

ACCREDITATION CROSSWALK OF HOME HEALTH STANDARDS

Note: Standards are cross-walked according to the intent of the standard and not according to the exact language of the standard. References to JCAHO standards are made to standards in the JCAHO manuals for home health services, home care pharmacy services, home medical equipment, respiratory therapy, and rehabilitation technology. CHAP standards are referenced to the Core standards and Home Health Standards. ACHC standards are referenced to the home health standards. This crosswalk is organized by the sections utilized by ACHC.

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
Section 100 Organization and Administration				
Legal Authority	101	LD.1	CI.2a	
Documentation of legal authority	101a	LD.1	CI.2 CI.2b	
Change in authority	101b	No standard	CI.2i8	
Governing Body	102	LD.1, LD.1.1	CI.2c	
Governing body duties	102a	LD.1.1, LD.2, LD.2.1	CI.2 CI.2, f, g, j, k, l CIV.2i	
Description of governing body	102b	LD.1, LD.9	CI.2, c, d	
List of governing body members	102c	No standard	CI.2d	
Composition of governing body	102d	LD.1, LD1.1	CI.2	
Orientation of governing body	102e	LD1.1	CI.2e	
Professional advisors	103	No standard	HHI.2c, d, e, f, g HIV.1a3	
P&P for professional advisors	103a	No standard	HHI.2g	
List of professional advisors	103b	No standard	HHI.2e	
Orientation of professional advisors	103c	No standard	No standard	
Conflict of interest	104	RI.12	CI.2h, i	
Written policy for conflict of interest	104a	RI.12	CI.2h2	JCAHO does not require written policy
Written conflict of interest policy will be shared with staff and others	104b	No standard	CI.2h*	* This is specific to governing body and not staff
Identification of individual responsible for organization	105	LD.7	CI.5 CI.5a CI.5e	
Services planned, communicated to community are provided	No standard	LD.6	CI.5e10	
Designation of individual	105a	LD.7	CI.5, 5a	

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
Job description for designated individual	105b	LD.7	CI.5a CI.5e	
Individual is qualified	105c	LD.7	CI.5b, c	
Periodic written evaluations of designated individual	105d	HR.7	No standard	
Designation of person in absence of executive	105e	LD.7.1	CI.5, d	
Organizational structure	106	LD.9	CI.3, a, b, c HHI.3	
Organizational chart	106a	LD.9	CI.3	
Person identified for overall supervision	106b	LD.8, HR.3.2	CI.3a CII.4c HHI.3, 3a,b	
Organizational chart shows persons responsible	106c	LD.9	CI.3a	
Design of organizational chart	106d,e, f	LD.9	CI.3a, c	
Leaders develop organizational policies, review and revise policies for administrative and patient care activities	No standard	LD.10	CII.1, a CII.1b CII.1d HHI.2b, 1, 2 HHI.2f HHI.2h2 HHII.3b* HHII.7, 7a, b	* Specific to clinical specialty programs
Organizational policies are implemented	Addressed at specific standards	LD.10.1	CI.5e2 HHI.2b3 HHII.1*	* Related to implementation of policies for clinical services only
Job descriptions	106g	HR.2	CI.5e CIII.1c	
Organization wide planning, implementing, programs	No standard	LD.2 LD.2.1	CI.5e4, 5,9 CII.4, 4a CIV.1, a-d CIV.2j HHI.4a	
Leaders and appropriate staff collaborate in decision making	No standard	LD.3	CII.4, 4a HHI.2h1	
Leaders ensure that care and services are	No standard	LD.6	CI.5e, 1	

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
provided as planned			HHI.2 HHI.4, 4a HHII.1	
Written mission/philosophy statement	107	LD.4	CI.1a, b, c** HHI.1, a, b, c** HHI.4** HHIV.1	** ACHC and JCAHO do not include staff activities and behaviors to support mission
Compliance with law and regulation	108	LD.5	CI.4 CI.5e3 CII.1b, 18,19 HHI.2a HHII5d	
Written policies related to compliance with law and regulations	108a	LD.5	CII.1b, 18, 19	
Notification of accrediting body when outcomes from other audits may effect accreditation or licensure	108b	No standard *	No standard	*JCAHO does have a participation requirement for reports and audits to be shared with JCAHO when requested.
Organizational plans and designs information management processes	No standard	IM.1	CII.5j CIV.5	ACHC standards are specific to clinical information only
Uniform data definitions and data capture methods are used.	No standard	IM.3	CII.5f2	Examples: ICD-9 codes, abbreviations
Transmission of data and information is timely and accurate	No standard	IM.5	CIV.5a	
The format and methods for disseminating data and information are standardized, easy retrieval of information	No standard	IM.5.1	CI.4	
The organization provides adequate integration and interpretation of information	No standard	IM.6	CIV.5,b,c	
The organization collects and aggregates data to support operations	No standard	IM.8	CIV.5, b, c, d	
Current, knowledge-based information is available for organizational planning and development	No standard	IM.9,IM.91	HHI.2h3	
Bill of Rights	202	RI.1.1	CI.6b,c,d,e	
Informing client of rights/responsibilities	202a	RI.1.1	CI.6b,c,d* CII5b2	* Only CHAP includes details of providing information related to the organization's liability insurance and posting the BOR in a public area for clients receiving non-home based services.
Written bill of rights/responsibilities	202b	RI.1.1, PF.3.7	CI.6b,c,d,e3	

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
Staff understand bill of rights/ responsibilities	202c	RI.1.1, HR.5	CI.6e2	
Patient right to choose or refuse participation in research, investigational studies or clinical trials	No standard	RI.2.3	CIV.7*	CHAP is in more detail related to research studies
Patient right to privacy and security	202a*	RI.6	CIII.6a6	* refers to privacy only
Client grievance procedure	203	RI.4	CI.6c,2,3, 16,17,18 CI.6d,4,8 CI.8, 8a,b,c,d	
Grievance process	203a,b	RI.4	CI.6d,4,8 CI.6c,2,3, 16,17,18 CI.8,a,b,c	
Staff understand grievance process	203c	RI.4, HR.5	CI.8d	
Confidentiality of client information	204	RI.5	CI.6c,11,12	
Information provided to client about confidentiality	204a	RI.5	CI.6c,11,12	
Written policies about confidentiality	204b	IM.2	CI.6,11,12 CII.1b,13,14	
Staff, board members knowledgeable about confidentiality	204c	IM.2, HR.5	CII.5a2	
Release of information policies, forms	204d,	IM.2	CI.6c,11,12 CII.5a,b,f,g	
Client's right to refuse treatment, advance directives	205	RI.2.1, RI.2.2	CI.6c10 CI.6d3	
Policy for refusal of care, advance directives	205a	RI.2.1, RI.2.2	CI.6d3*	* refusal of care not included
Advance directives and resuscitation	205b,c	RI.2.2	CI.6c10 CI.6d3	
Reporting of abuse/neglect	206, a, b	PE.4, PE.4.1	HHII.7a8	
Handling ethical issues	207	RI.10	CI.9, 9a,b,c	
Written policy for handling ethical issues	207a	RI.10	CI.9b	JCAHO does not require written policy
Ethical business practices	No Standard	RI.11	CI.6d5&6	
Accountability and training for ethical practices	207b	HR.5	CI.9b1,2	JCAHO does not require a summary of ethical issues be presented to the governing body
Services for clients of various cultures, religious beliefs	208	No standard	No standard	
Consideration of client's culture, beliefs	208a	RI.1	No Standard	

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
Communication in various languages or forms	208b	RI.3	CI.7,a,b	
Corporate Compliance Plan	209	RI.11, RI.12, RI.13	No standard	JCAHO does not require a corporate compliance plan but does expect ethical and legal business practices at these standards.
Section 300 - Fiscal Management				
Annual budget	301, 301a	LD.1.1 LD.2.2	CI.5e8 CIII.3,3c,d,e*	*CHAP much more detailed
Annual review of budget	301b	LD.2.2	CIII.5c1	
Capital expenditure plan	301c	LD.2.2	CIII.3f	
Written policy for expenditure limits	301d	No standard	CIII.5c.3c	
Fiscal policies	302, 302a	LD.10	CII.1,a3 CII.1b19 CIII.3a	JCAHO standard requires policies for administrative operations in general
Accounting system	302b	No standard	CIII.4,4a,b,c CIII.5,5a-5f	CHAP has greater details
Maintenance of finance records, annual audit	303, a, b	No standard	CIII.5a,b,c,d	
Established rates for services	304	No standard	CIII.5e3	
Communication of rates for services	304a	RI.2, RI. 11	CI.6c13,14,15 CIII.5e	JCAHO standard is not specific for conveying rates to the public.
Sliding scale rates	304b	No standard	CIII.5e3	
Section 400 - Personnel Management				
Personnel policies	401	LD.10	CII.1a4 CIII.1h	JCAHO standard requires policies for administrative operations in general. Each specific standard for human resources may or may not require a written policy.
Specific personnel policies	401a	LD.10	CII.1a4 HHI.2f7	As above
Policies accessible to staff	401b	No standard	CIII.1i	
Recruitment, retention of adequate, appropriate staff	No standard	HR.1	CI.5e4 CIII.1,1a,d,e HHIII.1,1a HHIII.1b	
Job descriptions, review of job descriptions with staff	402,a, b	HR.2	CIII.1c	
Selecting and hiring employees, policies for verifying qualifications	403, a	HR.3, HR.3.1, HR.3.2	CIII.1b,d HHIII.1a	

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
			HHIII.1a.4,6 HHIII.1b	
Reference checks	403b	HR.3.1, HR.3.2	HHIII.1a.10a HHIII.1c	
Credentials	403c	HR.3.1, HR.3.2	HHIII.1a.1,2,3,5	
Health Screens	404, a, b	HR.3.1, HR.3.2	CII.7i5 HHIII.1a.10b	
Drivers license	404c	No standard	No standard	Only expected by JCAHO as required by applicable law and regulations
Criminal background check	404d	HR.3.1, HR.3.2	HHIII.1a.10c	
Personnel files maintained	405,a	HR.3.1, HR.3.2	CI.4 CIII.1j,k CIII.3b HHIII.1a, 1-10 HHIII.1a.10d	
Orientation	406,a, b, c	HR.5	CII.7g CIII.1m,n HHIII.1a.7,8	
Demonstration of competence	407	HR.4	HHIII.1c,1d	
Training, education, skills	407a	HR.4	CI.5e5	
Demonstration of competence	407b	HR.4, HR.4.1, HR.4.1.1	CIII.1,t,u	
Implementation of an Inservice education plan, staff attend inservices	408, a	HR.6	CI.5e5 CII.1c3 CII.7g CIII.1,o,p,q,r,s HHII.1b.1m HHII.1c.1l HHII.1d.12 HHII.1e.11 HHII.1g.11 HHIII.1g,h	
Supervision by qualified personnel	409	HR.3.2	CI.5c CII.4c HHIII.1e	
Policies regarding supervision	409a	HR.3.2	HHIII.1e	JCAHO does not require written policies
Appropriate supervision available during all hours	409b,c	HR.3.2	CII.4c HHIII.1e	
Personnel evaluation	410	HR.7	CI.5e6 CIII.1l	

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
Annual observation visit of direct service staff	410a	No standard	HHIII.1a.9c	
Annual performance appraisals shared with staff	410b,c	HR.7	HHIII.1a.9	
Written contracts/agreements	411, a, b, c, d, e	LD.11	CI.5a,1,2 CII.1b22,23 CIII.2,2a,b,c,d,e, HHIII.1f,1i	
Section 500 Client/service/Care Management				
Client record maintained	501	IM.7	CI.4 CII.5c,h,i,j HH.I.2f6 HHII.1b.1f HHII.1c.1h HHII.1d.6 HHII.1e.6 HHII.1g.4 HHII.4j2 HHII.4k2	
Contents of client record	501a	IM.7.2	HHII.7c,d	
Signed and dated entries	501b	IM.7.1	CII.5f,g	
Records include safety measures	501c	IM.7.2	HHII.7c.12	
Management of records	501d	IM.2.1	CII.5c,d	
Policies for referral and intake process	502	CC.1	HHI.2f2 HHII.3,a	
Qualified intake/referral staff adhere to policies	502a	CC.1	No standard	
Physician license verification	502b	TX.2.1.1	HHIII.2	
Eligibility of clients	503	CC.1	CII.1b.1,2,3,5	
Written eligibility guidelines	503a	CC.1	CII.1 CII.1b.1,2,3,5	JCAHO does not require written policies or guidelines
Organization only admits patients they can provide services to	503b	CC.1	HHII.3,a	
Written policy for anti-discrimination	503c	No standard	CII.1b1	
Written verification that clients meet eligibility requirements	503d	No standard	HHII.4d.3d	
Procedures for when client needs cannot be met	504	CC.1	HHII.3a	
List maintained of clients who are not	504a,b	No standard	CIV.2d5	JCAHO does not require a list

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
accepted for services, waiting list				
Coordination of services with other community agencies	505,a,b	CC.2, CC.2.1, CC.2.1, CC.4	CII.2,a,b,c HHII.1b.g,h HHII.3d	
Data maintained on unmet care needs	505c	No standard	No standard	
Initial and periodic reassessments	506	PE.1, PE.2, PE.3	CII.1b4 HHII.1b.1a HHII.1c.1a HHII.1d1 HHII.1e1 HHII.1g1	
Written policies for initial assessments	506a	PE.1, PE.2, PE.2.1	HHII.4d	
Content of initial assessment	506b	PE.2	HHII.4d	
Assessments conducted by experienced personnel	506c	PE.1, HR.3.1	HHII.1b.1a HHII.1c.1a HHII.1d1 HHII.1e1	
Reassessments	506e	PE.3	HHII.3g,j*	*Specific to PPS/OASIS requirements
Professional oversight when paraprofessionals assist in assessment and reassessment	506f	No standard	HHII.1b2* HHII.1c.1k* HHII.1c.2*	*Specific to disciplines
Written plan of care based on assessment, appropriate for client	507,a	TX.1, TX.1.1, TX.1.2, TX.1.3, TX.2	CII.1b8 HHII.3c,d HHII.4,4a HHII.4b.,4b.2	
There is consistency between care provided and the plan of care and services billed	507b	TX.1.4, TX.2	HHII.4b.,4b.1	
Client involvement in plan of care documented	507c	RI.2, RI.2.1, CC.3.1	HHII.3d.4	
Plan of care reviewed and revised based on policies	507d	TX.1.6 TX.4	CII.1b8 HHII.1b.1j HHII.3c* HHII.4c	*Includes specific PPS requirements
Changes are made in the plan of care based on reassessment	507e	TX.1.6	HHII.4c	
Physician orders obtained as required, physician notification of changes in client condition	507f	TX.2, TX.2.1, CC.4.1	CII.1b,6,7,8 HHII.1b.1i HHII.1d.3,	

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
			HHII.1e.3, 10 HHII.1g.2 HHIII.3c HHII.4h,i,j,k	
Client education based on plan of care	507g	PF.3, PF.3.1	HHII.1b.1d HHII.1c.1f HHII.1d.8 HHII.1g.5	
Designated care coordinator/case manager	508a	No standard	CII.4b	
Professional oversight when paraprofessionals gather data and monitor plan of care	508b	No standard	HHII.1b2 HHII.1c2 HHIII.1e	
Communication and coordination of care with staff and during business and non-business hours	509*	CC.2, CC.3	CII.1b11 CII.13d HHII.1b.1i HHII.1c.1i HHII.1d.7, 10 HHII.1e.10 HHII.1g.6 HHII.3d, 1,2,3	* does not refer to after hours care and services
Communication among employees	509a	CC.2, CC.3	see above HHII.1e.4	
Communication and coordination with other agencies	509b	CC.4	HHII.3d	
Transfer and discharge when client needs can no longer be met. Transfer /discharge policies	510,a,b	CC.5, CC.5.1, CC.5.2 CC.6 IM.7.2	CII.b3 HHI.2f2 HHII.1b.1l HHII.1c.1m HHII.1d.11 HHII.1e.9 HHII.1g.8 HHII.3e,3f,3g,3h,3i,3j*	* Includes PPS/OASIS requirements
Section 600 - Quality Outcomes/ Improvement				
Quality Improvement activities	601	PI.1, PI.1.1 LD.12, LD.12.2	CI.5e7 CII.6,a,b,c,d HHII.7	
Implementation of QI activities	601a	LD.12, LD.12.2	CI.5e7	
Involvement of leadership in QI	601b	LD.12.1, LD.12.2,	CI.5e7	

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
		LD.12.2.1		
Staff involvement in QI	601c	LD.12.3	CII.6*	*not specific to staff
QI includes all aspects of the program and services	602	PI.3, PI.3.1, LD.12.2	CII.6a,b,c,d	JCAHO does not expect all aspects of programs and services to be represented with measures. JCAHO expects all programs and services to be considered when prioritizing measures and QI activities.
Annual evaluation must be included in QI activities	602a	LD.4	CI.3b CII.1c12,13 CII.1d1 CIV.2, 2a-j HHI.2f8 HHIV.1,1a	JCAHO expects an annual evaluation of the organization but it is not expected to be part of the QI activities.
Assessment of at risk processes, sentinel events	602b	LD.12.4.2, PI.3.1.2	CIV.2e,h	
Quarterly record review	602c	IM.7.3	CII.6g,h HHII.7e	JCAHO does not require a quarterly record review as part of QI activities. JCAHO expects a process for ensuring accurate records. This is quarterly only when required by law and regulation.
Monitoring of one aspect of care for each program service provided	602d	PI.3.1.1, PI.3.1.2, PI.3.1.3, PI.3.1.4	CII.1c6,7 CII.6d CIV.2d	JCAHO does not require a measure for every program service area. JCAHO measures are based on other criteria and priorities identified by leadership.
Monitoring of one administrative/operational aspect of service	602e	PI.3.1.1, PI.3.1.2, PI.3.1.3, PI.3.1.4	CII.1c6,7	As above
Client satisfaction	602f	PI.3.1.1	CI.8b10 CII.1c5,10 CII.6e	
Data collection methods	603	PI.3	CII.1c8,9 CIV.2c	
Data are systematically aggregated and analyzed on an ongoing basis and statistical techniques are used to analyze and display data	No standard	PI.4, PI.4.1	CII.1c8	
Criteria for data collection	603a	PI.3	CII.6d	
External benchmarking	603b	PI.4.2, IM.10	CIV.5b,c HHII.7f	Preferred by ACHC
Annual QI report	603c	LD.12.4.1	HHIV.1a	JCAHO does not require an annual report, but only as related to corrective actions

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
Utilization of information from QI activities	604	PI.4.4, LD.12.4	CII.6i	
Written plan of correction in response to unacceptable findings.	604a	PI.4.2, PI.4.3, PI.4.4, LD.12.4, LD.12.4.1	CII.6f,i	
Written summary of outcomes, changes made	604b	LD.12.4.1, PI.5	CII.6j	
New or modified processes are designed well with identified performance expectations which are measured	No standard	PI.2, PI.2.1, PI.2.2	CII.1c4	Process design is not included in ACHC QI standards
Leaders assess own effectiveness in performance improvement	No standard	LD.12.5	CI.5e7	
Section 700 -Risk Management: Infection and Safety Control				
Infection control program	701	IC.1, PF.3.9	CII.7,7a,b,c,d,e,f,g,h,i,n	
Infection control program consistent with regulatory standards	701a	IC.1, IC.1.3, IC.1.4	CII.7, a, b, c, d, e, f, h, i, n	
Compliance with OSHA	701b	IC.1	CII.7,a,b,c,d,e,f,g,h,i	
Implementation of infection control procedures	702c	IC.2	CII.7o	
Effectiveness of infection control program monitored	701d	IC.1, IC.1.1, IC.1.2, IC.1.5	CII.7,d,e,n	
Safety program	702*	EC.1.1, EC.1.2, EC.1.1.1, EC.2, EC.2.1, EC.1.5, EC.2.5	CII.1b15 CII.1b21 CII.7j CIII.6,6 a	* Does not include safe work/office environment as detailed as JCAHO and CHAP
The organization plans for and implements plan for a secure environment, environmental concerns	No standard	EC.1.2, EC.2.2, EC.3	CIII.6 CIII.6a8	
Education of staff about safety, safety policies	702a	EC.1.1, HR.5	CII.1b21 CII.7j	
Home safety assessments and client education	702b	EC.1.1, EC.2.1, EC.1.3, EC.2.3, PF.3.3, PF.3.8, PF. 3.12	CII.7k	
Crisis situation	702c	EC.1.4, EC.2.4, PF.310	CI.6d9 CII.1b17 CII.3,3a,b,c	JCAHO refers to this as emergency or disaster planning
Management of hazardous materials	703	EC.1.3, EC.2.3	CII.7j*	
Policies for management of hazardous materials and equipment management	703a	EC.1.3, EC.2.3, EC.1.6.1, EC.2.9.3	CII.7j,4,5 CIII.6a4,5 HHII.8c6*	* related to telemedicine

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
			HHII.8d*	
Compliance with OSHA hazardous communication standard	703b	EC.1.3, EC.2.3, LD.5	CIII.6a,4,5	JCAHO does not include the specific OSHA standard, but includes applicable law and regulations
Education of client re: hazardous materials, oxygen in the client's home	703c	EC.1.3, EC.2.3, PF.3.8, PF.3.11	CII.7k3	
Variance reporting	704a,b	EC.4.1, EC.4.2	CII.7I	
Utilizing data from variance reports	704c	EC.4.3	CII.7I	
Use of CLIA waived tests in organization	No standard	TX.11	HHII.5	
Personnel are identified who can perform waived tests under CLIA waiver	No standard	TX.11.1	HHII.5a	
Training of personnel who conduct waived tests	No standard	TX.11.2	HHII.5a	
Policies and procedures for waived tests	No standard	TX.11.3	HHII.5a,b,c,e	
Quality control checks for waived tests	No standard	TX.11.4	HHII.5a	
Manufacturer's recommendations are followed for waived tests	No standard	TX.11.4.1	HHII.5a	
Quality control records are maintained for waived tests	No standard	TX.11.4.2	HHII.5e	
The organization plan for and supports the provision of patient education activities	No standard	PF.1	CII.1b16	
The organization identifies resources for patient education	No standard	PF.1.1	CII.1b16	
Patient education is coordinated and consistent among staff	No standard	PF.2	CII.1b16	
Section 800 - Scope of Services				JCAHO does not distinguish between disciplines. All standards are applicable to all disciplines
Home Care Aide/Home Management Services				
Qualified aide provided aide services	801,a	HR.3.1	HHIII.1c HHIII.1d	
There are written policies for aide services	802,a	LD.10	HHII.1b.3* HHII.1b.4* HHII.1b.5*	*CHAP spells out duties of the home health and personal care aide and homemaker/chore worker. However, ACHC, JCAHO do not.
Aide/home management services are supervised by qualified personnel	803,a,b	HR.3.2	HHII.4I HHIII.1e	
There is professional oversight when paraprofessionals supervise aide/home	803c	HR.3.2	HHII.1b.k	

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
management services				
Aide/home management services are provided in accordance with a written plan of care	804	TX.1.4	HHII.4l HHII.4m HHII.4n	
Aide/home management plan of care is based on identified client need	804a	PE.2, TX.1, TX.1.1, TX.1.2, TX.1.3, TX.2	No standard	
Physician orders are obtained for aide services as required	804b	TX.2	HHII.4h	
Client participates in plan of care for aide/home management services	804c	RI.2, RI.2.1 CC.3.1	HHII.4o	
Aide/home management services are directed toward goals	804d	TX.1.2	No standard	
Aide/home management services follow transfer and discharge policies	804f,g	CC.5, CC.5.1, CC.5.2, CC.6, IM.7.2	No standard	
Nursing Services				
Qualified nurses provide nursing services	805,a	HR.3.1	HHII.1	
There are written policies for nursing services	806,a	LD.10	HHII.1	JCAHO expects policies for all service areas
Nursing services are provided according to the plan of care with 24-hour nurse availability	806b	TX.1.4, TX.2, CC.2	HHII.1b HHII.2*	*24 hour/7 days week coverage is extended in a broader definition by CHAP standard
Qualified personnel supervise nursing services	807	HR.3.2	HHIII.1e	
Licensed Practical Nurses are supervised by a Registered Nurse	807b	No standard	HHI.1b. k HHIII.1e.8,9	
Nursing care is ordered by a physician, and provided in accordance with the plan of care	808,a	TX.1.1, TX.1.2, TX.1.3, TX.2	HHII.1b.b,c HHIII.4 HHII.4b,4b1,4c	
Client assessment for need and participation in plan of care	808b,c	PE.2, RI.2, RI.2.1 CC.3.1	HHII.4d CI.6c,6,7,8 HHII.1b.1a	
Nursing care is directed at client goals	808d	TX.1.2	HHII.1b.j	
Nursing care is evaluated every 60 days and a report is submitted to physician	808e	CC.4.1 TX.4	HHII.1b.1i,1j	
Nursing follows transfer and discharge procedures	808,f, g	CC.5, CC.5.1, CC.5.2, CC.6, IM.7.2	HHII.1b.1l	
Administration of pharmaceuticals and	809	TX.6, LD.5,	HHI.2a	

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
medical treatments per law, regulations and policies		LD.10.1	HHII.6,6b,d	
Medication administration policies and procedures	809a	TX.6	CII.1b9 HHII.6,b,d	
The organization has a process for using investigational medications	No standard	TX.6.4	HHII.6d4	
Nurse assesses client medications	809b	TX.6.1, TX.6.2, TX.6.3, TX.7, TX.7.1, TX.7.2	HHII.6a	
Written guidelines for training and education of nursing staff administering pharmaceuticals	809c	HR.3.1, HR.4 HR.6	CII.1c3	
Adverse drug reaction policies	809d	TX.6.5	HHII.6c	
Physical Therapy Services				
Qualified physical therapists provide therapy services	810,a	HR.3.1 TX.12.1	HHII.1c	
There are written policies for physical therapy services	811,a	LD.10	HHII.1	JCAHO expects policies for all service areas
Qualified personnel supervise physical therapy services	812	HR.3.2	HHIII.1e.4,8,9	
A physical therapy assistant is supervised by a licensed physical therapist	812,a	No standard	HHII.1c.2 HHIII.1e.4,8,9	
Physical therapy is ordered by a physician, and provided in accordance with the plan of care	813,a	TX.1.1, TX.1.2, TX.1.3, TX.2	HHII.1c.1b,1e,1f,1i* HHIII.4.,4b,4c	*CHAP is more detailed
Client assessment for need and participation in plan of care	813,b,c	PE.2, PE.9 TX.12,TX.12.2 TX.12.3,TX.12.4 RI.2, RI.2.1 CC.3.1, PF.3.5	CII.1b8 HHII.1c.1a,c,g,* HHII.3d HHII.3d4 HHII.4.a	*CHAP is more detailed
Physical therapy care is directed at client goals	813d	TX.1.2 TX.12.5	HHII.1c,1d	
Physical therapy is evaluated every 60 days and a report is submitted to physician	813e	CC.4.1 TX.4	HHII.1c.1j	
Physical therapy services follow transfer and discharge procedures	813,f, g	CC.5, CC.5.1, CC.5.2, CC.6, IM.7.2	HHII.1c.m	
All therapy treatments are administered in accordance with law, regulations and	814,a	LD.5, LD.10.1	HHI.2a HHII.1	

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
policies				
Written guidelines for training and education of physical therapy staff administering special procedures	814,b	HR.3.1, HR.4 HR.6	CII.1c3	
Occupational Therapy Services				
Qualified occupational therapists provide therapy services	815,a	HR.3.1 TX.12.1	HHII.1c	
There are written policies for occupational therapy services	816,a	LD.10	HHII.1	JCAHO expects policies for all service areas
Qualified personnel supervise occupational therapy services	817	HR.3.2	HHIII.1e.4,8,9	
A occupational therapy assistant is supervised by a licensed physical therapist	817,a	No standard	HHII.1c.2 HHIII.1e.4,8,9	
Occupational therapy is ordered by a physician, and provided in accordance with the plan of care	818,a	TX.1.1, TX.1.2, TX.1.3, TX.2	HHII.1c.1b,1e,1f,1i* HHII.4.,4b,4c	* CHAP more detailed
Client assessment for need and participation in plan of care	818b,c	PE.2, PE.9,TX.12 TX.12.2,TX.12.3 TX.12.4,RI.2, RI.2.1 CC.3.1,PF.3.5	CII.1b8 HHII.1c.1a,c,g,* HHII.3d HHII.3d4 HHII.4a	* CHAP more detailed
Occupational therapy care is directed at client goals	818d	TX.1.2 TX.12.5	HHII.1c,1d	
Occupational therapy is evaluated every 60 days and a report is submitted to physician	818d,e	CC.4.1 TX.4	HHII.1c.1j	
Occupational therapy services follow transfer and discharge procedures	813f, g	CC.5, CC.5.1, CC.5.2, CC.6, IM.7.2	HHII.1c.m	
All therapy treatments are administered in accordance with law, regulations and policies	819,a	LD.5, LD.10.1	HHI.2a HHII.1	
Written guidelines for training and education of physical therapy staff administering special procedures	819,b	HR.3.1, HR.4 HR.6	CII.1c3	
Speech Therapy Services				
Qualified speech-language-pathologist s (SLP) provide therapy services	820,a	HR.3.1 TX.12.1	HHII.1d	
There are written policies for SLP therapy services	821,a	LD.10	HHII.1	JCAHO expects policies for all service areas
Qualified personnel supervise SLP therapy	822	HR.3.2	HHIII.1e.4,8,9	

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
services				
A speech therapy assistant is supervised by a licensed SLP	822a	No standard	HHIII.1e.4,8,9	
Speech therapy is ordered by a physician, and provided in accordance with the plan of care	823,a	TX.1.1, TX.1.2, TX.1.3, TX.2	HHII.1d.,3,5 HHII.4,4b,4c	
Client assessment for need and participation in plan of care	823,b,c	PE.2, PE.9 TX.12 TX.12.2 TX.12.3 TX.12.4 RI.2, RI.2.1 CC.3.1	CII.1b8 HHII.1d.1 HHII.3c,d HHII.3d4 HHII.4a	
Speech therapy care is directed at client goals	823d	TX.1.2 TX.12.5	HHII.1d.,2,4	
Speech therapy is evaluated every 60 days and a report is submitted to physician	823e	CC.4.1 TX.4	HHII.1d.9	
Speech therapy services follow transfer and discharge procedures	823,f, g	CC.5, CC.5.1, CC.5.2, CC.6, IM.7.2	HHII.1d.11	
All therapy treatments are administered in accordance with law, regulations and policies	824,a	LD.5, LD.10.1	HHI.2a HHII.1	
Written guidelines for training and education of speech therapy staff administering special procedures	824,b	HR.3.1, HR.4 HR.6	CII.1c3	
Medical Social Services				
Qualified medical social workers provide MSW services	825,a	HR.3.1	HHII.1e	
There are written policies for social work services	826,a	LD.10	HHII.1	JCAHO expects policies for all service areas
Qualified personnel supervise social work services	827,a	HR.3.2	HHIII.1e.,4,9	
A medical social work assistant is supervised by a Masters prepared social worker	827b	No standard	No standard	
Social work services are ordered by a physician, and provided in accordance with the plan of care	828,a	TX.1.1, TX.1.2, TX.1.3, TX.2, PF.3.6	HHII.1e.3 HHII.1e.5,8 HHII.4,4b,4c	
Client assessment for need and participation in plan of care	828,b,c	PE.2, RI.2, RI.2.1	CII.1b8 HHII.1e1	

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
		CC.3.1	HHII.3c,d HHII.3d4 HHII.4a	
Social work services are directed at client goals	828d	TX.1.2	HHII.1e.7	
Social work services are evaluated every 60 days and a report is submitted to physician	828e	CC.4.1 TX.4	HHII.1e.7	
Social work services follow transfer and discharge procedures	828,f, g	CC.5, CC.5.1, CC.5.2, CC.6, IM.7.2	HHII.1e.9	
All social work services are administered in accordance with law, regulations and policies	829,a	LD.5, LD.10.1	HHI.2a HHII.1	
Written guidelines for training and education of social work staff administering special procedures	829,b	HR.3.1, HR.4 HR.6	CII.1c3	
Infusion Nursing Services				JCAHO and CHAP do not distinguish nursing and infusion nursing as separate clinical groups in the home health manuals. JCAHO standards apply to all disciplines.
Qualified nurses provide infusion nursing therapy services	830,a			
All required licenses or permits are current and displayed	830b			
There are written policies for infusion nursing services	831,a			
Infusion nursing services are provided according to the plan of care with 24-hour nurse availability	831b			
Qualified personnel supervise infusion therapy nursing services	832,a			
Licensed Practical Nurses are supervised by a Registered Nurse	832b			
Nursing care is ordered by a physician, and provided in accordance with the plan of care	833,a			
Client assessment for need and participation in plan of care	833,b, c			
Infusion nursing care is directed at client goals	833d			

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
Infusion nursing care is evaluated related to goals and communicated to physician	833e			
Infusion nursing services follow transfer and discharge procedures	833,f, g			
All pharmaceuticals are administered in accordance with law, regulations and policies	834,a			
Nurse assesses client medications	834b			
Written guidelines for training and education of nursing staff administering pharmaceuticals	834c			
Adverse drug reaction policies	834d			
Pharmacy Services				See JCAHO manual for home care pharmacy services for the following standards. These are not scored as part of home health. CHAP does not include pharmacy in the home health manual.
Pharmacy services provided consistent with law, regulations and recognized standards of practice and policies	835,a	TX.3, LD.5 LD.10.1		
Written policies describe pharmacy services	836,a	LD.10		JCAHO expects policies for all service areas in general
Pharmacy services are provided according to the plan of care and available 24/7	836b	TX.1.4, TX.2, TX.5, TX.5.6		
Qualified personnel supervise pharmacy services. A pharmacist supervises pharmacy technicians.	837a,b	TX.3, HR.3.2		
Pharmaceutical care is ordered by a physician, and provided in accordance with the plan of care	838,a	TX.1.1, TX.1.2, TX.1.3, TX.2		
Client assessment for need and participation in plan of care	838,b, c	PE.2, RI.2, RI.2.1 CC.3.1		
Pharmacy services are directed at client goals	838d	TX.1.2		
Pharmacy services follow transfer and discharge procedures	838e	CC.5, CC.5.1, CC.5.2, CC.6, IM.7.2		
Administration of pharmaceuticals and medical treatments is in accordance with applicable laws, regulations and policies	839	TX.6, LD.5, LD.10.1		

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
A licensed pharmacist reviews client medication prior to dispensing	839a	TX.5.2, TX.5.2.1, TX.5.2.2, TX.5.3 TX.6.1, TX.6.2, TX.6.3, TX.7, TX.7.1, TX.7.2		
Written guidelines for training and education of pharmacy staff preparing pharmaceuticals	839c	HR.3.1, HR.4 HR.6		
Adverse drug reaction policies	839d	TX.6.5		
Pharmacy records include lot numbers and expiration dates, product formulation	840,a, b	TX.5.3		
Preparation and compounding of medications	841	TX.5.1		
Qualified personnel prepare and compound medications	841a	HR.3.1, HR.4		
Compounding environment and procedures, maintenance and testing of equipment	841b,c, d	TX5.1, TX.5.2, EC.2.9.3, EC.3.1		
Storage of pharmaceuticals	842a,b, c	EC.3.1		
Access to library and reference materials	843,a	IM.9, IM.91		
Clinical Respiratory Care				JCAHO standards for Respiratory therapy are included in the manual for HME and not the home health manual.
Qualified personnel provide respiratory care services	844,a	HR.3.1	HHII.1g	
There are written policies for physical therapy services	845,a	LD.10	HHII.1	JCAHO expects policies for all service areas
Respiratory services are provided according to the plan of care with 24-hour availability	845b	TX.1.4, TX.2, CC.2	HHII.2*	*24 hour/7 days week coverage is extended in a broader definition by CHAP standard
Qualified personnel supervise respiratory care services	846,a	HR.3.2	HHIII.1e.4, 9	
Respiratory care services are ordered by a physician, and provided in accordance with the plan of care	847,a	TX.1.1, TX.1.2, TX.1.3, TX.2	HHII.1g.2 HHII.1g.3 HHII.4,4b.,4c	
Client assessment for need and participation in plan of care	847,b, c	PE.2, RI.2, RI.2.1 CC.3.1	HHII.1g.1 HHII.1g.10	
Respiratory care is directed at client goals	847d	TX.1.2	HHII.1g.7	
Respiratory care is evaluated related to	847e	TX.4	HHII.1g.9	

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
goals				
Respiratory care services follow transfer and discharge procedures	847,f, g	CC.5, CC.5.1, CC.5.2, CC.6, IM.7.2	HHII.1g.8	
All therapy treatments are administered in accordance with law, regulations and policies	848,a	LD.5, LD.10.1	HII.2a HHII.1	
A respiratory care practitioner reviews client medications	848b	TX.6.1, TX.6.2, TX.6.3, TX.7, TX.7.1, TX.7.2	HHII.6a	
Written guidelines for training and education of physical respiratory care staff administering special treatments.	848c	HR.3.1, HR.4 HR.6		
Adverse drug reaction policies	848d	TX.6.5	HHII.6c	
Home Medical Equipment (HME) Services				CHAP does not include HME in home health standards. JCAHO includes some HME standards in their home health manual. Other HME standards specific for HME are in the manual for HME.
Qualified personnel provide HME services	849,a	HR.3.1		
There are written policies for HME services	850,a	LD.10		JCAHO expects policies for all service areas
Emergency HME services are provided with 24-hour /7days per week.	850b	EC.1.6.4.1 EC.1.6.4.2		
Qualified personnel supervise HME services	851,a	HR.3.2		
HME is ordered by a physician, and provided in accordance with the plan of care	852,a	TX.1.1, TX.1.2, TX.1.3, TX.2		
Client assessment for need and participation in plan of care	852,b, c	PE.2 RI.2, RI.2.1 CC.3.1		
HME services are directed at client goals	852d	TX.1.2		
HME services are evaluated related to goals	852e	TX.4		
HME services follow transfer and discharge procedures	8523,f, g	CC.5, CC.5.1, CC.5.2, CC.6, IM.7.2		
All HME services are provided in accordance with law, regulations and policies	853,a	LD.5, LD.10.1		

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
HME staff implement written policies regarding the set-up and delivery of equipment	853b	EC.1.6.1 EC.1.6.3		
There are written policies for the maintenance and repair of medical equipment	853c	EC.2.9.3		
There are written policies related to tracking of equipment and recalls	853d	EC.1.6.1 EC.2.6.1.1		
There are written policies for handling soiled and contaminated equipment	853e	EC.1.6.2		
There are written polices relating to back-up systems	853f	EC.1.6.4		
Written guidelines for training and education of HME staff	853g	HR.3.1, HR.4 HR.6		
Rehabilitation Technology Supplier (RTS)				CHAP does not include this service in the home health standards.
Qualified personnel provide Rehabilitation Technology Supplier services	854,a	HR.3.1		
There are written policies for rehabilitation technology services	855,a	LD.10		JCAHO expects policies for all service areas
Qualified personnel supervise rehabilitation technology services	856,a	HR.3.2		
RTS services are is ordered by a physician, and provided in accordance with the plan of care	857,a	TX.1.1, TX.1.2, TX.1.3, TX.2		
Client assessment for need and participation in plan of care	857,b, c	PE.2 RI.2, RI.2.1 CC.3.1		
RTS services are directed at client goals	857e	TX.1.2		
RTS services are evaluated related to goals	857f	TX.4		
RTS services follow transfer and discharge procedures	857,f, g	CC.5, CC.5.1, CC.5.2, CC.6, IM.7.2		
All RTS services are provided in accordance with law, regulations and policies	858,a	LD.5, LD.10.1		
RTS staff implement written policies regarding the set-up and delivery of equipment	858b	EC.1.6.1 EC.1.6.3		
There are written policies for the	858c	EC.2.9.3		

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
maintenance and repair of RTS equipment				
There are written policies related to tracking of equipment and recalls	858d	EC.1.6.1 EC.2.6.1.1		
There are written policies for handling soiled and contaminated equipment	858e	EC.1.6.2		
RTS provides quality products and services on site and via a variety of client options	859,a, b	No standard		
RTS provides products for testing and demonstration	859c	No standard		
RTS provides written warranties	859d	No standard		
No comparable standards to crosswalk the following standards				
Patient right to appropriate assessment and management of pain		RI.2.4		
Assessment of prenatal and postpartum patients		PE.6		
Assessment of infants, children and adolescents		PE.7		
Assessment of patients receiving behavioral health care		PE.8		
Patients identified at nutritional risk receive additional nutritional assessments		PE.10		
Patient with pain receive a comprehensive pain assessment		PE.11		
Patient care and services are provided in accordance with acceptable standards of practice.		TX.3		
Care of the dying patient optimizes comfort and dignity		TX.3.1		
Nutritional care planning		TX.8		
Process for preparation, storage and distribution, administration of nutritional therapy		TX.8.1		
Safe, accurate, timely distribution of patient's nutrition therapy		TX.8.2		
Safe, accurate, timely administration of patient's nutrition therapy		TX.8.3		
Each patient's nutrition status is monitored on an ongoing basis		TX.8.4	HHI.1f*	*CHAP standard is specific to nutrition services provided by a dietician. Neither ACHC nor JCAHO specify nutrition services

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
				by a dietician.
Provision of appropriate nutrition therapy when diets are altered		TX.8.5		
The patient is educated about nutrition and diet		PF.3.2		
The patient is educated about pain and pain management		PF.3.4		
Patient/family is educated when appropriate about the use of restraints		PF.3.13		JCAHO refers to both physical and chemical restraints
The patient receives care from a limited number of staff		CC.3.2		
Leaders provide for a uniform level of care throughout the organization		LD.6.1		
The organization plans for and implements plan for managing medical equipment		EC.1.6, EC.2.6		Example: infusion pumps
The organization plan for and implements a plan for managing utilities		EC.1.7, EC.2.7		
Operational components of the environment are maintained, tested and inspected		EC.2.9		
Medical equipment is maintained, tested and inspected		EC.2.9.3		Example: Infusion pumps
Utility systems are maintained, tested and inspected		EC.2.9.4		
When changes in patient assignment occur, staff are oriented to the patient's needs		HR.5.1		
Patient care is not negatively effected when staff request not to participate in an aspect of patient care		HR.8		
The necessary expertise and tools are available for the analysis and transformation of data into information		IM.4		
Leadership informs the governing body and staff of current organizational, community and industry trends			CI.5e12	
Clinical staff members have access to policies and procedures.			CII.1e	
A positive organizational climate is maintained			CIII.1f	
Exit interview process			CIII.1g	

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
Staff enhance their job performance through integration of new knowledge and skills			CIII.1v	
Methodologies for developing budget, budget used to forecast financial successes and challenges			CIII.3e	
Adequate space and privacy provided to employees			CIII.6a6*	* Also refers to clients - see under section addressing patient rights
Facilities are barrier free and special arrangements are made to provide access as needed			CIII.6a7	
Strategic planning reflects mission and purpose and includes a comprehensive evaluation of internal and external environments			CIV.1	
The organization identifies and quantifies potential financial and operational risks to provide reasonable assurance of fulfilling mission and purpose.			CIV.3	
The organization identifies and reaches market segments or populations in need of it's care and services			CIV.4	
The organization contributes to expansion of knowledge in community based health care organizations			CIV.6	
Research initiatives			CIV.7	
Corporate climate of innovation and direction for the future			CIV.8	
Innovation and leadership skills			CIV.9	
Home health services include part-time or intermittent nursing services or other therapeutic service			HHII.1a	
Nursing includes preventive and rehabilitative care, health promotion, disease prevention and client/family independence			HHII.1b.1e, n, o	
Personal care Aides, home maker/chore duties			HHII.1b.4, 5	
Nutrition services provided by a registered dietitian			HHII.1f	
Physician services and responsibilities			HHII.1h, i	

DESCRIPTION OF STANDARD	ACHC	JCAHO	CHAP	COMMENTS
Accessibility to services after hours, staffing after hours, hours documented and available to clients			HHII.2a,b,c	
Telemedicine Program requirements			HHII.8	
OASIS assessment, data and transmission			HHII.4e,4f,4g	
Home health management team fosters innovation and leadership skills to industry related activities.			HHIV.2	
The following standards are included by JCAHO for pharmacy services				JCAHO standards from the Home Care Pharmacy Manual
Delivery process for equipment is appropriate to meet patient needs		EC.1.6.1		Example: Delivery of infusion pumps
Equipment is appropriately set-up in the patient's residence.		EC.1.6.3		
Emergency maintenance, replacement or back-up equipment is provided.		EC.1.6.4		
24-hour emergency services are provided when equipment malfunction may threaten a patient's health.		EC.1.6.4.1		
A back-up system is provided when equipment malfunction may threaten a patient's life		EC.1.6.4.2		
Equipment is received and stored appropriately at organization's site		EC.2.6.1		
Process for inventory includes manufacturer, model, serial number of equipment		EC.2.6.1.1		
The organization identifies medications available for prescribing or ordering		TX.5		
Pharmaceutical issues are considered in evaluating, selecting and using various methods for administering medications		TX.5.2.3		Example: infusion control devices
Medications and supplies are delivered to the correct patient		TX.5.5		