



Updated Accreditation Manual: Rights and Responsibilities of the Individual and Transplant Safety Chapters

Accreditation 360
Hospitals and Critical Access Hospitals

On Demand Webinar
November 2025 release
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January 31, 2026

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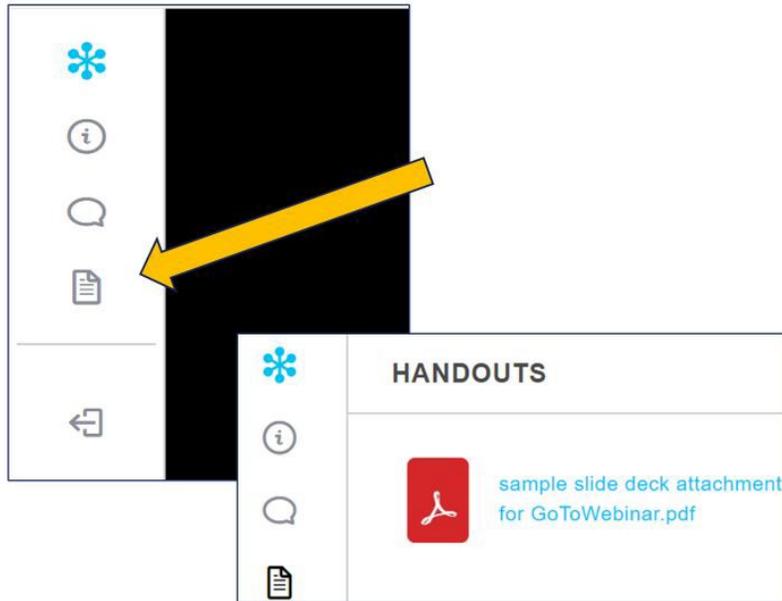
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- Entities providing credit
- Requirements to earn credit
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Participant Learning Objectives



Discuss the rationale for the Rights and Responsibilities of the Individual and Transplant Safety standards rewrite/reorganization

Define the structure, organization, and requirements of the new Rights and Responsibilities of the Individual and Transplant Safety 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>

Rights and Responsibilities of the Individual and Transplant Safety 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 — Rights and Responsibilities of the Individual (RI) Updates

Standard Numbering Changes

Current Standard Numbers

RI.01.01.01 — RI.02.01.01

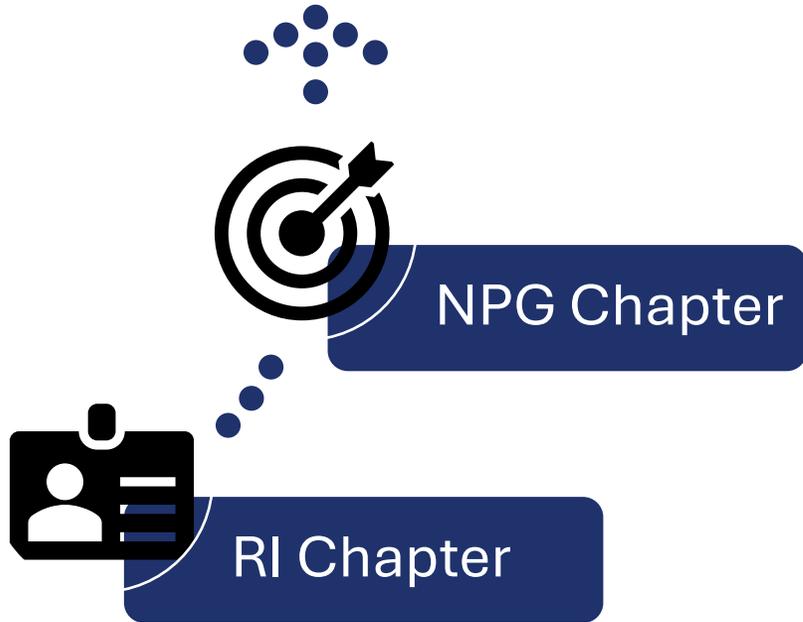


Future Standard Numbers

RI.11.01.01 – RI.15.01.01

- RI.15.01.01 HAP only

RI Concepts Moved to the NPG Chapter



**Right to Effective
Communication**
NPG.07.01.01

**Informed Consent
Policy & Process**
NPG.07.02.01

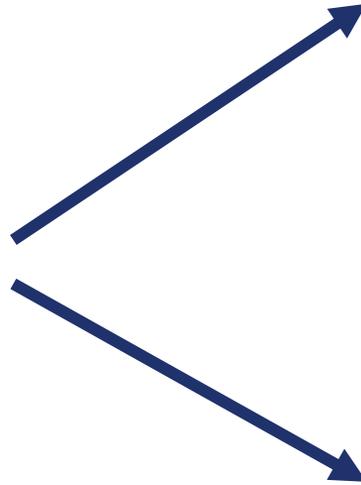
**Reporting and
Resources
Abuse/Neglect**
NPG.07.03.01

**Respect Values &
Spiritual Services**
NPG.07.04.01

Part 2 — Transplant Safety (TS) Chapter Updates

Numbering and Location Changes

| Current Standard Numbering |
|----------------------------|
| TS.01.01.01 |
| TS.02.01.01 |
| TS.03.01.01 |
| TS.03.02.01 |
| TS.03.03.01 |



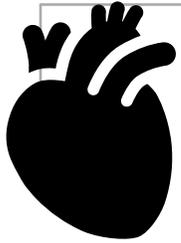
| 2026: |
|---------------------------|
| Donation Organ/Tissues |
| TS.11.01.01 (HAP and CAH) |
| TS.12.01.01 (HAP) |

| 2026: Tissue Management |
|-------------------------|
| NPG.09.01.01 |
| NPG.09.02.01 |
| NPG.09.03.01 |

Standard TS.11.01.01

- A written agreement with an organ procurement organization (OPO) and timely notification
- A written agreement with at least one tissue and eye bank
- Designating an organ procurement representative or a trained designated requestor
- Procedures for Informing the family of each potential donor, in collaboration with the OPO
- Education and training of staff on the use of discretion and sensitivity
- Policies and procedures for working with the organ procurement organization (OPO) and tissue and eye banks, including review of death records, maintaining potential donors maximize the viability of donor organs, and staff education
- Documentation

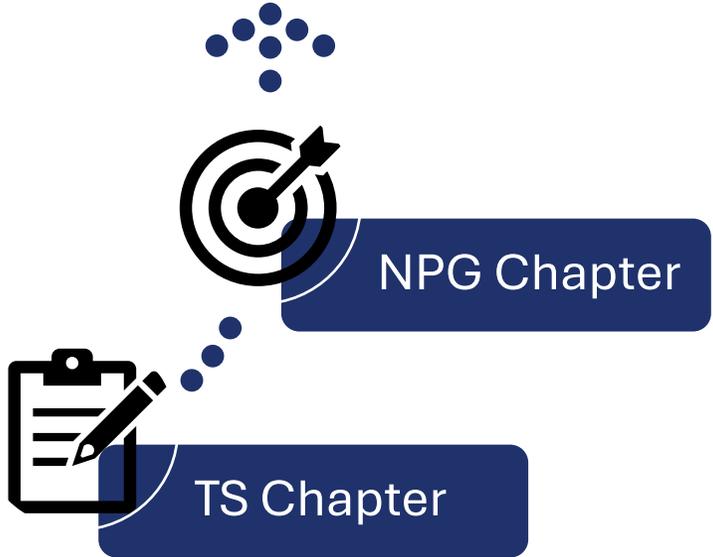
Standard TS.12.01.01 (HAP only)



Compliance with Organ Transplantation Responsibilities:

- Organ Procurement and Transplantation Network (OPTN) Rules
- Provision of data, if requested, to OPTN, the Scientific Registry of Transplant Recipients (SRTR), OPO, and US Dept. Health & Human Services

TS Concepts Moved to the NPG Chapter



Standardized Procedures for Managing Tissues
NPG.09.01.01

Bi-Directional Tissue Tracing
NPG.09.02.01

Adverse Events Tissue Use or Donor Infections
NPG.09.03.01

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 usual activities, for example:

- Individual Tracers
- Document Review
- Open and Closed Medical Record Review
- Staff Interviews



Hospital Accreditation

Survey Process Guide

Survey Process Guidance - Modules

Hospital Organ, Tissue, and Eye Procurement Evaluation Module (482.45)

| Joint Commission Standards / EPs | Hospital CoP | Hospital Survey Process |
|--|---|--|
| | §482.45 Condition of Participation: Organ, Tissue, and Eye Procurement | |
| | §482.45(a) Standard: Organ Procurement Responsibilities The hospital must have and implement written protocols that: | Document Review <ul style="list-style-type: none"> □ Organ procurement policies and procedures that address the hospital responsibilities, including: <ul style="list-style-type: none"> ○ Timely notification of OPO or third party designated by the OPO of individuals whose death is imminent or who have died in the hospital. |
| TS.11.01.01, EP 1: The hospital develops and implements written policies and procedures that include the following: - A written agreement with an organ procurement organization (OPO) that includes that hospital notifying, in a timely manner, the OPO or a third party designated by the OPO of individuals whose death is imminent or who | §482.45(a)(1) Incorporate an agreement with an OPO (organ procurement organizations) designated under part 486 of this chapter, under which it must notify, in a timely manner, the OPO or a third party designated by the OPO of individuals | Interview <ul style="list-style-type: none"> □ Interview the staff to verify that they are aware of the policies and procedures for organ, tissue, and eye procurement. Document Review <ul style="list-style-type: none"> □ Review the written agreement with the OPO to verify that it addresses all required information. See below. <ul style="list-style-type: none"> • Written agreement with an Organ Procurement |

New Standard/EP

CoP

Survey Process Guidance
(Interview, Document Review, Observation)

Survey Process Guidance - Modules

Hospital Patient Rights Evaluation Module (482.13)

| Joint Commission Standards / EPs | Hospital CoP | Hospital Survey Process |
|--|---|---|
| RI.11.01.01, EP 1: The hospital develops and implements written policies to protect and promote patient rights. | §482.13 Condition of Participation: Patient's Rights A hospital must protect and promote each patient's rights. | |
| | §482.13(a) Standard: Notice of Rights | |
| RI.11.01.01, EP 2: The hospital informs each patient, or when appropriate, the patient's representative (as allowed, under state law) of the patient's rights in advance of providing or discontinuing patient care whenever possible. | §482.13(a)(1) A hospital must inform each patient, or when appropriate, the patient's representative (as allowed under State law), of the patient's rights, in advance of furnishing or discontinuing patient care whenever possible. | Interview <input type="checkbox"/> Ask staff how the hospital communicates information about patient rights to diverse patients, including individuals who need assistive devices or translation services. <ul style="list-style-type: none"> ○ Does the hospital have alternative means, such as written materials, signs, or |

New Standard/EP

CoP

Survey Process Guidance
(Interview, Document Review, Observation)

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 the 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



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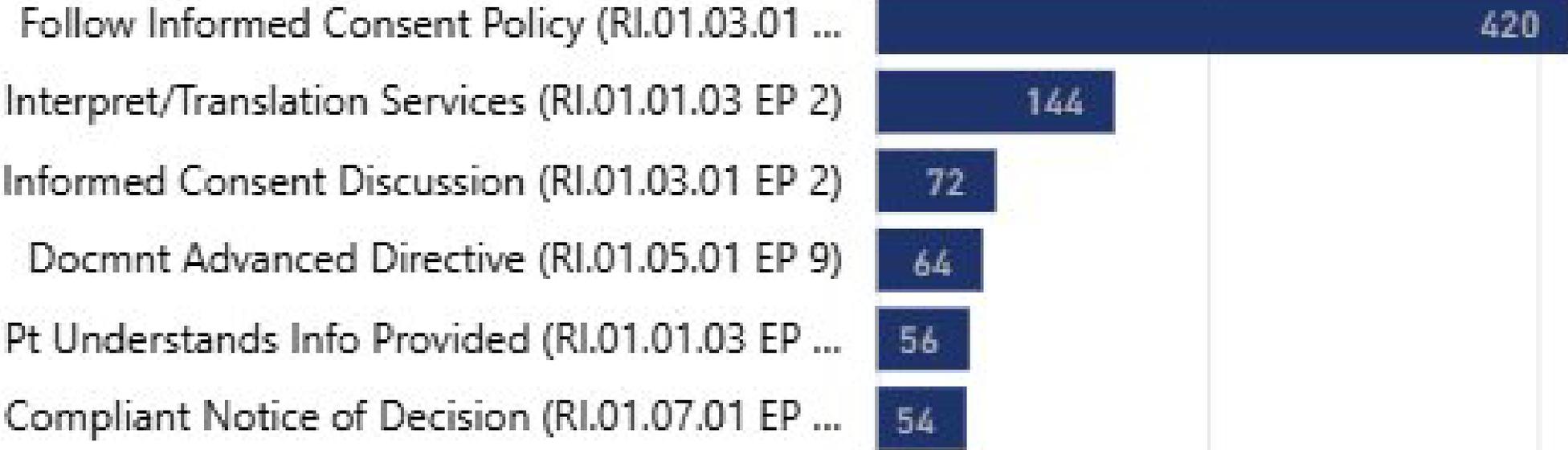
Current State Compared to Future State

| | | | |
|---------------|--|--|---|
| §482.45 | §482.45 Condition of Participation: Organ, Tissue and Eye Procurement | | |
| §482.45(a) | §482.45(a) Standard: Organ Procurement Responsibilities The hospital must have and implement written protocols that: | | |
| §482.45(a)(1) | (1) Incorporate an agreement with an OPO designated under part 486 of this chapter, under which it must notify, in a timely manner, the OPO or a third party designated by the OPO of individuals whose death is imminent or who have died in the hospital. The OPO determines medical suitability for organ donation and, in the absence of alternative arrangements by the hospital, the OPO determines medical suitability for tissue and eye donation, using the definition of potential tissue and eye donor and the notification protocol developed in | <p>TS.01.01.01, EP 1 The hospital has a written agreement with an organ procurement organization (OPO) and follows its rules and regulations.</p> <p>TS.01.01.01, EP 9 The hospital notifies the organ procurement organization (OPO) of patients who have died and of mechanically ventilated patients whose death is imminent, according to the following: - Clinical triggers defined jointly with its medical staff and the designated OPO - Within the time frames (ideally, within one hour of</p> | <p>TS.11.01.01, EP 1 The hospital develops and implements written policies and procedures that include the following: - A written agreement with an organ procurement organization (OPO) that requires the hospital to notify, in a timely manner, the OPO or a third party designated by the OPO of individuals whose death is imminent or who have died in the hospital, and that includes the OPO's responsibility to determine medical suitability for organ donation - A written agreement with at least one tissue bank and at least one eye bank to cooperate in retrieving, processing, preserving, storing, and distributing tissues and eyes to make certain that all usable tissues and eyes are obtained from potential donors, to the</p> |

Commonly Identified Opportunities for Improvement

Rights and Responsibilities of the Individual (RI) and Transplant Safety (TS)

Top RI Opportunities — Hospital



Data from 05/01/2024 — 05/31/2025

HAP — RI Top Opportunities New Locations

| Old Location | New Location |
|---|--|
| RI.01.03.01 EP 1 Follow Informed Consent Policy | NPG.07.02.01 EP 1 Follow Informed Consent Policy |
| RI.01.01.03 EP 2 Interpret/Translation Services | NPG.07.01.01 EP 2 Interpret/Translation Services |
| RI.01.03.01 EP 2 Informed Consent Discussion | NPG.07.02.01 EP 2 Informed Consent Discussion |
| RI.01.05.01 EP 9 Documentation Advanced Directive | RI.12.01.01. EP 5 SPG Hospital Patient Rights Evaluation Module (482.13) |
| RI.01.01.03 EP 1 Pt. Understands Information Provided | RI.11.02.01 EP 1 Pt. Understands Information Provided |
| RI.01.07.01 EP 18 Complaint Notice of Decision-deemed | RI.14.01.01 EP 3 Complaint Notice of Decision-deemed |

Date Range: 05/01/2024 — 05/31/2025*

Top RI Opportunities — CAH



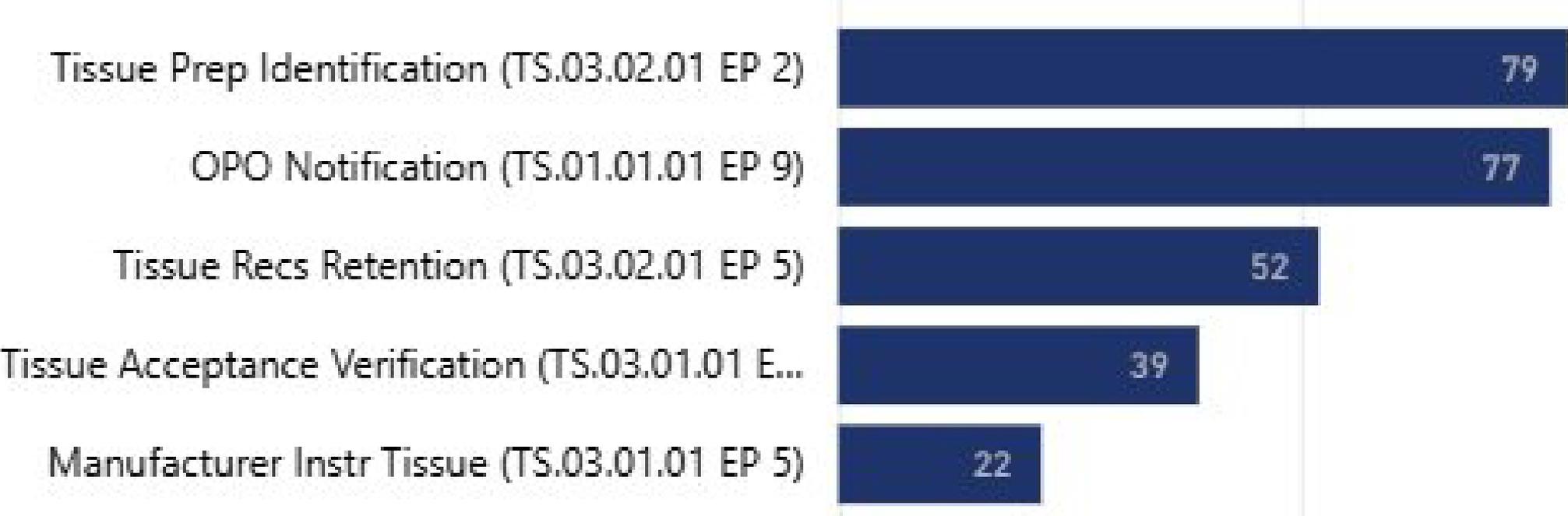
Data from 05/01/2024 — 05/31/2025

CAH — RI Top Opportunities New Locations

| Old Location | New Location |
|---|--|
| RI.01.03.01 EP 1 Follow Informed Consent Policy | NPG.07.02.01 EP 1 Follow Informed Consent Policy |
| RI.01.07.01 EP 18 Complaint Notice of Decision | RI.14.01.01 EP 3 Complaint Notice of Decision |
| RI.01.01.03 EP 2 Interpret/Translation Services | NPG.07.01.01 EP 2 Interpret/Translation Services |

*Date Range: 05/01/2024 — 05/31/2025**

Top TS Opportunities — Hospital



Data from 05/01/2024 — 05/31/2025

HAP — TS Top Opportunities New Locations

| Old Location | New Location |
|---|--|
| TS.03.02.01 EP 2 Tissue Prep Identification | NPG.09.02.01 EP 2 Tissue Prep Identification |
| TS.01.01.01 EP 9 OPO Notification | TS.11.01.01 EP 1 SPG Organ, Tissue, and Eye Procurement Evaluation Module (482.45(a)(1)) |
| TS.03.02.01 EP 5 Tissue Recs Retention | LD.13.01.01 EP 1 Comply with law and regulation |
| TS.03.01.01 EP 7 Tissue Acceptance Verification | NPG.09.01.01 EP 1 SPG National Performance Goals Evaluation Module |
| TS.03.01.01 EP 5 Manufacturer Instr Tissue | NPG.09.01.01 EP 3 Manufacturer Instr Tissue |

Date Range: 05/01/2024 — 05/31/2025*

Top TS Opportunities — CAH



Data from 05/01/2024 — 05/31/2025

CAH — TS Top Opportunities New Locations

| Old Location | New Location |
|---|--|
| TS.03.02.01 EP 2 Tissue Prep Identification | NPG.09.02.01 EP 2 Tissue Prep Identification |
| TS.01.01.01 EP 9 OPO Notification | TS.11.01.01 EP 1 SPG Organ, Tissue, and Eye Procurement Evaluation Module (§485.643(a)) |
| TS.03.01.01 EP 7 Tissue Acceptance Verification | NPG.09.01.01 EP 1 SPG National Performance Goals Evaluation Module |

**Date Range: 05/01/2024 —
05/31/2025***

Questions



If you have any questions associated with the RI or TS 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>

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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



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Also see the separate handout detailing the CE requirements.



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Survey

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Obtain Certificate

After completing survey, print or download PDF CE Certificate. Certificate link also provided via email.



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