Standards and elements of performance (EPs) published in this manual are effective January 1, 2014.

**Note:** Your organization is responsible for meeting all applicable changes to accreditation requirements for organizations accredited under the Laboratory and Point-of-Care Testing Program published in The Joint Commission Perspectives®, the official monthly newsletter of The Joint Commission.

Major changes that appear in this update to requirements for accreditation, policies, procedures, and other information include the following:

- Added information provided by Lab Central Connect to “Information Accuracy and Truthfulness Policy” in "The Accreditation Process Chapter"
- Revised definition of Immediate Threat to Health or Safety to signify a threat of immediate risk rather than a threat of “the most” immediate risk and clarified that abatement survey results help determine the Accreditation Committee’s decision in “Immediate Threat to Health or Safety” section

**How to Use This Manual (HM)**

- Updated “What Is This Manual’s Purpose?” and “Changes to the Manual” sections
- Added Clinical Laboratory Improvement Amendments (CLIA) to Table 1. Acronyms Used in This Manual
- Added description of Appendix B. Laboratory Developed Tests to “Policies, Procedures, and Other Information” section
- Clarified behavioral health care and home care program descriptions in “Identifying Applicable Standards” section
- Renamed “Keys to Successfully Using This Manual” to "Keys to Successfully Achieving Standards Compliance"
- Updated Sidebar 2. Where Should I Go for More Information? as appropriate
Accreditation Participation Requirements (APR)
- Updated “What Is This Manual’s Purpose?” and “Changes to the Manual” sections
- Added Clinical Laboratory Improvement Amendments (CLIA) to Table 1
- Acronyms Used in This Manual
- Added description of Appendix B. Laboratory Developed Tests to “Policies, Procedures, and Other Information” section
- Clarified behavioral health care and home care program descriptions in “Identifying Applicable Standards” section
- Renamed “Keys to Successfully Using This Manual” to "Keys to Successfully Achieving Standards Compliance"
- Updated Sidebar 2. Where Should I Go for More Information? as appropriate

Environment of Care (EC)
- Revised chapter introduction regarding time frames for completing tasks or functions
- Revised Standard EC.02.02.01, EP 11, to revise term material data safety sheets to simply safety data sheets
- Revised Standard EC.02.05.07, EPs 4-6

Emergency Management (EM)
- Revised Standard EM.01.01.01, EP 6, to revise reference to IM.01.01.03

Human Resources (HR)
- Revised URLs throughout chapter

Infection Prevention and Control (IC)
- Updated reference and replaced URL in chapter Overview
- Revised URL in footnote to Standard IC.01.05.01, EP 1
- Revised URL in footnote to IC.02.02.01, EP 1

Leadership (LD)
- Revised URL in footnote to Standard LD.04.04.01, EP 1

Performance Improvement (PI)
- Deleted MOS icon from Standard PI.02.01.01, EP 3, related to analyzing data

Quality System Assessment for Nonwaived Testing (QSA)
- Revised Chapter Outline
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- Revised URL in footnote to Standard QSA.01.01.01, EP 1
- Revised URL in footnote to Standard QSA.04.02.01, EP 1
- Revised Standard QSA.05.01.01, EP 4, related to reviews of blood transfusion service policies and procedures
- Revised URL in footnote to Standard QSA.05.19.03, EP 6

Waived Testing (WT)
- Revised URL in chapter overview

The Accreditation Process (ACC)
- Added information provided by Lab Central Connect to “Information Accuracy and Truthfulness Policy”
- Updated “Available Accreditation Information” section
- Added footnote to “Release of Aggregate Performance Data” section to reflect that this information is not available for ambulatory care organizations and office-based surgery practices
- Revised “Early Survey Policy” section to reflect that organizations in Preliminary Accreditation cannot use The Joint Commission’s Gold Seal of Approval®
- Added requirement that the laboratory director be entered into Lab Central Connect before an initial survey
- Decreased billing time frame for on-site fees to within two days after survey in “Survey Fees” section
- Updated orientation and training subprocesses to include competency assessment for tests in “Priority Focus Areas (PFAs)” section
- Added review of Lab Central Connect information to “During the Survey” section
- Updated Table 1. Exceptions to Unannounced Biennial Surveys
- Added attestation that surveyors have not helped organization with Focused Standards Assessment (FSA) to “Information Accuracy and Truthfulness Policy”
- Revised definition of Immediate Threat to Health or Safety to signify a threat of immediate risk rather than a threat of “the most” immediate risk and clarified that abatement survey results help determine the Accreditation Committee’s decision in “Immediate Threat to Health or Safety” section
- Updated “The Summary of Survey Findings Report” section
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- Added statement that Quality Check® will show Requirements for Improvement (RFIs) for organizations that receive a decision of Accreditation with Follow-up Survey (AFS), Contingent Accreditation (CONT), or Preliminary Denial of Accreditation (PDA) to “Accreditation Effective Date” section
- Clarified that organizations have 10 business days to clarify RFIs in “The Process for Accreditation with Follow-up Survey, Contingent Accreditation, or Preliminary Denial of Accreditation” section
- Clarified that a change in laboratory director can only be reported through Lab Central Connect in “Changes Affecting E-App Information” section
- Revised “Changes to the Site of Care, Treatment, or Services” section to reflect that organizations must complete a new Statement of Conditions if offering services or programs at a new location or in a significantly altered physical plant that is not a business occupancy
- Deleted the 50% minimum of services offered at a new location or in a significantly altered physical plant previously required as a condition of conducting extension surveys from “Extension Surveys” section
- Deleted redundant information about when for-cause surveys may be conducted from “For-Cause Surveys” section
- Revised CONT01 to reflect that abatement survey results help determine the Accreditation Committee’s decision
- Revised CONT05 to include failure to successfully address all RFIs

Glossary (GL)
- Revised definitions of applicant organization, assessment, home care, Immediate Threat to Health or Safety, initial survey, Review Hearing Panel, situational decision rules, surveyor, and tracer methodology
- Added cross references between Intracycle Monitoring (ICM) and Focused Standards Assessment (FSA) in their respective definitions
Comprehensive Accreditation Manual

CAMLAB
for Laboratory and Point-of-Care Testing
Effective January 1, 2014, or as Noted

Standards
Elements of Performance
Scoring
Accreditation Policies
The Joint Commission Mission
The mission of The Joint Commission is to continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value.

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