

Beginnings: 1910-1986

Ernest Codman, MD, proposes the "end result" system of hospital standardization. American College of Surgeons (ACS) is founded and the "end result" system becomes an ACS objective.

1910-13

Joint Commission on Accreditation of Hospitals (JCAH) is created as an independent, not-for-profit organization in Chicago, Illinois.

1950-52

Begin accrediting psychiatric facilities, substance abuse programs and community mental health programs. The Social Security Act is amended to require that the Secretary of the U.S. Department of Health & Human Services validate JCAH findings.

1970-72

Begin accrediting hospice care organizations. Quality Healthcare Resources® (QHR), Inc. is formed as a not-for-profit consulting subsidiary of JCAH. QHR later becomes Joint Commission Resources (JCR).

1982-86

The Minimum Standard of the America College of Surgeons' Hospital Standardization Program

The Minimum Standard

 That physicians and surgeons privileged to practice in the hospital be organized as a definite group or staff. Such organization has nothing to do with the question as to whether the hospital is "open" or "closed," nor need it affect the various existing types of staff organization. The word \$17.47° is here editined as the group as the "results staff." "the visition staff," and the "swociase staff."

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2. That membership upon the staff be restricted to physicians and surgeons who are (a) full graduates of medicine in good standing and legally licensed to practice in their respective states or provinces, (b) competent in their respective fields, and (c) worthy in character and in matters of professional ethics; that in this latter connection the practice of the division, of fees, under any mixture shares the prohibited.

guise whatever, be prohibited.

3. That the staff initiate and, with the approval of the governing board of the hospital, adopt rules, regulations, and policies governing the professional work of the hospital; that these rules,

(a) That staff meetings be held at least once each month. (Inlarge haspitals the departments may choose to meet separately.) (b) That the staff review and analyze at regular intervals that the staff review and analyze at regular intervals that the staff review and analyzes, and the other specialties; the clinical records of patients, free and pay, to be the basis for such review and analyzes.

4. That accurate and complete records be written for all patien and filed in an accisable manner in the hospital—a complet case record being one which includes identification data; physical examination; special cauminations, such as comulation physical examination; special cauminations, such as comulation working diagnosts: medical or surgical teratement; goes and micro scopical pathological findings; progress notes; final diagnost condition on discharge; follow-up and, in case of death, autopo condition on discharge; follow-up and, in case of death, autopo

5. That diagnostic and therapeutic facilities under competer supervision be available for the study, diagnosis, and treatment a patients, these to include, at least (a) a clinical laboratory prividing chemical, bacteriological, serological, and pathologic services; (b) an X-ray department providing radiographic and

1917-26

ACS develops the Minimum Standard for Hospitals; the requirements fill one page. The ACS begins on-site inspection of hospitals. In 1926, the first standards manual is printed, consisting of 18 pages.

1964-65

Congress passes the Social Security Amendments of 1965 with a provision that hospitals accredited by JCAH are "deemed" to be in compliance with most Medicare Conditions of Participation for hospitals and can participate in Medicare and Medicaid programs.

1975-79

Begin accrediting ambulatory health care facilities. An agreement with the College of American Pathologists (CAP) results in CAP accreditation of a laboratory in a JCAH-accredited hospital being recognized in lieu of JCAH's accreditation of the laboratory.





Expansion: 1987-1998

The name changes to the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) to reflect an expanded scope of activities. The Agenda for Change launches, placing emphasis of the accreditation process on actual organization performance.

1987

The JCAHO headquarters and conference center opens in Oakbrook Terrace, Illinois, about 20 miles west of downtown Chicago, where previous headquarters was located, in the John Hancock Center.

1990

The first organization-specific performance reports are released to the public. Joint Commission International (JCI) is formed to provide education and consulting to international clients. Begin accrediting freestanding laboratories.

1994-95

The revised Sentinel Event Policy promotes self-reporting of medical errors and encourages close examination of the root causes of these events. Joint Commission Resources, Inc., (JCR) replaces QHR.

1998

1988-89

Begin developing the Indicator Measurement System®, an indicator-based performance monitoring system. Begin accrediting home care and managed care organizations.

Joint Commission
on Accreditation of Healthcare Organizations

1992-93

A new standard requires accredited hospitals to have a policy prohibiting smoking. The number and nature of confirmed substantive complaints filed against accredited organizations and the existence of type I recommendations becomes public information.

1996-97

Establish the Sentinel Event Policy. The Joint Commission website launches. ORYX®: The Next Evolution in Accreditation launches. Quality Check® becomes available on the Joint Commission website.

The Joint Commission Quality Check®





Growth: 1999-2009

The revised mission statement explicitly references patient safety. A toll-free hotline is established to encourage patients, their families, caregivers, and others to share concerns regarding care quality issues at accredited organizations.

1999

Establish the National Patient Safety Goals®. The Speak UpTM patient safety program launches. The Disease-Specific Care Certification program launches. With the National Quality Forum, establish the John M. Eisenberg Patient Safety & Quality Awards.

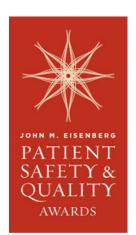
2002

Begin certifying health care staffing services, lung volume reduction surgery, left ventricular assist devices, and the nation's first certification for chronic kidney disease management. Life Safety Code Specialists are added to survey team.

2004-05

Release the E-dition, the first electronic version of accreditation standards. Begin certifying heart failure services. A refreshed mission statement and new vision statement are created. The Center for Transforming Healthcare launches.

2008-09



2000-01

Begin accrediting office-based surgery practices and critical access hospitals. JCI publishes the first comprehensive international quality standards for hospitals.

2003

Universal Protocol for Preventing Wrong Site, Wrong Procedure, Wrong Person SurgeryTM becomes effective. Accreditation certificates show the Gold Seal of Approval®. The first nationwide Primary Stroke Care Certification program is created with the American Stroke Association (ASA).

2006-07

Unannounced on-site accreditation surveys and certification reviews begin (with certain exceptions). Begin certifying advanced inpatient diabetes care and chronic obstructive pulmonary disease management. The name is shortened to The Joint Commission.





Specialization: 2010-2019

Begin advanced certification for palliative care programs. The Center releases its first Targeted Solutions Tool® (TST®) for improving hand hygiene.

2010-11

Begin certifying memory care, integrated care, perinatal care, and advanced certification for acute stroke ready hospitals. The Center releases the TST® for preventing falls and its ORO® 2.0, an online high reliability assessment.

2014-15

Elsevier begins publishing The Joint Commission Journal on Quality and Patient Safety. Begin certifying comprehensive cardiac care centers and medication compounding.

2017

Launch two new hospital certifications with AHA to improve the systems of care for heart attack and cardiovascular disease. JCI Accreditation (Beijing) Co. Ltd. (JCIA China) qualifies to provide service certification in mainland China.

2019



2012

Begin advanced certification for comprehensive stroke centers with the American Heart Association/American Stroke Association (AHA/ASA). The Center releases TSTs® for safe surgery and handoff communication.

2016

Begin advanced certification for total hip and total knee replacement and certifying patient blood management, and community-based palliative care – a first for the industry. Behavioral health standards addressing eating disorders become effective.

2018

Begin certifying thrombectomy-capable stroke centers. Stroke center certification is made available to non-accredited hospitals. Begin advanced certification for heart failure programs.



The Joint Commission



American Heart Association^a American Stroke Association^a

STROKE CERTIFICATION



Recognition: 2020-2022

In March, suspend all regular onsite surveys of hospitals and other health care organizations to allow organizations and professionals to focus on caring for patients with COVID-19.

2020

Begin accrediting assisted living organizations. Launch a Maternal Levels of Care Verification program with the American College of Obstetricians and Gynecologists to help reduce maternal mortality and morbidity in the U.S.

May, June 2021

Collaborate with Alzheimer's Association to help improve quality and safety in dementia care in nursing, skilled nursing, and assisted living facilities.

January 2022

Join the White House Conference on Hunger, Nutrition, and Health's Sync for Social Needs coalition, committing to a role in ending hunger and reducing diet-related disease in the United States by 2030.

October 2022



March 2021

Establish the Bernard J. Tyson National Award for Excellence in Pursuit of Healthcare Equity with Kaiser Permanente to recognize organizations and their partners that lead initiatives that achieve a measurable, sustained reduction in health care disparities.

October 2021

Establish the Leading Laboratories Recognition Program with the American Society for Clinical Pathology to promote laboratory leadership and elevate the visibility and collaborative work of the medical laboratory team.

April, June 2022

With American Heart Association, launch Comprehensive Heart Attack Center certification program. Join the Biden Administration's Health Sector Climate Pledge to reduce carbon contributions emanating from the healthcare sector.





Progression: 2022

