Standards and elements of performance (EPs) published in this manual are effective as of January 1, 2015.

**Note:** Your organization is responsible for meeting all applicable changes to accreditation requirements for organizations accredited under the Behavioral Health Care Program published in *Joint Commission Perspectives*, the official monthly newsletter of The Joint Commission.

Major changes that appear in this update to requirements for accreditation, policies, procedures, and other information include the following:

- “Human Resources” (HR) chapter renamed “Human Resources Management” (HRM); changes include the addition of several new requirements to make the chapter more relevant to the behavioral health care field, revision of existing requirements for clarity, relocation of requirements to chapters for which they are better suited, and deletion or requirements that are no longer considered relevant or valuable to the field.

- Updated Accreditation Decision Rules in “The Accreditation Process” (ACC) chapter to reflect 2015 decision rules.

- Completely revised “Sentinel Events” (SE) chapter. Redefined *sentinel event* and includes a new appendix of sentinel event–related standards and elements of performance (EPs).
## Type of Change

### How to Use This Manual (HM)

- Changes to the Manual: Added statement that standards may be revised in response to law and regulation changes
- Table 1. Acronyms Used in This Manual: Made the following changes:
  - Added CSAT (Center for Substance Abuse Treatment), OQPS (Office of Quality and Patient Safety), and OFI (Opportunities for Improvement)
  - Changed (HR) Human Resources to (HRM) Human Resources Management
  - Removed references to CSG (clinical/service group), (PFP) priority focus areas, and (PFP) Priority Focus Process
- Accreditation Requirements: Revised section title from “Requirements for Accreditation” and clarified the Notes description
- Accreditation Process Information: Revised section title from “Policies, Procedures, and Other Information”
- Identifying Applicable Standards: Added the following types of providers:
  - Telehealth providers to the Ambulatory Care Accreditation Program
  - Case management services, corrections-based services, and opioid treatment programs to the Behavioral Health Care Accreditation Program
  - Private duty services, nonmedical personal care and support services, and mail order and specialty pharmacies to the Home Care Accreditation program
- Understanding the Icons Used in the Manual: Updated reference to scoring information in the ACC chapter
- Keys to Successfully Achieving Standards Compliance: Added a bullet on signing up for news and alerts on the Joint Commission home page and using the “What’s New” feature in the E-dition
- Sidebar 2. Where Should I Go for More Information?: Made the following changes:
  - Clarified information regarding copies of print manuals and how to contact Joint Commission and JCR staff
  - Updated contact information
- Made additions and revisions throughout the chapter for navigating both E-dition and print manuals
- Minor editorial revisions
### Type of Change

**Requirements for Accreditation**

#### Care, Treatment, and Services (CTS)

- CTS.01.01.01, EP 2: Clarified that populations served shall be defined in writing
- CTS.02.01.09, EP 4: Added new EP regarding receiving opioid medication for patients with pain management needs
- CTS.02.04.05, EP 8: Deleted MOS requirement
- CTS.03.01.07, EP 4: Added new EP regarding completing referrals and follow-up within a specified period of time
- CTS.03.01.07, EPs 5–10: Renumbered EPs
- CTS.04.01.01, EP 4: Formerly HR.02.01.07, EP 3, requiring documentation of any orders issued while a temporary staff member is covering for a permanent staff member
- CTS.04.01.01, EPs 5–16: Renumbered EPs
- CTS.04.01.01, EP 10, now CTS.04.01.01, EP 11: Added clarification regarding managing comorbidities on site
- CTS.04.03.21, EP 3: Revised cross reference to HRM.01.05.01
- CTS.06.02.01, EP 10, Note: Added note regarding ongoing multidrug use and discharge
- CTS.06.03.01, EP 3: Changed to a direct impact requirement and deleted MOS requirement
- Minor editorial revisions

#### Environment of Care (EC)

- EC.02.03.03, EP 3: Added explanation about times and conditions of fire drills
- EC.02.03.03, EP 4, Note: Replaced fire alarm system with audible alarms as an alternative method of notifying staff
- EC.02.05.07, EP 1: Added time frame for performing battery-powered light tests
- Minor editorial revisions

#### Emergency Management (EM)

- EM.02.02.01, EP 6: Revised staff “person” to staff “member”
## Type of Change

### Human Resources Management (HRM)

- Completely revised and renamed “Human Resources” (HR) chapter to “Human Resources Management” (HRM):
  - Revised existing requirements for clarity
  - Moved some requirements to other chapters to which they were better suited
  - Deleted some requirements that were considered no longer relevant or valuable to the field
  - Left requirements related to opioid treatment programs (OTPs) unchanged because they are aligned to federal regulations and guidelines (standards numbering has been changed to align with chapter revisions)

- This summary does not list all changes, but a few revisions of particular significance include the following:
  - HR.01.02.01, now HRM.01.01.01: Revised to state organization will develop written job descriptions to more accurately reflect current practice
  - HR.01.06.01, EP 3, now HRM.01.06.01, EP 2: Added clarification to individuals assessing staff competence
  - HR.02.01.03, now HRM.01.02.01: Simplified language related to evaluating licensure or registration of staff, but retained the concepts of the former standard within other standards in the revised chapter
  - HR.02.01.07, EPs 1 and 2: Deleted, as content was redundant to Standard HR.01.02.05, now Standard HRM.01.02.05
  - HR.02.01.07, EP 3: Relocated to Care, Treatment, and Services (CTS) Standard CTS.04.01.01, EP 4

### Infection Prevention and Control (IC)

- IC.01.05.01, EP 6: Revised cross reference to HRM.01.03.01, EP 4
- IC.02.01.01, EP 7: Revised cross reference to HRM.01.03.01, EP 4
- IC.02.04.01, EP 2: Revised cross reference to HRM.01.03.01, EP 4

### Information Management (IM)

- Chapter Outline IM.02.02.05: Added note about the standard not applying to behavioral health care
- IM.02.01.01, EP 4: Added Note regarding patient confidentiality
**Type of Change**

**Leadership (LD)**

- LD.03.06.01, EP 3: Deleted cross reference to HR.01.01.03, EP 1
- LD.03.06.01, EP 4: Deleted cross reference to HR.01.01.03, EP 2
- LD.03.06.01, EP 7: Added new EP to make certain administration and staff have support for the volume of foster care services as required by law
- LD.03.06.01, EP 8: Added new EP to ensure agency has qualified staff for foster care services
- LD.03.06.01, EP 9: Added new EP for foster care to confirm a process is in place to determine the staffing needs based on recipients and families served
- LD.04.01.08: Added new standard to verify foster care staff caseloads are consistent with care, treatment, or services provided
- LD.04.01.08, EP 1: Added new EP to check that a foster care agency has a process for delegating caseloads based on care, treatment, or services provided
- LD.04.01.08, EP 2: Added new EP for foster care so that an agency follows its process for assigning and adjusting caseloads
- LD.04.01.08, EP 3: Added new EP for foster care to ensure the caseload size is in accordance with law
- LD.04.04.05, EP 6: Added Note to reduce staff reluctance to report errors
- LD.04.04.05, EP 7: Updated *sentinel event* to *patient safety event*; clarified definition of *adverse event* to include *close call*
- LD.04.04.05, EP 8: Clarified that comprehensive systematic analyses, such as root cause analyses, are used in response to a sentinel event
- LD.04.04.05, EP 12: Clarified that comprehensive systematic analyses, such as root cause analyses, are used in response to a sentinel event; minor editorial revisions
- LD.04.04.09, EP 1: Added *or* as option to identifying clinical practice guidelines and/or evidence-based practices
- LD.04.04.09, EP 3: Added *or, clinical practice, and evidence-based* to identifying clinical practice guidelines and/or evidence-based practices
- LD.04.04.09, EP 4: Added *or* as option to identifying clinical practice guidelines and/or evidence-based practices
### Type of Change

- **LD.04.04.09, EP 5**: Added *or* as option to identifying clinical practice guidelines and/or evidence-based practices

### Life Safety (LS)

- **LS.04.02.30, EP 7**: Clarified that alarm system will notify occupants

### Medication Management (MM)

- **About This Chapter:**
  - Added hazardous medications to high-alert medications
  - Added patients and licensed independent practitioners to list of individuals bringing medications into the organization
  - Added explanation regarding sample medications

- **MM.01.01.01, EPs 1 and 2**: Added Note to indicate that the EP is applicable to sample medications

- **MM.01.01.03, EPs 1–3**: Added Note to indicate that the EP is applicable to sample medications

- **MM.01.02.01, EPs 1–3**: Added Note to indicate that the EP is applicable to sample medications

- **MM.02.01.01, EPs 1–3, 7, 8**: Added Note to indicate that the EP is applicable to sample medications

- **MM.03.01.01, EPs 2–8, 18**: Added Note to indicate that the EP is applicable to sample medications

- **MM.03.01.05, EPs 1–3**: Added Note to indicate that the EP is applicable to sample medications

- **MM.04.01.01, EP 20**: Changed *milligrams* to *mg*

- **MM.05.01.09, EPs 1–3**: Added Note to indicate that the EP is applicable to sample medications

- **MM.05.01.11, EPs 1 and 2**: Added Note to indicate that the EP is applicable to sample medications

- **MM.05.01.17, EPs 1, 3, 4**: Added *US* to Food and Drug Administration

- **MM.05.01.17, EPs 1–4**: Added Note to indicate that the EP is applicable to sample medications

- **MM.05.01.19, EPs 1–4**: Added Note to indicate that the EP is applicable to sample medications
## Type of Change

- **MM.06.01.03, EP 21**: Added EP regarding opioid treatment programs to accommodate traveling patients
- **MM.07.01.01, EPs 1–3**: Added Note to indicate that the EP is applicable to sample medications
- **MM.07.01.03, EPs 1–3, 5**: Added Note to indicate that the EP is applicable to sample medications
- **MM.08.01.01, EPs 1–3, 6**: Added Note to indicate that the EP is applicable to sample medications
- **MM.08.01.01, EP 6**: Added cross reference to PI.03.01.01, EP 2
- Revised the following entries under the Applicability for Medication Management Type Grid
  - **Store Medications**
    - **MM.01.01.01, EP 1**: Added EP
    - **MM.03.01.05, EPs 1–3**: Added EPs
  - **Prescribe Medications**
    - **MM.04.01.01, EP 8**: Added EP
- Minor editorial revisions

### National Patient Safety Goals (NPSG)

- **NPSG.03.06.01, EP 3**: Revised cross reference in Note to HRM.01.06.01, EP 1

### Performance Improvement (PI)

- **PI.02.01.01, EP 8**: Added cross references to HRM.01.06.05, EP 2 and HRM.01.07.01, EP 3

### Record of Care, Treatment, and Services (RC)

- **RC.01.03.01, EP 1**: Added cross reference to CTS.04.01.01, EP 4
**Type of Change**

**Rights and Responsibilities of the Individual (RI)**

- RI.01.02.01, EP 21: Revised reference from “Sentinel Events” (SE) chapter to Glossary for sentinel events definition
- RI.01.02.01, EPs 34 and 35: Added EPs regarding providing patients with information about providers in the community
- RI.01.07.03, EP 5: Revised cross reference to HRM.01.03.01, EP 6
- RI.03.01.05, EP 7: Revised cross reference to HRM.01.05.01, EP 3
- Minor editorial revisions

**Accreditation Process Information**

**The Accreditation Process (ACC)**

- Joint Commission Accreditation Programs:
  - Deleted section to eliminate redundancies with “How to Use This Manual” (HM) chapter and updated a reference to this section in Complex Organization Survey Process section
  - Updated program descriptions
- Complex Organization Survey Process: Clarified that The Joint Commission gives organizations access to electronic editions of manuals
- Concurrent and Sequential Survey Options: Added bullet point about sequential surveys
- Initial Surveys: Changed Contingent Accreditation footnote into last paragraph
- Survey Postponement Policy: Clarified that in rare circumstances, it may be appropriate to postpone a survey
- Information Accuracy and Truthfulness Policy: Clarified that comprehensive systematic analyses, such as root cause analyses, are used in response to a sentinel event
- Data Release to Government Agencies and Organizations with Which The Joint Commission Performs Coordinated Survey Activities: Added bullet about evaluating and submitting *Life Safety Code®* equivalencies
- Process for Responding to a Complaint: Changed Office of Quality Monitoring to Office of Quality and Patient Safety
- Sidebar 1. Early Survey Policy: Added “or in licensing process”
### Type of Change

- **An Organization’s Secure Joint Commission Connect Site:** Revised to include information about guest access.

- **Electronic Application for Accreditation (E-App):** Clarified that certain official records and reports must be made available to The Joint Commission during initial on-site surveys.

- **Annual Survey Fees:** Revised title to include “Annual” and noted that letters of nonpayment are posted to the extranet instead of sent via certified mail.

- **Priority Focus Process (PFP):** Deleted section as well as all references to it.

- **Clinical/Service Groups (CSGs):** Deleted section as well as all references to it.

- **Unannounced Surveys:** Revised to reflect that survey avoid dates can be identified in the 27-month E-App and cannot be modified after E-App submission.

- **Table 1. Exceptions to Unannounced Triennial Surveys:**
  - Clarified exceptions pertain to behavioral health care services not offered as part of a hospital.
  - Updated thresholds.

- **Initial and Full Survey Team Composition:** Updated to reflect applicability to both initial and full surveys.

- **Survey Agenda:**
  - Added Facility Maintenance Review and clarified the *Life Safety Code* Building Assessment includes a building layout orientation and tour.
  - Deleted “Facility Maintenance Review”.
  - Replaced bullet about processes for designing buildings with bullet about reviewing Statement of Conditions™ and Plan for Improvement (PFI) in “*Life Safety Code* Building Tour”.

- **Tracer Methodology:** Updated information about how surveyors determine what tracers to conduct.

- **Immediate Threat to Health or Safety:** Clarified that status may change from Preliminary Denial of Accreditation to Contingent Accreditation after an organization resolves an Immediate Threat situation.

- **The Summary of Survey Findings Report:** Revised to reflect that preliminary report includes all single Category C observations and the number of open PFI items.
Type of Change

- How Accreditation Decisions Are Made: Clarified that status *may* change from Preliminary Denial of Accreditation to Contingent Accreditation after an organization resolves an Immediate Threat situation
- Accreditation Decision Categories: Revised “Accreditation with Follow-up Survey” decision category to reflect that organizations may receive this decision if PFI items remain incomplete within six months of projected completion date
- Accreditation Effective Date: Clarified when accreditation decisions are effective for initial and resurveyed organizations
- Evidence of Standards Compliance (ESC) Process: Clarified that PFI items in the Survey Report do not require an ESC
- Corrective ESC: Clarified accreditation effective date for initial organizations
- Sentinel Event Follow-Up: Amended text to align with revised “Sentinel Events” (SE) chapter
- Changes to the Site of Care, Treatment, or Services: Deleted “business occupancy” qualifier
- Accreditation Status of Organizations That Cease Provision of Services for a Period of Time: Added paragraph about what occurs when an on-site survey reveals that an organization has not provided services for more than six months
- Accreditation Decision Rules:
  - Changed “FSA” to “ICM” in fourth bullet of Preliminary Denial of Accreditation (PDA) decision rule PDA05
  - Updated Contingent Accreditation (CONT) decision rules CONT05, CONT06, CONT07
  - Revised Accreditation with Follow-up Survey (AFS) decision rule AFS01 to include risk-related standards; revised AFS06 to reflect participation rather than submission
  - Revised On-site ESC Survey (ESC02) decision rule to reflect that an on-site survey may be scheduled to evaluate a written ESC
  - Deleted Note from Preliminary Accreditation (PA) decision rule PA01
  - Revised Behavioral Health Home Certification decision rules
  - Review and Appeal Procedures: Revised III. Contingent Accreditation and IV. Accreditation with Follow-up Survey regarding Condition-level deficiencies
- Minor editorial revisions
## Type of Change

### Standards Applicability Process (SAP)

- Made changes to all applicability grids to align with revised HRM standards
- Made the following changes to entries under the Foster Care Applicability Grid
  - All references to HRM standards and EPs have been revised throughout this grid to reflect the changes to that chapter
  - Foster Care—Adult
    - CTS.04.01.01, EPs 5–9, 15, 16: Renumbered EPs
    - LD.03.06.01, EPs 7–9: Added EPs
    - LD.04.01.08, EPs 1–3: Added Standard and EPs
  - Foster Care—Therapeutic Child & Youth
    - CTS.04.01.01, EPs 5–9, 15, 16: Renumbered EPs
    - LD.03.06.01, EPs 7–9: Added EPs
    - LD.04.01.08, EPs 1–3: Added Standard and EPs
  - Foster Care—Traditional Child & Youth
    - CTS.04.01.01, EPs 5–9, 15, 16: Renumbered EPs
    - LD.03.06.01, EPs 7–9: Added EPs
    - LD.04.01.08, EPs 1–3: Added Standard and EPs
  - Foster Care—Respite Care
    - CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs
    - LD.03.06.01, EPs 7–9: Added EPs
    - LD.04.01.08, EPs 1–3: Added Standard and EPs
  - Shelter
    - CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs
  - Adoption Services
    - CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs
    - LD.03.06.01, EPs 7–9: Added EPs
- Made the following changes to entries under the Behavioral Health Care Settings Applicability Grid
### Type of Change

- Added Community-based setting
- All references to HRM standards and EPs have been revised throughout this grid to reflect the changes to that chapter
- Correctional
  - CTS.04.01.01, EPs 9, 15, 16: Renumbered EPs
- Forensic
  - CTS.04.01.01, EPs 9, 15, 16: Renumbered EPs
- In-Home
  - CTS.04.01.01, EPs 9, 15, 16: Renumbered EPs
- Inpatient Crisis Stabilization
  - CTS.04.01.01, EPs 9, 15, 16: Renumbered EPs
- Outdoor/Wilderness Program
  - CTS.04.01.01, EPs 9, 15, 16: Renumbered EPs
- Outpatient/Staff Office(s) Only
  - CTS.04.01.01, EPs 9, 15, 16: Renumbered EPs
- Adult Day Care
  - CTS.04.01.01, EPs 9, 15, 16: Renumbered EPs
- Day Treatment
  - CTS.04.01.01, EPs 9, 15, 16: Renumbered EPs
- Intensive Outpatient
  - CTS.04.01.01, EPs 9, 15, 16: Renumbered EPs
- Partial Hospitalization
  - CTS.04.01.01, EPs 9, 15, 16: Renumbered EPs
- Therapeutic Day School
  - CTS.04.01.01, EPs 9, 15, 16: Renumbered EPs
- Group Home
  - CTS.04.01.01, EPs 9, 15, 16: Renumbered EPs
- 24-Hour Therapeutic School
  - CTS.04.01.01, EPs 9, 15, 16: Renumbered EPs
<table>
<thead>
<tr>
<th>Type of Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential</td>
</tr>
<tr>
<td>• CTS.04.01.01, EPs 9, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>Technology-Based</td>
</tr>
<tr>
<td>• CTS.04.01.01, EPs 9, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>Transitional/Supportive Living</td>
</tr>
<tr>
<td>• CTS.04.01.01, EPs 9, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>Community-Based Home</td>
</tr>
<tr>
<td>• CTS.04.01.01, EPs 4 and 5: Deleted</td>
</tr>
<tr>
<td>• CTS.04.01.01, EPs 9, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>• EC.02.01.01, EPs 5, 8, 11: Deleted</td>
</tr>
<tr>
<td>• EC.02.01.03, EP 6: Deleted</td>
</tr>
<tr>
<td>• EC.02.01.05, EPs 1–11, 13: Added EPs</td>
</tr>
<tr>
<td>• EC.02.03.01, EPs 1, 3, 4–10: Deleted</td>
</tr>
<tr>
<td>• EC.02.03.03, EPs 1, 3–5: Deleted</td>
</tr>
<tr>
<td>• EC.02.03.05, EPs 2, 5–9, 12–15, 17–20: Deleted</td>
</tr>
<tr>
<td>• EC.02.05.07, EPs 3–6, 9, 10: Deleted</td>
</tr>
<tr>
<td>• EC.02.06.01, EPs 9, 11, 12, 19: Deleted</td>
</tr>
<tr>
<td>• EC.02.06.03, EPs 1–5: Deleted</td>
</tr>
<tr>
<td>• EC.04.01.01, EP 14: Deleted</td>
</tr>
<tr>
<td>• EC.04.01.03, EPs 1 and 2: Deleted</td>
</tr>
<tr>
<td>• EC.04.01.05, EPs 1 and 2: Deleted</td>
</tr>
<tr>
<td>• IC.02.01.01, EP 6: Added EP</td>
</tr>
<tr>
<td>Made the following changes to entries under the Behavioral Health Care Services Applicability Grid</td>
</tr>
<tr>
<td>• All references to HRM standards and EPs have been revised throughout this grid to reflect the changes to that chapter</td>
</tr>
<tr>
<td>Addiction Services—Opioid</td>
</tr>
<tr>
<td>• CTS.02.01.09, EP 4: Added EP</td>
</tr>
<tr>
<td>• CTS.03.01.07, EP 10: Added EP</td>
</tr>
<tr>
<td>• CTS.04.01.01, EPs 8, 10–16: Renumbered EPs</td>
</tr>
<tr>
<td>Type of Change</td>
</tr>
<tr>
<td>---------------------------------------------------</td>
</tr>
<tr>
<td>MM.06.01.03, EP 21: Added EP</td>
</tr>
<tr>
<td>RI.01.02.01, EPs 34 and 35: Added EPs</td>
</tr>
<tr>
<td>Addiction Services—Adult</td>
</tr>
<tr>
<td>CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>Addiction Services—Child/Youth</td>
</tr>
<tr>
<td>CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>Family Preservation Services/Wraparound Services—Children/Youth</td>
</tr>
<tr>
<td>CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>Intellectual Disabilities—Adult</td>
</tr>
<tr>
<td>CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>Intellectual Disabilities—Child/Youth</td>
</tr>
<tr>
<td>CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>Mental Health Services—Adult Services</td>
</tr>
<tr>
<td>CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>Mental Health Services—Child/Youth Services</td>
</tr>
<tr>
<td>CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>Recovery or Resilience Services—Care Coordination/Case Management Services</td>
</tr>
<tr>
<td>CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>Recovery or Resilience Services—Family Support Services</td>
</tr>
<tr>
<td>CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>Recovery or Resilience Services—Employment Services</td>
</tr>
<tr>
<td>CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>Recovery or Resilience Services—Peer Support Services</td>
</tr>
<tr>
<td>CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>Vocational Rehabilitation Services</td>
</tr>
<tr>
<td>CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>Eating Disorders</td>
</tr>
<tr>
<td>CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>Primary Physical Health Care</td>
</tr>
<tr>
<td>CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs</td>
</tr>
</tbody>
</table>
**Type of Change**

- Prevention and Wellness Promotion Services
- CTS.04.01.01, EPs 8, 15, 16: Renumbered EPs

**Sentinel Events (SE)**

- Sentinel Event Policy rewritten for improved clarity and flow
- I. Sentinel Events
  - Revised the definition of *sentinel event* and introduced the broader classification term *patient safety event*
  - Explained a comprehensive taxonomy of patient safety events, of which one category is sentinel events
- III. Responding to Sentinel Events
  - Added discussion of additional related standards beyond Leadership (LD) Standard LD.04.04.05
  - Introduced the term *comprehensive systematic analysis* (for identifying the causal and contributory factors), with root cause analysis identified as the most common example
  - Explained the more collaborative approach to follow-up activities between The Joint Commission and accredited organizations
- IV. The Sentinel Event Database
  - Changed due dates to business days instead of calendar days in some instances
  - Expanded the types of appropriate follow-up activities (such as Measures of Success or other appropriate mutually agreed-upon documentation of sustained improvement)
- Appendix: Accreditation Requirements Related to Sentinel Events
  - Added new listing of related accreditation standards
### Type of Change

#### Required Written Documentation (RWD)

- Changed Material Safety Data Sheets to safety data sheets
- Added the following Standards:
  - CTS.04.01.01, EP 4
  - HRM.01.01.01, EPs 1, 2, 4, 5
  - HRM.01.02.01, EPs 1, 2, 4, 5, 7, 8
  - HRM.01.03.01, EPs 2–6
  - HRM.01.05.01, EPs 1–3
  - HRM.01.06.01, EPs 3–5
  - HRM.01.07.01, EP 2

#### Early Survey Policy Option (ESP)

- Added the following Standards:
  - CTS.04.01.01, EP 6
  - HRM.01.01.01, EPs 1, 2, 4–6
  - HRM.01.01.03, EPs 1 and 2
  - HRM.01.03.01, EP 1
  - HRM.01.06.01, EP 1
  - MM.06.01.03, EP 21
  - RI.01.02.01, EPs 34 and 35
- Minor editorial revisions

#### Opioid Treatment Programs (OTP)

- Minor editorial revisions to introduction
- CTS.02.01.09, EP 4: Added new EP regarding receiving opioid medication for patients with pain management needs
- CTS.03.01.07, EP 4: Added new EP regarding completing referrals and follow-up within a specified period of time
- CTS.03.01.07, EPs 5–10: Renumbered EPs
- CTS.04.01.01, EPs 5, 6, 10–13: Renumbered EPs
- CTS.04.01.01, EP 10: Added clarification regarding managing comorbidities on site
<table>
<thead>
<tr>
<th>Type of Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>❑ CTS.06.02.01, EP 10, Note: Added note regarding ongoing multidrug use and discharge</td>
</tr>
<tr>
<td>❑ HRM.01.01.01: Revised to state organization will develop written job descriptions</td>
</tr>
<tr>
<td>❑ HRM.01.01.01, EP 1: Added new EP requiring a written job description</td>
</tr>
<tr>
<td>❑ HRM.01.01.01, EP 3: Added new EP for opioid treatment requiring physicians to have experience in addiction medicine</td>
</tr>
<tr>
<td>❑ HRM.01.01.03: Revised standard to state an organization will determine how staff function</td>
</tr>
<tr>
<td>❑ HRM.01.01.03, EP 1: Added new EP requiring all staff providing care, treatment, or services to possess a current credentials as required by law and organization policy</td>
</tr>
<tr>
<td>❑ HRM.01.01.03, EP 3: Added new EP stating staff will practice within the scope of their job description</td>
</tr>
<tr>
<td>❑ HRM.01.02.01: Revised to state that organization will evaluate, in addition to verify, staff qualifications; renumbered</td>
</tr>
<tr>
<td>❑ HRM.01.02.01, EP 8: Renumbered EP</td>
</tr>
<tr>
<td>❑ HRM.01.03.01: Renumbered standard</td>
</tr>
<tr>
<td>❑ HRM.01.03.01, EP 15: Renumbered EP</td>
</tr>
<tr>
<td>❑ HRM.01.05.01: Renumbered standard</td>
</tr>
<tr>
<td>❑ HRM.01.05.01, EP 1: Category changed to A; deleted Measure of Success requirement</td>
</tr>
<tr>
<td>❑ HRM.01.05.01, EPs 2, 3, 5–8: Renumbered EP</td>
</tr>
<tr>
<td>❑ HRM.01.05.01, EP 2: Category changed to A; deleted Measure of Success requirement</td>
</tr>
<tr>
<td>❑ HRM.01.05.01, EP 5: Category changed to A; deleted Measure of Success requirement</td>
</tr>
<tr>
<td>❑ HRM.01.06.01: Revised standard to include staff job duties</td>
</tr>
<tr>
<td>❑ HRM.01.06.03: Clarified that individuals served will have specific competencies</td>
</tr>
<tr>
<td>❑ HRM.01.06.03, EP 3: Risk factor changed to 3; renumbered EP</td>
</tr>
<tr>
<td>❑ HRM.01.06.03, EPs 4 and 5: Renumbered EPs</td>
</tr>
</tbody>
</table>
### Type of Change

- HRM.01.06.03, EP 6: Added new EP for opioid treatment programs, which will have a sufficient number of trained and qualified substance abuse counselors to provide services to patients
- HRM.01.07.01, EP 1: Added Note to clarify a written contract may replace a job description for a written contract
- IM.02.01.01, EP 4: Added to chapter
- LD.03.06.01, EP 3: Deleted cross reference to HR.01.01.03, EP 1
- LD.04.04.05, EP 6: Added Note to reduce staff reluctance to report errors
- LD.04.04.05, EP 7: Updated *sentinel event* to *patient safety event*; clarified definition of *adverse event* to include *close call*
- LD.04.04.05, EP 8: Clarified that comprehensive systematic analyses, such as root cause analyses, are used in response to a sentinel event
- MM.01.01.01, EPs 1 and 2: Added Note to indicate that the EP is applicable to sample medications
- MM.03.01.01, EPs 2–8, 18: Added Note to indicate that the EP is applicable to sample medications
- MM.04.01.01, EP 20: Changed *milligrams* to *mg*
- MM.06.01.03, EP 21: Added EP regarding opioid treatment programs to accommodate traveling patients
- MM.07.01.03, EPs 2 and 3: Added Note to indicate that the EP is applicable to sample medications
- RI.01.02.01, EPs 34 and 35: Added EP regarding providing patients with information about providers in the community
- RC.01.03.01, EP 1: Added cross reference to CTS.04.01.01, EP 4
- Minor editorial revisions

### Foster Care (FC)

- CTS.02.04.05, EP 8: Deleted MOS requirement
- HRM.01.05.01: Renumbered standard
- HRM.01.05.01, EP 9: Category changed to A; deleted Measure of Success requirement; renumbered EP
- HRM.01.06.01, EP 7: Renumbered EP
- LD.02.01.01: Added standard and Rationale to chapter
<table>
<thead>
<tr>
<th>Type of Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>LD.02.01.01, EPs 4, 5: Added to chapter</td>
</tr>
<tr>
<td>LD.03.06.01, EP 7: Added new EP to make certain administration and staff have</td>
</tr>
<tr>
<td>support for the volume of foster care services as required by law</td>
</tr>
<tr>
<td>LD.03.06.01, EP 8: Added new EP to ensure agency has qualified staff for foster</td>
</tr>
<tr>
<td>care services</td>
</tr>
<tr>
<td>LD.03.06.01, EP 9: Added new EP for foster care to confirm a process is in</td>
</tr>
<tr>
<td>place to determine the staffing needs based on recipients and families served</td>
</tr>
<tr>
<td>LD.04.01.08: Added new standard to verify foster care staff caseloads are</td>
</tr>
<tr>
<td>consistent with care, treatment, or services provided</td>
</tr>
<tr>
<td>LD.04.01.08, EP 1: Added new EP to check that a foster care agency has a</td>
</tr>
<tr>
<td>process for delegating caseloads based on care, treatment, or services</td>
</tr>
<tr>
<td>provided</td>
</tr>
<tr>
<td>LD.04.01.08, EP 2: Added new EP for foster care so that an agency follows its</td>
</tr>
<tr>
<td>process for assigning and adjusting caseloads</td>
</tr>
<tr>
<td>LD.04.01.08, EP 3: Added new EP for foster care to ensure the caseload size is</td>
</tr>
<tr>
<td>in accordance with law</td>
</tr>
<tr>
<td>RI.03.01.05, EP 7: Revised cross reference to HRM.01.05.01, EP 3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Behavioral Health Home Certification Option (BHH)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reorganized standards in alphabetical order</td>
</tr>
<tr>
<td>Made editorial and clarification changes to introduction</td>
</tr>
<tr>
<td>CTS.01.01.01, EP 2: Clarified that populations served shall be defined in</td>
</tr>
<tr>
<td>writing</td>
</tr>
<tr>
<td>CTS.04.01.01, EPs 5–9, 15, 16: Renumbered EPs</td>
</tr>
<tr>
<td>HRM.01.03.01: Renumbered standard</td>
</tr>
<tr>
<td>HRM.01.03.01, EPs 16, 17: Renumbered EPs</td>
</tr>
<tr>
<td>HRM.01.03.01, EP 16: Deleted cross reference to HR.01.05.03, EP 24</td>
</tr>
<tr>
<td>HRM.01.03.01, EP 16: Deleted cross reference to HR.01.05.03, EP 24</td>
</tr>
<tr>
<td>HRM.01.05.01: Renumbered standard</td>
</tr>
<tr>
<td>HRM.01.05.01, EP 1: Category changed to A; deleted Measure of Success</td>
</tr>
<tr>
<td>requirement</td>
</tr>
<tr>
<td>HRM.01.05.01, EPs 2, 3, 10: Renumbered EPs</td>
</tr>
<tr>
<td>HRM.01.05.01, EP 2: Category changed to A; deleted Measure of Success</td>
</tr>
</tbody>
</table>
### Type of Change

- HRM.01.05.01, EP 10: Deleted cross reference to HR.01.04.01, EP 25
- LD.04.04.05, EP 7: Updated *sentinel event* to *patient safety event*; clarified definition of *adverse event* to include *close call*
- LD.04.04.05, EP 8: Clarified that comprehensive systematic analyses, such as root cause analyses, are used in response to a sentinel event
- LD.04.04.05, EP 12: Clarified that comprehensive systematic analyses, such as root cause analyses, are used in response to a sentinel event
- LD.04.04.05, EP 14: Added *US* to Food and Drug Administration
- LD.04.04.09, EP 1: Added *or* as option to identifying clinical practice guidelines and/or evidence-based practices
- LD.04.04.09, EP 3: Added *or, clinical practice, and evidence-based* to identifying clinical practice guidelines and/or evidence-based practices
- LD.04.04.09, EP 4: Added *or* as option to identifying clinical practice guidelines and/or evidence-based practices
- LD.04.04.09, EP 5: Added *or* as option to identifying clinical practice guidelines and/or evidence-based practices
- PI.02.01.01, EP 8: Added cross references to HRM.01.06.05, EP 2 and HRM.01.07.01, EP 3
- RI.01.07.03, EP 5: Revised cross reference to HRM.01.03.01, EP 6
- Minor editorial revisions

### Glossary

- Added definitions for the following new terms:
  - *adverse event*
  - *comprehensive systematic analysis*
  - *patient safety event*
- Revised definitions of the following terms:
  - *accreditation manual*
  - *close call*
  - *root cause analysis*
  - *sentinel event*
| Type of Change | | |
| --- | --- | |
| □ Deleted the following terms: | □ Changed *case management/care coordination services* terms | |
| ■ *clinical/service groups (CSGs)* | □ Minor editorial revisions | |
| ■ *primary priority focus area* | | |
| ■ *priority focus areas (PFAs)* | | |
| □ Updated index | | |

**Index**

□ Updated index
Comprehensive Accreditation Manual

CAMBHC for Behavioral Health Care
Effective January 1, 2015

Standards
Elements of Performance
Scoring
Accreditation Policies

The Joint Commission
Accreditation
Behavioral Health Care
The Joint Commission Mission

The mission of The Joint Commission is to continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value.

© 2015 The Joint Commission

Joint Commission Resources, Inc. (JCR), a not-for-profit affiliate of The Joint Commission, has been designated by The Joint Commission to publish publications and multimedia products. JCR reproduces and distributes these materials under license from The Joint Commission.

JCR educational programs and publications support, but are separate from, the accreditation activities of The Joint Commission. Attendees at JCR educational programs and purchasers of JCR publications receive no special consideration or treatment in, or confidential information about, the accreditation process.

All rights reserved. No part of this publication may be reproduced in any form or by any means without written permission from the publisher.

Printed in the U.S.A. 5 4 3 2 1

Requests for permission to make copies of any part of this work should be mailed to the following:
Permissions Editor
Department of Publications and Education
Joint Commission Resources
1515 W. 22nd Street
Suite 1300W
Oak Brook, Illinois 60523
permissions@jcrinc.com

ISBN: 978-1-59940-873-6
ISSN: 1089-9871

For more information about The Joint Commission, please visit http://www.jointcommission.org.
Contents

How to Use This Manual (HM) ................................................................. HM-1

Accreditation Requirements
Accreditation Participation Requirements (APR) ................................. APR-1
Care, Treatment, and Services (CTS) ......................................................... CTS-1
Environment of Care (EC) ....................................................................... EC-1
Emergency Management (EM) ................................................................. EM-1
Human Resources Management (HRM) .................................................... HRM-1
Infection Prevention and Control (IC) ....................................................... IC-1
Information Management (IM) ............................................................... IM-1
Leadership (LD) ...................................................................................... LD-1
Life Safety (LS) ...................................................................................... LS-1
Medication Management (MM) ............................................................... MM-1
National Patient Safety Goals (NPSG) ..................................................... NPSG-1
Performance Improvement (PI) .............................................................. PI-1
Record of Care, Treatment, and Services (RC) ........................................ RC-1
Rights and Responsibilities of the Individual (RI) ..................................... RI-1
Waived Testing (WT) ............................................................................... WT-1

Accreditation Process Information
The Accreditation Process (ACC) ............................................................. ACC-1
Standards Applicability Process (SAP) .................................................... SAP-1
Sentinel Events (SE) .............................................................................. SE-1
The Joint Commission Quality Report (QR) ........................................... QR-1
Required Written Documentation (RWD) .............................................. RWD-1
Early Survey Policy Option (ESP) ......................................................... ESP-1
Opioid Treatment Programs (OTP) ....................................................... OTP-1

CAMBHC, January 2015