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 HOME CARE ORGANIZATIONS**

**Effective July 1, 2017**

**Environment of Care Chapter**

**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.

   **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.

   **Rationale: Part of regular operations/processes**

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

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EC.04.01.01
The organization collects information to monitor conditions in the environment.

Elements of Performance for EC.04.01.01

12. In buildings where patients receive care, treatment, or services, every six months the organization conducts environmental tours in patient care areas to evaluate the performance of activities intended to minimize risks in the environment of care. □ □

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. The organization identifies and analyzes problematic trends related to the environment of care. □ □

Rationale: Should be left to organization discretion

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

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

2. The organization uses assessment methods to determine the individual's competence in the skills being assessed.

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

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 infections 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 increased number 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 increased number 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 increased number 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 increased number 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, 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)

**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.

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.02.02.03
The organization retrieves, disseminates, and transmits health information in useful formats.

Elements of Performance for IM.02.02.03

1. The organization has written policies addressing data capture, display, transmission, and retention.

Rationale: Operational issue that should be left to organization discretion

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

LD.01.07.01
Individual leaders have the knowledge needed for their roles in the organization or they seek guidance to fulfill their roles.

Rationale: Issue should be left to the discretion of the organization. Applies to all EPs within this standard.

Elements of Performance for LD.01.07.01

2. Leaders are oriented to all of the following:
   - The organization’s mission and vision
   - The organization’s safety and quality goals
   - The organization’s structure and the decision-making process
   - The development of the budget as well as the interpretation of the organization’s financial statements
   - The population(s) served by the organization and any issues related to that population(s)
   - The individual and interdependent responsibilities and accountabilities of leaders as they relate to supporting the mission of the organization and to providing safe and quality care
   - Applicable law and regulation

3. Governance provides leaders with access to information and training in areas where they need additional skills or expertise.
LD.02.03.01
Leaders regularly communicate with each other on issues of safety and quality.

Elements of Performance for LD.02.03.01

1. Leaders discuss issues that affect the organization and the population(s) it serves, including the following:
   - Performance improvement activities
   - Reported safety and quality issues
   - Proposed solutions and their impact on the organization’s resources
   - Reports on key quality measures and safety indicators
   - Safety and quality issues specific to the population served
   - Input from the population(s) served

   **Rationale:** Leave to organization discretion

2. The organization establishes time frames for the discussion of issues that affect the organization and the population(s) it serves.

   **Rationale:** Leave to organization discretion

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.

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

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

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

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

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

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

   **Rationale:** Process should be left to the discretion of the organization
9. Literature and advisories relevant to patient safety are available to individuals who work in the organization.

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

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

**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**

5. Leaders monitor the implementation of the budget and long-term capital expenditure plan.

**Rationale: Part of regular operations/processes**

**LD.04.01.05**
The organization effectively manages its programs, services, sites, or departments.

**Elements of Performance for LD.04.01.05**

1. Leaders of the program, service, site, or department oversee operations.

**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**

2. The arrangement and allocation of space supports safe, efficient, and effective care, treatment, or services.

**Rationale: Duplicative of current LD.04.01.11, EP 3**
**LD.04.02.03**  
Ethical principles guide the organization’s business practices.

<table>
<thead>
<tr>
<th>Elements of Performance for LD.04.02.03</th>
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<tbody>
<tr>
<td>3. The organization follows ethical practices for marketing and billing.</td>
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<td><strong>Rationale:</strong> Part of operations</td>
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<td>6. When leaders excuse staff members from a job responsibility, care, treatment, or services are not affected in a negative way.</td>
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<td><strong>Rationale:</strong> Process should be left to the discretion of the organization</td>
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**LD.04.03.07**  
Patients with comparable needs receive the same standard of care, treatment, or services throughout the organization.

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<thead>
<tr>
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<tr>
<td>2. Care, treatment, or services are consistent with the organization’s mission, vision, and goals.</td>
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**LD.04.04.03**  
New or modified services or processes are well designed.

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<thead>
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<tr>
<td>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.</td>
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<tr>
<td><strong>Rationale:</strong> Process should be left to the discretion of the organization</td>
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<tr>
<td>7. Leaders involve staff and patients in the design of new or modified services or processes.</td>
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<td><strong>Rationale:</strong> Process should be left to the discretion of the organization</td>
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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. 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 processes. 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**

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 or exploitation.

#### Elements of Performance for PC.01.02.09

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

**Rationale:** Implicit in other EPs in this standard

### 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 process for external transfer of the patient.

**Rationale:** Duplicative of PC.04.01.01, EP 2

4. The organization collaborates 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

3. Before the patient is discharged or transferred, the organization provides the patient with information about why he or she is being discharged or transferred.

**Rationale:** Covered by other EPs in this standard

8. The organization provides discharge instructions 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
The organization collects data to monitor its performance.

Elements of Performance for PI.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
   - Conditions in the organization or patient environment that are related to care, treatment, or services

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 of 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

Record of Care, Treatment, and Services Chapter

RC.01.01.01
The organization maintains complete and accurate patient records.

Elements of Performance for RC.01.01.01

9. The organization uses standardized formats to document the care, treatment, or services it provides to patients.

Rationale: Operational issue that should be left to organization discretion
The organization tracks the location of all components of the patient record.  

**Rationale:** Operational issue that should be left to organization discretion

The organization assembles or makes available in a summary in the patient record all pertinent information required to provide patient care, treatment, or services. (See also MM.01.01.01, EP 1)  
Note: Pertinent information may include physician orders, staff documentation, and summary reports.

**Rationale:** Part of regular operations/process that should be determined by the organization

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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**

1. 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.

**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).

**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.

   **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.

   **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.

   **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.

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

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**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**

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