Revisions to the Palliative Care Certification Requirements

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.

Please note: Where applicable, this report shows current standards and EPs first, with deleted language struck-through. Then, the revised requirement follows in bold text, with new language underlined.

APPLICABLE TO PALLIATIVE CARE CERTIFICATION
Effective July 1, 2020

Program Management (PCPM) Chapter

PCPM.8

The program promotes collaboration among program staff and with the organization staff who are involved in the patient’s care.

Element(s) of Performance for PCPM.8

3. The program demonstrates teamwork among the interdisciplinary team members and other organization staff who are involved in the patient’s care.

3. The program demonstrates teamwork among the interdisciplinary team members and other organization staff who are involved in the patient’s care, including responding to and managing incoming referrals and offering consultations.

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

PCPC.1

Patients and families know how to access and use the program’s care, treatment, and services.

Element(s) of Performance for PCPC.1

6. The program assesses the caregiver’s willingness and ability to provide care. Note: This may include administering medication, accessing community resources, and assisting with activities of daily living.

7. The interdisciplinary team identifies family and caregiver burden and assists in identifying additional resources when needed.
6. Program staff inform patients and families of their responsibility to provide information that is important to care, treatment, and services.

8. Program staff inform patients and families of their responsibility to provide information that is important to care, treatment, and services.

7. Program staff inform patients and families about their right to refuse any or all of the care, treatment, and services offered by the program.

9. Program staff inform patients and families about their right to refuse any or all of the care, treatment, and services offered by the program.

8. Programs that do not provide hospice care have a process for making referrals to one or more hospices that will accept palliative care patient referrals.

10. Programs that do not provide hospice care have a process for making referrals to one or more hospices that will accept palliative care patient referrals.

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