In response to concerns regarding The Joint Commission’s stance on pain management, David W. Baker, MD, MPH, FACP, executive vice-president, Healthcare Quality Evaluation, earlier this year released a statement on the matter.*

“In the environment of today’s prescription opioid epidemic, everyone is looking for someone to blame,” Dr. Baker wrote. “Often, The Joint Commission’s pain standards take that blame. We are encouraging our critics to look at our exact standards, along with the historical context of our standards, to fully understand what our accredited organizations are required to do with regard to pain.”

**The Joint Commission’s pain standards**

Dr. Baker noted that The Joint Commission first established standards for pain assessment and treatment in 2001 in response to the national outcry about the widespread problem of undertreatment of pain. He also noted that The Joint Commission’s current standards require health care organizations to establish policies regarding pain assessment and treatment, as well as to conduct educational efforts to ensure compliance.

“The standards do not require the use of drugs to manage a patient’s pain; and when a drug is appropriate, the standards do not specify which drug should be prescribed,” he noted in the statement.

Dr. Baker further explained that The Joint Commission’s pain standards were designed to address a serious, intractable problem in patient care that affected millions of people, including inadequate pain control for both acute and chronic conditions.

“The standards were designed to be part of the solution,” he wrote. “We believe that our standards, when read thoroughly and correctly interpreted, continue to encourage organizations to establish education programs, training, policies, and procedures that improve the assessment and treatment of pain without promoting the unnecessary or inappropriate use of opioids.”
The foundational standards call for hospitals to engage in the following activities:

- Educate all licensed independent practitioners on assessing and managing pain
- Respect the patient’s right to pain management
- Assess and manage the patient’s pain

Requirements for what should be addressed in a health care organization’s policies include the following:

- The hospital conducts a comprehensive pain assessment that is consistent with its scope of care, treatment, and services and the patient’s condition.
- The hospital uses methods to assess pain that are consistent with the patient’s age, condition, and ability to understand.
- The hospital reassesses and responds to the patient’s pain based on its reassessment criteria.
- The hospital either treats the patient’s pain or refers the patient for treatment. Treatment strategies for pain may include pharmacologic and nonpharmacologic approaches. Strategies should reflect a patient-centered approach and consider the patient’s current presentation, the health care providers’ clinical judgment, and the risks and benefits associated with the strategies, including potential risk of dependency, addiction, and abuse.

Dr. Baker also addressed five misconceptions that are commonly associated with The Joint Commission’s pain standards, as follows:

- **Misconception 1:** The Joint Commission endorses pain as a vital sign
- **Misconception 2:** The Joint Commission requires pain assessment for all patients
- **Misconception 3:** The Joint Commission requires that pain be treated until the pain score reaches zero
- **Misconception 4:** The Joint Commission standards push doctors to prescribe opioids
- **Misconception 5:** The Joint Commission pain standards caused a sharp rise in opioid prescriptions

The entire statement, including elaboration of the five misconceptions and a video of Dr. Baker debunking the pain standard myths, is available on [The Joint Commission’s website](http://www.jointcommission.org/topics/pain_management.aspx).

**Disclaimer**

The thoughts and opinions expressed in this column are solely those of Dr. Pellegrini and do not necessarily reflect those of The Joint Commission or the American College of Surgeons.