

# APPROVED: New Requirements for Residential and Outpatient Eating Disorders Programs

Effective July 1, 2016, for Behavioral Health Care Accreditation Program

The Joint Commission added several new requirements applicable to accredited **behavioral health care** organizations that provide care for individuals with eating disorders. The requirements will appear in the “Care, Treatment, and Services” (CTS), “Leadership” (LD), “Performance Improvement” (PI), and “Rights and Responsibilities” (RI) chapters in the *Comprehensive Accreditation Manual for Behavioral Health Care Organizations (CAMBHC)* and are **effective July 1, 2016**.

Eating disorders have the highest mortality rate of any behavioral health disorder, making it very important that these programs provide the safest and highest-quality care possible. While several existing standards in the manual could apply to eating disorders programs, there are currently only two that apply specifically to organizations providing care to individuals with eating disorders: Standards CTS.02.03.09 and CTS.04.02.17 (shown in the blue box at right). The field expressed concern to The Joint Commission that organizations purporting to offer eating disorders programs may not be adhering to the level of rigor necessary to successfully provide these services. Based on these conversations with the field as well as its own research, The Joint Commission identified a need for additional requirements that address eating disorders programs.


The new standards, which are applicable only for organizations that provide eating disorders care, treatment, or services, address the following aspects of eating disorders programs:

- Assessments
- Plan of care, treatment, or services
- Outcomes assessment
- Data to be collected and analyzed
- Transitions of care
- Components of care, treatment, or services
- Roles of key staff and other clinicians
- Supervision of individuals served
- Family involvement
- Marketing materials and insurance information
- Organization policies

The eating disorders care, treatment, or services standards will be displayed on The Joint Commission website at [http://www.jointcommission.org/standards\\_information/prepublication\\_standards.aspx](http://www.jointcommission.org/standards_information/prepublication_standards.aspx), posted in the spring E-edition®, and published in the *2016 Update 1* to the *CAMBHC*. The box beginning on page 5 displays the requirements; new text is underlined, and deleted language is ~~crossed out~~.

## Existing Standards Specific to Eating Disorders Programs

<p><b>Standard CTS.02.03.09</b>  <b>For organizations providing care, treatment, or services to individuals with eating disorders:</b> The organization assesses the individual's food-related behaviors. (Refer to Standard CTS.04.02.17 for more information)  <b>Note:</b> <i>This standard applies to all individuals with eating disorders regardless of setting.</i></p>	<p><b>Standard CTS.04.02.17</b>  <b>For organizations providing care, treatment, or services to individuals with eating disorders:</b> The organization monitors the individual's weight and food-related behaviors. (Refer to CTS.02.03.09 for more information)  <b>Note:</b> <i>This standard applies to all individuals with eating disorders regardless of setting.</i></p>
<p>EP 1 <b>For organizations providing care, treatment, or services to individuals with eating disorders:</b> The organization assesses the individual's beliefs, perceptions, attitudes, and behavior regarding food. (Refer to Standard CTS.02.01.11 for more information)</p>	<p>EP 1 <b>For organizations providing care, treatment, or services to individuals with eating disorders:</b> The organization monitors the individual's weight in accordance with organizational policy.</p>
<p>EP 2 <b>For organizations providing care, treatment, or services to individuals with eating disorders:</b> The organization includes family observations regarding the individual's food-related behavior in the assessment, when available.</p>	<p>EP 2 <b>For organizations providing care, treatment, or services to individuals with eating disorders:</b> The organization monitors the individual's food-related behaviors.</p>

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# Requirements for Organizations Providing Care for Individuals with Eating Disorders

APPLICABLE TO BEHAVIORAL HEALTH CARE

Effective July 1, 2016

## Care, Treatment, and Services (CTS)

Standard CTS.02.03.11

**For organizations that provide eating disorders care, treatment, or services:** The organization conducts additional assessments for individuals with eating disorders.

### Elements of Performance for CTS.02.03.11

C 1. **For organizations that provide eating disorders care, treatment, or services:** After admitting an individual to its program, the organization performs or makes a documented referral for the following tests, screenings, and procedures based on the needs of the individual served and in a time frame that meets the needs of the individual and is consistent with organization policy (*See also* CTS.03.01.09, EP 3): <sup>3</sup>  $\mathbb{M}$

- Complete blood count
- Comprehensive serum metabolic profile, including phosphorus and magnesium
- Thyroid function test
- Electrocardiogram (ECG), if clinically indicated
- Body Mass Index (BMI)
- Heart rate
- Screening for eating disorder behaviors
- Any additional laboratory testing, as determined by the organization and in accordance with the level of care provided

**Note:** For non-24-hour settings, the program may accept test results from other providers completed within two weeks prior to admission.

C 2. **For organizations that provide eating disorders care, treatment, or services:** The organization gathers behavioral and physical health information from both inpatient and outpatient providers by whom the individual has been treated, and/or other eating disorders treatment programs in which the individual has participated, if available.  $\mathbb{M}$

A 3. **For organizations that provide eating disorders care, treatment, or services:** The organization obtains or completes initial medical assessments, Diagnostic and Statistical Manual of Mental Disorders (DSM)-based diagnostic assessments, psychiatric evaluations, and nutritional assessments in accordance with the level of care provided, and within the time frame designated by the organization's policies

and procedures.

**Note:** Psychological testing is completed as clinically indicated.

A 4. **For organizations that provide eating disorders care, treatment, or services:** The organization conducts complete assessments in accordance with the level of care provided and within the time frame designated by the organization's policies and procedures.

C 5. **For organizations that provide 24-hour eating disorders care, treatment, or services:** The organization assesses the risk for falls for each individual served. <sup>3</sup>  $\mathbb{M}$

A 6. **For organizations that provide 24-hour eating disorders care, treatment, or services:** The organization implements interventions to reduce falls based on the individual's assessed risk. <sup>3</sup>

C 7. **For organizations that provide 24-hour eating disorders care, treatment, or services:** Individuals served are assessed and reassessed for refeeding syndrome based on the individual's physiological status. <sup>3</sup>  $\mathbb{M}$

Standard CTS.03.01.03

The organization has a plan for care, treatment, or services that reflects the assessed needs, strengths, preferences, and goals of the individual served.

### Elements of Performance for CTS.03.01.03

C 26. **For organizations that provide eating disorders care, treatment, or services:** The plan of care, treatment, or services specifies a diagnosis based on the current Diagnostic and Statistical Manual of Mental Disorders (DSM) and/or the current edition of the International Classification of Diseases (ICD).  $\mathbb{M}$

C 27. **For organizations that provide eating disorders care, treatment, or services:** The plan of care, treatment, or services provides for sufficient nutritional rehabilitation to support regular and consistent weight when indicated (including expected rates of controlled weight gain of at least one pound per week) and/or measurable improvement in eating disorders behavior (for example, restricting, binge eating, purging). <sup>3</sup>  $\mathbb{M}$

Standard CTS.03.01.09

The organization assesses the outcomes of care, treatment, or services provided to the individual served.

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## Requirements for Organizations Providing Care for Individuals with Eating Disorders (continued)

### Element of Performance for CTS.03.01.09

**C 3.** **For organizations that provide eating disorders care, treatment, or services:** The organization assesses outcomes of care, treatment, or services based on data collected at admission. Examples of such data include complete history and physical including height, weight, frequency of binge eating and purging (when applicable), eating disorder diagnosis, Body Mass Index (BMI), heart rate, date of last period, and other appropriate lab tests such as potassium, phosphorous, thyroid, hemoglobin, glucose, as determined by the organization and in accordance with the level of care provided. (See also CTS.02.03.11, EP 1) **M**

Standard CTS.04.01.01\*

The organization coordinates the care, treatment, or services provided to an individual served as part of the plan for care, treatment, or services and in a manner consistent with the organization's scope of care, treatment, or services. (For more information, refer to Standard CTS.03.01.07)

### Elements of Performance for CTS.04.01.01

**A 6.** The organization has a process to receive or share relevant information ~~on~~ about the individual served to facilitate coordination and continuity when individuals are referred to other care, treatment, or service providers. **R**

**A 7.** **For organizations that provide eating disorders care, treatment, or services:** If during the course of care, treatment, or services the individual is transferred to a hospital, the organization provides the hospital with a clinical contact person who can provide information relevant to the individual's eating disorder in support of the individual's care, treatment, or services. **A**

**C 7: 8.** The activities detailed in the plan of care, treatment, or services are designed to occur in a time frame that meets the behavioral health needs of the individual served. **M**

**C 8: 9.** **For organizations that elect The Joint Commission Behavioral Health Home option:** The activities detailed in the plan of care, treatment, or services are designed to occur in a time frame that meets the physical health care needs of the individual served. **M**

**C 9: 10.** Before taking action on a verbal order or verbal report of a test result, staff members use a record and "read back" process to verify the information. **A**

**A 10: 11.** **For opioid treatment programs:** The program works with the criminal justice system to provide continuous treatment to patients who are incarcerated, on probation, or on parole.

**A 11: 12.** **For opioid treatment programs:** When possible, the program manages comorbidities on site. When comorbidities cannot be managed on site, the program develops referral and consultative relationships with other agencies and providers that can provide services to treat patients for any psychiatric comorbid conditions, medical complications, and communicable diseases.

**C 12: 13.** **For opioid treatment programs:** When a patient is being treated for mental health issues, the program and the mental health provider jointly review the prescribed medications. **M**

**C 13: 15.** **For opioid treatment programs:** When a patient has hepatitis C, the program coordinates its treatment with the agency responsible for medical treatment. Attention is paid to the patient's adherence to the medication regimen and adverse events. **M**

**C 14: 16.** **For opioid treatment programs:** The program notifies the state health officer both when a patient begins and leaves interim maintenance treatment and notifies the state health officer in advance when the patient is transferred to a comprehensive maintenance treatment program. All such notifications are documented. **M**

**A 15: 19.** **For organizations that elect The Joint Commission Behavioral Health Home option:** If an organization has multiple integrated care teams, each team provides care, treatment, or services for a designated panel of individuals.

**C 16: 20.** **For organizations that elect The Joint Commission Behavioral Health Home option:** When an individual is referred to an external organization, the integrated care team does the following: **M**

- Assists the individual with making the referral appointment, when needed
- Assists the individual in getting to the appointment, when needed
- Tracks whether the individual kept the appointment

\* Please note that EP numbering for Standard CTS.04.01.01 reflects relocation of various requirements.

# Requirements for Organizations Providing Care for Individuals with Eating Disorders (continued)


- Reviews and tracks the care, treatment, or services provided to the individual

A 21. **For organizations that provide 24-hour eating disorders care, treatment, or services:** A registered nurse is either on duty or available 24 hours a day, 7 days a week.

Standard CTS.04.02.16

**For organizations that provide eating disorders care, treatment, or services:** The organization provides additional care, treatment, or services that support the needs of individuals with eating disorders.

## Elements of Performance for CTS.04.02.16

C 1. **For organizations that provide eating disorders care, treatment, or services:** Each individual served receives core care, treatment, or service components (psychosocial, medical, nutritional, and psychiatric) according to his or her assessed needs. This includes, but is not limited to, individual therapy, group therapy, family therapy (as applicable), medical monitoring, medication monitoring (as applicable), and nutritional counseling. <sup>3</sup> 

A 2. **For organizations that provide eating disorders care, treatment, or services:** The organization is knowledgeable about evidence-based guidelines for treatment of individuals with eating disorders, such as the American Psychiatric Association Eating Disorder Treatment Guidelines, the Guidelines of the British National Institute for Clinical Excellence (NICE Guidelines), or the American Academy of Child and Adolescent Psychiatry Practice Parameter for the Assessment and Treatment of Children and Adolescents with Eating Disorders.

A 3. **For organizations that provide eating disorders care, treatment, or services:** A registered dietitian is available to provide for individuals' nutritional needs, including assessing, educating, and counseling individuals, parents and/or guardians, and staff on food- and nutrition-related issues.

A 4. **For organizations that provide eating disorders care, treatment, or services:** A registered dietitian designs, implements, and manages safe and effective nutrition-related strategies that enhance growth and development; support recovery from disordered eating; and promote lifelong health.

A 5. **For organizations that provide eating disorders care, treatment, or services:** The organization

attempts to engage family members who have not acknowledged the organization's efforts to involve them in the individual's care, treatment, or services, in accordance with the needs and preferences of the individual served. (See also RI.01.02.01, EP 8; and CTS.03.01.05, EPs 1–3)

Standard CTS.04.02.18

**For organizations that provide 24-hour eating disorders care, treatment, or services:** The organization supervises individuals served as needed.

## Elements of Performance for CTS.04.02.18

A 1. **For organizations that provide 24-hour eating disorders care, treatment, or services:** The organization supervises the daily activities of individuals served as needed to prevent them for engaging in behavior that could be detrimental to their health, such as excessive or inappropriate exercise, inappropriate use of laxatives, or self-induced vomiting. <sup>3</sup>

A 2. **For organizations that provide 24-hour eating disorders care, treatment, or services:** Supervision is conducted by staff; the organization prohibits one individual served from supervising another.

Standard CTS.04.02.29

**For organizations that provide eating disorders care, treatment, or services:** The multidisciplinary care, treatment, or services team supports the continuity and provision of care, treatment, or services.

## Elements of Performance for CTS.04.02.29

A 1. **For organizations that provide eating disorders care, treatment, or services:** The organization has a multidisciplinary care, treatment, or services team that consists of at least the following: <sup>3</sup>

- A licensed clinician with experience and/or training in treating eating disorders
- A doctor of medicine or osteopathy with experience and/or training in treating eating disorders, either on staff or available to the team 24 hours a day, 7 days a week. If individuals served are under the age of 13, the MD or DO is a pediatrician. If the MD or DO is not on staff, an advanced practice nurse with experience and/or training in treating eating disorders and licensed to prescribe medications is on staff.
- A psychiatrist or clinical psychologist with experi-

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## Requirements for Organizations Providing Care for Individuals with Eating Disorders (continued)

ence and/or training in treating eating disorders, either on staff or available to the team 24 hours a day, 7 days a week

- A registered dietitian
- A registered nurse, unless there is an advanced practice nurse on staff

**A 2. For organizations that provide eating disorders care, treatment, or services:** If individuals served are less than 18 years of age, the organization has access to consultation from a child or adolescent psychiatrist. <sup>3</sup>

**Note:** The psychiatrist may be either on staff or otherwise available to the multidisciplinary team, such as via a teleconference link.

Standard CTS.06.02.03

When an individual served is discharged or transferred, the organization bases the discharge or transfer on the assessed needs of the individual and the organization's capabilities.

**Element of Performance for CTS.06.02.03**

**A 10. For organizations that provide eating disorders care, treatment, or services:** The discharge plan includes the following:

- Level of care recommended, based on current assessment
- Specific recommendations for follow-up treatment
- Medication education, as needed
- Contact information for follow-up appointments

Standard CTS.06.02.05

When individuals served are transferred or discharged, pertinent information related to the care, treatment, or services provided is exchanged with other providers.

**Element of Performance for CTS.06.02.05**

**C 3. For organizations that provide eating disorders care, treatment, or services:** Upon written consent of the individual served, after-care providers will be given a copy of the discharge summary prior to discharge whenever possible but no later than within two weeks of discharge. <sup>10</sup>

### Leadership (LD)

Standard LD.04.02.03

Ethical principles guide the organization's business practices.

**Elements of Performance for LD.04.02.03**

**A 8. For organizations that provide eating disorders care, treatment, or services:** The organization's program materials indicate the following:

- The program's setting(s), scope of services, and population(s) served
- Availability of and/or the process for transfer to other settings of care, if necessary, such as acute hospital, psychiatric facility, or other setting
- Pertinent information regarding availability of care, treatment, or services based on particular population characteristics (for example, only one half of available beds are open to adolescents; only females are served by the program; individuals must treat chemical dependency issues prior to entering program)
- Description of the members of the multidisciplinary team providing care, treatment, or services

**A 9. For organizations that provide eating disorders care, treatment, or services:** The organization is able to provide individuals served and their families, if applicable, with information on insurance coverage accepted by the organization, the availability of any financial assistance, and whether or not the facility is considered in-network for the individual's insurance company.

### Performance Improvement (PI)

Standard PI.01.01.01

The organization collects data to monitor its performance.

**Element of Performance for PI.01.01.01**

**A 48. For organizations that provide eating disorders care, treatment, or services:** The organization collects data about care, treatment, or services outcomes. Examples of such data include the following:

- If conducting follow-ups, confirmation of whether the individual is engaged in aftercare services and, if so, the type and frequency of those services.
- Data collected from valid and reliable instruments used at admission and discharge that are self-administered by individuals served. Examples of such instruments include the Beck

# Requirements for Organizations Providing Care for Individuals with Eating Disorders (continued)

Depression Inventory (BDI), Eating Disorder Quality of Life (EDQOL), the SF-36, and Eating Disorder Inventory-3 (EDI-3).

- Data collected from individuals' satisfaction questionnaires.

## **Rights and Responsibilities of the Individual (RI)**

Standard RI.01.01.01

The organization respects the rights of the individual served.

### **Elements of Performance for RI.01.01.01**

A 30. **For organizations that provide 24-hour eating**

**disorders care, treatment, or services:** The organization has a policy addressing those situations, if any, in which minors are permitted to leave the facility.

C 31. **For organizations that provide 24-hour eating disorders care, treatment, or services:** The organization obtains consent from a minor's parent or guardian for the minor to have visitors. <sup>3</sup> **M**

A 32. **For organizations that provide 24-hour eating disorders care, treatment, or services:** The organization has a policy on Internet access for individuals served.