



Joint Commission International Accreditation and Certification Policies
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General Postsurvey Policies

Updated 19 Sept 2018

General Postsurvey Policies

Revision of the Official Survey Findings Report

Purpose. Provide a consistent, fair, and thorough process for reviewing, analyzing, and determining whether revisions in the survey findings report requested by the organization are warranted and appropriate.

Policy

1. An organization may submit a request for JCI Accreditation's evaluation of whether a revision(s) to a survey finding(s) or score(s) identified on the Preliminary or Final survey findings report issued by the JCI Central Office is warranted. The organization has 10 calendar days from receipt of the Survey Findings Report to request such revision(s).
2. The organization's request must be submitted in writing to JCI Accreditation, by email, fax, or post; verbal requests will not be accepted.
3. Material submitted to support each requested revision(s) is limited to facts in existence at the time of the onsite survey activity. Evidence of corrective action taken in response to findings identified during the onsite survey (full, follow-up, for-cause, or other survey) will not be considered.
4. JCI Accreditation must complete the review and communicate the results to the organization within 20 calendar days after the request was received.
5. If the review outcome alters previously identified JCI Decision Rule violations that may or may not have led to a follow-up survey visit, the decision will be appropriately adjusted.
6. If the resulting revision(s) alters the organization's currently existing accreditation status, the recommendation is taken to the Accreditation Committee for a final decision. The organization has the right to request that JCI accreditation initiate a formal appeal process when it is not satisfied with the outcome of the internal review. The notice from the organization to appeal the outcome must be received by JCI accreditation within 10 days after the results of the internal review process were communicated to the organization (*see* Appeal of Decisions When JCI accreditation Is Denied or Withdrawn).

The Accreditation/Certification Decision (Decision Rules)

The final accreditation or certification decision is based on an organization's compliance with JCI's accreditation or certification standards. Organizations do not receive a numeric score as part of the final accreditation/certification decision. When an organization successfully meets JCI's requirements, it will be awarded an accreditation decision of Accredited or the certification decision of Certified. This decision indicates that an organization is in compliance with all applicable standards and International Patient Safety Goals (IPSG) at the time of the initial or triennial full survey or at the conclusion of a focused survey conducted within 120 days subsequent to the initial or triennial full survey. The JCI Accreditation Program may request the submission of a SIP, which must be accepted by the JCI Accreditation Program, or the status of Accredited could be removed.

Postsurvey Compliance Process

After an organization receives an Accredited or Certified decision, JCI accreditation requests the organization to complete a Strategic Improvement Plan (SIP) for all "not met" and selected "partially



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met” findings that could impact patient safety and quality. The SIP is due within 45 days of receiving the Official Survey Findings Report. JCI accreditation reviews and accepts the plan; if the plan is not accepted, the organization has another 30 days to resubmit an acceptable plan; when the second SIP submission is not accepted, the organization is assigned At Risk for Denial of Accreditation/Certification classification and scheduled for a followup survey. If an acceptable SIP is not submitted by 120 days, JCI Accreditation recommends to the Accreditation Committee that the organization’s accreditation/certification be withdrawn. (see At Risk for Denial of Accreditation/Certification Policy)

Information on Accreditation/Certification Status Available to the Public

JCI accreditation is committed to making relevant and accurate information about surveyed organizations available to the public. Information about an organization’s performance not only helps practitioners improve their services but also helps educate users of the organization. Such information may also help patients and payers make informed choices in selecting health care organizations and/or practitioners.

However, it is important that confidentiality be maintained for certain information to encourage openness in the accreditation or certification process. This openness facilitates improvement of the quality of health care to benefit the public. Please refer to JCI accreditation’s Confidentiality Policy for specific information on this issue.

Accreditation/Certification Award Display and Use

JCI accreditation provides each organization with three certificates of accreditation or certification at the time of initial accreditation or certification and at the time of accreditation or certification renewal. There is no charge for the certificate. Additional copies of certificates may be available by contacting JCI Accreditation. The certificate and all copies remain JCI accreditation’s property. They must be returned if

- the organization is issued a new certificate reflecting a name change; or
- the organization’s accreditation or certification is withdrawn or denied for any reason.

An organization accredited or certified by JCI accreditation must be accurate in describing to the public the nature and meaning of its accreditation or certification award. Therefore, an organization must not misrepresent its accreditation or certification status or the facilities and services to which the accreditation or certification award applies. JCI Accreditation will supply each organization receiving accreditation or certification with appropriate guidelines for announcing the accreditation or certification award.