



About Us

May 05, 2006

A Journey Through the History of The Joint Commission

1910 | 1913 | 1917 | 1918 | 1926 | 1950 | 1951 | 1952 | 1953 | 1959 | 1964 | 1965 | 1966 | 1969 | 1970 | 1971 | 1972 | 1975 | 1978 | 1979 | 1982 | 1983 | 1986 | 1987 | 1988 | 1989 | 1990 | 1992 | 1993 | 1994 | 1995 | 1996 | 1997 | 1998 | 1999 | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008

Mission

The mission of The Joint Commission is to continuously improve the safety and quality of care provided to the public through the provision of health care accreditation and related services that support performance improvement in health care organizations.

1910



- Ernest Codman, M.D., proposes the “end result system of hospital standardization.” Under this system, a hospital would track every patient it treated long enough to determine whether the treatment was effective. If the treatment was not effective, the hospital would then attempt to determine why, so that similar cases could be treated successfully in the future.

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1913



- American College of Surgeons (ACS) is founded at the urging of Franklin Martin, M.D., a colleague of Dr Codman. The “end result” system becomes an ACS stated objective.

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1917

- The ACS develops the *Minimum Standard for Hospitals*. Requirements fill one page.

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1918

- The ACS begins on-site inspections of hospitals. Only 89 of 692 hospitals surveyed meet the requirements of the *Minimum Standard*.

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1926

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

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1950

- The standard of care improves over time and more than 3,200 hospitals achieve approval under the program.

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1951

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

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1952

- The ACS officially transfers its Hospital Standardization Program to JCAH, which begins offering accreditation to hospitals in January 1953.

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1953

- JCAH publishes *Standards for Hospital Accreditation*.

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1959

- The Canadian Medical Association withdraws from JCAH to form its own accrediting organization in Canada.

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1964

- JCAH begins charging for surveys.

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1965

- 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.

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1966

- Long term care accreditation begins.

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1969

- JCAH establishes four accreditation councils to develop standards and survey accreditation procedures. The Accreditation Council for Services for the Mentally Retarded and Other Developmentally Disabled Persons is appointed and accreditation for organizations serving developmentally disabled persons begins.

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1970

- Standards are recast to represent optimal achievable levels of quality, instead of minimum essential levels of quality.
- The Accreditation Council for Psychiatric Facilities is established and accreditation for psychiatric facilities, substance abuse programs and community mental health programs begins.
- Registered nurses and hospital administrators join physicians in conducting accreditation surveys.
- Accreditation for hospitals and long term care facilities is reduced to a maximum of two years from three years. Where survey findings indicated that necessary improvements had not been made or completed, accreditation is given for one year.

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1971

- The Accreditation Council for Long Term Care is established.

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1972

- 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 law also requires the Secretary to include an evaluation of JCAH's accreditation process in the annual DHHS report to Congress.
- The first issue of *Perspectives on Accreditation* is published.

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1975

- The Accreditation Council for Ambulatory Health Care is established and accreditation for ambulatory health care facilities begins.
- Instead of receiving one-year accreditation, hospitals with deficiencies are awarded two year accreditation, contingent on the correction of the deficiencies and forwarding proof of such corrections to JCAH.

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1978

- JCAH and the College of American Pathologists establish a collaborative agreement for the evaluation of laboratories in hospitals.

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1979

- The American Dental Association 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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1982

- The first public member begins service on the Board of Commissioners, JCAH's governing body.
- The accreditation cycle is changed from two years to three years for hospitals, psychiatric facilities, alcoholism and substance abuse programs, and community mental health centers.

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1983

- The accreditation cycle is changed from two years to three years for long term care organizations.
- Accreditation for hospice care organizations begins. (Folded into the Home Care Accreditation Program in 1990.)
- JCAH establishes a tailored survey approach.

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1986

- Quality Healthcare Resources® (QHR), Inc., is formed as a not-for-profit consulting subsidiary of JCAH.

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1987

- 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 with a set of initiatives designed to place the primary emphasis of the accreditation process on actual organization performance.

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1988

- Development of the Indicator Measurement System® (IMSystem®)—an indicator-based performance monitoring system—gets underway.
- Accreditation for home care organizations begins.

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1989

- Accreditation for managed care begins. (Folded into the Ambulatory Care Accreditation Program in 1990.)

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1990



- The Joint Commission Headquarters and Conference Center opens in Oakbrook Terrace, Ill., about 20 miles west of downtown Chicago.
- Two additional public members begin service on the board.

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1992

- The *Accreditation Manual for Hospitals* begins the multiyear transition to standards that emphasize performance improvement concepts.
- An at-large nursing representative and another public member begin service on the board.
- The Joint Commission issues a standard requiring all accredited hospitals to have a policy prohibiting smoking in the hospital.

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1993

- The Accreditation Manual for Hospitals is reorganized around important patient care and organization functions to shift the focus from standards that measure an organization's capability to perform to those that look at its actual performance.
- The number and nature of confirmed substantive complaints filed against accredited facilities and the existence of type I recommendations becomes public information.
- The Joint Commission begins conducting mid-cycle, random, unannounced surveys of 5 percent of accredited organizations across the nation.
- 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 in December for health care organizations surveyed after January 1, 1994. The reports provide information to the public about the performance of organizations accredited by the Joint Commission.
- The *1995 Accreditation Manual for Hospitals*, *1995 Accreditation Manual for Home Care* and *1995 Accreditation Manual for Mental Health, Chemical Dependency, and Mental Retardation/Developmental Disabilities Services* are published, completing the transition for these programs to performance-focused standards organized around functions important to patient care.
- A new survey process is implemented that uses a systemwide, cross-department orientation.
- Accreditation for health care networks begins.
- The Joint Commission forms the Work Group on Accreditation Issues for Small and Rural Hospitals.
- Quality Healthcare Resources, Inc.® and the Joint Commission form Joint Commission International to provide education and consulting services to international clients.
- Two additional public members begin service on the Board of Commissioners, bringing the total number of public members to six.

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1995

- The federal government recognizes Joint Commission laboratory accreditation services as meeting the requirements for Clinical Laboratory Improvement Amendments of 1988 (CLIA) certification.
- As part of an Action Plan, the Joint Commission launches the Orion Project (suggested by the Work Group on Accreditation Issues for Small and Rural Hospitals) in Pennsylvania and Arizona as a series of experiments designed to test innovations to improve the delivery of accreditation services.
- For the first time, a public member serves as an officer of the Board of Commissioners.
- The *1996 Accreditation Manual for Ambulatory Health Care*, *1996 Accreditation Manual for Health Care Networks*, *1996 Accreditation Manual for Long Term Care* and *1996 Accreditation Manual for Pathology and Clinical Laboratory Services* are published, completing the transition for all programs to performance-focused standards organized around functions important to patient care.
- Accreditation for freestanding laboratories begins.

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1996

- Laptop technology is introduced for use during hospital surveys, and a preliminary report is introduced.
- 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 for the evaluation of sentinel events in accredited organizations and their relationship to accreditation status.
- The Joint Commission launches its Web site at www.jcaho.org (now www.jointcommission.org).

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1997

- The Joint Commission launches ORYX: The Next Evolution In Accreditation™ to integrate the use of outcomes and other performance measures into the accreditation process. For 1998, the ORYX implementation plan applies to hospitals, long term care organizations and health care networks.
- Accreditation for preferred provider organizations is launched as a separate accreditation track under the Network Accreditation Program.
- Accreditation for managed behavioral health care organizations is launched as a separate accreditation service under the Behavioral Health Care Accreditation Program.
- The Joint Commission’s Ernest A. Codman Awards are awarded for the first time to recognize outstanding achievement by health care organizations and individuals in the use of performance measurement to improve organization performance.
- Quality Check®, a directory of Joint Commission accredited organizations and performance reports, becomes available on the Joint Commission Web site.
- The Business Advisory Group is created to provide counsel to the Joint Commission on employer priorities in the evaluation of health care quality.

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1998

- The Sentinel Event Policy is revised, effective April 1, to promote self-reporting of medical errors and encourage health care providers to more closely examine the root causes of these events.
- The ORYX™ initiative expands to include accredited behavioral health care and home care organizations
- Joint Commission Resources, Inc.™ replaces Quality Healthcare Resources, Inc.® 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: “To continuously improve the safety and quality of care provided to the public through the provision of health care accreditation and related services that support performance improvement in health care

organizations."

- As part of a plan to incorporate standardized core performance measures in the ORYX initiative, five priority measurement areas recommended by the state hospital association forum are approved—acute myocardial infarction, congestive heart failure, pneumonia, pregnancy and related conditions, and surgical procedures and complications.
- The first real ORYX data is transmitted to the Joint Commission from hospitals and long term care organizations.
- The Public Advisory Group on Health Care Quality is established to counsel the Joint Commission on current and evolving health care issues that are of concern to the public, and to define public expectations for quality in health care.
- 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.
- The Centers for Medicare & Medicaid Services approves the Joint Commission's application for hospice deemed status.
- The Joint Commission and the Occupational Safety and Health Administration receive the Hammer Award, which recognizes excellence achieved by teams and partnerships in helping to reinvent government.

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2000

- Random Unannounced Survey Policy is revised: Organizations now receive no advance notice for random unannounced surveys.
- 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.
- The Joint Commission revises behavioral health care standards relating to the use of restraint and seclusion in the treatment of psychiatric patients and adopts revised requirements relating to the use of restraint and seclusion in hospitals that use accreditation for Medicare deemed status purposes.
- The *Accreditation Manual for Assisted Living* is published, and the first accreditation is awarded.
- The Sentinel Event Policy is modified so that an organization with significant concerns about sharing legally sensitive sentinel event information with the Joint Commission may opt for an on-site review of its response to a sentinel event rather than provide the root cause analysis of the sentinel event to the Joint Commission.
- The Joint Commission begins conducting surveys during evening, night and weekend shifts for full surveys of hospitals.
- The Joint Commission and OSHA in June extend an educational partnership agreement, established in 1996, that renews a commitment to help health care organizations efficiently meet both entities' requirements.

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2001

- The Joint Commission celebrates the 50th anniversary of its founding.
- New pain assessment and management standards go into effect January 1 for hospitals, health plans and organizations providing ambulatory care, assisted living, behavioral health care, home care and long term care.
- The Joint Commission introduces a new accreditation program for Office-Based Surgery practices.
- New standards that focus directly on patient safety and medical/health care error reduction in hospitals take effect July 1.
- The Joint Commission forms a 20-member Standards Review Task Force to identify the accreditation standards most relevant to the safety and quality of patient care, and target for elimination or modification those standards that do not contribute to good patient outcomes.
- The Joint Commission phases in an automated on-line application for survey. The application is available on the Joint Commission's secure, password-protected extranet, Joint Commission Connect.
- The Joint Commission launches a new accreditation program for critical access hospitals, with the first surveys conducted in November.

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2002

- The Joint Commission announces the Shared Visions-New Pathways initiative, designed to progressively sharpen the focus of the accreditation process on care systems critical to the safety and quality of patient care.
- The Joint Commission establishes its first annual National Patient Safety Goals for improving the safety of patient care in health care organizations, to be effective in 2003.
- The Joint Commission and the Centers for Medicare & Medicaid Services launch Speak Up™, a national campaign that urges patients to take a role in preventing health care errors and encourages them to become active, involved and informed participants of the health care team.
- The Joint Commission's Board of Commissioners invites a home care professional to attend and participate in board meetings in a non-voting capacity.
- The Joint Commission releases the first of its public policy white papers, *Health Care at the Crossroads: Strategies for Addressing the Evolving Nursing Crisis*.
- The Joint Commission launches the Disease-Specific Care Certification Program.
- CMS announces the granting of deeming authority for critical access hospitals to the Joint Commission and announces its continued approval of the Joint Commission as an accrediting body for review of clinical laboratories under federal CLIA regulations, and as a deeming authority for ambulatory surgery centers.
- Accredited hospitals begin collecting data on the first sets of ORYX core performance measures in July.
- The Joint Commission announces that all accredited long term care, home care and behavioral health care organizations will be permitted to defer the reporting of data from ORYX measures to the Joint Commission until core measures are identified.
- The Joint Commission and the National Quality Forum announce the establishment of the John M. Eisenberg Patient Safety Awards, named in memory of the respected former leader of the Agency for Healthcare Research and Quality.
- The Joint Commission and the American Case Management Association announce the establishment of the Franklin Award of Distinction, which recognizes exceptional Hospital and Health System Case Management.
- The Joint Commission's Board of Commissioners elects for the first time a public member to serve as its chairman beginning in 2003.

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2003

- The Joint Commission announces plans to introduce unannounced triennial surveys on an optional, limited basis beginning in 2004 with the intent to transition all triennial surveys to an unannounced basis by 2006.
- The Joint Commission establishes a 30-member Nursing Advisory Council in May to help address the recommendations contained in *Health Care at the Crossroads: Strategies for Addressing the Evolving Nursing Crisis*.
- The Joint Commission announces a Universal Protocol™ for preventing wrong site, wrong procedure, wrong person surgery, effective July 1, 2004.
- The Joint Commission forms a 20-member expert panel to consider and recommend ways in which the Joint Commission's infection control standards can be strengthened. Later in the year, the panel approves revised standards that sharpen and raise the expectations of organization leadership and of the infection control program itself.
- To help accredited organizations publicize the value of accreditation, the Joint Commission creates a Gold Seal of Approval™ that is displayed on all certificates of accreditation awarded after January 1, 2003.
- The Joint Commission's Board of Commissioners approves the extension of the Home Care non-voting position on the Board for two years, and approved creation of a Long Term Care non-voting position on the Board.
- The Joint Commission announces home care and behavioral health care specific National Patient Safety Goals for 2004.
- Based on the recommendations for primary stroke centers published by the Brain Attack Coalition and the American Stroke Association's statements/guidelines for stroke care, the Joint Commission develops

a Primary Stroke Care Certification Program. The collaboration between the Joint Commission and the ASA provides the first nationwide certification program to evaluate stroke care provided by hospitals.

- In March, the Joint Commission, the American Society for Clinical Pathology and the American Proficiency Institute launch Lab Advantage, combining Joint Commission accreditation, API proficiency testing, and ASCP continuing education into one seamless new process.

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2004

- The Joint Commission launches its new accreditation process, Shared Visions-New Pathways, January 1.
- A Professional and Technical Advisory Committee for the Laboratory Accreditation Program is established in March.
- The Joint Commission launches a national campaign to help individuals prepare to become living organ donors and to make the process as safe as possible by becoming active, involved and informed. In June, the Joint Commission issues the public policy white paper, *"Health Care at the Crossroads: Strategies for Narrowing the Organ Donation Gap and Protecting Patients."*
- The first non-voting Long Term Care representative is appointed to the Board of Commissioners in April for a two-year term.
- Joint Commission International announces in April the opening of a European office in Milan, Italy.
- Quality Reports debut on the Joint Commission Connect extranet in June, and are posted to Quality Check® in July. "Merit badge" achievements are added to the Special Quality Awards section of the Quality Report. Hospital Quality Measures and other core measure data are also added to Quality Reports.
- The Government Accountability Office (GAO) issues *Medicare: CMS Needs Additional Authority and Better Measures to Adequately Oversee the Hospital Accreditation Program*, and the Joint Commission challenges the misleading findings.
- The Joint Commission launches the Health Care Staffing Services Certification Program in October.
- Joint Commission International opens a branch office in Ferney-Voltaire, France, in October.
- The Joint Commission unveils a set of principles to guide the development and refinement of health care pay-for-performance programs.
- The Joint Commission develops new certification programs for Lung Volume Reduction Surgery and Left Ventricular Assist Devices.
- The Joint Commission receives an award from The California Endowment to fund a major study entitled *Hospitals, Culture, and Language: A Snapshot of the Nation* whose goal is to assess how hospitals across the nation are addressing issues related to culture and language in the populations that they serve.
- The Joint Commission and the American Society for Healthcare Engineering (ASHE) announce in June a new partnership that will improve the evaluation of life safety and environment of care issues.
- The Joint Commission and the National Quality Forum announce in October a joint project to develop and standardize performance measures for the prevention and care of deep vein thrombosis.
- The World Health Organization launches its World Alliance for Patient Safety in October, and the Joint Commission is invited to be involved in several of the Alliance's initiatives.

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2005

- Life safety code specialists are added to the Joint Commission survey team during on-site surveys of hospitals with 200 or more beds, effective January 1.
- The Joint Commission releases "Health Care at the Crossroads: Strategies for Improving the Medical Liability System and Preventing Patient Injury," and holds a news conference on February 10, in Washington, D.C., issuing a call to action to reform the nation's medical liability system.
- The Board of Commissioners approves in February a subscription billing model, effective January 2006.
- The Joint Commission and JCR establish the Joint Commission International Center for Patient Safety in March.
- Quality Reports in July begin identifying hospitals with high organ donation rates, based on information from the Health Resources and Services Administration of the Department of Health and Human Services.

- The Joint Commission begins random announced validation surveys in July to study how well the triennial survey assesses an organization's compliance with Joint Commission standards.
- The World Health Organization in August designates the Joint Commission and Joint Commission International as the WHO Collaborating Centre for Patient Safety Solutions.
- The Board of Commissioners votes in August to terminate the Assisted Living and Network Accreditation Programs, effective January 1, 2006.
- The Joint Commission responds to the needs of accredited organizations in September and publishes *"Standing Together: An Emergency Planning Guide for America's Communities"* for small, rural and suburban communities to both prepare for and successfully respond to emergencies. The Joint Commission establishes an 18-member Physician Engagement Advisory Group in December.
- The Joint Commission launches the nation's first certification program for chronic kidney disease management in December.

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2006

- The Joint Commission begins conducting on-site accreditation surveys and certification reviews on an unannounced basis, with certain exceptions.
- JCR and the Joint Commission team up with writers Michael F. Roizen, M.D., and Mehmet C. Oz, M.D., to produce *You: The Smart Patient: An Insider's Handbook for Getting the Best Treatment* released in February.
- The Joint Commission launches a redesigned Web site, www.jointcommission.org, in March.
- The Joint Commission announces a new infection control standard in June that requires accredited hospitals, critical access hospitals and long term care organizations to offer influenza vaccinations to staff, effective January 1, 2007.
- Joint Commission International announces in June the opening of a Middle East office in Dubai Healthcare City, Dubai, United Arab Emirates.
- The Board of Commissioners approves a proposal in July to initiate the conduct of unannounced initial surveys in hospitals and critical access hospitals, effective January 1, 2007.
- The Joint Commission announces in July an Advanced Inpatient Diabetes Care Certification Program that will provide the first nationwide certification program for inpatient diabetes care.
- Joint Commission International announces in August the opening of an Asia Pacific office located in Singapore.
- The Joint Commission launches the Standards Improvement Initiative in October, 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.
- The Department of Health and Human Services' Centers for Medicare & Medicaid Services grants The Joint Commission deeming authority in November to accredit durable medical equipment, prosthetics, orthotics and supplies, as provided by the Medicare Modernization Act of 2003.
- The World Health Organization Collaborating Centre on Patient Safety, the World Alliance for Patient Safety and the Commonwealth Fund announces a seven-country collaborative project in December that will leverage the implementation of five standardized patient safety solutions to prevent avoidable catastrophic events in hospitals.

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2007

- The Joint Commission introduces its refreshed brand identity (name and logo) on January 1, in support of its continuing efforts to improve the value of accreditation.
- The Joint Commission publishes in February the public policy white paper, *"What Did the Doctor Say?": Improving Health Literacy to Protect Patient Safety*.
- The Joint Commission receives a grant in February from the Robert Wood Johnson Foundation to test nursing-focused performance measures.
- The Department of Health and Human Services' Centers for Medicare & Medicaid Services in February grants The Joint Commission continued deeming authority under the Clinical Laboratory Improvement Amendments of 1988.
- Joint Commission International is selected in March by Dubai Healthcare City to accredit hospitals within DHCC.

- The first non-voting Behavioral Health Care representative is appointed to the Board of Commissioners in March.
- The Joint Commission publishes in March *“Improving America’s Hospitals: A Report on Quality and Safety,”* which details accredited hospitals against standardized national performance measures and The Joint Commission’s National Patient Safety Goals. A follow-up report is issued in November.
- The Joint Commission begins in May a study of smoke-free hospital campuses, which is funded by a grant from the Robert Wood Johnson Foundation’s Substance Abuse Policy Research Program.
- The World Health Organization’s Collaborating Centre for Patient Safety Solutions announces in May nine solutions to prevent health care errors. In 2005, WHO designated The Joint Commission and JCR as its Collaborating Centre for Patient Safety Solutions.
- The Joint Commission launches in June WikiHealthCare™, a free, Internet-based collaborative forum accessed through a link The Joint Commission’s home page.
- The Joint Commission launches in July the Strategic Surveillance System for hospitals.
- Joint Commission International announces in July a cooperative agreement with the Ministry of Health of the People’s Republic of China to improve the safety and quality of patient care.
- The Board of Commissioners approves in August revisions to Standard MS.1.20, which addresses medical staff bylaws, rules and regulations, and policies, effective July 2009.
- The Joint Commission is awarded in August a contract by the World Health Organization to oversee global field testing of the International Classification for Patient Safety.
- The Joint Commission launches in September the Ventricular Assist Device Certification Program for hospitals that perform ventricular assist device surgery as destination therapy.
- The Joint Commission announces in September that Joint Commission certified Primary Stroke Centers will be required to collect and report data on all 10 measures of a standardized set of performance measures, and Joint Commission certified Health Care Staffing Services will be required to collect data on a standardized set of three performance measures, effective January 1, 2008.
- Quality Check® is expanded in October to include organizations that are not accredited by The Joint Commission to provide consumers with more information about where to go for their health care needs.
- The Joint Commission receives a grant in October from the Agency for Healthcare Research and Quality for a study of the potential risks and weaknesses of inaccurate or incomplete pre-operative nursing assessments in ambulatory surgery centers.
- The Joint Commission launches in October a new Disease-Specific Care Certification Program for Chronic Obstructive Pulmonary Disease management.
- The Joint Commission begins a study in November, funded by the U.S. Centers for Disease Control and Prevention, on how rapid tests for influenza are implemented in outpatient medical settings.
- The Joint Commission adds in November an initial set of seven hospital outpatient measures to the complement of core measure sets that may be used to satisfy ORYX performance measurement requirements.

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2008

- Joint Commission President Mark R. Chassin, M.D., M.P.P., M.P.H., begins January 1.
- The Joint Commission announces in January a task force to examine implementation issues related to revised hospital medical staff standard MS.1.20. In June, the Board suspends the July 2009 date for implementation of the revised standard.
- Joint Commission International announces it is accredited by the International Society of Quality in Health Care, in January.
- A new patient safety law that took effect January 14 requires New York State physician practices that perform office-based surgical procedures to achieve accreditation from a nationally recognized accrediting organization, among which is The Joint Commission.
- The Joint Commission’s *Sentinel Event Alerts* focus on MRI injuries, preventing pediatric medication errors, behaviors that undermine a culture of safety, anticoagulant therapy, and safely implementing health information and converging technologies.
- The Joint Commission publishes the following public policy white papers: *“Development of a National Performance Measurement Data Strategy,”* in March, and *“Guiding Principles for the Development of the Hospital of the Future,”* in November.
- As part of the award-winning Speak Up™ program, The Joint Commission publishes two brochures: *“Understanding Your Caregivers,”* in April, and *“What You Should Know about Pain Management,”* in

September.

- The Joint Commission releases *“One Size Does Not Fit All: Meeting the Health Care Needs of Diverse Populations,”* in April.
- The Department of Health and Human Services’ Centers for Medicare & Medicaid Services again grants The Joint Commission deeming authority for home health organizations; the Final Notice granting the six-year deeming authority publishes in March.
- The Joint Commission announces in May a new study, funded in part by a grant from the Robert Wood Johnson Foundation, which aims to find new ways to help consumers better understand health care quality data and use the information to make informed health care decisions.
- Quality Check® expands to include organizations with Joint Commission certified programs such as primary stroke, heart disease, kidney disease and heart failure, as well as organizations earning Health Care Staffing Services Certification.
- The Joint Commission and the Urgent Care Association of America collaborate to improve quality oversight for urgent care clinics. The collaboration will include development of quality standards specific to urgent care.
- In June, The Joint Commission announces that, effective with October 1, 2008 discharges, accredited hospitals that provide acute inpatient psychiatric services can use The Joint Commission’s Hospital-Based Inpatient Psychiatric Services measure set to meet ORYX performance measurement requirements. Free-standing psychiatric hospitals also have the option of collecting and submitting data on either the seven measures included in the HBIPS measure set or nine non-core measures to meet ORYX requirements.
In June, the 2009 National Patient Safety Goals are announced; three new requirements address preventing health care-associated infections due to multiple drug-resistant organisms, central line-associated blood stream infections and surgical site infections.
- As of July 1, the window for unannounced surveys is expanded to 18-39 months after an organization’s full survey. The window for accredited laboratories is 18-24 months; certified programs are excluded.
- As part of the Standards Improvement Initiative, the 2009 standards, rationales and elements of performance are posted on The Joint Commission Web site in July.
- A statement is issued to the field, in July, regarding the Medicare reform bill that became law on July 15, which requires The Joint Commission to apply for deeming authority for its hospital accreditation program in order to continue to have deemed status for hospitals subsequent to July 15, 2010. At its August meeting, the Board of Commissioners unanimously approves a resolution for The Joint Commission to reapply for continued hospital deeming authority.
- The Boards of The Joint Commission and Joint Commission Resources agree to redistribute the activities of the Joint Commission International Center for Patient Safety, as of August 1.
- The Joint Commission receives a grant from The Commonwealth Fund, in September, to revise and develop accreditation standards for culturally competent patient-centered care in hospitals across America.
- The Joint Commission and other health care leaders join together in October to develop the *Compendium of Strategies to Prevent Healthcare-Associated Infections in Acute Care Hospitals*.
- The Centers for Medicare & Medicaid Services issues a clarification in October, sought by The Joint Commission in response to field concerns, which brings CMS’ interpretation of standing orders into alignment with The Joint Commission’s view on how to facilitate the timely treatment of certain patients.
- The Centers for Medicare & Medicaid Services grants The Joint Commission deeming authority for critical access hospitals in November. CMS will evaluate, within 180 days, the changes The Joint Commission agreed to make in order to align The Joint Commission requirements with those of CMS.
- In November, it is announced that laboratory accreditation decisions will no longer immediately impact hospital accreditation decisions, effective January 1, 2009.
- *Improving America’s Hospitals: The Joint Commission’s Report on Quality and Safety 2008*, published in November, shows that in some very critical areas, Joint Commission-accredited hospitals in America have steadily improved the quality of patient care over a six-year period.
- The Joint Commission releases in November its E-dition, the first ever electronic version of its accreditation manuals.
- The Centers for Medicare & Medicaid Services again grants The Joint Commission deeming authority for ambulatory surgical centers for its maximum six-year period; the Final Notice publishes November 14.