

Joint Commission International Requirements for the Governing Entity

As required in the *JCI Accreditation Standards for Hospitals, 8th Edition*



A health care organization's governing body plays an important role in ensuring quality and safety. Research has shown that higher-performing health care organizations are correlated with well-educated boards that discuss and monitor quality and safety in measurable, meaningful ways at every board meeting.

Joint Commission recognizes the important role of the governing entity (also known as the governing body, board, board of directors, trustees). Joint Commission International (JCI) defines the governing entity as:

- The individual(s) or group that has ultimate authority and responsibility for establishing policy, maintaining quality of care, and providing for organization management and planning for the organization.

The table below lists the standards and measurable elements (ME) that reference the role of the governing entity of a hospital in quality and patient safety, as defined in the *JCI Accreditation Standards for Hospitals, 8th Edition*. (Similar standards and MEs can be found in other JCI manuals of accreditation, such as for ambulatory care centers, primary care, etc.). The standards, identified by chapters, are statements that define the performance expectations and/or structures or processes that must be in place for organizations to provide safe, high-quality care, treatment and services. The Measurable Elements (MEs) are the details of the specific elements of performance. Some references to the role of the governing entity are found in general descriptions of the standard, including the intent sections, which provide the rationale and guidance on what elements must or might be considered.

The chapter that provides definitions, descriptions and standards that define the requirements of the governing entity is:

- GLD: Governance, Leadership and Direction

Other chapters and standards that include references to the role of the governing entity include:

- FMS: Facility Management and Safety
- PCI: Prevention and Control of Infections
- QPS: Quality and Patient Safety
- SQE: Staff Qualifications and Education
- GHI: Global Health Impact

For Academic Medical Centers, two additional chapters have references to the role of the governing entity:

- MPE: Medical Professional Education
- HRP: Human Subjects Research Programs

**Required Quality and Safety Responsibilities of the Governing Entity
(JCI Accreditation Standards for Hospitals, 8th Edition)**

Standard Number	Standard Description	Intent statement and/or Measurable Element (ME) that references Governing Entity
GLD.01.00	The structure, authority, and responsibilities of the hospital's governing entity are described in bylaws, policies and procedures, or similar written documents.	<p>Intent: Governing entity... is responsible for overseeing the hospital's provision of care, treatment, and services.</p> <p>These responsibilities are primarily at the approval level and include:</p> <ul style="list-style-type: none"> • Approving... mission, strategic plan, policies and procedures, budget, participation in education and research and oversight of quality of such programs.
GLD.04.00	Hospital leaders plan, develop, and implement a quality and patient safety program.	<p>Intent: Hospital leaders develop the quality and patient safety program for approval by the governing entity, and through its vision and support, shapes the quality culture of the hospital</p> <p>Leadership and planning begin with the governing entity.</p>
GLD.04.01	Hospital leaders report quality improvement and patient safety information to the governing entity and hospital staff.	<p>Intent: The governing entity approves the quality and patient safety program on an annual basis, and on a quarterly basis receives quality reports.</p> <p>ME 1 The governing entity annually reviews and approves the hospital's program for quality and patient safety.</p> <p>ME 2 D At least quarterly, hospital leaders provide the governing entity with written reports on quality and patient safety.</p>
GLD.07.01	Hospital leaders create and maintain a culture of safety and quality throughout the hospital	<p>Intent: Leaders must address such [undesirable] behaviors in individuals working at all levels of the hospital, including...governing entity members</p> <p>The appointed committee presents</p> <p>periodic updates to the governing entity to identify issues that impact overall quality and patient safety.</p>
GLD.07.02	The hospital implements a workplace violence prevention program to provide a safe and secure workplace.	<p>Intent: Regularly reporting incidents and trends to the governing body</p> <p>ME 5 The hospital implements a process for the reporting of workplace violence incidents to the governing body.</p>
FMS.02.00	The hospital develops and documents a risk assessment based on facility management and safety risks identified throughout the organization, prioritizes the risks, establishes goals, and implements improvements to reduce and eliminate risks.	<p>ME 4 D Hospital leaders provide the annual risk assessment report and the effectiveness of the facility management and safety programs to the governing entity, and the governing entity takes actions based on the report.</p>
PCI.01.00	A qualified individual(s) guides the implementation of the hospital's infection prevention and control program and oversees the activities needed to carry out the program throughout the hospital.	<p>Intent: The governing entity approves the program, and leaders provide the resources to implement the program.</p>

PCI.08.00	The infection prevention and control process is integrated with the hospital's overall program for quality and patient safety, using data and measures that are epidemiologically important to the hospital	Intent: Full integration allows for a consistent approach to improvement and communication structures with leaders and the governing board.
PCI.08.01	The hospital provides education on infection prevention and control practices to staff, health care practitioners, patients, families, and others when indicated by their role in the hospital.	Intent: ...a mechanism for reporting to leaders and the governing board. ME 5 D The hospital communicates information and data from the infection prevention and control program to leaders and the governing body.
QPS.01.00	A qualified individual(s) guides the implementation of the hospital's program for quality and patient safety, and manages the activities needed to carry out an effective program of continuous quality improvement and patient safety within the hospital	Intent: The governing entity approves the [quality] program, and leaders provide the resources to implement the program.
QPS.03.04	The hospital identifies undesirable trends and variation, and always conducts an intensive analysis, or a comprehensive systematic analysis, when these are evident from its data collection.	Intent: ... structure and process in place for...identifying and intensively analyzing undesirable trends; and reporting the results to the governing body as part of the quality and patient safety program ME 5 D The hospital reports data for identified risks to patient safety to the governing entity as part of the quality and patient safety program.
SQE.06.01	Hospital leaders grant temporary clinical privileges to medical staff for a limited period of time and for circumstances as defined by hospital policy.	Intent: The circumstances for which the granting of temporary privileges is acceptable are as follows: <ul style="list-style-type: none"> • When an applicant for new privileges with a complete application that raises no concerns is awaiting review and approval by the medical staff executive committee and the governing body
GHI.06.01	Hospital leaders ensure that environmental strategies are formally included and acted on as part of the organization's operations and governance.	Intent: Involve hospital governing bodies to ensure reporting, monitoring, and improvement of the strategies. ME 1 D Hospital leaders include environmental sustainability and low-carbon and resilient care on their board agenda to discuss at least once a year, with reporting of progress, declaration of resources allocated, and assessment of the implementation of the strategies. Minutes reflect actions taken and any follow-up on those actions.

Academic Medical Centers		
MPE		<p>Overview of Chapter</p> <p>Ensuring a rich and meaningful experience for medical students and trainees requires many factors in addition to the commitment of the governing entity and hospital leaders.</p> <p>...hospital's governing entity and leaders are responsible to ensure that there is appropriate supervision of patient care, treatment...</p> <p>The hospital's governing entity and leaders do the following...</p>
MPE.01.00	The hospital's governing body and leaders approve and monitor the hospital's participation in providing medical education.	<p>ME 1. D The decision to provide medical education is made by the governing entity and leaders of the hospital, is consistent with the hospital's mission, and is documented.</p> <p>ME 2. D The hospital's governing entity and leaders obtain, review, and accept the parameters of the participating medical school, and this action is documented.</p> <p>ME 3. D The hospital's governing entity and leaders endorse a set of metrics to monitor and evaluate the ongoing operation of medical education programs, and there is documented review of the monitoring data.</p> <p>ME 4. D The hospital's governing entity and leaders review the medical education programs within the hospital at least annually, and the review is documented.</p>
HRP	Each Standard identifies specific hospital leadership responsibilities (which includes the governing entity)	<p>Overview of Chapter</p> <p>The HRP standards require the governing entity and leaders in organizations that conduct human subject research to protect all participating subjects in accordance with international and national principles that govern clinical research.</p>