

Beginnings: 1910-1986

Ernest Codman, MD, proposes the "end result" system of hospital standardization. American College of Surgeons (ACS) is founded and the "end result" system becomes an ACS objective.

1910-13

Joint Commission on Accreditation of Hospitals (JCAH) is created as an independent, not-for-profit organization in Chicago, Illinois.

1950-52

Begin accrediting psychiatric facilities, substance abuse programs and community mental health programs. The Social Security Act is amended to require that the Secretary of the U.S. Department of Health & Human Services validate JCAH findings.

1970-72

Begin accrediting hospice care organizations. Quality Healthcare Resources® (QHR), Inc. is formed as a not-for-profit consulting subsidiary of JCAH. QHR later becomes Joint Commission Resources (JCR).

1982-86

The Minimum Standard

 That physicians and surgents privileged to practice in the hospital be opinized as a deline group or said. Such organization has nothing to do with the question as to whether the hospital is open "or closed, no need it allect the various existing types of staff organization. The word STAFF is here defined as the group of doctors who practice in the hospital phalatine of all groups such

as the "regular staff," The visiting staff, and the "associate staff,"

1. That membership upon the staff he restricted to physicises and surgrom who are (a) full graduates of molitime in good standing and ligably litened to practice in their respective states or provinces, (b) competent in their respective before, and (c) worthy in Character and in matters of prolessional ethics; that in this later connection the practice of the division, of less, under any

 That the staff initiate and, with the approval of the governing board of the hospital, adopt rules, regulations, and policite governing the professional work of the hospital; that these rules, regulations, and policies specifically provide:

(a) Thus saif meetings be beld at least once each second. (In large hospital is the department smy choses to meet separately.) (b) That the staff review and analyze at regular intervals their clinical experience in the various departments of the hospital, such as medicine, surgery, observice, and the other special ties; the clinical records of patients, few and pay, to be the basis

4. That accurate and complete resurds be written for all paties and fided in an octosable resource in the hospital—as complete one record being one which includes identification data; containing personal and family history; intervoy of persont illustrations and a family history; intervoy of persont illustrations and a family history; intervolved and included laboratory. X-ray and other examinations; provisional informations; provisional pathwisepted findings; progress rocker; final diagnost pathwisepted findings; progress rocker; final diagnost condition on discharge; followed pand, in case of ceath, alsopportunity.

5. That diagnostic and therapoutic faulticle under component, 9. That diagnostic and therapoutic faulticle under component succession be available for the study, diagnosts, and treatment of particles, there to include the property of the component of the particles, and particles, and particles, and particles, cervices, (t) an X-ray department providing radiographic and fluorescenic services.

1917-26

ACS develops the Minimum Standard for Hospitals; the requirements fill one page. The ACS begins on-site inspection of hospitals. In 1926, the first standards manual is printed, consisting of 18 pages.

1964-65

Congress passes the Social Security Amendments of 1965 with a provision that hospitals accredited by JCAH are "deemed" to be in compliance with most Medicare Conditions of Participation for hospitals and can participate in Medicare and Medicaid programs.

1975-79

Begin accrediting ambulatory health care facilities. An agreement with the College of American Pathologists (CAP) results in CAP accreditation of a laboratory in a JCAH-accredited hospital being recognized in lieu of JCAH's accreditation of the laboratory.





Expansion: 1987-1998

The name changes to the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) to reflect an expanded scope of activities. The Agenda for Change launches, placing emphasis of the accreditation process on actual organization performance.

1987

The JCAHO headquarters and conference center opens in Oakbrook Terrace, Illinois, about 20 miles west of downtown Chicago, where previous headquarters was located, in the John Hancock Center.

1990

The first organization-specific performance reports are released to the public. Joint Commission International (JCI) is formed to provide education and consulting to international clients. Begin accrediting freestanding laboratories.

1994-95

The revised Sentinel Event Policy promotes self-reporting of medical errors and encourages close examination of the root causes of these events. Joint Commission Resources, Inc., (JCR) replaces QHR.

1998

Joint Commission on Accreditation of Healthcare Organizations

1988-89

Begin developing the Indicator Measurement System®, an indicator-based performance monitoring system. Begin accrediting home care and managed care organizations.

1992-93

A new standard requires accredited hospitals to have a policy prohibiting smoking. The number and nature of confirmed substantive complaints filed against accredited organizations and the existence of type I recommendations becomes public information.

1996-97

Establish the Sentinel Event Policy. The Joint Commission website launches. ORYX®: The Next Evolution in Accreditation launches. Quality Check® becomes available on the Joint Commission website.







Growth: 1999-2009

The revised mission statement explicitly references patient safety. A toll-free hotline is established to encourage patients, their families, caregivers, and others to share concerns regarding care quality issues at accredited organizations.

1999

Establish the National Patient Safety Goals®. The Speak UpTM patient safety program launches. The Disease-Specific Care Certification program launches. With the National Quality Forum, establish the John M. Eisenberg Patient Safety & Quality Awards.

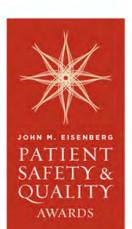
2002

Begin certifying health care staffing services, lung volume reduction surgery, left ventricular assist devices, and the nation's first certification for chronic kidney disease management. Life Safety Code Specialists are added to survey team.

2004-05

Release the E-dition, the first electronic version of accreditation standards. Begin certifying heart failure services. A refreshed mission statement and new vision statement are created. The Center for Transforming Healthcare launches.

2008-09



2000-01

Begin accrediting office-based surgery practices and critical access hospitals. JCI publishes the first comprehensive international quality standards for hospitals.

2003

Universal Protocol for Preventing Wrong Site, Wrong Procedure, Wrong Person SurgeryTM becomes effective. Accreditation certificates show the Gold Seal of Approval®. The first nationwide Primary Stroke Care Certification program is created with the American Stroke Association (ASA).

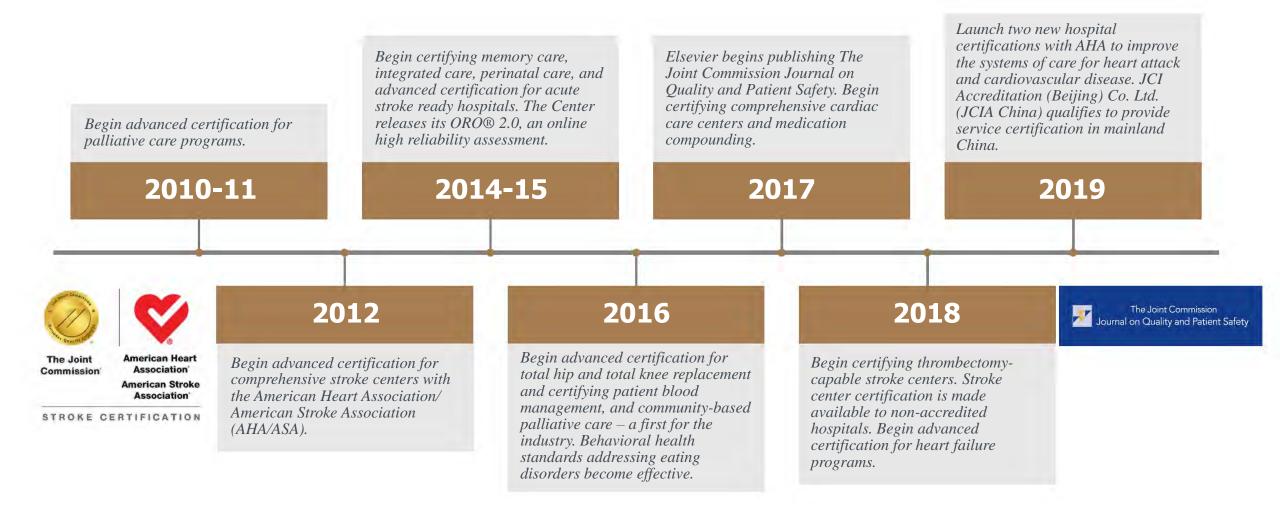
2006-07

Unannounced on-site accreditation surveys and certification reviews begin (with certain exceptions). Begin certifying advanced inpatient diabetes care and chronic obstructive pulmonary disease management. The name is shortened to The Joint Commission.





Specialization: 2010-2019





Recognition: 2020-2022

In March, suspend all regular onsite surveys of hospitals and other health care organizations to allow organizations and professionals to focus on caring for patients with COVID-19.

2020

Begin accrediting assisted living organizations. Launch a Maternal Levels of Care Verification program with the American College of Obstetricians and Gynecologists to help reduce maternal mortality and morbidity in the U.S.

May, June 2021

Collaborate with Alzheimer's Association to help improve quality and safety in dementia care in nursing, skilled nursing, and assisted living facilities.

January 2022

Join the White House Conference on Hunger, Nutrition, and Health's Sync for Social Needs coalition, committing to a role in ending hunger and reducing diet-related disease in the United States by 2030.

October 2022



March 2021

Establish the Bernard J. Tyson National Award for Excellence in Pursuit of Healthcare Equity with Kaiser Permanente to recognize organizations and their partners that lead initiatives that achieve a measurable, sustained reduction in health care disparities.

October 2021

Establish the Leading Laboratories Recognition Program with the American Society for Clinical Pathology to promote laboratory leadership and elevate the visibility and collaborative work of the medical laboratory team.

April, June 2022

With American Heart Association, launch Comprehensive Heart Attack Center certification program. Join the Biden Administration's Health Sector Climate Pledge to reduce carbon contributions emanating from the healthcare sector.





Progression: 2022-2023

In collaboration with American College of Obstetricians and Gynecologists (ACOG), launch Advanced Certification in Perinatal Care (ACPC) to help improve quality and safety for pregnant or postpartum patients and newborns.

October 2022

Elevate Leadership Standard LD.04.03.08 on healthcare disparities to a National Patient Safety Goal for critical access hospitals, hospitals, and some ambulatory care organizations and behavioral healthcare and human services organizations.

January 2023

Form a strategic alliance with National Quality Forum (NQF) to accelerate improvements in health for all people, shifting the focus from competing measures to advancing key outcomes.

August 2023

Launch Responsible Use of Health DataTM Certification for U.S. hospitals, providing guidance and recognizing organizations navigating the appropriate sensitivities needed to safely use data for purposes beyond clinical care.

December 2023



December 2022

Eliminates 168 standards (14%) and revises 14 other standards across Joint Commission accreditation programs. Additionally, is not raising accreditation fees for domestic hospitals in 2023.

July 2023

Launch Health Care Equity Certification program. With the Alzheimer's Association, launch Memory Care Certification for Assisted Living Communities, recognizing high-quality care for residents with Alzheimer's disease or other forms of dementia.

September 2023

Announce Sustainable Healthcare Certification, acting upon requests from organizations that want to accelerate their sustainable practices and reduce greenhouse gas emissions.

