Accreditation 360 - Updated Accreditation Manual: Medication Management and Information Management Chapters

On Demand Webinar Transcript
October 2025

Slide 1 – 00:00

Hello and welcome! This is your introduction to the Medication Management and Information Management updates as part of the Accreditation 360 initiative, effective January 1st, 2026. CE credit is available for this on demand webinar for 6 weeks following its release. We encourage healthcare organizations to share the link to this recording and the slides with their staff and colleagues. There is no limit on how many staff can take advantage of this educational webinar. We are excited to lead you through the key changes and what they mean for your organization.

Slide 2 – 00:32

Before we begin the webinar content, we would like to offer just a few tips about webinar platform functionality. Use your computer speakers or headphones to listen. Feedback or dropped audio are common for streaming video. Refresh your screen if this occurs. You can pause the play back at any time. You can return and replay the video by using the same access link from your registration confirmation email. We have captioned this recording, and the slides are designed to follow Americans with Disabilities Act rules.

Slide 3 -00:57

The slides are available now. There are many links provided throughout this webinar, but they are not clickable on screen. By downloading the slides, you'll be able to access links and also take notes. To access the slides now within the webinar platform, on the left side of the screen within the participant navigation pane, select the icon that represents a document. A new pop-up window will open, and you can select the name of the file. A new browser window will open, and from it, you can download or print the PDF of the slides. After the Continuing Education period expires, slides will remain accessible on the Joint Commission's website at the link included at the bottom of this slide.

Slide 4 – 01:36

Many attending this webinar will wish to receive continuing education credit or qualifying education hours. All relevant information about continuing education credit is available within a handout we've included with this webinar and has also been communicated within the webinar registration information. The attachment includes the list of entities that will provide credit, the requirements for participants to earn credit, and information about how to complete the survey and obtain a certificate. So be sure to download that attachment to learn more. As previously stated, credit is available for this webinar for 6 weeks following its release. For information on Joint Commission's continuing education policies, visit the link provided on the bottom of this slide.

Slide 5 – 02:14

The participant learning objectives are: Discuss the rationale for the Medication Management and Information Management standards rewrite/reorganization; Define the structure, organization, and requirements of the new

Medication Management and Information Management chapters; Apply guidance and resources to inform implementation.

Slide 6 – 02:37

All staff and subject matter experts have disclosed that they do not have any conflicts of interest. For example, financial arrangements, affiliations with, or ownership of organizations that provide grants, consultancies, honoraria, travel, or other benefits that would impact the presentation of this webinar's content.

Slide 7 – 02:54

Here's a quick overview of what we'll cover today: Medication Management and Information Management chapters will be covered in this webinar. We will begin with a brief, high level overview of the structural changes in the medication management and information management chapters, including new numbering and changes in chapter locations. After discussing standards revisions, we will switch focus on the survey process. We will introduce the Survey Process Guide or SPG document and provide a brief orientation to the modules in the survey process guide. We will also mention a few compliance tools within the survey process guide that include medication management requirements. Next, we will highlight the Accreditation 360 resource documents that are available to help you as you navigate through the new manual. Finally, we will provide an overview of the most frequent opportunities for improvement from recent hospital and critical access hospital surveys, focusing on medication management and information management requirements.

Just a couple notes before we proceed with the webinar content – the information presented in this webinar is high-level. We advise participants to have the standards chapters accessible and open as you proceed through the presentation. The revised manual chapters are posted on pre-publication page, and we've provided the link on this slide. You can follow along in the new chapters. The webinar platform permits pausing the recording, should you need time to access the relevant chapters now, and as you reference the chapters throughout the webinar.

Slide 8 – 04:18

Let's dive in with our presentation. First, we will discuss how the Medication Management or MM chapter requirements have been restructured for 2026.

Slide 9 – 04:28

All standards and EPs have been renumbered in the MM chapter. The boxes on the left display the current numbering of the standards and elements of performance (or EPs). This numbering will continue throughout 2025. As of January 2026, some medication management-related requirements will remain in the Medication Management chapter, while some will move to the new National Performance Goals or NPG chapter, Leadership (or LD) chapter, and the Record of Care or RC chapter.

The box provided in the upper right corner includes the new numbering of the standards and EPs that will remain in the Medication Management chapter. The box in the lower right corner lists the requirements that have moved from the Medication Management chapter to the NPG, LD, and RC chapters. There is a separate webinar about the NPG chapter. We encourage you to register and attend that webinar to better understand NPG requirements.

Slide 10 – 05:21

Now let's examine the concepts remaining in the MM chapter. As noted on this slide, the new MM chapter has 9 standards. Standard MM 11.01.01 addresses general management of drug and biologicals in accordance with federal and state laws and acceptable standards of practice.
Standard MM 11.01.03 is on having information available to the professional staff relating to drug interactions, therapy, side effects, toxicology, dosage, indications for use, and routes of administration.
Standard MM 12.01.01 requires the hospital to maintain a medication formulary.
Standard MM 13.01.01 relates to medication storage as well as records and disposition of scheduled drugs, receipt and distribution of radiopharmaceuticals, and removal of expired, or otherwise unusable medications from patient use.
Standard MM 14.01.01 addresses medication orders.
Standard MM 15.01.01 focuses on supervision of all compounding, packaging, and dispensing of drugs, biologicals and in-house prepared radiopharmaceuticals, as well as sterile medication compounding.
Standard MM 16.01.01 covers medication administration processes, including self-administration of medications.
Standard MM 17.01.01 requires hospitals to implement processes for reporting adverse drug events, significant adverse drug reactions, and medication errors.
And, finally, standard MM 18.01.01 contains requirements on antibiotic stewardship programs.
The important thing to emphasize is that regardless of the changes in the format and numbering, the key medication management concepts remain the same.

Slide 11 – 07:07

Next, as was mentioned previously, some of the medication management-related requirements have been moved from the MM chapter to the new National Performance Goals or NPG chapter, Leadership chapter, and Record of Care Chapter.

Let us first examine medication management-related topics that have been relocated to the new NPG chapter. The new NPG chapter was created to include critical areas designed to prevent patient harm, improve outcomes, and create a safer environment. These topics are:
A requirement to have a pharmacy directed by a registered pharmacist in accordance with accepted professional principles at NPG 12.01.01 EP 10.
Medication review during pharmacy off-hours and a policy on medication overrides when automatic dispensing cabinets are used at NPG 14.01.01.
Standardization of available drug concentrations and management of medication shortages at NPG 14.02.01.
And, finally, requirements on having a multidisciplinary committee to oversee the antibiotic stewardship program and monitoring antibiotic use by the program at NPG 14.06.01.
To reiterate, while these requirements have been relocated from the MM to the NPG chapter, no new concepts have been introduced.
As another reminder, additional information about the new National Performance Goal chapter is provided in a separate webinar.

Slide 12 – 08:28

This slide provides an example of a requirement that was formerly MM 07.01.03 EP 1 and has been moved to the Leadership chapter. Standard LD 13.01.09, EP 5 requires hospitals to develop and implement policies and

procedures that minimize drug errors. The medical staff develops these policies and procedures unless delegated to the pharmaceutical service.

Slide 13 – 08:42

This slide provides an example of a requirement that was formerly MM 04.01.01 EP 15 and has been moved to the Record of Care, Treatment and Services or RC chapter. Standard RC 12.01.01, EP 5 covers requirements on the use of preprinted and electronic standing orders, order sets, and protocols.

To summarize, MM concepts remain the same, and if your organization is currently meeting the requirements related to these concepts, in the new Joint Commission Accreditation 360 model, you will be meeting compliance as well.

Slide 14 – 09:28

We will conclude the segment on medication management-related revisions by noting that current National Patient Safety Goals or NPSGs that relate to medication safety and quality have been retained with minor revisions and moved to a new location in the NPG chapter. The table on the slide shows the change in the numbering and location:
NPSG 03.04.01 on labeling medications on and off the sterile field in perioperative and other procedural areas is now covered in NPG 14.03.01. NPSG 03.05.01 on the safe use of anticoagulant therapy is now covered in NPG 14.04.01. And NPSG 03.06.01 is now located in NPG 14.05.01.

Slide 15 – 10:11

Now we will focus on how the Information Management (or IM) chapter requirements have been restructured in the new accreditation manual.

Slide 16 – 10:18

Similar to the Medication Management chapter, all of the standards and EPs have been renumbered in the Information Management chapter. The box on the left includes the current numbering of the information management standards and elements of performance and the box on the right denotes the future numbering.

Slide 17 – 10:34

The concepts remaining in the IM Chapter should seem familiar to you. They are:
IM 11.01.01, which requires the hospital to plan for continuity of its information management processes.
IM 12.01.01 protects the privacy and confidentiality of health information, and
IM 12.01.03 addresses the security and integrity of health information.
IM 13.01.01 requires hospitals to use standardized terminology, definitions, abbreviations, acronyms, symbols, and dose designations.
IM 13.01.03 is about the hospital retrieving, disseminating, and transmitting health information in useful formats.
And finally, IM 13.01.05 is specific for hospitals that use Joint Commission accreditation for deemed status purposes, and addresses hospitals meeting requirements for the electronic exchange of patient health information.

Slide 18 – 11:26

This slide includes the standards and elements of performance that have been deleted from the manual. Standard IM 02.02.01, EP 3, which specifies the list of prohibited abbreviations, acronyms, symbols, and dose designations has been deleted. However, the concept of using standardized formats is still included in the manual at the new Standard IM 13.01.01.

Standard IM 03.01.01, EP 1 addressing access to knowledge-based information resources has also been deleted.

Slide 19 – 12:00

Now that we have discussed new standards numbering and locations for the Medication Management and Information Management chapters, let's switch focus and we'll describe the survey process.

Slide 20 – 12:10

One important resource for understanding the Joint Commission survey process is the new Survey Process Guide or SPG. This document explains the survey process in great detail and replaces the Survey Activity Guide that accredited organizations are currently using. There are some new features to mention:
First, the SPG better reflects State Operations Manual or SOM related to survey process for the CoPs. Second, accredited organizations will receive the same detailed survey process guide used by surveyors, which would promote greater transparency and consistency throughout the survey process. One thing to note, the expectations for compliance with the elements of performance and the CoPs has not changed. If your organization is compliant today, you can be confident that you will be compliant on January 1st, 2026.

Slide 21 – 12:58

As we will discuss throughout the next few slides, the SPG is organized into modules based on the CMS CoP structure. There is a separate module for the NPG chapter. The SPG also provides a series of compliance evaluation tools to assist organizations in meeting compliance with the elements of performance evaluated during surveys.

Slide 22 – 13:18

It is important to emphasize that the survey process and structure remain unchanged. Medication management concepts will still be discussed during individual tracers, medical record reviews, medication safety and pharmacy review conducted with pharmacy staff and leaders. Information management concepts will continue to be assessed during medical records review activities.

Slide 23 – 13:39

As mentioned previously, the Survey Process Guide is organized into modules based on the CMS Conditions of Participation or CoP structure. Let's examine an example module from the survey process guide. As displayed on the slide, the red box at the top includes the CoP that will be addressed in the module. In this case, CoP 482.5 on pharmaceutical services. The information is presented in a 3-column table:
The column on the left identifies the Joint Commission standards and EPs. The standard MM 13.01.01 EP 1 on maintaining current and accurate records of the receipt and disposition of all scheduled drugs appears in the left column. The middle column provides the full text of the Pharmaceutical services CoP that the standard and EP is mapped to. The column on the right side of the slide provides the survey process information and

activities that surveyors will carry out to evaluate compliance. These activities may include Interview, Document Review, and Observation following our current tracer methodology.

Slide 24 – 14:44

Please note that the MM and IM requirements will appear in several modules throughout the SPG document. Therefore, to fully understand these requirements and how they will be evaluated, we encourage you to review the entire survey process guidance document. On this slide we've included an MM requirement that is included in the Nursing Services Evaluation Module and an IM requirement that is located in the Patient Rights Evaluation Module. The "control-find" function is a tool that organizations can use to find all references to the MM and IM standards and EPs. First hold down control button on your keyboard while also clicking on the "F" button. In the box that opens, you can type in the EP that you are seeking, and the document will be searched for that EP. You can also search for terms as well.

Slide 25 – 15:28

The Survey Process Guide also includes a collection of compliance evaluation tools to help surveyors and organizations evaluate compliance with the standards. Medication management-related standards are referenced in several of these tools. For example, the CMS A-Tag Summary Review Sheet for Deemed Hospital Medical Record Review, the Antibiotic Stewardship Tool, and the Performance Improvement Evaluation Tool.

Slide 26 – 15:54

Now we are going to provide an overview of the resources that are available to you as you transition to Joint Commission's Accreditation 360 model.

Slide 27 – 16:01

There are several resources available on our pre-publication webpage that you may find useful as you navigate through restructured accreditation standards. From this webpage, you will be able to access the reports containing accreditation requirements, as well as hospital and critical access hospital crosswalks, crosswalk compare reports, survey process guides, and disposition reports.

All of these resources are available to download from the link provided on this slide. If you've downloaded the slides, this link will be clickable and will take you to the prepublication website.

Slide 28 – 16:31

To track standard revisions, we have developed a Disposition Report to help accredited organizations easily determine what revisions were made. The report contains information about where concepts have moved from their previous EP locations, and there is a disposition column to describe the type of revision that occurred.

For each of the current standards and EPs listed on the left side of the table, the disposition column identifies what has happened to the requirement. Examples of options that may appear in the disposition column are: moved to a new location, moved and revised, EP split into multiple EPs, or a consolidation of several requirements into one.

In some cases, there will be new language. This is because that EP language was revised to convey alignment with the language in the Conditions of Participation. The overall concept is not new, but now the EP text matches the CoP language more closely. There are also situations where an EP has been deleted. Either the

requirement is no longer necessary because it no longer addresses current patient or safety concerns, or it is now redundant to a more direct EP that matches CMS language. In some cases, a requirement is deleted, and the concept is moved to the Survey Process Guide or SPG. The phrase “moved to guidance within SPG” means that the details underlying a requirement and the information on how this requirement will be evaluated will now be found in the SPG document.

For the requirements that were retained, the new locations and EP text are provided on the right side of the table.

Slide 29 – 18:02

The crosswalk compare reports are another resource available on the pre-publication page. These documents are helpful if you would like to understand how to meet Conditions of Participation and how Joint Commission standards address or crosswalk to those CMS requirements. The document contains current and future Joint Commission requirements organized by the CoP number. What you will immediately notice in the crosswalk compare reports, is that crosswalks were simplified quite significantly.

Slide 30 – 18:30

This slide provides an example of the crosswalk with the hospital CoP listed on the left, the current EP mapping in the middle, and the future mapping on the right. The CoP shown on the slide previously had multiple Information Management requirements mapped to it, and in the future will just have one mapped. This example demonstrates a streamlined approach in which Joint Commission requirements more directly identify the US Centers for Medicare & Medicaid Services (CMS) Conditions of Participation.

Slide 31 – 18:58

This portion of the presentation will address trending opportunities for medication management and information management requirements in both Hospital and Critical Access Hospital programs. We will also demonstrate new standard locations for these commonly identified opportunities for improvement.

Slide 32 – 19:14

Let us examine the most frequent opportunities from the MM chapter for the Hospital program. As provided on the graph, the top 5 opportunities include medication administration in accordance with the order at MM 06.01.01 EP 3 with 720 opportunities documented between May 2025 and May 2025. Clarifying medication order concerns at MM 05.01.01 EP 11 had 223 opportunities, and the requirement MM 03.01.01 EP 7 to label stored medications with the contents, expiration date, and any applicable warnings had 179 opportunities. Finally, the requirements on removing expired or damaged medications and storing medications according to the manufacturers' recommendation received 171 and 167 opportunities, respectively.

Slide 33 – 20:08

This slide provides an easy reference for the new locations for the top 5 trended opportunities in the MM chapter. For example, MM 06.01.01 EP 3 on medication administration per order is moving to the new MM 16.01.01 EP 1. Additional information about the survey process for these requirements is available in the Survey Process Guide (or SPG) and could help organizations address these opportunities for improvement.

Slide 34 – 20:35

Now let's review the most frequent opportunities from the MM chapter for the Critical Access Hospital program between May 2024 and May 2025. As provided within the graph, the top 5 opportunities include medication administration in accordance with the order at MM 06.01.01 EP 3 with 38 opportunities. Following a policy that defines the minimum required elements of a complete medication order at MM 04.01.01 EP 2 had 9 opportunities. The requirement MM 03.01.01 EP 7 to label stored medications with the contents, expiration date, and any applicable warnings had 6 opportunities. Finally, the requirements related to sterile medication compounding policies and procedures, and compounding competencies received each received 5 opportunities.

Slide 35 – 21:25

Now we will move on to trending opportunities for improvement in the IM chapter between May 2024 and May 2025. The top 5 opportunities include following a list of prohibited abbreviations with 46 opportunities and having a written policy addressing the privacy and confidentiality of health information with 37 opportunities. Protecting health information against loss, damage, unauthorized alteration, unintentional change, and accidental destruction and protecting against unauthorized access, use, and disclosure of health information both had 29 and 28 opportunities, respectively. The 5th most commonly identified opportunity was using standardized terminology, definitions, abbreviations, acronyms, symbols, and dose designations.

Slide 36 – 22:12

This slide provides the new standard locations for these top opportunities. All requirement concepts have been retained and have been renumbered.

Slide 37 – 22:20

For critical access hospitals, the top 3 opportunities for information management topics between May 2024 and May 2025 include following a list of prohibited abbreviations, following a written policy that addresses the security of health information, including access, use, and disclosure, and protecting against unauthorized access, use, and disclosure of health information.

Slide 38 – 22:43

After reviewing standards, resources, and this webinar, you may still have remaining questions. The revisions were significant, and Joint Commission is prepared to assist you through the transition. If you have any questions about the MM or IM chapter updates, or any other questions about the new chapters, please submit your inquiry using the link displayed at the top of this slide. Joint Commission staff monitor this site closely.

If you have questions about webinar operations or obtaining Continuing Education credit, please submit them via email to: tjcwebinarnotifications@jointcommission.org.

Slide 39 – 23:19

All Accreditation 360 webinar recording links, slides, and transcripts can be accessed on the Joint Commission's webpage via the link provided at the bottom of this slide. After this webinar is no longer available for continuing education credit, the recording and materials will remain accessible at that link on Joint Commission's website.

Slide 40 – 23:36

Before this webinar concludes, a few words about the survey. We use your feedback to inform future content, determine education gaps, and assess the quality of our educational programs. A QR code is available on the next slide. You can use your mobile device to scan and access the survey. If you prefer to take the survey later, an automated email also delivers the link to the survey.

After you complete and submit your survey responses, you will be redirected to a page from which you can print or download a blank Certificate that you complete by adding your own name and credentials. In case you miss that opportunity to download, an automated email will also be sent to you that includes the link to the certificate.

Slide 41 – 24:16

We'll leave this slide up for a few moments so participants can scan the survey QR code. This concludes our presentation. Thank you for attending this webinar on the Accreditation 360 revisions to the Medication Management and Information Management chapters. Have a wonderful day.