




# Healthcare Joint Commission Compliance Checklist

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## Patient Safety Identification and Prevention of Harm

Covers patient identification, medication safety, fall prevention, surgical safety, and pressure ulcer prevention.

### Patient Identification Verification Method

- Two Unique Identifiers
- Barcode Scanning
- Photo Identification

### Fall Risk Score

Enter a number...



### Allergies Documented?

- Yes
- No
- NKDA (No Known Drug Allergies)

### Last Fall Risk Assessment Date

Enter date...

### Nurse Signature - Patient ID Verification

### Detailed Description of Patient Education Provided (e.g., Fall Prevention)

Write something...

### Medication Reconciliation Complete?

- Yes
- No

### Relevant Documentation (e.g., Fall Prevention Plan)

 Upload File

# Emergency Management

Addresses emergency preparedness, disaster planning, and security protocols.

## Last Disaster Drill Participants

## Last Disaster Drill Date

## Drill Start Time

## Drill Debriefing Notes

## Disaster Plan Document

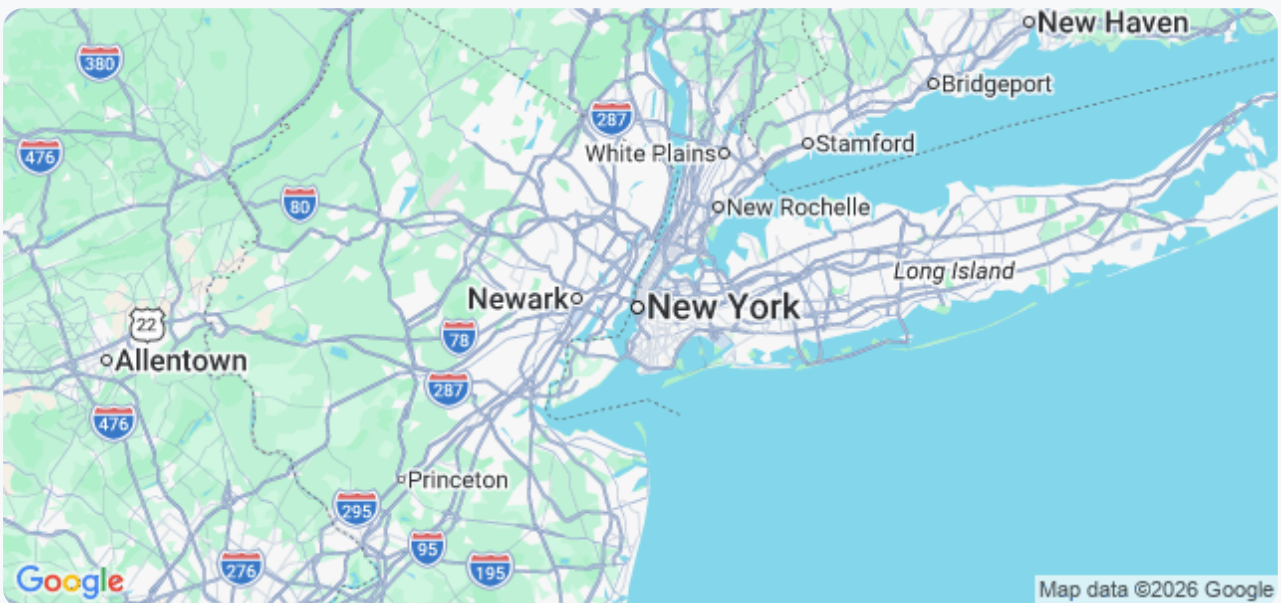
 Upload File

## Emergency Contact Person

- Administrator
- Medical Director
- Safety Officer

## Emergency Assembly Point

 [Set My Current Location](#)



## Emergency Communication Methods

- Phone
- Email
- Public Address System
- Two-Way Radios

## Date of Next Disaster Drill

Enter date...

# Environment of Care

Focuses on fire safety, hazardous materials management, and facility safety.

## Fire Alarm System Test Frequency (Months)

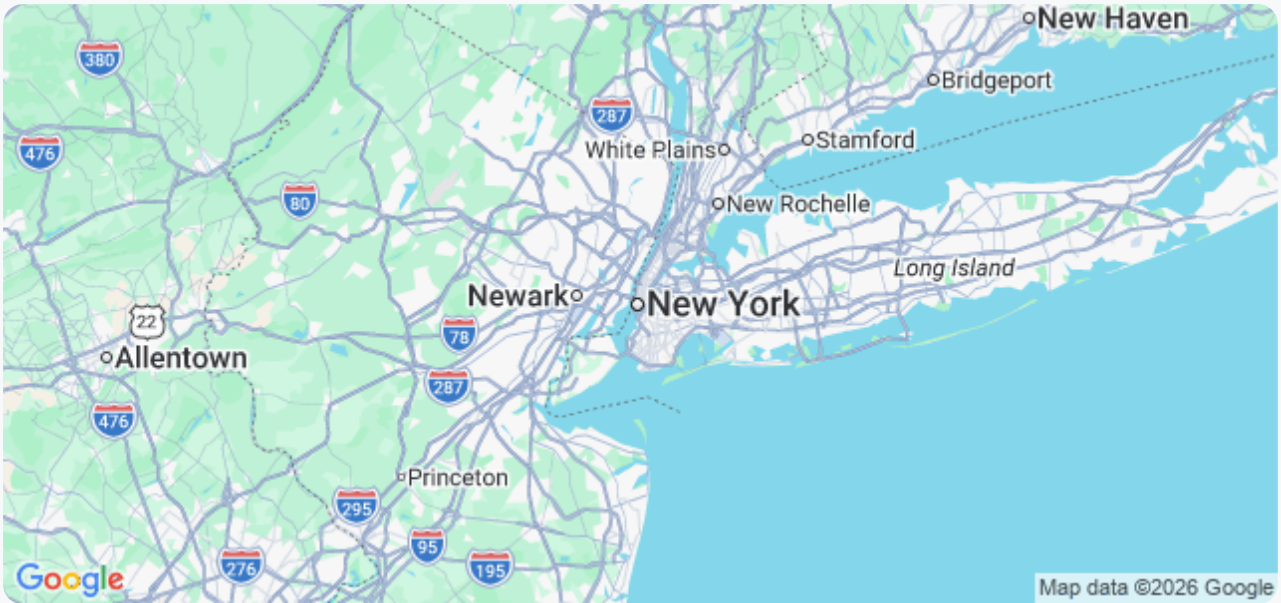
## Last Fire Safety Inspection Date

## Hazardous Materials Present?

- Chemicals
- Medical Gases
- Radioactive Materials

## Location of Fire Extinguishers

 Set My Current Location



## Description of Emergency Power Generator Maintenance Log

Write something...

## Ventilation System Functionality

- Optimal
- Needs Adjustment
- Malfunctioning

## Fire Safety Plan Document

 Upload File

## Time of Last Sprinkler System Inspection

Enter time...

# Leadership

Covers governance, ethics, and compliance programs.

## Number of Ethics Committee Meetings Held Annually

Enter a number...

## Last Ethics Committee Review Date

Enter date...

## Ethics Hotline Availability (24/7, Business Hours, Limited Hours)

- 24/7
- Business Hours
- Limited Hours

## Summary of Key Leadership Decisions Regarding Compliance

Write something...

## Annual Compliance Training Documentation

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## Leadership Commitment to Patient-Centered Care (Scale 1-5)

- 1
- 2
- 3
- 4
- 5

## CEO Commitment to Compliance Program

# Human Resources

Focuses on credentialing, training, and performance evaluation.

## Number of Active Employees

Enter a number...

### Last Credentialing Review Date

Enter date...

### Background Check Policy Adherence

- Fully Compliant
- Partially Compliant
- Not Compliant

### Required Employee Training Modules Completed

- HIPAA Privacy
- Patient Safety
- Emergency Preparedness
- Cultural Competency
- Cybersecurity Awareness

### Next Employee Performance Review Due Date

Enter date...

### Summary of Recent HR Policy Updates

Write something...

### Employee Training Records (Sample)

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# Medical Staff Services

Addresses physician credentialing, privileging, and performance improvement.

## Physician Signature (Credentialing Verification)

## Credentialing Verification Expiration Date

## Number of Physician Privileges Granted

## Physician Supervision Level

- Direct
- Indirect
- General
- Limited
- None

### **Clinical Areas of Competency**

- Cardiology
- Neurology
- Pediatrics
- Surgery
- Oncology

### **Last CME Completion Date**

Enter date...

### **Summary of Peer Review Performance**

Write something...

## **Clinical Performance Improvement**

Covers data analysis, process improvement, and outcome measurement.

### **Number of Process Improvement Projects Initiated**

Enter a number...

### Number of Process Improvement Projects Completed

Enter a number...

### Summary of Key Performance Indicators (KPIs) Tracked

Write something...

### Date of Last Performance Review Meeting

Enter date...

### Data Sources Used for Performance Measurement

- Electronic Health Records (EHR)
- Patient Satisfaction Surveys
- Clinical Registries
- Incident Reporting System


## Description of Corrective Actions Implemented based on Performance Data

Write something...

## Overall Assessment of Clinical Performance Improvement Efforts

- Excellent
- Good
- Fair
- Needs Improvement

## Supporting Documentation (e.g., Performance Reports, Action Plans)

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# Information Management

Addresses data security, privacy, and electronic health record management.

## Data Encryption Method

- AES-256
- TLS 1.2
- Other (Specify in Long Text)

### Detailed Description of Data Security Policies

Write something...

### Frequency of Data Backup (in days)

Enter a number...

### Last Security Risk Assessment Date

Enter date...

### Access Control Method

- Role-Based
- Attribute-Based
- Other (Specify in Long Text)

### Supporting Documentation (e.g., Security Audit Reports)

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### Data Types Protected by HIPAA

- Demographic Data
- Medical Records
- Payment Information
- Other (Specify in Long Text)

# Medication Management

Focuses on medication ordering, dispensing, administration, and reconciliation.

## Medication Reconciliation Completed?

- Yes
- No
- Not Applicable

## Last Medication Reconciliation Date

Enter date...

## Number of Medication Discrepancies Identified

Enter a number...

## Description of Medication Discrepancies (if any)

Write something...

### High-Alert Medications Verified?

- Yes
- No
- N/A

### Routes of Administration Verified?

- Oral
- IV
- IM
- Subcutaneous
- Topical

### Time of Medication Administration

Enter time...

### Pharmacist Signature

## Infection Prevention and Control

Covers surveillance, prevention, and control of healthcare-associated infections.

### Last Environmental Cleaning Date

Enter date...

### Hand Hygiene Compliance Observed (Last Audit)

- Excellent
- Good
- Fair
- Poor

### Number of HAIs (Healthcare-Associated Infections) Reported This Month

Enter a number...

### Isolation Precautions Currently in Use

- Contact
- Droplet
- Airborne
- None

### Description of any recent infection control breaches or incidents

Write something...

### Supporting Documentation (e.g., audit reports, cleaning logs)

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# Communication and Teamwork

Addresses internal and external communication protocols and team collaboration.

## Team Handoff Communication Method

- Verbal
- Written
- Electronic Health Record
- Video Conference

## Number of Inter-Departmental Meetings Held Monthly

Enter a number...

## Last Team Conflict Resolution Training Date

Enter date...

## Summary of Recent Team Communication Challenges

Write something...

### Communication Tools Utilized by the Team

- Email
- Instant Messaging
- Project Management Software
- Video Conferencing
- Phone

### Team's Perceived Level of Psychological Safety

- Very High
- High
- Moderate
- Low
- Very Low

### Contact Person for Communication Issues

Write something...