Revised Requirements for Substance Use Disorder Treatment

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 THE BEHAVIORAL HEALTH CARE ACCREDITATION PROGRAM
Effective July 1, 2020

Care, Treatment, and Services (CTS) Chapter

CTS.02.02.09

For opioid treatment programs: The organization has a process to provide medical histories, physical examinations, and diagnostic and laboratory tests.

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Element(s) of Performance for CTS.02.02.09

5. For opioid treatment programs: The program collects toxicological specimens in a manner that demonstrates trust and respect while taking reasonable steps to prevent falsification of samples.

   Note: Direct observation, although necessary for some patients, is neither necessary nor appropriate for all patients.

5. For organizations providing care, treatment, or services to individuals with addictions: The program collects toxicological specimens in a manner that demonstrates trust and respect while taking reasonable steps to prevent falsification of samples.

   Note: Direct observation, although necessary for some individuals, is neither necessary nor appropriate for all individuals.

15. For opioid treatment programs and medication-assisted treatment programs: When initiating medication-assisted treatment, medical assessments and testing are done according to current national guidelines established for the treatment being used.

Key: D indicates that documentation is required; R indicates an identified risk area;
For organizations providing care, treatment, or services to individuals with addictions: The assessment includes the individual's history of addictive behaviors.

### Element(s) of Performance for CTS.02.03.07

<table>
<thead>
<tr>
<th>1. For organizations providing care, treatment, or services to individuals with addictions: The organization obtains the individual's history of alcohol use, drug use, nicotine use, and other addictive behaviors. The history includes the following information:</th>
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<tbody>
<tr>
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<tr>
<td>- Duration</td>
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<tr>
<td>- Patterns of use (for example, continuous, episodic, binge, frequency, amounts, and route that the substance is taken)</td>
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<th>2. For organizations providing care, treatment, or services to individuals with addictions: The organization obtains the following information:</th>
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<td>- The individual's history of mental, emotional, behavioral, legal, and social consequences of dependence or addiction</td>
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<td>- The individual's history of physical problems associated with substance abuse, dependence, and other addictive behaviors</td>
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<td>- The history of the use of alcohol and other drugs, and other addictive behaviors by the individual's family</td>
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<td>- The individual's perception of the role of spirituality or religion in his or her life</td>
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<td>- If applicable to the belief system of the individual served, the individual's perception of the role of spirituality or religion in his or her life and recovery</td>
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<td>- The individual’s readiness to change</td>
</tr>
<tr>
<td>- The individual’s current living arrangements and environment, and options for an alternative and supportive living environment</td>
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For organizations providing care, treatment, or services to individuals with addictions: Assessments of the individual served contain information about the following:
- Previous care, treatment, or services
- The individual's response to previous care, treatment, or services
- The individual's relapse history

7. For organizations providing care, treatment, or services to individuals with addictions: Assessments of the individual served contain information about the following:
- Previous care, treatment, or services
- The individual's response to previous care, treatment, or services
- The individual's relapse history
- Acute intoxication and/or withdrawal potential

**CTS.02.03.13**

For organizations providing care, treatment, or services to individuals with addictions: The individual served is placed in the appropriate level of care.

**Element(s) of Performance for CTS.02.03.13**

1. For organizations providing care, treatment, or services to individuals with addictions: The organization uses an evidence-based, multidimensional admission assessment that includes, at a minimum, mental health, medical, and substance-use history for placement of the individual at the appropriate level of care.

**CTS.02.03.15**

For organizations providing care, treatment, or services to individuals with addictions: The organization uses drug testing to promote safety and quality of care.

**Element(s) of Performance for CTS.02.03.15**

1. For organizations providing care, treatment, or services to individuals with addictions: The organization follows its written policy on performing drug testing. Note: When developing this policy, the organization considers when drug testing is appropriate based on the individual's diagnosis, progress in treatment, history of use, and the provider's clinical judgement.

2. For organizations providing care, treatment, or services to individuals with addictions: The organization documents in the individual's clinical/case record the reason for drug testing, the results, and actions based on the results.

3. For organizations providing care, treatment, or services to individuals with addictions: The organization provides education and training for staff who are involved in drug testing. At a minimum, this includes test administration and storage of the specimen.

**CTS.03.01.03**

The organization has a plan for care, treatment, or services that reflects the assessed needs, strengths, preferences, and goals of the individual served.

Key: D indicates that documentation is required; R indicates an identified risk area;
Element(s) of Performance for CTS.03.01.03

28. For organizations providing care, treatment, or services to individuals with addictions: The organization develops a plan for care, treatment, or services at the time of admission or entry into care that reflects the assessed needs, strengths, preferences, and goals of the individual served.

CTS.04.03.35

The organization responds to medical emergencies according to organization policy and procedures.

Element(s) of Performance for CTS.04.03.35

5. For opioid treatment programs: The program has staff on duty who are trained and proficient in the following:
   - Cardiopulmonary resuscitation (CPR) through an evidence-based training program
   - Management of opiate overdose
   - Management of medical emergencies
   - Other appropriate techniques

5. For opioid treatment programs and medication-assisted treatment programs: The program has staff on duty who are trained and proficient in the following:
   - Cardiopulmonary resuscitation (CPR) through an evidence-based training program
   - Management of opiate overdose
   - Management of medical emergencies
   - Other relevant techniques

8. For organizations providing care, treatment, or services to individuals with addictions: The organization provides information on how to obtain life-saving medication in the case of opioid overdose.
   Note: One example would be providing information on how to obtain naloxone either from the organization or another source.

CTS.06.02.01

When an individual served is transferred or discharged, the continuity of care, treatment, or services is maintained.

Element(s) of Performance for CTS.06.02.01

4. For opioid treatment programs: The discharge planning process addresses referrals for continuing outpatient care after the last dose of medication and planning for re-entry to maintenance treatment if relapse occurs.

4. For opioid treatment programs and medication-assisted treatment programs: The discharge planning process addresses referrals for continuing outpatient care after the last dose of medication and the plan for re-entry to maintenance treatment if relapse occurs.
Leadership (LD) Chapter

**LD.04.02.03**

Ethical principles guide the organization's business practices.

**Element(s) of Performance for LD.04.02.03**

10. For organizations providing care, treatment, or services to individuals with addictions: Prior to admission, information regarding charges and financial responsibility for care, treatment, and services are provided to the individual served. This includes making the individual aware of any travel or other expenses they will be responsible for related to the care, treatment, or services that the organization provides.