Leadership Requirement Added to Align with CMS

Effective January 9, 2017, Leadership (LD) Standard LD.01.03.01, Element of Performance (EP) 12 for deemed-status home health agencies and hospices will also apply to deemed-status hospitals, critical access hospitals, and ambulatory surgical centers.

For The Joint Commission’s deemed-status programs, the Medicare Condition of Participation (CoP) (or Condition for Coverage [CfC], for ambulatory care) concerning an organization’s governing body is cited if the governing body is not fulfilling its responsibilities. While Standard LD.01.03.01 states that the governing body/governance “is ultimately accountable for the safety and quality of care, treatment, and services,” currently there is no specific EP pertaining to the governing body’s legal responsibility. In addition, different EPs are used across deemed programs to cite issues related to the governing body’s failure in carrying out its responsibilities.

In order to have a consistent process that uses EP language comparable to the CoPs/CfCs across deemed programs, The Joint Commission determined that one EP should be used for all deemed programs and identified Standard LD.01.03.01, EP 12, from its home care program as the best EP to use for citing a governing body Condition-level finding.

The print accreditation manuals for hospitals, critical access hospitals, and ambulatory care organizations publishing in December 2016 will include the new EP, which will then be added to E-dition® on January 9, 2017 (see the related article that starts below on the upcoming postings and publications of manual products).

Questions may be directed to Laura Smith, project director, Department of Standards and Survey Methods, The Joint Commission, at lsmith@jointcommission.org.

Posting: Fall E-dition® for Accreditation and Certification Manuals

The January 1 E-dition® updates to the comprehensive accreditation manuals and certification manuals were posted to the Joint Commission Connect™ extranet site in early November. The box in the column at right lists the programs that received updates in the E-dition. In addition, the new Comprehensive Cardiac Center certification program was released for trial viewing on E-dition at the end of November.

Please note that the E-dition will be updated a second time on January 9, 2017, for the ambulatory care, behavioral health care, critical access hospital, hospital, home care, and nursing care center programs. This E-dition release will include changes to requirements in the Environment of Care (EC) and Life Safety (LS) chapters resulting from the Centers for Medicare & Medicaid Services (CMS) adoption of the 2012 editions of the National Fire Protection Association’s NFPA 101: Life Safety Code® and NFPA 99: Health Care Facilities Code (see November 2016 Perspectives, page 7). Until January 9, 2017, surveyors are using the current LS and EC standards to survey to the 2012 code requirements.

The print accreditation manuals publishing through December 2016 include the January 1 effective standards and the revised EC and LS requirements as appropriate. The box on page 11 lists all the print manual products publishing at this time.

Major revisions that appear in the print and/or E-dition updates include the changes in the following list (items with a square bullet are Project REFRESH–related changes). See the What’s New section included in your accreditation resource to identify specific changes for your setting.

- Revisions to requirements for Advanced Certification in Heart Failure (an advanced disease-specific care program), effective January 1, 2017 (see June 2016 Perspectives, pages 3–10)
- New Medication Management (MM) Standard MM.09.01.01 addressing antimicrobial stewardship for hospitals, critical access hospitals, and nursing care centers, effective January 1, 2017 (see July 2016 Perspectives, Continued on page 8

* Life Safety Code® is a registered trademark of the National Fire Protection Association, Quincy, MA.