

# Certification Requirements

• Issued September 20, 2023 •



## New Sustainable Healthcare Certification

The Joint Commission has approved the following revisions for prepublication. While revised requirements are published in the semiannual updates to the print manuals (as well as in the online *E-dition*®), accredited organizations and paid subscribers can also view them in the monthly periodical *The Joint Commission Perspectives*®. To begin your subscription, call 800-746-6578 or visit <http://www.jcrinc.com>.

**Please note:** Where applicable, this report shows current standards and EPs first, with deleted language struck-through. Then, the revised requirement follows in bold text, with new language underlined.

### APPLICABLE TO THE SUSTAINABLE HEALTHCARE CERTIFICATION

Effective January 1, 2024

## Certification Participation Requirements (CPR) Chapter

### CPR.01

The organization allows The Joint Commission to review the results of external evaluations from publicly recognized bodies.

#### Element(s) of Performance for CPR.01

**New EP 1** When requested, the organization provides The Joint Commission with all official records and reports of licensing, examining, reviewing, or planning bodies.

- Ⓓ Documentation is required

### CPR.02

The organization reports any changes in the information provided in the application for certification and any changes made between reviews.

#### Element(s) of Performance for CPR.02

New EP 1 The organization notifies The Joint Commission in writing within 30 days of a change in ownership, control, location, capacity, or services offered.

Note: When the organization changes ownership, control, location, capacity, or services offered, it may be necessary for The Joint Commission to review the organization again. If the organization does not provide written notification to The Joint Commission within 30 days of these changes, the organization may be denied certification.

- Ⓓ Documentation is required
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### **CPR.03**

The organization permits the performance of a review at The Joint Commission's discretion.

#### **Element(s) of Performance for CPR.03**

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New EP 1 The organization permits the performance of a review at The Joint Commission's discretion.

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### **CPR.04**

The organization provides baseline greenhouse gas emission data for three emission sources at the time of initial certification review.

#### **Element(s) of Performance for CPR.04**

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New EP 1 The organization provides baseline greenhouse gas emission data for three emission sources at the time of initial certification review.

- Ⓓ Documentation is required
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New EP 2 For recertification, the organization provides 24 months of data and demonstrates reductions of greenhouse gas emissions for three emission sources.

- Ⓓ Documentation is required
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### **CPR.06**

The organization notifies the public it serves about how to contact its organization management and The Joint Commission to report concerns about patient safety and quality of care.

Note: Methods of notice may include, but are not limited to, distribution of information about The Joint Commission, including contact information in published materials such as brochures and/or posting this information on the organization's website.

#### **Element(s) of Performance for CPR.06**

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New EP 1 The organization informs the public it serves about how to contact its management to report concerns about patient safety and quality of care.

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New EP 2 The organization informs the public it serves about how to contact The Joint Commission to report concerns about patient safety and quality of care.

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## **CPR.07**

The organization provides accurate information throughout the certification process.

### **Element(s) of Performance for CPR.07**

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New EP 1 The organization provides accurate information throughout the certification process.

Note 1: Information may be received in the following ways:

- Provided verbally
- Obtained through direct observation by, or in an interview or any other type of communication with, a Joint Commission employee
- Derived from documents supplied by the organization to The Joint Commission
- Submitted electronically by the organization to The Joint Commission

Note 2: For the purposes of this requirement, falsification is defined as the fabrication, in whole or in part, of any information provided by an applicant or certified organization to The Joint Commission. This includes redrafting, reformatting, or deleting document content. However, the organization may submit supporting material that explains the original information submitted to The Joint Commission. These additional materials must be properly identified, dated, and accompanied by the original documents.

(See also CPR.12, EP 1)

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## **CPR.08**

The organization accurately represents its certification status and the facilities and services to which Joint Commission certification applies.

### **Element(s) of Performance for CPR.08**

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New EP 1 The organization's advertising accurately reflects the scope of facilities and services that are certified by The Joint Commission.

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New EP 2 The organization does not engage in any false or misleading advertising about its certification award.

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**CPR.09**

Applicants and certified organizations do not use Joint Commission employees to provide certification-related consulting services.

**Element(s) of Performance for CPR.09**

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New EP 1 The organization does not use Joint Commission employees to provide any certification-related consulting services.

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**CPR.10**

The organization accepts the presence of Joint Commission reviewer management staff or a Board of Commissioners member in the role of observer during a review.

**Element(s) of Performance for CPR.10**

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New EP 1 The organization allows Joint Commission reviewer management staff or a member of the Board of Commissioners to observe the review.

Note 1: The observer will not participate in the review process, including the scoring of standards compliance. Reviewer management staff will only participate in the review process if they feel it is necessary to bring any potential findings or observations to the attention of the reviewer and the organization.

Note 2: The organization will not incur any additional fees because an observer(s) is present.

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**CPR.11**

Any individual who provides care, treatment, and services can report concerns about safety or the quality of care to The Joint Commission without retaliatory action from the organization.

**Element(s) of Performance for CPR.11**

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New EP 1 The organization educates its staff and other individuals who provide care, treatment, and services that concerns about the safety or quality of care provided in the organization may be reported to The Joint Commission.

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New EP 2 The organization informs its staff that it will take no disciplinary or punitive action because an employee or other individual who provides care, treatment, and services reports safety or quality-of-care concerns to The Joint Commission.

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New EP 3 The organization takes no disciplinary or punitive action against employees or other individuals who provide care, treatment, and services when they report safety or quality-of-care concerns to The Joint Commission.

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## **CPR.12**

The organization submits information to The Joint Commission as required.

### **Element(s) of Performance for CPR.12**

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New EP 1 The organization meets all requirements for timely submission of data and information to The Joint Commission.

Note 1: The Joint Commission will impose the following consequence for failure to comply with this CPR: If the organization consistently fails to meet the requirements for the timely submission of data and information to The Joint Commission, the organization will be required to undergo a Certification with Follow-up Review. Failure to resolve this issue at the time of the Certification with Follow-up Review may result in a certification decision change.

Note 2: The proposed consequences address only compliance with the requirement itself. They do not address the content of the organization's submissions to The Joint Commission. For example, if information in an organization's electronic application for certification (E-App) leads to inaccuracies in the appropriate length of the review and a longer review is required, the organization will incur the additional costs of the longer review. In addition, if there is evidence that the organization has intentionally falsified the information submitted to The Joint Commission, the Information Accuracy and Truthfulness Policy and its consequences will be applicable.

(See also CPR.07, EP 1)

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## **CPR.13**

The organization is truthful and accurate when describing information in its Quality Report to the public.

### **Element(s) of Performance for CPR.13**

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New EP 1 The organization adheres to The Joint Commission's published guidelines for how it describes information in its Quality Report.

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## **CPR.14**

The organization is compliant with applicable federal laws, including Medicare Conditions of Participation.

### **Element(s) of Performance for CPR.14**

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New EP 1 The organization is compliant with applicable federal laws, including Medicare Conditions of Participation.

**CPR.15**

The organization provides care, treatment, services, and an environment that pose no risk of an “Immediate Threat to Health or Safety.”

**Element(s) of Performance for CPR.15**

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New EP 1 The organization provides care, treatment, services, and an environment that pose no risk of an “Immediate Threat to Health or Safety.”

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Leadership (SHCLD) Chapter

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**SHCLD.01**

Environmental sustainability is a strategic priority for the organization.

**Element(s) of Performance for SHCLD.01**

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New EP 1 The organization’s written strategic plan, reviewed and approved by the board annually, includes reducing its greenhouse gas emissions.

ⓓ Documentation is required

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New EP 2 The organization allocates resources for activities to improve its environmental footprint by reducing its greenhouse gas emissions.  
Note: Examples of resource allocation may include financial resources, equipment, human resources, and/or materials.

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**SHCLD.02**

The organization defines leadership responsibilities.

**Element(s) of Performance for SHCLD.02**

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New EP 1 The organization appoints a leader(s) who is responsible for the oversight of activities to reduce greenhouse gas emissions in coordination with clinical and facility representatives.  
Note: The organization may appoint a leader(s) at the corporate or system level. This leader coordinates and implements greenhouse gas reduction activities at each location and addresses the site-specific reduction activities identified.

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New EP 2 The leader(s) develops and implements operational plans to reduce greenhouse gas emissions.

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## Measurement (SHCME) Chapter

### **SHCME.01**

The organization measures its greenhouse gas emissions.

#### **Element(s) of Performance for SHCME.01**

New EP 1 The organization measures three or more of the following greenhouse gas emission sources:

- Energy use (fuel combustion)
- Purchased electricity (purchased grid electricity, district steam, chilled and hot water)
- Anesthetic gas use, including volatile agents and nitrous oxide
- Pressurized metered-dose inhaler use
- Fleet vehicle carbon-based fuel use (from organization-owned vehicles)
- Waste disposal

Note: Waste disposal includes the disposal of waste generated in operations, waste generated in the production of purchased materials and fuels, and solid products at the end of their life. Examples of waste include municipal waste (such as product packaging, plastics, plastics from gloves, catheter bags, empty bottles, used batteries, and other items thrown in the trash), food waste, and pharmaceutical waste classified as solid waste.

New EP 2 The organization converts its greenhouse gas measurements to metric tons of carbon dioxide equivalents (MTCO<sub>2e</sub>).

- Ⓓ Documentation is required

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## Performance Improvement (SHCPI) Chapter

### **SHCPI.01**

The organization improves its environmental footprint by reducing its greenhouse gas emissions.

#### **Element(s) of Performance for SHCPI.01**

New EP 1 The organization develops goals to reduce greenhouse gas emissions in the three or more areas that it measured and develops and implements action plans to meet those goals.

Note: The organization states its goals in percent reduction in MTCO<sub>2e</sub>.

- Ⓓ Documentation is required

**New EP 2 The organization analyzes its greenhouse gas emission data annually.**

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**New EP 3 The organization determines whether it is meeting its goals and revises its plan if goals are not achieved or sustained.**

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