



# The Joint Commission Ambulatory Care Chapters – Part 1

PATIENT-CENTERED CARE AND CLINICAL DELIVERY

# Governing Council Presentations

- ▶ Joint Commission Timeline (2026)
  - ▶ Last Survey: November 7-9, 2023
  - ▶ Survey Window: May 2026 – Nov 2026
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- ✓ April: Overview
  - ✓ May: National Patient Safety Goals (NPSG)
  - ✓ June: Chapter overviews part 1
  - July: Chapter overviews part 2
  - August: Primary Care Medical Home (PCMH)
  - Sept: Survey overview/What is GC's role in survey
  - Oct forward: Review sessions until survey

# National Patient Safety Goals (NPSG)

Identify

- Identify Patients Safely

Use

- Use Medicines Safely

Prevent

- Prevent Infection (Hand Hygiene)

Improve

- Improve Health Outcomes for All (Health Equity)

Prevent

- Prevent Mistakes during Procedures

# Medication Management (MM)

The Organization evaluates the effectiveness of its medication management system, including medication reconciliation.

- ▶ **Administering and Dispensing Medications:** The organization safely administers and dispenses medication.
- ▶ **High-Alert & Look-Alike/Sound-Alike (LASA) Protocols:** Apply strict physical isolation, special labeling, and multi-step verification safeguards for high-alert and LASA medications to prevent administration errors.
- ▶ **Secure Storage, Temperature Control, and Expiration Integrity:** Store all medications securely under strict climate controls, utilizing temperature logs, and conduct monthly audits to identify, remove, and safely quarantine expired, altered, or contaminated medications.

# Provision of Care, Treatment, and Services (PC)

Care, treatment, or services are provided to the patient in an interdisciplinary, collaborative manner.

- ▶ **Standardized Assessments:** Complete physical, psychological, and social assessments and reassessments inside designated timeframes.
- ▶ **Patient & Family Education:** Deliver and document tailored education regarding the patient's treatment plan, safe self-care at home, and potential side effects.
- ▶ **Pain & Nutritional Screening:** Utilize standardized screening tools to identify patient pain levels and nutritional risks, triggering appropriate clinical interventions or referrals.

# Record of Care, Treatment, and Services (RC)

The organization maintains complete and accurate clinical records.

- ▶ **Documentation Accuracy:** Document all patient encounters thoroughly, capturing accurate timestamps, signatures, and essential histories.
- ▶ **Privacy Controls:** Limit clinical record access strictly to authorized care personnel to remain fully compliant.
- ▶ **Timely Closure:** Finalize and lock clinical documentation within organizationally mandated deadlines.

# Rights and Responsibilities of the Individual (RI)

The organization respects the patient's rights to receive information in a manner the patient understands and to participate in decisions about their care, treatment, or services.

- ▶ **Informed Consent:** Secure documented, clear consent before any invasive treatments or procedural actions.
- ▶ **Language Access:** Offer qualified translation and interpretive support for diverse patient communication needs.
- ▶ **Grievance Pathways:** Provide a clear, transparent mechanism for patients to log complaints without facing care disruptions.

# Waived Testing (WT)

Rapid strep tests (throat swabs)  
Urine pregnancy tests (dipsticks)  
Blood sugar checks (finger-stick glucometer)  
Rapid COVID-19 or flu tests (nasal swabs)

Policies and procedures for waived tests are established, current, approved, and readily available.

- ▶ **Competency Checks:** Require documented, specific device training for all staff running waived point-of-care tests.
- ▶ **Quality Control:** Run and log device control tests matching manufacturer frequencies.
- ▶ **Log Maintenance:** Maintain records linking test results, control validation data, and kit expiration dates.