

Prepublication Requirements

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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>.



Standards and Elements of Performance Deletions Related to EP Review Phase III

APPLICABLE TO AMBULATORY HEALTH CARE CENTERS

Effective July 1, 2017

Environment of Care Chapter

EC.01.01.01

The organization plans activities to minimize risks in the environment of care.

Note: One or more persons can be assigned to manage risks associated with the management plans described in this standard.

Elements of Performance for EC.01.01.01

2. Leaders identify an individual(s) to intervene whenever environmental conditions immediately threaten life or health or threaten to damage equipment or buildings.

Rationale: Implicit in EP 1 of this standard

EC.02.04.01

The organization manages medical equipment risks.

Elements of Performance for EC.02.04.01

1. The organization has a systematic approach to selecting and acquiring medical equipment.

Rationale: Issue that should be left to the discretion of the organization

Key: **D** indicates that documentation is required; **R** indicates an identified risk area

EC.02.05.07

The organization inspects, tests, and maintains emergency power systems.

Note: This standard does not require organizations to have the types of emergency power equipment discussed below. However, if these types of equipment exist within the building, then the following maintenance, testing, and inspection requirements apply.

Elements of Performance for EC.02.05.07

11. If a required emergency power system test fails, the organization implements measures to protect patients, visitors, and staff until necessary repairs or corrections are completed.

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Rationale: Part of regular operations/processes

12. If a required emergency power system test fails, the organization performs a retest after making the necessary repairs or corrections.

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Rationale: Part of regular operations/processes

EC.02.06.01

The organization establishes and maintains a safe, functional environment.

Elements of Performance for EC.02.06.01

23. The organization provides emergency access to all locked and occupied spaces.

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Rationale: Should be left to organization discretion

EC.03.01.01

Staff and licensed independent practitioners are familiar with their roles and responsibilities relative to the environment of care.

Elements of Performance for EC.03.01.01

1. Staff and licensed independent practitioners can describe or demonstrate methods for eliminating and minimizing physical risks in the environment of care. (See also HR.01.04.01, EP 1)

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Rationale: Should be left to organization discretion

3. Staff and licensed independent practitioners can describe or demonstrate how to report environment of care risks. (See also HR.01.04.01, EP 1)

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Rationale: Should be left to organization discretion

EC.04.01.01

The organization collects information to monitor conditions in the environment.

Elements of Performance for EC.04.01.01

14. The organization monitors environmental deficiencies, hazards, and unsafe practices.

Rationale: Should be left to organization discretion

EC.04.01.03

The organization analyzes identified environment of care issues.

Elements of Performance for EC.04.01.03

1. Representatives from clinical, administrative, and support services participate in the analysis of environment of care data.

Rationale: Should be left to organization discretion

EC.04.01.05

The organization improves its environment of care.

Elements of Performance for EC.04.01.05

2. The organization evaluates changes to determine if they resolved environmental safety issues.

Rationale: Implicit in EC.04.01.05, EP 1

Human Resources Chapter

HR.01.02.05

The organization verifies staff qualifications.

Elements of Performance for HR.01.02.05

6. The organization uses the following information from HR.01.02.05, Elements of Performance 1–5, to make decisions about staff job responsibilities:
- Required licensure, certification, or registration verification
 - Required credentials verification
 - Education and experience verification
 - Criminal background check
 - Applicable health screenings

Rationale: Issue should be left to organization discretion

HR.01.05.03

Staff participate in ongoing education and training.

Elements of Performance for HR.01.05.03

5. Staff participate in education and training that is specific to the needs of the population(s) served by the organization. Staff participation is documented. (See also PC.01.02.09, EP 3)



Rationale: Implicit in EPs 1 and 4 of this standard

7. Staff participate in education and training that includes information about the need to report unanticipated adverse events and how to report these events. Staff participation is documented.



Rationale: Implicit in EPs 1 and 4 of this standard and in safety program reporting requirements in the Leadership chapter

HR.01.06.01

Staff are competent to perform their responsibilities.

Elements of Performance for HR.01.06.01

15. The organization takes action when a staff member's competence does not meet expectations.



Rationale: Part of regular operations; process should be left to the discretion of the organization

Infection Prevention and Control Chapter

IC.01.05.01

The organization plans for preventing and controlling infections.

Elements of Performance for IC.01.05.01

3. The organization plans how it will evaluate its infection prevention and control activities. This method of evaluation is documented.



Rationale: Process should be left to the discretion of the organization

7. The organization has a method for communicating responsibilities about preventing and controlling infection to licensed independent practitioners, staff, visitors, patients, and families. Information for visitors, patients, and families includes hand and respiratory hygiene practices. (See also IC.02.01.01, EP 7)

Note: Information may be in different forms of media, such as posters or pamphlets.

Rationale: Duplicative of IC.02.01.01, EP 7

8. The organization identifies methods for reporting infection surveillance, prevention, and control information to external organizations. (See also IC.02.01.01, EP 9)

Rationale: Duplicative of IC.02.01.01, EP 9

IC.01.06.01

The organization prepares to respond to an influx of potentially infectious patients.

Elements of Performance for IC.01.06.01

1. The organization identifies resources that can provide information about infections that could cause an influx of potentially infectious patients.

Note: Resources may include local, state, and federal public health systems.

Rationale: Process should be left to the discretion of the organization

5. If the organization decides to accept an influx of potentially infectious patients, then the organization describes in writing its methods for managing these patients over an extended period of time.

Rationale: Duplicative of EP 4 in this standard

6. When the organization determines it is necessary, the organization activates its response to an influx of potentially infectious patients.

Rationale: Process should be left to the discretion of the organization

Information Management Chapter

IM.01.01.01

The organization plans for managing information.

Elements of Performance for IM.01.01.01

1. The organization identifies the internal and external information needed to provide safe, quality care.

Rationale: Duplicative of LD.03.02.01, EP 1

3. The organization uses the identified information to guide development of processes to manage information.

Rationale: Duplicative of LD.03.02.01, EP 1

4. Staff and licensed independent practitioners, selected by the organization, participate in the assessment, selection, integration, and use of information management systems for the delivery of care, treatment, or services.

Rationale: Duplicative of LD.03.02.01, EP 1

IM.01.01.03

The organization plans for continuity of its information management processes.

Elements of Performance for IM.01.01.03

5. The organization's plan for managing interruptions to electronic information processes is tested for effectiveness according to time frames defined by the organization.

Rationale: Duplicative of EC utilities management requirements and EM emergency management requirements

6. The organization implements its plan for managing interruptions to information processes to maintain access to information needed for patient care, treatment, or services. (See also IM.03.01.01, EP 1)

Rationale: Duplicative of EC utilities management requirements and EM emergency management requirements

IM.02.01.01

The organization protects the privacy of health information.

Elements of Performance for IM.02.01.01

5. The organization monitors compliance with its policy on the privacy of health information. (See also RI.01.01.01, EP 7)

Note: For ambulatory surgical centers that elect to use The Joint Commission deemed status option: The organization must comply with Section 45 of the Code of Federal Regulations parts 160 and 164, generally known as the Health Insurance Portability and Accountability Act (HIPAA) Privacy and Security Rules.

Rationale: Implicit in EP 3 of this standard

IM.02.01.03

The organization maintains the security and integrity of health information.

Elements of Performance for IM.02.01.03

8. The organization monitors compliance with its policies on the security and integrity of health information.

Note: For ambulatory surgical centers that elect to use The Joint Commission deemed status option: The organization must comply with Section 45 of the Code of Federal Regulations parts 160 and 164, generally known as the Health Insurance Portability and Accountability Act (HIPAA) Privacy and Security Rules.

Rationale: Part of regular operations; process should be left to the discretion of the organization

IM.02.02.01

The organization effectively manages the collection of health information.

Elements of Performance for IM.02.02.01

1. The organization uses uniform data sets to standardize data collection throughout the organization.

Rationale: Process should be left to the discretion of the organization

IM.04.01.01

The organization maintains accurate health information.

Elements of Performance for IM.04.01.01

1. The organization has processes to check the accuracy of health information.

Rationale: Duplicative of RC.01.04.01, EP 1

Leadership Chapter

LD.01.04.01

A chief executive manages the organization.

Elements of Performance for LD.01.04.01

2. The chief executive provides for the following: Recruitment and retention of staff.

Rationale: Duplicative of LD.03.06.01, EP 3

11. When the chief executive is absent from the organization, a qualified individual is designated to perform the duties of this position.

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Rationale: Issue should be left to the discretion of the organization

LD.03.01.01

Leaders create and maintain a culture of safety and quality throughout the organization.

Elements of Performance for LD.03.01.01

3. Leaders provide opportunities for all individuals who work in the organization to participate in safety and quality initiatives.

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Rationale: Process should be left to the discretion of the organization

6. Leaders provide education that focuses on safety and quality for all individuals.

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Rationale: Process should be left to the discretion of the organization

7. Leaders establish a team approach among all staff at all levels.

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Rationale: Process should be left to the discretion of the organization

8. All individuals who work in the organization, including staff and licensed independent practitioners, are able to openly discuss issues of safety and quality. (See also LD.04.04.05, EP 6)

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Rationale: Process should be left to the discretion of the organization

9. Literature and advisories relevant to patient safety are available to all individuals who work in the organization.

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Rationale: Process should be left to the discretion of the organization

10. Leaders define how members of the population(s) served can help identify and manage issues of safety and quality within the organization.

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Rationale: Process should be left to the discretion of the organization

LD.04.01.03

The organization develops an annual operating budget and, when needed, a long-term capital expenditure plan.

Elements of Performance for LD.04.01.03

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| 5. | Leaders monitor the implementation of the budget and long-term capital expenditure plan. | <input type="checkbox"/> <input type="checkbox"/> |
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Rationale: Part of regular operations/processes

LD.04.01.05

The organization effectively manages its programs, services, or sites.

Elements of Performance for LD.04.01.05

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| 1. | Leaders of the program, service, or site oversee operations. | <input type="checkbox"/> <input type="checkbox"/> |
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Rationale: Duplicative of current LD.04.01.05, EPs 2, 3, 4, 5

LD.04.01.11

The organization makes space and equipment available as needed for the provision of care, treatment, or services.

Elements of Performance for LD.04.01.11

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| 2. | The arrangement and allocation of space supports safe, efficient, and effective care, treatment, or services. | <input type="checkbox"/> <input type="checkbox"/> |
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Rationale: Duplicative of current LD.04.01.11, EP 3

LD.04.02.03

Ethical principles guide the organization's business practices.

Elements of Performance for LD.04.02.03

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| 3. | The organization follows ethical practices for marketing and billing. | <input type="checkbox"/> <input type="checkbox"/> |
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Rationale: Part of operations

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| 4. | Marketing materials accurately represent the organization and address the care, treatment, or services that the organization provides either directly or by contractual arrangement. | <input type="checkbox"/> <input checked="" type="checkbox"/> |
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Rationale: Part of regular operations/processes

6. When leaders excuse staff members from a job responsibility, care, treatment, or services are not affected in a negative way.

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Rationale: Process should be left to the discretion of the organization

LD.04.03.07

Patients with comparable needs receive the same standard of care, treatment, or services throughout the organization.

Elements of Performance for LD.04.03.07

2. Care, treatment, or services are consistent with the organization's mission, vision, and goals.

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Rationale: Issue should be left to the discretion of the organization

LD.04.04.03

New or modified services or processes are well designed.

Elements of Performance for LD.04.04.03

6. The organization tests and analyzes its design of new or modified services or processes to determine whether the proposed design or modification is an improvement.

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Rationale: Process should be left to the discretion of the organization

Medication Management Chapter

MM.03.01.05

The organization safely controls medications brought into the organization by patients, their families, or licensed independent practitioners.

Elements of Performance for MM.03.01.05

3. The organization informs the prescriber and patient if the medications brought into the organization by patients, their families, or licensed independent practitioners are not permitted.

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Note: This element of performance is also applicable to sample medications.

Rationale: Implicit in EPs 1 and 2 of this standard

MM.08.01.01

The organization evaluates the effectiveness of its medication management system.

Note: This evaluation includes reconciling medication information. (Refer to NPSG.03.06.01 for more information)

Elements of Performance for MM.08.01.01

4. The organization reviews the literature and other external sources for new technologies and best practices.

Rationale: Process should be left to the discretion of the organization

Provision of Care, Treatment, and Services Chapter

PC.01.02.01

The organization assesses and reassesses its patients.

Elements of Performance for PC.01.02.01

4. Based on the patient's condition, information gathered in the initial assessment includes the following:
- Physical, psychological, and social assessment
 - Nutrition and hydration status
 - Functional status
 - For patients who are receiving end-of-life care, the social, spiritual, and cultural variables that influence the patient's and family members' perception of grief
- Note: This bullet is not applicable to settings that provide episodic care, such as urgent care and convenient care clinics.
(See also RC.02.01.01, EP 2)

Rationale: Part of clinical care process; identification of components of the assessment should be defined by the organization; also covered at PC.01.02.01, EPs 1 and 2

23. During patient assessments and reassessments, the organization gathers the data and information it requires.

Rationale: Part of clinical care process; also covered at PC.01.02.01, EP 1

PC.01.02.09

The organization assesses the patient who may be a victim of possible abuse and neglect.

Elements of Performance for PC.01.02.09

5. The organization either assesses the patient who meets criteria for possible abuse and neglect or refers the patient to a public or private community agency for assessment.

Rationale: Implicit in other EPs in this standard

PC.01.02.15

The organization provides for diagnostic testing.

Elements of Performance for PC.01.02.15

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| 1. Diagnostic testing and procedures are performed as ordered. | <input type="checkbox"/> <input type="checkbox"/> |
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Rationale: Part of clinical care process

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| 3. When a test report requires clinical interpretation, information necessary to interpret the results is provided with the request for the test. | <input type="checkbox"/> <input type="checkbox"/> |
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Rationale: Part of clinical care process

PC.03.01.01

The organization plans operative or other high-risk procedures, including those that require the administration of moderate or deep sedation or anesthesia.

Elements of Performance for PC.03.01.01

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| 1. Individuals administering moderate or deep sedation and anesthesia are qualified and have credentials to manage and rescue patients at whatever level of sedation or anesthesia is achieved, either intentionally or unintentionally. (See also HR.02.01.03, EPs 3–6) | <input checked="" type="checkbox"/> <input type="checkbox"/> |
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Rationale: Addressed in other standards such as HR.01.02.01, HR.01.02.05, HR.01.02.07, and HR.02.01.03

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| 8. For operative or other high-risk procedures, including those that require the administration of moderate or deep sedation or anesthesia: The organization has resuscitation equipment available. (See also MM.03.01.03, EP 2) | <input checked="" type="checkbox"/> <input type="checkbox"/> |
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Rationale: Duplicative of PC.02.01.11, EP 2

PC.03.01.03

The organization provides the patient with care before initiating operative or other high-risk procedures, including those that require the administration of moderate or deep sedation or anesthesia.

Elements of Performance for PC.03.01.03

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| 2. Before operative or other high-risk procedures are initiated, or before moderate or deep sedation or anesthesia is administered: The organization assesses the patient's anticipated needs in order to plan for the postprocedure care. | <input type="checkbox"/> <input type="checkbox"/> |
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Rationale: Part of the clinical care process determined by the organization

3. Before operative or other high-risk procedures are initiated, or before moderate or deep sedation or anesthesia is administered: The organization provides the patient with preprocedural treatment and services, according to his or her plan for care.

Rationale: Part of the clinical care process determined by the organization

7. Before administering moderate or deep sedation or anesthesia, a licensed independent practitioner plans or concurs with the plan for sedation or anesthesia.

Rationale: Part of the clinical care process determined by the organization; also covered at PC.01.03.01, EP 1

PC.04.01.01

The organization has a process that addresses the patient's need for continuing care, treatment, or services after discharge or transfer.

Elements of Performance for PC.04.01.01

3. The organization describes the mechanisms for external transfer of the patient.

Rationale: Duplicative of PC.04.01.01, EP 2

4. The organization agrees with the receiving organization about each of their roles to keep the patient safe during transfer.

Rationale: Duplicative of PC.04.01.01, EP 2

PC.04.01.05

Before the organization discharges or transfers a patient, it informs and educates the patient about his or her follow-up care, treatment, or services.

Elements of Performance for PC.04.01.05

8. The organization provides written instructions at the end of an episode of care or at discharge in a manner that the patient and/or the patient's family or caregiver can understand. (See also RI.01.01.03, EP 1)

Rationale: Duplicative of RI.01.01.03, EP 1

Performance Improvement Chapter

PI.01.01.01

The organization collects data to monitor its performance.

Elements of Performance for PI.01.01.01

30. The organization considers collecting data on the following:
- Staff opinions and needs
 - Staff perceptions of risk to individuals
 - Staff suggestions for improving patient safety
 - Staff willingness to report adverse events

Rationale: Issue should be left to organization discretion

PI.02.01.01

The organization compiles and analyzes data.

Elements of Performance for PI.02.01.01

1. The organization compiles data in usable formats.

Rationale: Issue should be left to organization discretion

2. The organization identifies the frequency for data analysis.

Rationale: Issue should be left to organization discretion

5. The organization compares data with external sources, when available.

Rationale: Issue should be left to organization discretion

PI.03.01.01

The organization improves performance.

Elements of Performance for PI.03.01.01

1. Leaders prioritize the identified improvement opportunities. (See also PI.02.01.01, EP 8)

Rationale: Issue should be left to organization discretion

3. The organization evaluates actions to confirm that they resulted in improvements.

Rationale: Duplicative of PI.03.01.01, EPs 2 and 4

Record of Care, Treatment, and Services Chapter

RC.01.01.01

The organization maintains complete and accurate clinical records.

Elements of Performance for RC.01.01.01

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| 9. The organization uses standardized formats to document the care, treatment, or services it provides to patients. | <input style="width: 20px; height: 20px; border: 1px solid black;" type="checkbox"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="checkbox"/> |
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Rationale: Operational issue that should be left to organization discretion

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| 12. The organization tracks the location of all components of the clinical record. | <input style="width: 20px; height: 20px; border: 1px solid black;" type="checkbox"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="checkbox"/> |
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Rationale: Operational issue that should be left to organization discretion

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| 13. The organization assembles or makes available in a summary in the clinical record all information required to provide patient care, treatment, or services. (See also MM.01.01.01, EP 1) | <input style="width: 20px; height: 20px; border: 1px solid black;" type="checkbox"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="checkbox"/> |
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Rationale: Part of regular operations/process that should be determined by the organization

RC.02.01.07

The clinical record contains a summary list for each patient who receives continuing ambulatory care services.

Rationale: Part of regular operations/process that should be determined by the organization. Applies to all EPs within this standard.

Elements of Performance for RC.02.01.07

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| 1. A summary list is initiated for the patient by his or her third visit. | <input style="width: 20px; height: 20px; border: 1px solid black;" type="checkbox"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="checkbox"/> |
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Rationale: Also covered at RC.01.01.01, EP 13

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| 2. The patient's summary list contains the following information:
- Any significant medical diagnoses and conditions
- Any significant operative and invasive procedures
- Any adverse or allergic drug reactions
- Any current medications, over-the-counter medications, and herbal preparations | <input style="width: 20px; height: 20px; border: 1px solid black;" type="checkbox"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="checkbox"/> |
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Rationale: Also covered at RC.02.01.01, EP 2; RC.02.01.03, EP 1

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| 3. The patient's summary list is updated whenever there is a change in diagnoses, medications, or allergies to medications, and whenever a procedure is performed. | <input style="width: 20px; height: 20px; border: 1px solid black;" type="checkbox"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="checkbox"/> |
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4. The summary list is readily available to practitioners who need access to the information of patients who receive continuing ambulatory care services in order to provide care, treatment, or services.

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Rights and Responsibilities of the Individual Chapter

RI.01.03.01

The organization honors the patient's right to give or withhold informed consent.

Elements of Performance for RI.01.03.01

12. The informed consent process includes a discussion about any circumstances under which information about the patient must be disclosed or reported.
 Note: Such circumstances may include requirements for disclosure of information regarding cases of HIV, tuberculosis, viral meningitis, and other diseases that are reported to organizations such as health departments or the Centers for Disease Control and Prevention.

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Rationale: Covered by law and regulation or external requirements

RI.01.03.03

The organization honors the patient's right to give or withhold informed consent to produce or use recordings, films, or other images of the patient for purposes other than his or her care.

Elements of Performance for RI.01.03.03

2. When recordings, films, or other images of patients are made for external use, the organization obtains and documents informed consent prior to producing the recordings, films, or other images. This informed consent includes an explanation of how the recordings, films, or other images will be used.
 Note: Recordings, films, or other images made for external use are those that will be heard or seen by the public (for example, commercial filming, television programs, or marketing materials).

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Rationale: Process issue that should be left to the discretion of the organization

6. The organization informs the patient of his or her right to request cessation of the production of the recordings, films, or other images.

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Rationale: Process issue that should be left to the discretion of the organization

7. Before engaging in the production of recordings, films, or other images of patients, anyone who is not already bound by the organization's confidentiality policy signs a confidentiality statement to protect the patient's identity and confidential information.

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Rationale: Process issue that should be left to the discretion of the organization

8. The organization accommodates the patient's right to rescind consent before the recording, film, or image is used.

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Rationale: Process issue that should be left to the discretion of the organization

RI.01.03.05

The organization protects the patient and respects his or her rights during research, investigation, and clinical trials.

Elements of Performance for RI.01.03.05

1. The organization reviews all research protocols and weighs the risks and benefits to the patient participating in the research.

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Rationale: Part of clinical care; process should be left to the discretion of the organization. Implicit in other EPs in this standard

Transplant Safety Chapter

TS.03.01.01

The organization uses standardized procedures for managing tissues.

Elements of Performance for TS.03.01.01

4. The organization coordinates its acquisition, receipt, storage, and issuance of tissues throughout the organization.

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Rationale: Part of regular operations that should be left to the discretion of the organization

11. The organization complies with state and/or federal regulations when it acts as a tissue supplier. *

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Note: The US Food and Drug Administration (FDA) considers the routine policy or practice of shipping tissue to another facility as distribution which requires FDA registration. Returning unused tissue back to the tissue supplier is not considered distribution and does not require FDA registration.

Footnote *: Please refer to the following website:
<http://www.fda.gov/cber/tissue/tisreg.htm>.

Rationale: Covered by law and regulation or other external requirements

Waived Testing Chapter

WT.01.01.01

Policies and procedures for waived tests are established, current, approved, and readily available.

Elements of Performance for WT.01.01.01

5. Current and complete policies and procedures are available for use during testing to the person performing the waived test.

Rationale: Part of regular operations that should be left to the discretion of the organization

6. Written policies, procedures, and manufacturers' instructions for waived testing are followed. (See also WT.04.01.01, EPs 3–5)
 Note: Manufacturers' recommendations and suggestions are surveyed as requirements.

Rationale: Part of regular operations that should be left to the discretion of the organization; covered by law and regulation or other external requirements; also covered at WT.01.01.01, EPs 1 and 2

7. The criteria for confirmatory testing are followed as specified in the waived testing written procedures.

Rationale: Part of regular operations that should be left to the discretion of the organization

8. Clinical use of results is consistent with the organization's policies and the manufacturers' recommendations for waived tests.

Rationale: Part of regular operations that should be left to the discretion of the organization; covered by law and regulation or other external requirements