

# The Joint Commission: Over a century of quality and safety

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# 1910-1913

- ▶ [Ernest Codman, M.D.](#) proposes the “end result system of hospital standardization.”
- ▶ American College of Surgeons is founded. The “end result” system becomes an ACS objective.



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# 1917-1918

- The American College of Surgeons develops the *Minimum Standard for Hospitals*. Requirements fill one page.
- The ACS begins on-site inspections of hospitals.

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

### *The Minimum Standard*

1. 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 STAFF is here defined as the group of doctors who practice in the hospital inclusive of all groups such as the "regular staff," "the visiting staff," and the "associate staff."
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 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, regulations, and policies specifically provide:
  - (a) That staff meetings be held at least once each month. (In large hospitals the departments may choose to meet separately.)
  - (b) That the staff review and analyze at regular intervals their clinical experience in the various departments of the hospital, such as medicine, surgery, obstetrics, and the other specialties; the clinical records of patients, free and pay, to be the basis for such review and analyses.
4. That accurate and complete records be written for all patients and filed in an accessible manner in the hospital—a complete case record being one which includes identification data; complaint; personal and family history; history of present illness; physical examination; special examinations, such as consultations, clinical laboratory, X-ray and other examinations; provisional or working diagnosis; medical or surgical treatment; gross and microscopic pathological findings; progress notes; final diagnosis; condition on discharge; follow-up and, in case of death, autopsy findings.
5. That diagnostic and therapeutic facilities under competent supervision be available for the study, diagnosis, and treatment of patients, these to include, at least (a) a clinical laboratory providing chemical, bacteriological, serological, and pathological services; (b) an X-ray department providing radiographic and fluoroscopic services.

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# 1926

The first standards manual is printed, consisting of 18 pages.

*The American College of Surgeons made the three-story former residence shown opposite, on Chicago's rapidly growing north side, its headquarters in 1920.*



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# 1950-1951

- The American College of Physicians, the American Hospital Association, the American Medical Association, and the Canadian Medical Association join with the ACS as corporate members to create the Joint Commission on Accreditation of Hospitals (JCAH), an independent, not-for-profit organization, in Chicago, Illinois, whose primary purpose is to provide voluntary accreditation.

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# 1952

- ▶ The American College of Surgeons officially transfers its Hospital Standardization Program to JCAH, which begins offering accreditation to hospitals in January 1953.
- ▶ Edwin L. Crosby, M.D., becomes the first director of the Joint Commission on Accreditation of Hospitals.



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# 1953-1959

- ▶ JCAH publishes *Standards for Hospital Accreditation*.
- ▶ Kenneth Babcock, M.D., becomes director of JCAH.



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# 1964-1965

- ▶ The Joint Commission on Accreditation of Hospitals begins charging for surveys.
- ▶ Congress passes the Social Security Amendments of 1965 with a provision that hospitals accredited by JCAH are “deemed” to be in compliance with most of the Medicare Conditions of Participation for hospitals and, thus, able to participate in the Medicare and Medicaid programs.
- ▶ John D. Porterfield III, M.D., becomes director of the JCAH.

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# 1966-1969

- ▶ Long term care accreditation begins.
- ▶ JCAH establishes four accreditation councils to develop standards and survey accreditation procedures.

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# 1970

- ▶ The Accreditation Council for Psychiatric Facilities is established and accreditation for psychiatric facilities, substance abuse programs and community mental health programs begins.
- ▶ Accreditation for hospitals and long term care facilities is reduced to a maximum of two years from three years.

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# 1971-1972

- ▶ The Accreditation Council for Long Term Care is established.
- ▶ The Social Security Act is amended to require that the Secretary of the U.S. Department of Health and Human Services (DHHS) validate JCAH findings.
- ▶ The first issue of *Perspectives on Accreditation* is published.

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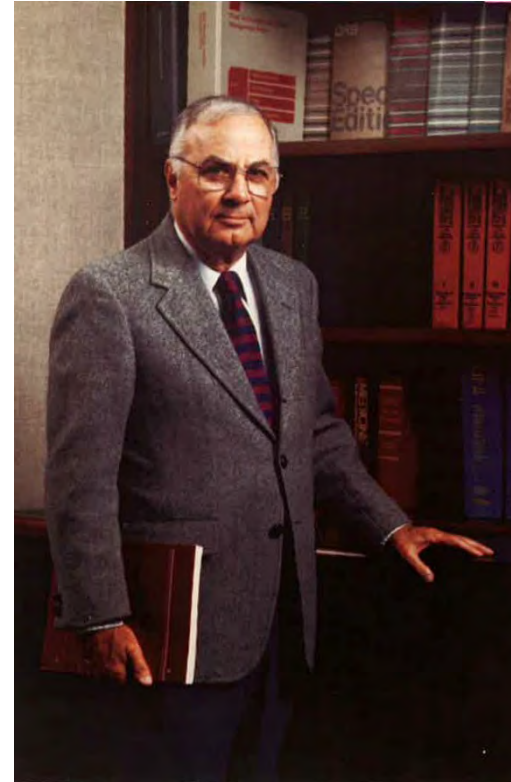
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# 1975-1977

- ▶ The Accreditation Council for Ambulatory Health Care is established and accreditation for ambulatory health care facilities begins.
- ▶ John E. Affeldt, M.D., becomes president of the JCAH.



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# 1978-1979

- ▶ JCAH establishes an agreement with the College of American Pathologists to recognize CAP accreditation of a laboratory in a JCAH-accredited hospital in lieu of the Commission's accreditation of the laboratory.
- ▶ The American Dental Association (ADA) becomes a JCAH corporate member.
- ▶ A Professional and Technical Advisory Committee is established for each accreditation program, and the Accreditation Councils are disbanded.

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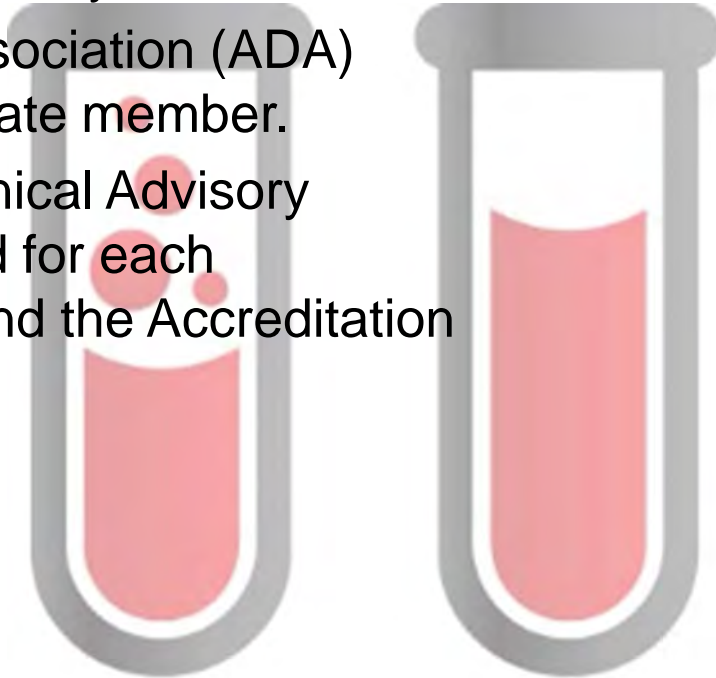
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# 1982-1983

- The accreditation cycle is changed from two years to three years for hospitals, psychiatric facilities, alcoholism and substance abuse programs, community mental health centers, and long term care organizations.
- Accreditation for hospice care organizations begins. (Folded into the Home Care Accreditation program in 1990.)

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# 1986

- ▶ Quality Healthcare Resources® (QHR), Inc. is formed as a not-for-profit consulting subsidiary of JCAH. (QHR later becomes Joint Commission Resources.)
- ▶ Dennis S. O’Leary, M.D., becomes president of the JCAH.

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# 1987-1989

- ▶ The organization name changes to the Joint Commission on Accreditation of Healthcare Organizations to reflect an expanded scope of activities.
- ▶ The Agenda for Change is launched, placing the primary emphasis of the accreditation process on actual organization performance.
- ▶ Development of the Indicator Measurement System<sup>®</sup> (IMSystem<sup>®</sup>) – an indicator-based performance monitoring system – gets underway.
- ▶ Accreditation for home care organizations and managed care begins. (Managed care is folded into the Ambulatory Care Accreditation Program in 1990).

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***Joint Commission***  
*on Accreditation of Healthcare Organizations*

# 1990

The Joint Commission Headquarters and Conference Center opens in Oakbrook Terrace, Illinois, about 20 miles west of downtown Chicago.



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# 1992-1993

- ▶ The Joint Commission issues a standard requiring all accredited hospitals to have a policy prohibiting smoking in the hospital.
- ▶ The number and nature of confirmed substantive complaints filed against accredited facilities and the existence of type I recommendations becomes public information.
- ▶ The federal government announces that home health agencies accredited by the Joint Commission after an unannounced survey will be “deemed” to meet the Medicare Conditions of Participation.

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# 1994

- ▶ The first organization-specific performance reports are released to the public.
- ▶ A new survey process is implemented that uses a systemwide, cross-department orientation.
- ▶ Quality Healthcare Resources, Inc.® and the Joint Commission form Joint Commission International to provide education and consulting services to international clients.

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# 1995

- ▶ The federal government recognizes Joint Commission laboratory accreditation services as meeting the requirements for Clinical Laboratory Amendments of 1988 (CLIA) certification.
- ▶ As part of an Action Plan, the Joint Commission launches the Orion Project in Pennsylvania and Arizona as a series of experiments designed to test innovations to improve the delivery of accreditation services.
- ▶ Accreditation for freestanding laboratories begins.

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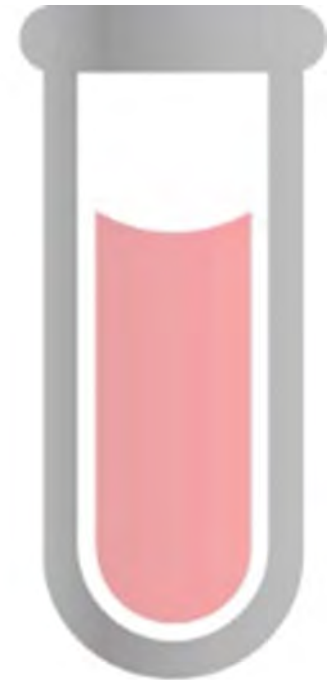
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# 1996

- ▶ The Centers for Medicare & Medicaid Services announces that ambulatory surgical centers accredited by the Joint Commission will be “deemed” as meeting or exceeding Medicare certification requirements.
- ▶ The [Sentinel Event Policy](#) is established.
- ▶ The Joint Commission launches its website at [www.jcaho.org](http://www.jcaho.org) (now [www.jointcommission.org](http://www.jointcommission.org)).

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# 1997

- ▶ The Joint Commission launches [ORYX®: The Next Evolution in Accreditation™](#).
- ▶ [Quality Check®](#) becomes available on the Joint Commission website.

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The Joint Commission  
**Quality Check®**





# 1998

- ▶ The Sentinel Event Policy is revised to promote self-reporting of medical errors and encourage health care providers to more closely examine the root causes of these events.
- ▶ The Joint Commission publishes the first issue of [\*Sentinel Event Alert\*](#).
- ▶ Joint Commission Resources, Inc.<sup>™</sup> replaces Quality Healthcare Resources, Inc.<sup>®</sup> Joint Commission International (including accreditation and consulting services) remains a division of this new subsidiary.

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# 1999

- ▶ The Joint Commission's mission statement is revised to explicitly reference patient safety.
- ▶ The Joint Commission establishes a toll free hot line to encourage patients, their families, caregivers, and others to share concerns regarding quality of care issues at accredited health care organizations.



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# 2000

- ▶ Standards and a survey process for organizations that provide foster care services are established, effective January 1.
- ▶ Joint Commission International publishes the first comprehensive set of international quality standards for hospitals and presents its first accreditation award.

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# 2001

- ▶ New pain assessment and management standards go into effect January 1 for hospitals and organizations providing ambulatory care, assisted living, behavioral health care and long term care.
- ▶ A new accreditation program for office-based surgery practices is introduced.
- ▶ A new accreditation program for critical access hospitals is launched.

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# 2002

- ▶ The Joint Commission establishes its first annual [National Patient Safety Goals](#).
- ▶ The Joint Commission and the Centers for Medicare and Medicaid Services launch [Speak Up™](#).
- ▶ The Disease-Specific Care Certification Program launches.
- ▶ The Centers for Medicare and Medicaid Services announces the granting of deeming authority for critical access hospitals to The Joint Commission.
- ▶ The Joint Commission and the National Quality Forum announce the establishment of the [John M. Eisenberg Patient Safety Awards](#).
- ▶ The Joint Commission and the American Case Management Association announce the establishment of the [Franklin Award of Distinction](#).

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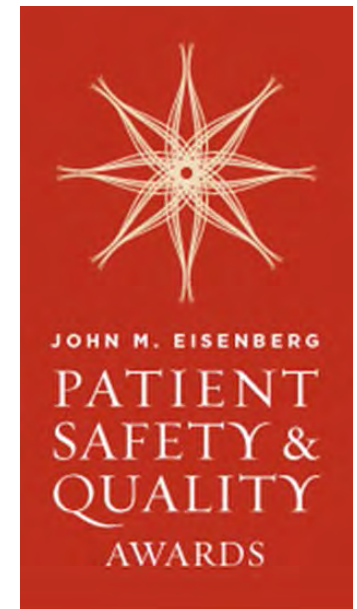
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# 2003

- ▶ The Joint Commission announces a Universal Protocol for Preventing Wrong Site, Wrong Procedure, Wrong Person Surgery™, effective July 1, 2004.
- ▶ The Joint Commission creates a Gold Seal of Approval™ that is displayed on all certificates of accreditation.
- ▶ The Joint Commission develops a Primary Stroke Care Certification Program with the American Stroke Association, providing the first nationwide certification program to evaluate stroke care provided by hospitals.

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# 2004

- ▶ The new Accreditation process, Shared Visions-New Pathways, is launched January 1, to focus on care processes and organizational systems critical to the safety and quality of patient care.
- ▶ The Health Care Staffing Services Certification Program launches.
- ▶ New certification programs for Lung Volume Reduction Surgery and Left Ventricular Assist Devices are developed.

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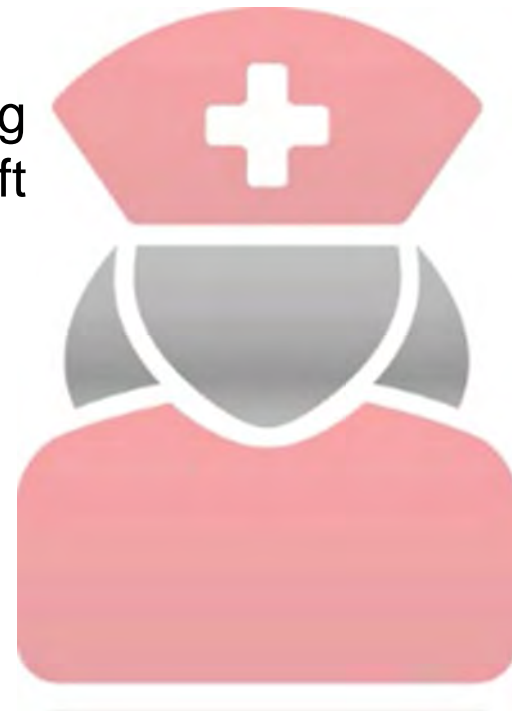
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# 2005

- ▶ Life safety code specialists are added to the Joint Commission survey team.
- ▶ The World Health Organization (WHO) in August designated The Joint Commission and Joint Commission International as WHO Collaborating Centre for Patient Safety Solutions.
- ▶ The nation's first certification program for chronic kidney disease management launches.

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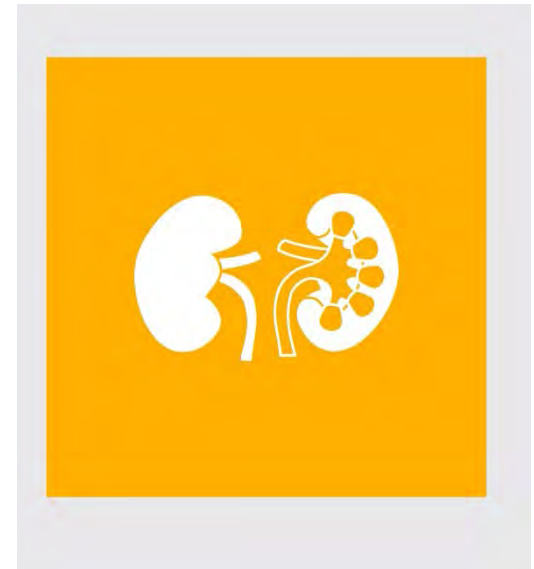
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# 2006

- ▶ The Joint Commission begins conducting on-site accreditation surveys and certification reviews on an unannounced basis, with certain exceptions.
- ▶ An Advanced Inpatient Diabetes Care Certification Program is announced.
- ▶ The Standards Improvement Initiative launches, with a goal to eliminate non-essential standards and to ensure that the remaining standards are understandable and relevant to the care setting to which they apply.

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# 2007

- ▶ The Joint Commission on Accreditation of Healthcare Organizations shortens its name to The Joint Commission.
- ▶ *Improving America's Hospitals: A Report on Quality and Safety* publishes.
- ▶ Joint Commission International announces a cooperative agreement with the Ministry of Health of the People's Republic of China.
- ▶ The Ventricular Assist Device Certification Program launches for hospitals that perform VAD surgery as destination therapy.
- ▶ A new Disease-Specific Care Certification Program for Chronic Obstructive Pulmonary Disease management launches.

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# 2008

- ▶ Mark R. Chassin, M.D., M.P.P., M.P.H., becomes president of The Joint Commission.
- ▶ Quality Check expands to include Joint Commission certified programs and organizations earning Health Care Staffing Services Certification.
- ▶ The Joint Commission and other health care leaders join together to develop the *Compendium of Strategies to Prevent Healthcare-Associated Infections in Acute Care Hospitals*.
- ▶ The E-dition, the first ever electronic version of Joint Commission accreditation manuals, is released.

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# 2009

- ▶ The Joint Commission, with the American Heart Association, announces the Disease Specific Care Certification Program in Heart Failure.
- ▶ Joint Commission International and the Korean Hospital Association sign a Memorandum of Understanding to establish programs to improve health care services in South Korea.
- ▶ The Joint Commission announces a new [enterprise-wide vision statement and a refreshed mission statement](#).
- ▶ The Joint Commission launches its [Center for Transforming Healthcare](#).

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# 2010

- ▶ The Centers for Medicare and Medicaid Service names The Joint Commission a designated accreditor of advanced diagnostic Imaging centers.
- ▶ The Joint Commission announces its plan to categorize its performance measures into accountability and non-accountable measures.
- ▶ The Center for Transforming Healthcare launches the [Targeted Solutions Tool® \(TST®\)](#). The first set of targeted solutions is for improving hand hygiene.

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The logo for Targeted Solutions Tool (TST) features the lowercase letters 'tst' in a bold, sans-serif font. The 't' and 's' are blue, and the 't' is green. A registered trademark symbol (®) is located to the upper right of the 't'.

TARGETED SOLUTIONS TOOL™

# 2011

- ▶ The Primary Care Medical Home option for accredited ambulatory care organizations becomes available.
- ▶ The Advanced Certification in Palliative Care Program launches.
- ▶ For the first time, the 2011 annual report on quality and safety, *Improving America's Hospitals*, lists [Top Performer hospitals](#).

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## Improving America's Hospitals

The Joint Commission's Annual Report on Quality and Safety

2011



New: Top Performers on Key Quality Measures





# 2011

- Joint Commission Resources is chosen as a Hospital Engagement Network by the Department of Health and Human Services to work with hospitals to make health care safer and less costly by targeting and reducing the millions of preventable injuries and complications from health care-associated conditions.

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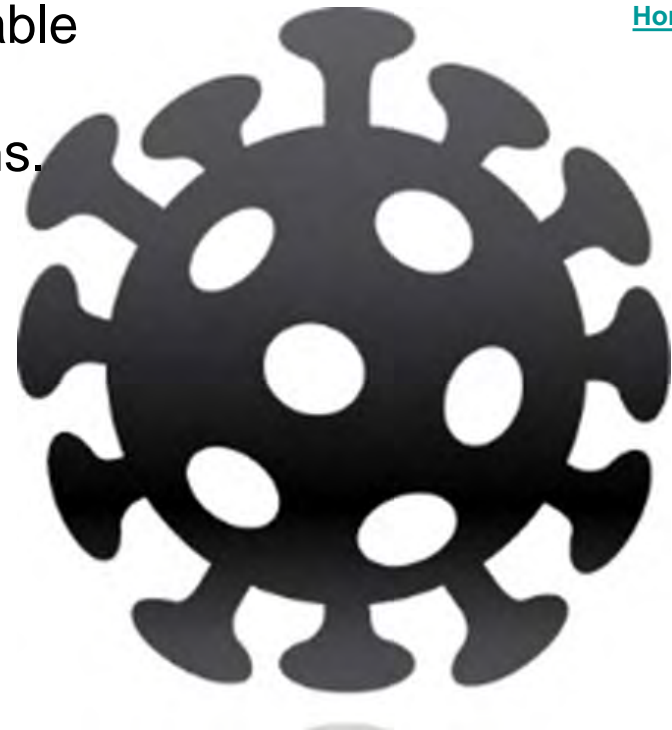
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# 2012

- ▶ The Center for Transforming Healthcare releases its [Targeted Solutions Tool® \(TST®\) for Safe Surgery](#).
- ▶ Joint Commission International, the South African-based Council for Health Service Accreditation of Southern Africa, and the PharmAccess Foundation of the Netherlands announce an agreement to establish the [SafeCare Foundation](#).

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# 2012

- ▶ The Center for Transforming Healthcare releases the [Hand-off Communications Targeted Solutions Tool® \(TST®\)](#).
- ▶ The Joint Commission and the American Heart Association /American Stroke Association announce the launch of the Disease-Specific Care Advanced Certification Program for Comprehensive Stroke Centers.

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# 2012

- ▶ Joint Commission Resources launches the [Certified Joint Commission Professional \(CJCP™\) program](#).
- ▶ The Center for Transforming Healthcare and the South Carolina Hospital Association announce the South Carolina Safe Care Commitment to improve patient safety by using high reliability strategies that have been proven effective in other industries.

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# 2013

- ▶ The Joint Commission debuts its new Nursing and Rehabilitation Center Accreditation program, and for the first time offers a Rehabilitation and Advanced Care Certification option.
- ▶ The Joint Commission begins offering a Primary Care Medical Home certification option for accredited hospitals and critical access hospitals.

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# 2014

- ▶ The Nursing Care Center Accreditation program begins offering [Memory Care Certification](#).
- ▶ An innovative online educational tool, “Applying High Reliability Principles to the Prevention and Control of Infections in Long Term Care,” is released.
- ▶ A new “Patient Safety Systems” chapter is published in the 2015 *Comprehensive Accreditation Manual for Hospitals*.

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# 2015

- ▶ The Joint Commission and the American Heart Association/ American Stroke Association launch a Disease-Specific Care Advanced Certification Program for Acute Stroke Ready Hospitals.

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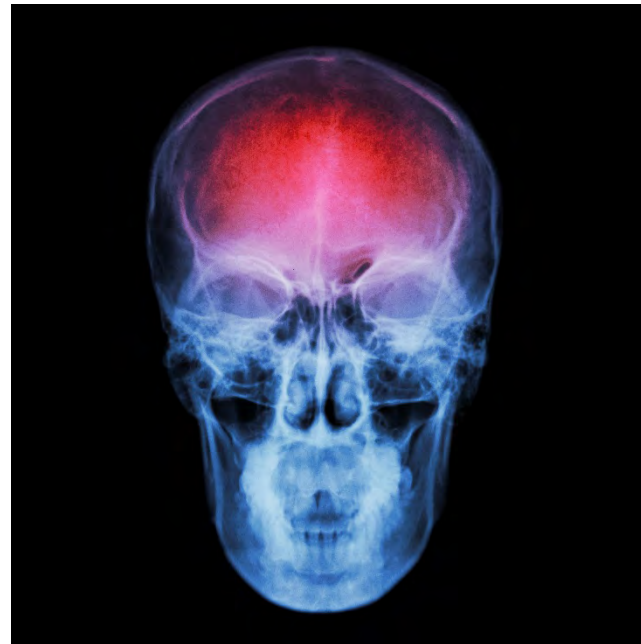
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# 2015

- ▶ An [Integrated Care Certification](#) option – for hospital and ambulatory care settings – focuses on helping improve care coordination across the continuum of care.
- ▶ [Perinatal Care Certification](#) launched, covering labor through postpartum care in order to improve and maintain the health of newborns and their mothers.

[1910-1919](#)

[1920-1929](#)

[1950-1959](#)

[1960-1969](#)

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# 2015

- ▶ The Center for Transforming Healthcare released its [Targeted Solutions Tool® \(TST®\)](#) for preventing hospital inpatient falls and falls with injury.
- ▶ The Center released [ORO 2.0](#), an online high reliability assessment and resource library designed to assist hospital leaders with determining their organization's level of maturity in multiple components of high reliability and striving for the goal of zero preventable harm.

[1910-1919](#)

[1920-1929](#)

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