The Joint Commission

Prepublication Requirements

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Revisions to Hospital 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 THE HOSPITAL ACCREDITATION PROGRAM

Effective July 1, 2024

Environment of Care (EC) Chapter

EC.02.02.01

The hospital manages risks related to hazardous materials and waste.

Element(s) of Performance for EC.02.02.01

EP 19 ~~For hospitals that use Joint Commission accreditation for deemed status purposes:~~ The hospital has procedures for the proper routine storage and prompt disposal of trash.

Revised EP 19 **The hospital has procedures for the proper routine storage and prompt disposal of trash and regulated medical waste.**

Information Management (IM) Chapter

IM.02.01.01

The hospital protects the privacy of health information.

Element(s) of Performance for IM.02.01.01

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EP 1 The hospital follows a written policy addressing the privacy of health information. (See also RI.01.01.01, EP 7)

Ⓓ Documentation is required

Revised EP 1 The hospital follows a written policy addressing the privacy and confidentiality of health information. (See also RI.01.01.01, EP 7)

Ⓓ Documentation is required

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

PC.03.05.01

The hospital uses restraint or seclusion only when it can be clinically justified or when warranted by patient behavior that threatens the physical safety of the patient, staff, or others.

Element(s) of Performance for PC.03.05.01

EP 2 The hospital does not use restraint or seclusion as a means of coercion, discipline, convenience, or staff retaliation.

Revised EP 2 The hospital does not use restraint or seclusion as a means of corporal punishment, coercion, discipline, convenience, or staff retaliation.

Rights and Responsibilities of the Individual (RI) Chapter

RI.01.01.01

The hospital respects, protects, and promotes patient rights.

Element(s) of Performance for RI.01.01.01

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EP 2 The hospital informs the patient of the patient's rights.
Note 1: For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital informs the patient (or support person, where appropriate) of the patient's visitation rights. Visitation rights include the right to receive the visitors designated by the patient, including, but not limited to, a spouse, a domestic partner (including a same-sex domestic partner), another family member, or a friend. Also included is the right to withdraw or deny such consent at any time.
Note 2: For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital ~~makes sure that~~ each patient~~, or the patient's family, is informed~~ of the patient's rights in advance of furnishing or discontinuing patient care whenever possible.
(See also RI.01.01.03, EPs 1, 2, 3)

Revised EP 2 The hospital informs the patient of the patient's rights.
Note 1: For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital informs the patient (or support person, where appropriate) of the patient's visitation rights. Visitation rights include the right to receive the visitors designated by the patient, including, but not limited to, a spouse, a domestic partner (including a same-sex domestic partner), another family member, or a friend. Also included is the right to withdraw or deny such consent at any time.
Note 2: For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital informs each patient (or support person, where appropriate) of the patient's rights in advance of furnishing or discontinuing patient care whenever possible.
(See also RI.01.01.03, EPs 1, 2, 3)

EP 29 The hospital prohibits discrimination based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, and gender identity or expression.

Revised EP 29 The hospital prohibits discrimination based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, and gender identity or expression.
Note: This includes prohibiting discrimination through restricting, limiting, or otherwise denying visitation privileges.

RI.01.05.01

The hospital addresses patient decisions about care, treatment, and services received at the end of life.

Element(s) of Performance for RI.01.05.01

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EP 1 The hospital follows written policies on advance directives, forgoing or withdrawing life-sustaining treatment, and withholding resuscitative services that address the following:
- Providing patients with written information about advance directives, forgoing or withdrawing life-sustaining treatment, and withholding resuscitative services.
- Providing the patient upon admission with information on the extent to which the hospital is able, unable, or unwilling to honor advance directives.
- For outpatient hospital settings: Communicating its policy on advance directives upon request or when warranted by the care, treatment, and services provided.
- Whether the hospital will honor advance directives in its outpatient settings.
- That the hospital will honor the patient's right to formulate or review and revise the patient's advance directives.
- Informing staff who are involved in the patient's care, treatment, and services whether or not the patient has an advance directive.

Ⓓ Documentation is required

Revised EP 1 The hospital follows written policies on advance directives, forgoing or withdrawing life-sustaining treatment, and withholding resuscitative services that address the following:
- Providing patients with written information about advance directives, forgoing or withdrawing life-sustaining treatment, and withholding resuscitative services.
- Providing the patient upon admission with information on the extent to which the hospital is able, unable, or unwilling to honor advance directives.
- For outpatient hospital settings: Communicating its policy on advance directives upon request or when warranted by the care, treatment, and services provided.
- Whether the hospital will honor advance directives in its outpatient settings.
- That the hospital will honor the patient's right to formulate or review and revise the patient's advance directives.
- Informing staff who are involved in the patient's care, treatment, and services whether or not the patient has an advance directive.
Note: For hospitals that use Joint Commission accreditation for deemed status purposes: The patient's right to formulate advance directives and have staff and licensed practitioners comply with these directives is in accordance with 42 CFR 489.100, 489.102, and 489.104.

Ⓓ **Documentation is required**

RI.01.06.03

The patient has the right to be free from neglect; exploitation; and verbal, mental, physical, and sexual abuse.

The patient has the right to be free from harassment; neglect; exploitation; and verbal, mental, physical, and sexual abuse.

Element(s) of Performance for RI.01.06.03

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EP 1 The hospital ~~determines how it will~~ protect the patient from neglect, exploitation, and abuse that could occur while the patient is receiving care, treatment, and services.
Note: For hospitals that use Joint Commission accreditation for deemed status purposes and have swing beds: The hospital also determines how it will protect residents from corporal punishment and involuntary seclusion.

Revised EP 1 The hospital protect<u>s</u> the patient from <u>harassment,</u> neglect, exploitation, and abuse that could occur while the patient is receiving care, treatment, and services.
Note: For hospitals that use Joint Commission accreditation for deemed status purposes and have swing beds: The hospital also determines how it will protect residents from corporal punishment and involuntary seclusion.

RI.01.07.01

The patient and their family have the right to have complaints reviewed by the hospital.

Element(s) of Performance for RI.01.07.01

EP 1 The hospital establishes a complaint resolution process and informs the patient and the patient's family about it.
Note: The governing body is responsible for the effective operation of the complaint resolution process unless it delegates this responsibility in writing to a complaint resolution committee.
(See also LD.04.01.07, EP 1; MS.09.01.01, EP 1)

Revised EP 1 The hospital establishes a complaint resolution process <u>for the prompt resolution of patient complaints that includes a clearly explained procedure for the submission of a patient's written or verbal complaint</u> and informs the patient and the patient's family about it.
Note: The governing body is responsible for the effective operation of the complaint resolution process unless it delegates this responsibility in writing to a complaint resolution committee.
(See also LD.04.01.07, EP 1; MS.09.01.01, EP 1)

EP 20 For hospitals that use Joint Commission accreditation for deemed status purposes: The process for resolving complaints includes a mechanism for timely referral of patient concerns regarding quality of care or premature discharge to the ~~quality improvement organization (QIO)~~.

Revised EP 20 For hospitals that use Joint Commission accreditation for deemed status purposes: The process for resolving complaints includes a mechanism for timely referral of patient concerns regarding quality of care or premature discharge to the <u>appropriate Utilization and Quality Control Quality Improvement Organization</u>.

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