



Updated Accreditation Manual: Nursing and Medical Staff Chapters

Accreditation 360
Hospitals and Critical Access Hospitals

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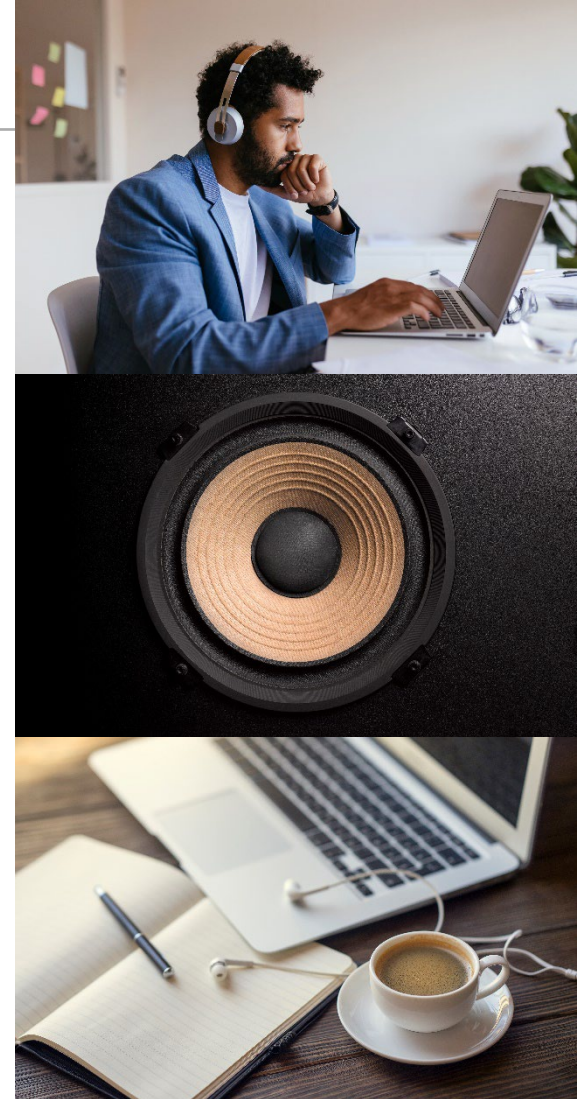
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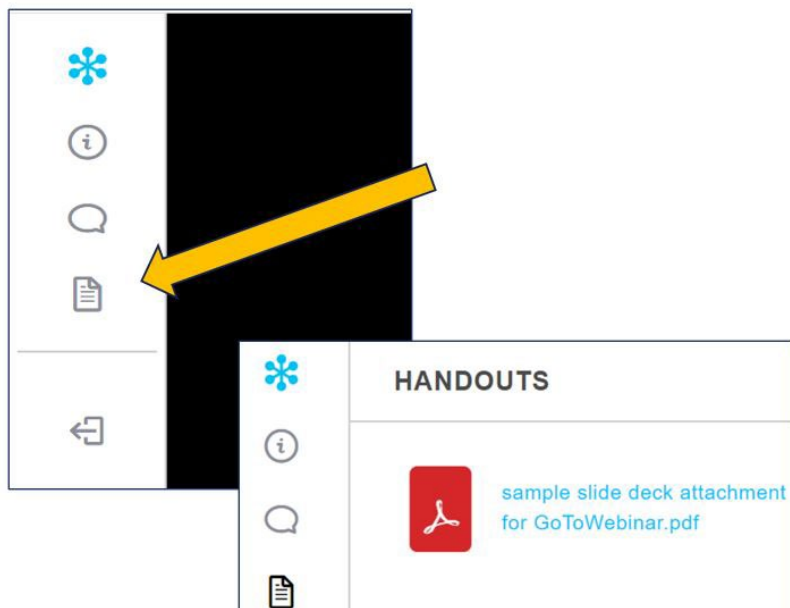
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- Entities providing credit
- Requirements to earn credit
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Participant Learning Objectives



Discuss the rationale for the Nursing and Medical Staff standards rewrite/reorganization

Define the structure, organization, and requirements of the new Nursing and Medical Staff chapters

Apply guidance and resources to inform implementation

Disclosure Statement

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 content.



Content Outline

<https://www.jointcommission.org/en-us/standards/prepublication-standards/critical-access-hospital-and-hospital-requirements-streamlined-to-reduce-burden>

Nursing and Medical Staff Updates

- New Numbering
- New Chapter Locations

Survey Process

- Orientation to Survey Process Guide (SPG)
- SPG Modules

Resources to Navigate Revisions

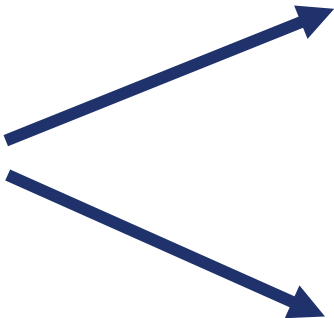
- Disposition Report
- Crosswalk Compare Report

Commonly Identified Opportunities for Improvement

Part 1 — Nursing (NR) Updates

Numbering and Location Changes

Current Standard Numbering
NR.01.01.01
NR.01.02.01
NR.02.01.01
NR.02.02.01
NR.02.03.01



Future Standard Numbering
LD.13.03.01 EP 2

Future Standard Numbering
NPG.12.02.01

Future Standard Numbering
NR.01.01.01

Concepts Remaining in the NR Chapter

Assigning Nursing
Care

NR.11.01.01 EP 1

**Adhering to Policies
and Procedures**

NR.11.01.01 EP 2

Supervision of
Clinical Activities by
Nurse Executive

NR.11.01.01 EP 3

Supervision of
Nursing Care by RN

NR.11.01.01 EP 4

Nursing Concepts in the NPG Chapter

Nurse Executive
Responsibilities
NPG.12.02.01 EP 1

Nurse Executive &
Decision-Making
NPG.12.02.01 EP 2

CAH Nurse on Duty
NPG.12.02.01 EP 3

Nursing Services
Provided 24-7
NPG.12.02.01 EP 4

Adequate Number of
Nursing Staff
NPG.12.02.01 EP 5

CAH with DPU
Director of
Psychiatric Nursing
NPG.12.02.01 EP 6

RN Presence in
Outpatient Depts.
NPG.12.02.01 EP 7

Nursing Concepts in Other Chapters

Revised Standard, EP Language

LD.13.03.01, EP 2 **(Formerly LD.04.03.01, EP 2)**

The hospital has an organized nursing service, with a plan of administrative authority and delineation of responsibility for patient care, that provides 24-hour nursing services.

Note: For hospitals that use Joint Commission accreditation for deemed-status purposes: Rural hospitals with a 24-hour nursing waiver granted under 42 CFR 488.54(c) are not required to have 24-hour nursing services.

CoP(s): §482.23, §482.23(a), §482.23(b)(1)

Part 2 — Medical Staff (MS) Chapter Updates

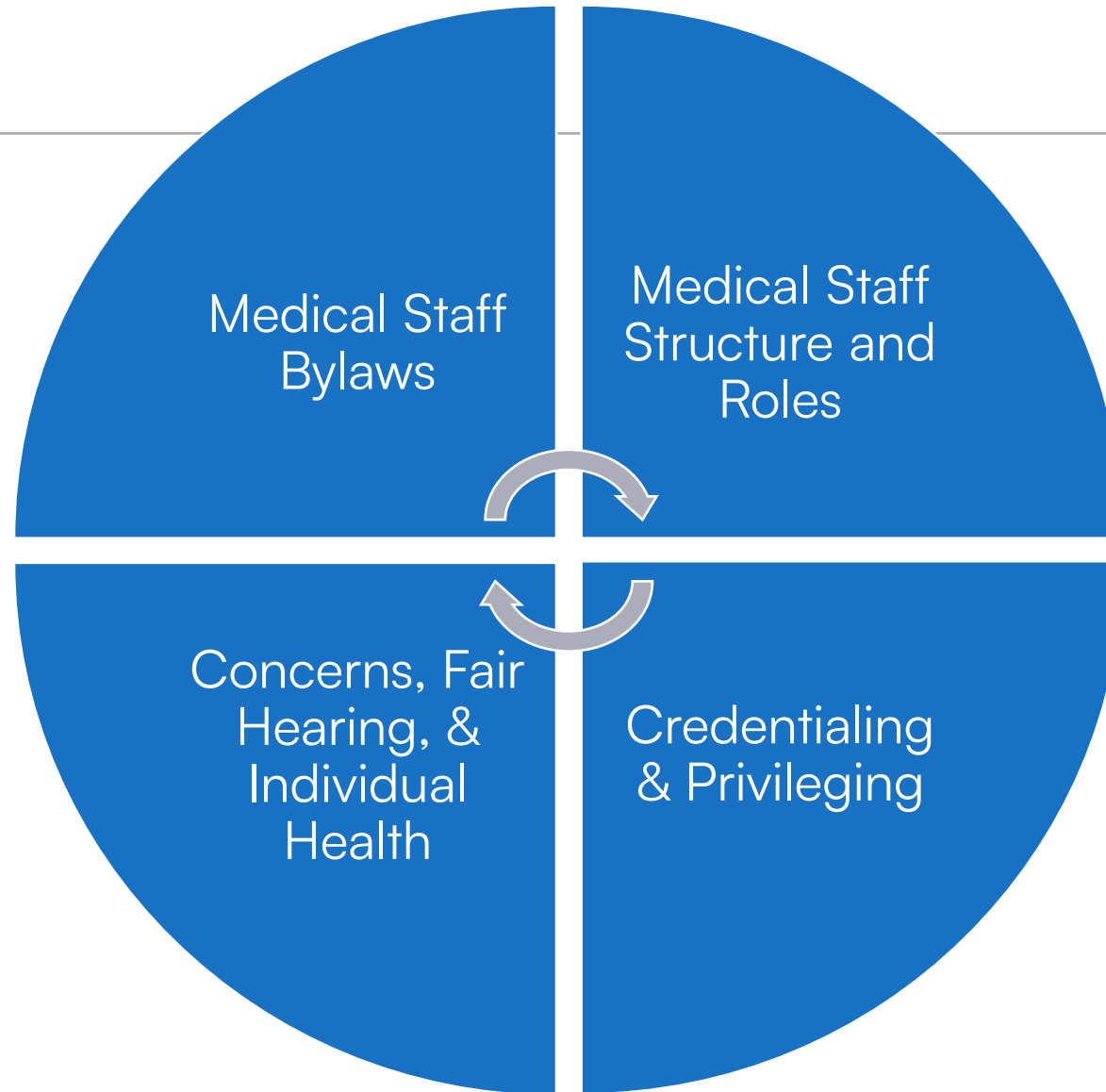
Numbering Changes

Current Standard Numbering	
MS.01.01.01	MS.06.01.09
MS.01.01.03	MS.06.01.11
MS.01.01.05	MS.06.01.13
MS.02.01.01	MS.07.01.01
MS.03.01.01	MS.07.01.03
MS.03.01.03	MS.08.01.01
MS.04.01.01	MS.08.01.03
MS.05.01.01	MS.09.01.01
MS.05.01.03	MS.10.01.01
MS.06.01.01	MS.11.01.01
MS.06.01.03	MS.12.01.01
MS.06.01.05	MS.13.01.01
MS.06.01.07	MS.13.01.03

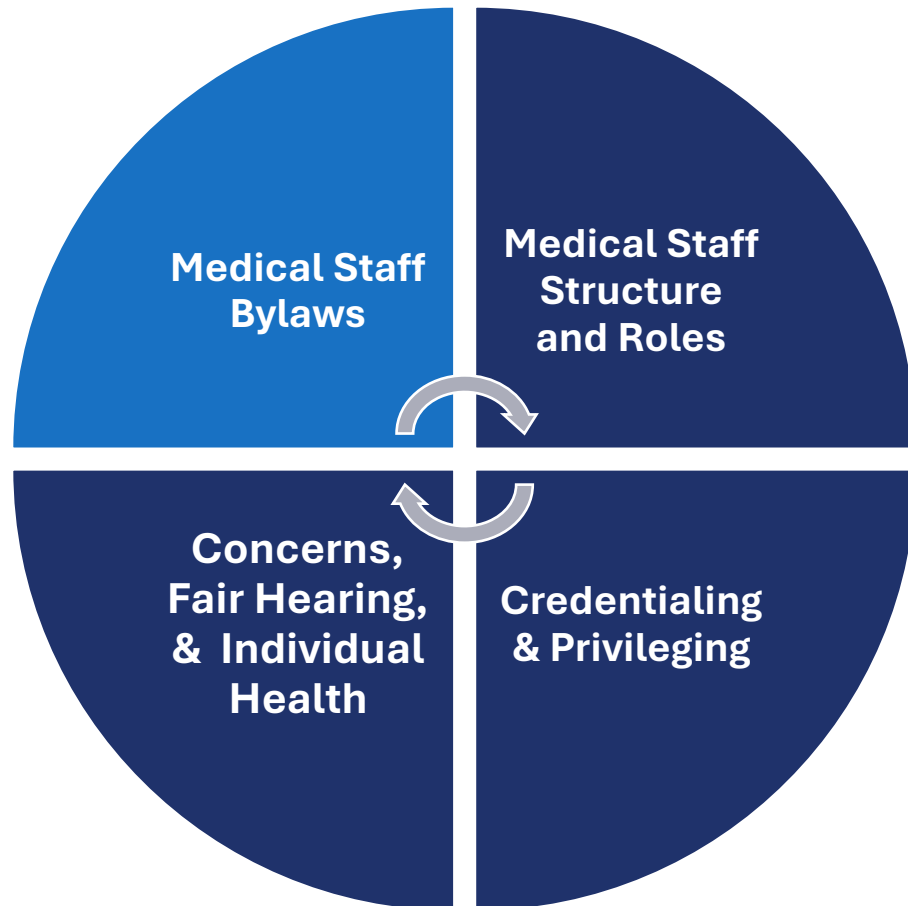


Future Standard Numbering	
MS.14.01.01	MS.17.04.01
MS.14.02.01	MS.18.01.01
MS.14.03.01	MS.18.02.01
MS.15.01.01	MS.18.02.03
MS.16.01.01	MS.18.03.01
MS.16.01.03	MS.18.04.01
MS.16.02.01	MS.18.05.01
MS.16.03.01	MS.19.01.01
MS.17.01.01	MS.20.01.01
MS.17.01.03	MS.20.01.03
MS.17.02.01	
MS.17.02.03	
MS.17.03.01	

Expectations Remain Unchanged

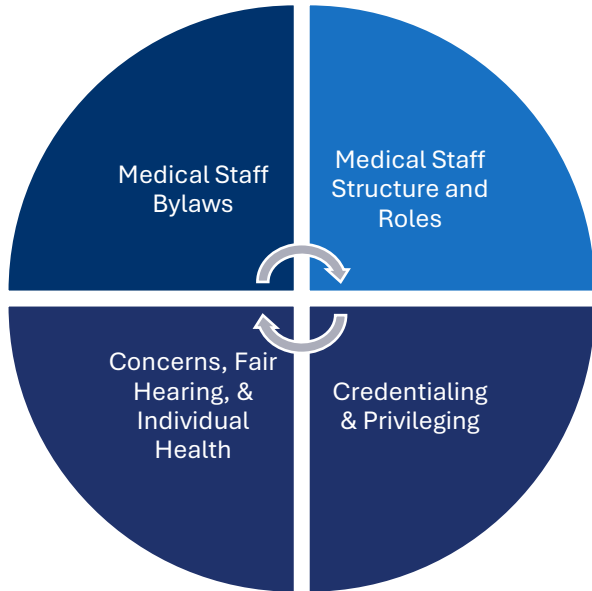


Medical Staff Bylaws



MS.14.01.01 Bylaws requirements
MS.14.02.01 Bylaws amendment

Medical Staff Structure, Roles & Responsibilities



MS.14.03.01 Multihospital system

MS.15.01.01 Medical staff executive committee

MS.16.01.01 Oversight of patient care

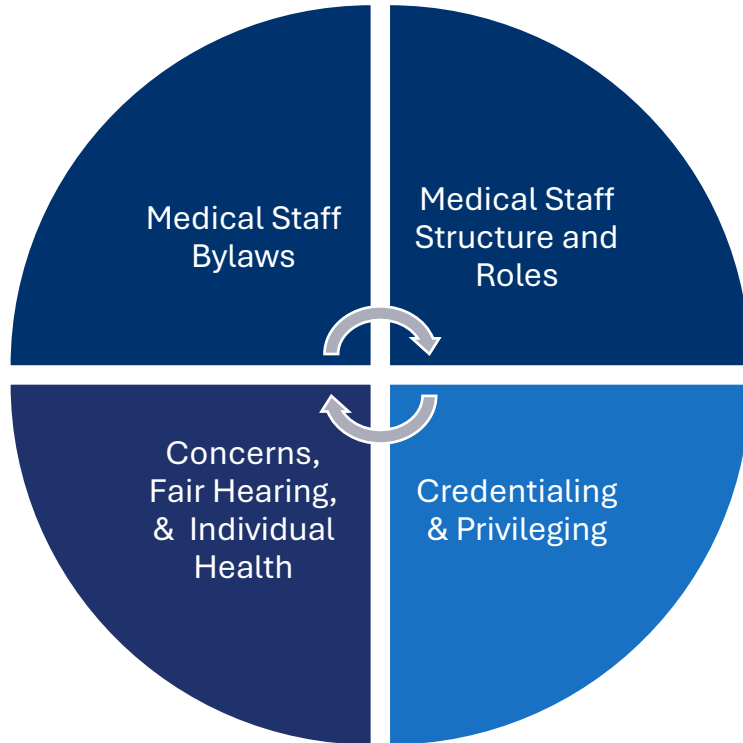
MS.16.01.03 Individual practitioner with appropriate privileges manages each patient's care, treatment

MS.16.02.01 Graduate education program(s)

MS.16.03.01 Participation in performance improvement

MS.19.01.01 Participation in continuing education

Credentialing & Privileging



MS.17.01.01 Necessary resources

MS.17.01.03 Supporting information

MS.17.02.01 Planning & procedures

MS.17.02.03 Decision process

MS.17.03.01 Expedited approval

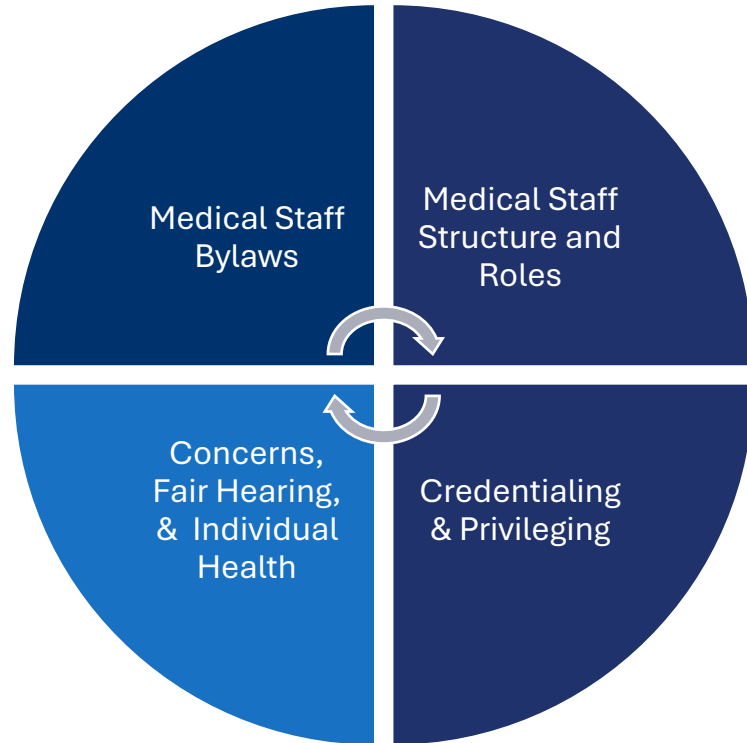
MS.17.04.01 Temporary privileges

MS.18.01.01 Peer recommendations

MS.18.02.01 Criteria & triggers for evaluating performance, FPPE

MS.18.02.03 OPPE

Management of Concerns, Individual Health



MS.18.03.01 Process for investigating/
addressing clinical practice concerns

MS.18.04.01 Fair hearing and appeal
process

MS.18.05.01 Identification and
management of matters of individual
health

Telemedicine Services

Credentialing &
Privileging
MS.20.01.01 EP 1

Clinical Services via
Telemedical Link
MS.20.01.03, EPs 1,2

Credentialing &
Privileging
LD.13.03.03 EP 3

Credentialing &
Privileging
LD.13.03.03 EP 6

Survey Process

Survey Process Guide (SPG) — Overview

- Replaces Survey Activity Guide (SAG)
- Better reflects State Operations Manual (SOM) related to survey process for the CoPs
- Same version shared between surveyors and accredited organizations



Hospital Accreditation

Survey Process Guide

Survey Process Guide (SPG) — Overview (2)

- Organized into modules based on the CMS CoP structure
- Contains separate module for NPG Chapter
- Includes updated Compliance Evaluation Tools



Hospital Accreditation

Survey Process Guide

Survey Process Remains the Same

Surveyors will continue to conduct these activities:

- Medical Staff Credentialing & Privileging
- Individual Tracers



Hospital Accreditation

Survey Process Guide

Survey Process Guidance - Modules

Hospital Medical Staff Evaluation Module (482.22) including Psychiatric Special Staff Requirements (482.62) (b)

Joint Commission Standards / EPs	Hospital CoP	Hospital Survey Process
MS.16.01.01, EP 1: The hospital has an organized medical staff that operates under bylaws approved by the governing body and that is responsible for the quality of medical care provided by the hospital.	§482.22 Condition of participation: Medical Staff. The hospital has an organized medical staff that operates under bylaws approved by the governing body, and which is responsible for the quality of medical care provided to patients by the hospital.	Interview Leaders (senior leaders and medical staff leader(s)) to confirm there is one medical staff for the entire hospital (including all campuses, provider-based locations, satellites, remote locations, etc.) The organized medical staff is responsible for the quality of medical care provided to patients by the hospital. Note: If this is a hospital system, it can have a unified and integrated medical staff (“unified medical staff”) for multiple, separately certified hospitals. The medical staff is organized and integrated as one body that operates under one set of bylaws approved by the governing body. These medical staff bylaws apply equally to all practitioners within each category of practitioners at all locations of the hospital and to the care provided at all locations of the hospital.

New Standard/EP

CoP

Survey Process Guidance
(Interview, Document Review, Observation)

Survey Process Guidance — Modules (2)

Hospital Nursing Services Evaluation Module (482.23)

LD.13.03.01, EP 2 The hospital has an organized nursing service, with a plan of administrative authority and delineation of responsibility for patient care, that provides 24-hour nursing services. Note: For hospitals that use The Joint Commission for deemed-status purposes:	§482.23(a) Standard: Organization The hospital must have a well-organized service with a plan of administrative authority and delineation of responsibilities for patient care. The director of the nursing service must be a licensed registered nurse. He or she is responsible for the operation of the service,	Document Review General <ul style="list-style-type: none"><input type="checkbox"/> Verify that the hospital's organizational chart or plan for nursing services displays lines of
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Hospital Nursing Services Evaluation Module (482.23)

NPG.12.02.01, EP 5 There must be an adequate number of licensed registered nurses, licensed practical (vocational) nurses, and other staff to provide nursing care to all patients, as needed. Note: There are supervisors and staff for each department or nursing unit to make certain a registered nurse is immediately available for the care of any patient.	§482.23(b) Standard: Staffing and Delivery of Care The nursing service must have adequate numbers of licensed registered nurses, licensed practical (vocational) nurses, and other personnel to provide nursing care to all patients as needed. There must be supervisory and staff personnel for each department or nursing unit to ensure, when needed, the immediate availability of a registered nurse for the care of any patient.	Document Review General <ul style="list-style-type: none"><input type="checkbox"/> Verify that written staffing schedules correlate to the number and acuity of patients. Patient Health Record <ul style="list-style-type: none"><input type="checkbox"/> Review a sample of health records to determine if patient care that is to be provided by nurses is being provided as ordered. Observation <ul style="list-style-type: none"><input type="checkbox"/> Verify that there is an RN physically present on the premises and on duty at all times.
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Resources

Pre-Publication Webpage Resources

<https://www.jointcommission.org/en-us/standards/prepublication-standards/critical-access-hospital-and-hospital-requirements-streamlined-to-reduce-burden>

Accreditation Requirements

These documents contain all requirements for the accreditation programs, along with regulations displayed below the EP.

- [Accreditation Requirements for Critical Access Hospitals](#)
- [Accreditation Requirements for Hospitals](#)

Crosswalks

These documents display the CoPs for each deemed program and the equivalent Joint Commission EP.

- [Critical Access Hospital Crosswalk](#)
- [Critical Access Hospital DPU Crosswalk](#)
- [Hospital Crosswalk](#)
- [Psychiatric Hospital Crosswalk](#)

Survey Process Guides (SPGs)

These guides replace the Survey Activity Guides previously used. This guide will be used by both organizations and surveyors. The SPGs closely follow CMS's interpretive guidelines and survey procedures, providing a direct correlation between the survey process and the associated EPs and CoPs.

- [SPG for Critical Access Hospitals](#)
- [SPG for Hospitals](#)

Disposition Reports

These documents contain information regarding where concepts have moved from their previous EP location to their revised EP location with a Disposition column to describe the type of change that occurred (such as

Crosswalk Compare Reports

These documents display the CoPs for each deemed program, the previous equivalent Joint Commission EPs, and the revised equivalent Joint Commission EPs.

- [Critical Access Hospital Crosswalk Compare](#)
- [Critical Access Hospital DPU Crosswalk Compare](#)
- [Hospital Crosswalk Compare](#)

Tracking Revisions: Disposition Report

Standard/EP	EP Text	Disposition	New Standard/EP	New EP Text
HR.01.01.01, EP 1	<p>The hospital defines staff qualifications specific to their job responsibilities.</p> <p>Note 1: Qualifications for infection control may be met through ongoing education, training, experience, and/or certification (such as that offered by the Certification Board for Infection Control).</p> <p>Note 2: Qualifications for laboratory personnel are described in the Clinical Laboratory Improvement Amendments of 1988 (CLIA '88), under Subpart M: "Personnel for Nonwaived Testing" §493.1351-§493.1495. A complete description of the requirement is located at https://www.ecfr.gov/cgi-bin/text-idx?SID=0854acca5427c69e771e5beb52b0b986&mc=true&node=sp42.5.493.m&rgn=div6.</p> <p>Note 3: For hospitals that use Joint Commission accreditation for deemed status purposes: Qualified physical therapists, physical therapist assistants, occupational therapists, occupational therapy assistants, speech-language pathologists, or audiologists (as defined in 42 CFR 484.4) provide physical therapy, occupational therapy, speech-language pathology, or audiology services, if these services are</p>	Moved and Revised	HR.11.02.01, EP 1	<p>The hospital defines staff qualifications specific to their job responsibilities.</p> <p>Note 1: Qualifications for infection control may be met through ongoing education, training, experience, and/or certification (such as that offered by the Certification Board for Infection Control).</p> <p>Note 2: Qualifications for laboratory personnel are described in the Clinical Laboratory Improvement Amendments (CLIA), under Subpart M: "Personnel for Nonwaived Testing" §493.1351-§493.1495. A complete description of the requirement is located at https://www.ecfr.gov/cgi-bin/text-idx?SID=0854acca5427c69e771e5beb52b0b986&mc=true&node=sp42.5.493.m&rgn=div6.</p> <p>Note 3: For hospitals that use Joint Commission accreditation for deemed status purposes: Qualified physical therapists, physical therapist assistants, occupational therapists, occupational therapy assistants, speech-language pathologists, or audiologists, as defined in 42 CFR 484, provide physical therapy, occupational therapy, speech-language pathology, or audiology services, if these services are</p>

Current Standard/EP

Examples of Disposition:

- Moved/Revised
- Split or Consolidated
- Deleted EP/Replaced w/more Direct EP/ Moved to Guidance within SPG

New Standard/EP


Current State to Future State Organized by CoP

Crosswalk Compare Reports

These documents display the CoPs for each deemed program, the previous equivalent Joint Commission EPs, and the revised equivalent Joint Commission EPs.

- [Critical Access Hospital Crosswalk Compare](#)
- [Critical Access Hospital DPU Crosswalk Compare](#)
- [Hospital Crosswalk Compare](#)
- [Psychiatric Hospital Crosswalk Compare](#)

Prepublication standards: effective January 1, 2026

	<p>Resources</p> <p>Joint Commission</p>	<p>About Us</p> <p>Newsletters</p>	<p>Need Help?</p> <p>Support Cen</p>
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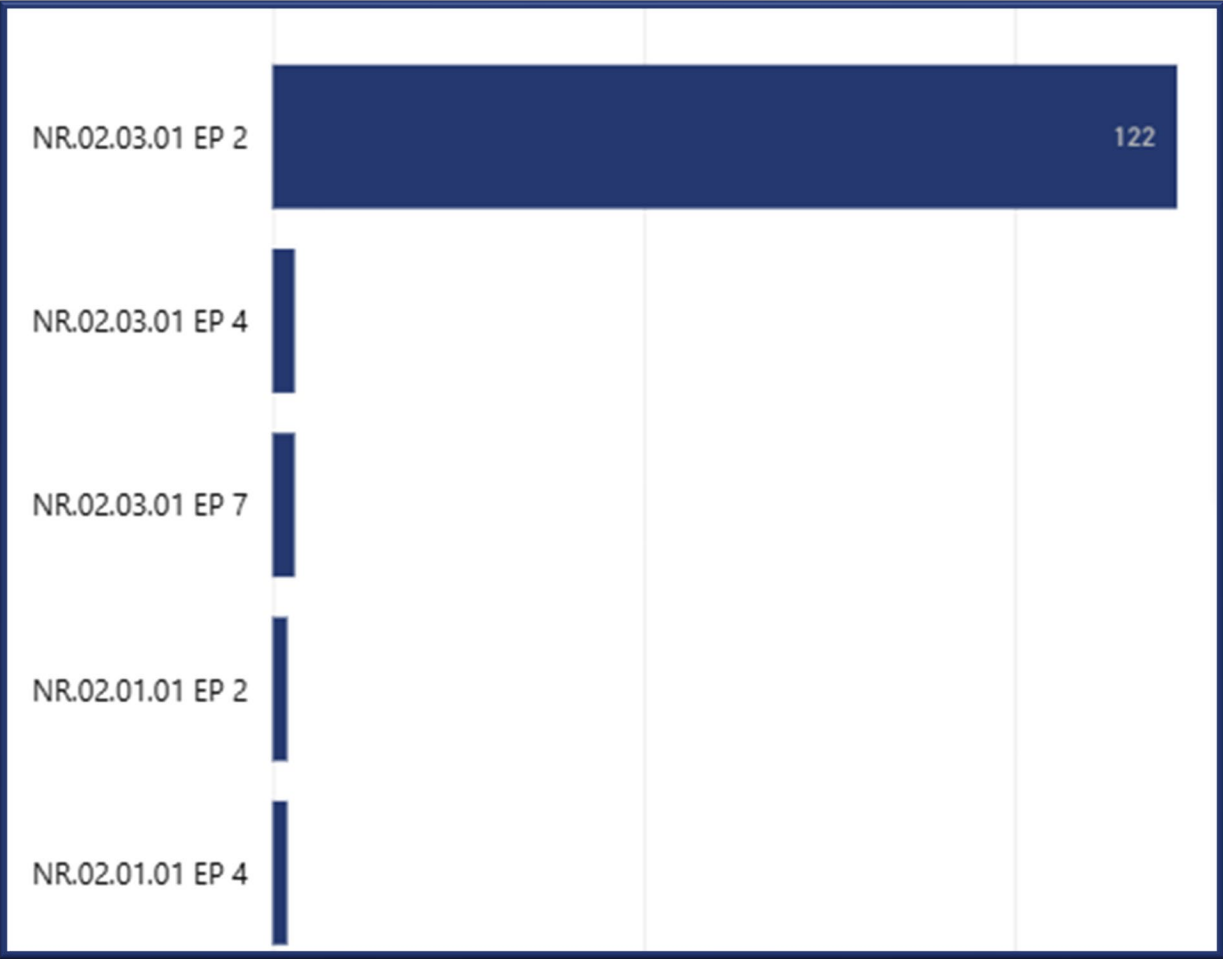
Current State Compared to Future State

Hospital Crosswalk – Current State Compared to Future State

CoP Requirement	CoP Text	Current EP Mapping	Future EP Mapping
§482.23(b)	§482.23(b) Standard: Staffing and Delivery of Care The nursing service must have adequate numbers of licensed registered nurses, licensed practical (vocational) nurses, and other personnel to provide nursing care to all patients as needed. There must be supervisory and staff personnel for each department or nursing unit to ensure, when needed, the immediate availability of a registered nurse for the care of any patient.	<p>LD.03.06.01, EP 2 Leaders provide for a sufficient number and mix of individuals to support safe, quality care, treatment, and services. Note: The number and mix of individuals is appropriate to the scope and complexity of the services offered.</p> <p>NR.02.02.01, EP 1 The nurse executive, registered nurses, and other designated nursing staff write and approve the following before implementation:</p> <ul style="list-style-type: none"> - Standards of nursing practice for the hospital - Nursing standards of patient care, treatment, and services - Nursing policies and procedures - Nurse staffing plan(s) <p>NR.02.03.01, EP 4 The nurse executive is responsible for the provision of nursing services 24 hours a day, 7 days a week.</p> <p>NR.02.03.01, EP 7 A registered nurse provides or supervises the nursing</p>	<p>NPG.12.02.01, EP 5 There must be an adequate number of licensed registered nurses, licensed practical (vocational) nurses, and other staff to provide nursing care to all patients, as needed. Note: There are supervisors and staff for each department or nursing unit to make certain a registered nurse is immediate availability for the care of any patient.</p>

Commonly Identified Opportunities for Improvement Nursing (NR) and Medical Staff (MS)

Top NR Opportunities — Hospital

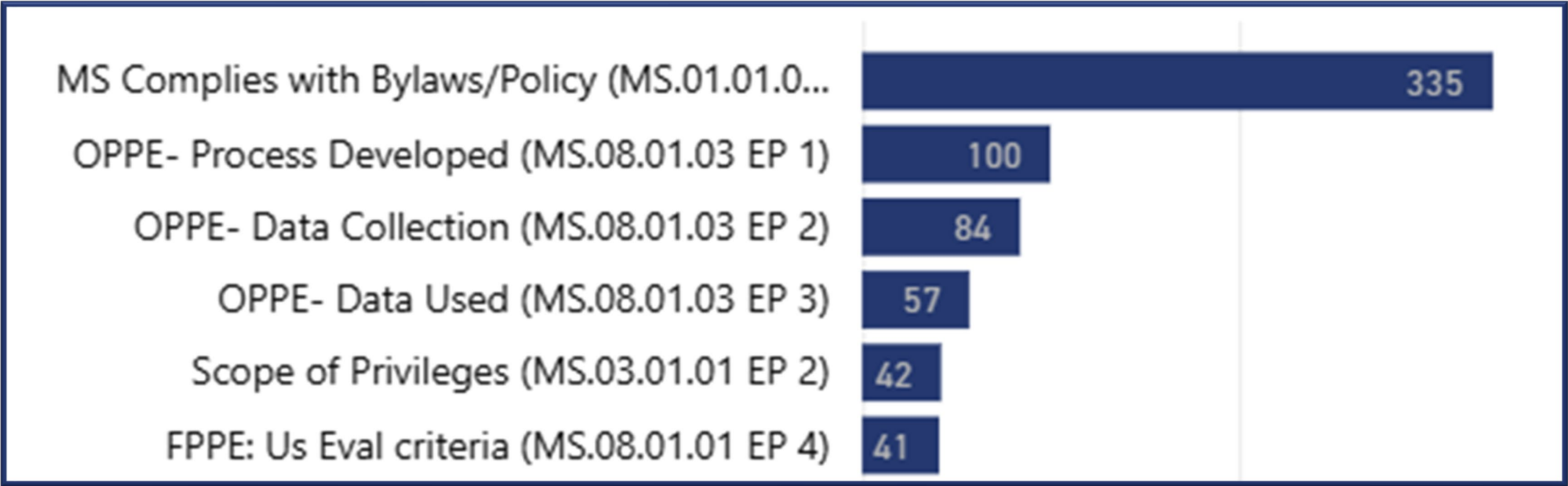


Data from 05/01/2024 —
05/31/2025

New Standard Location — Hospital

Current Standard/EP — 2025	New Standard/EP — January 1, 2026
Implement Nurse Policies NR.02.03.01 EP 2	Implement Nurse Policies NR.11.01.01 EP 2

Top 5 MS Opportunities — Hospital

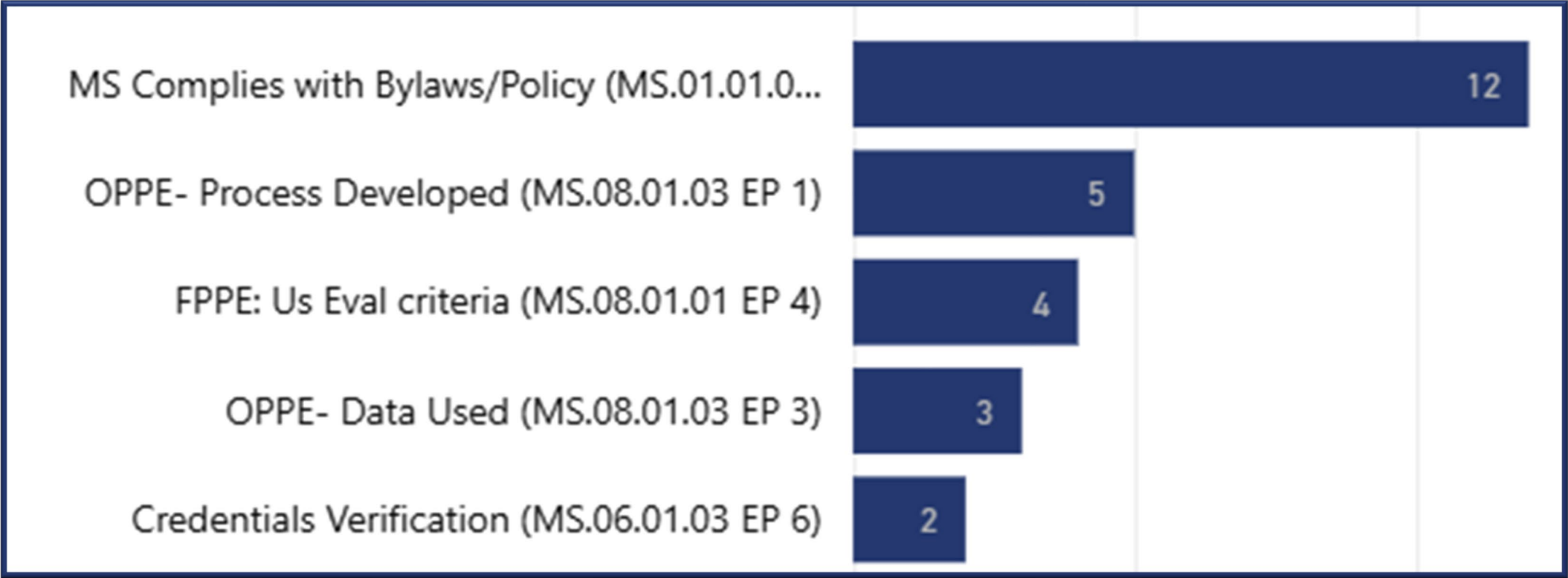


Data from 05/01/2024 —
05/31/2025

New Standard Location — Hospital

Current Standard/EP — 2025	New Standard/EP — January 1, 2026
MS Compliance with Bylaws/Policy MS.01.01.01, EP 5	MS Compliance with Bylaws/Policy MS.16.01.01, EP 1
OPPE — Process Developed MS.08.01.03, EP 1	OPPE — Process Developed MS.18.02.03, EP 1
OPPE — Data Collection MS.08.01.03, EP 2	OPPE — Data Collection MS.18.02.03, EP 2
OPPE — Data Used MS.08.01.03, EP 3	OPPE — Data Used MS.18.02.03, EP 2
Scope of Privileges MS.03.01.01, EP 2	Scope of Privileges MS.16.01.01, EP 3
FPPE — Use Eval Criteria MS.08.01.01, EP 4	FPPE — Use Eval Criteria MS.18.02.01

Top 5 MS Opportunities — Critical Access Hospital



Data from 05/01/2024 —
05/31/2025

New Standard Location — Critical Access Hospital

Current Standard/EP — 2025	New Standard/EP — January 1, 2026
MS Compliance with Bylaws/Policy MS.01.01.01 EP 5	MS Compliance with Bylaws/Policy MS.16.01.01 EP 1
OPPE — Process Developed MS.08.01.03 EP 1	OPPE — Process Developed MS.18.02.03 EP 1
FPPE — Use Eval Criteria MS.08.01.01 EP 4	FPPE — Use Eval Criteria MS.18.02.03 EP 1
OPPE — Data Used MS.08.01.03 EP 3	OPPE — Data Used MS.18.02.03 EP 3
Credentials Verification MS.06.01.03 EP 6	Credentials Verification MS.17.01.03 EP 3

Questions

If you have any questions associated with the NR or MS Chapter requirements, please submit your inquiry on our website:

<https://web.jointcommission.org/sigsubmission/sigquestionform.aspx>

Frequently Asked Questions regarding the Accreditation 360 model:

<https://www.jointcommission.org/en-us/accreditation/accreditation-360/faqs>

Regarding On Demand webinar operations and Continuing Education inquiries:

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Accreditation 360 Webinar Series

To access Accreditation 360 webinar recording links, slides, and transcripts, visit this landing page and scroll down:

www.jointcommission.org/en-us/knowledge-library/support-center/measurement/quality-measurement-webinars-videos

Webinars & Videos

The Joint Commission offers a variety of educational measurement-related webinars (live and on-demand), and other recorded video content. Topics include specific performance measures, reporting requirements, and topics that are clinically-, technically-, or statistically-focused. Webinars and videos address electronic clinical quality measures (eCQMs) and chart-abstracted measures used for accreditation and certification purposes. For additional information on each webinar or video series, see below.



Webinar Series



Pioneers in Quality General Sessions

Pioneers in Quality General Sessions provide information such as measurement requirements, changes in reporting, opportunities for engagement and/or recognition, and insights regarding data analysis of national clinical quality measurement data received. This generalized content is meant as education for hospitals and health systems to assist them in meeting current and future requirements.



eCQM Expert to Expert Series

Expert to Expert Webinar Series provides a deep-dive into measure intent, logic, and other clinical/technical aspects of electronic clinical quality measures (eCQMs) to assist hospitals and health systems in their efforts to improve eCQM data use for quality improvement. This series incorporates expertise from Joint Commission and other key stakeholders.



Video Shorts

Joint Commission produces a series of on-demand educational video shorts about electronic Clinical Quality Measures (eCQMs). Episodes are approximately 2-3 minutes in length and offer an engaging and contemporary approach to teach these complex and comprehensive topics. The eCQM video shorts lead the viewer to understand application of eCQM resources, eCQM constructs and Logic expression language concepts (CQL, FHIR).



Measure-Specific Webinars



Continuous Customer

Continuing Education Survey and Certificate

Also see the separate handout detailing the CE requirements.



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