed acute pain assessment and management standards for the Hospital accreditation program. These proposed standards underwent full public comment from January 9, 2017 to February 20, 2017 and will be finalized based on analysis of the information gathered during the comment period. Further information on the topic of pain assessment and management, including the announcement of final standards when they are approved, can be found on The Joint Commission’s website.
Leadership (LD) Chapter

Standard LD.04.04.01
Leaders establish priorities for performance improvement. (Refer to the "Performance Improvement" [PI] chapter.)

Element(s) of Performance for LD.04.04.01
32. The hospital implements process improvement activities identified through analysis of pain assessment and pain management data. (See also MS.05.01.01, EP 18; PI.01.01.01, EP 56; PI.02.01.01, EPs 4 and 8; PI.03.01.01, EPs 2 and 4)

Standard LD.04.05.17
Pain assessment and pain management, including safe opioid prescribing, is identified as an organizational priority for the hospital.

Element(s) of Performance for LD.04.05.17
1. The hospital has a leader or leadership team that is responsible for pain management and safe opioid prescribing and develops and monitors performance improvement activities.
2. The hospital promotes access to nonpharmacologic pain treatment modalities (this may include alternative modalities, such as, chiropractic, relaxation therapy, music therapy).
3. The hospital provides staff and licensed independent practitioners with educational resources and programs to improve pain assessment, pain management, and the safe use of opioid medications based on the identified needs of its patient population.
4. The hospital establishes a plan to monitor pain assessment and pain management for potential disparities in care within patient subgroups; these subgroups may be defined by age, language, race, ethnicity, or other factors relevant in the organization’s patient population. (See also RC.02.01.01, EP 1; RI.01.01.03, EPs 1 and 3)
5. The hospital provides information to staff and licensed independent practitioners on available services for consultation and referral of patients with complex pain management needs.
6. The hospital identifies opioid treatment programs that can be used by clinicians for patient referrals.
7. The hospital facilitates practitioner and pharmacist access to the Prescription Drug Monitoring Program databases.
8. The hospital provides equipment for clinicians to monitor patients considered high risk for adverse outcomes from opioid treatment during hospitalization.
Medical Staff (MS) Chapter

Standard MS.05.01.01
The organized medical staff has a leadership role in organization performance improvement activities to improve quality of care, treatment, and services and patient safety.

Element(s) of Performance for MS.05.01.01

18. The medical staff is actively involved in pain assessment, pain management, and safe opioid prescribing through the following:
   - Participating in the establishment of protocols and quality metrics
   - Reviewing performance improvement data
   (See also LD.04.04.01, EP 32)

Provision of Care, Treatment, and Services (PC) Chapter

Standard PC.01.02.07
The hospital assesses and manages the patient’s pain based on clinical practice guidelines and evidence-based practices and minimizes the risks associated with treatment.

Element(s) of Performance for PC.01.02.07

1. The hospital has written policies on pain screening, assessment, and reassessment. These policies are based on clinical practice guidelines and evidence-based practices.

2. The hospital uses methods to screen, assess, and reassess pain that are consistent with the patient’s age, condition, and ability to understand.

3. The hospital screens patients for pain or the risk of pain at the time of admission, based on the patient’s condition and planned medical procedures and treatments.

4. For patients who have been screened and found to have new, undiagnosed, or worsening pain, the hospital conducts an assessment of clinical and psychosocial risk factors that may affect pain assessment, pain management, and the risk of treatment with opioids.

5. For patients who have pain of unclear etiology after the initial history and physical examination, a diagnostic plan is developed and implemented.

6. The hospital either treats the patient’s pain or refers the patient for treatment. Note: Treatment strategies for pain may include pharmacologic, nonpharmacologic, and multimodal approaches.

7. The hospital develops a pain treatment plan based on evidence, protocols, and the patient’s clinical condition and pain management goals.

8. The hospital involves patients in the pain management treatment planning process through the following:
   - Developing realistic expectations and measureable goals for the degree, duration, and reduction of pain that are understood by the patient
   - Discussing the objectives used to evaluate treatment progress (for example, relief of pain and improved physical and psychosocial function)
   - Providing education on pain management, treatment options, and safe use of opioid medications
9. The hospital reassesses and responds to the patient’s pain through the following:
   - Evaluation and documentation of response(s) to pain intervention(s) (See also RC.01.01.01, EP 7)
   - Progress toward pain management goals and in the recovery process including functional ability (for example, ability to take a deep breath, turn in bed, walk with improved pain control)
   - Side effects of treatment
   - Risk factors for adverse events caused by the treatment

10. The hospital educates the patient and family on discharge plans related to pain management including the following:
    - Pain management plan of care
    - Side effects of pain management treatment
    - Activities of daily living, including the home environment, that might exacerbate pain or reduce effectiveness of the pain management plan of care, as well as strategies to address these issues
    - Safe use, storage, and disposal of opioids (for example, using the US Food and Drug Administration (FDA) medication disposal guidelines and information on locations in the community where opioids can be disposed)

Performance Improvement (PI) Chapter

Standard PI.01.01.01
The hospital collects data to monitor its performance.

**Element(s) of Performance for PI.01.01.01**

56. The hospital collects data on pain assessment and pain management including timing of reassessments, types of interventions, and effectiveness. (See also LD.04.04.01, EP 32)

Standard PI.02.01.01
The hospital compiles and analyzes data.

**Element(s) of Performance for PI.02.01.01**

18. The hospital analyzes data collected on pain assessment and pain management.

19. The hospital establishes and monitors indicators of safe use of opioids (for example, checking for adverse events, use of naloxone, use of high doses, and duration of opioid prescriptions).