



Updated June 21, 2018

## General Presurvey Policies

### General Eligibility Requirements for Survey

Any health care organization may apply for JCI accreditation if it meets the following requirements:

- The organization is located outside of the United States and its territories.
- The organization is currently operating as a health care provider in the country, is licensed to provide care and treatment (if required).
- The organization provides services addressed by the current JCI accreditation standards.
- The organization assumes, or is willing to assume, responsibility for improving the quality of its care and services.
- The organization is open and in *full operation*, admitting and discharging a volume of patients that will permit the complete evaluation of the implementation and sustained compliance with all current JCI accreditation standards.
- The organization meets the conditions described in the current Accreditation Participation Requirements (APRs).

Academic medical center hospital applicants must meet each of the criteria above in addition to the following three criteria:

1. The applicant hospital is organizationally or administratively integrated with a medical school.
2. The applicant hospital is the *principal site* for the education of both *medical students* (undergraduates) and postgraduate medical specialty *trainees* (**for example**, residents or interns) from the medical school noted in criterion 1.
3. At the time of application, the applicant hospital is conducting *medical research* with approval and oversight by an Institutional Review Board (IRB) or research ethics committee.

### Purpose of Accreditation Surveys

All inpatient and outpatient clinical services, units, and departments identified in the E-App are available for a comprehensive evaluation against all relevant JCI standards for organizations currently in effect, consistent with JCI Accreditation's normal survey process for the size and type of organization (see, **for example**, the current JCI hospital survey process guide), such as

- patient tracer activities, including individual patient and system tracers;
- open and closed medical record review;
- direct observation of patient care processes;
- interviews with patients; and
- interviews with medical students/trainees.
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The on-site survey process, as well as continued self-assessment, helps the organizations identify and correct problems and improve the quality of care and services. In addition to evaluating compliance with standards, their intent statements and the International Patient Safety Goals, surveyors spend time in providing education in support of the organization's quality improvement activities.



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**Scope of JCI Accreditation Surveys**

The scope of the JCI accreditation survey includes all standards-related functions of an applicant organization and all patient care settings. Applicable standards are selected by JCI accreditation from this manual based on the scope of services provided by an organization applying for survey.

The on-site survey will consider specific cultural and/or legal factors that may influence or shape decisions regarding the provision of care and/or policies and procedures in an organization.

**Outcomes of JCI Accreditation Surveys**

The Accreditation Committee of JCI makes accreditation decisions based on the findings of the survey. An organization can receive one of the following two accreditation decisions:

**Accredited or Accreditation Denied.** These accreditation decisions are based on whether or not the organization meets the decision rules. For a description of the decision rules, please see the Survey Process Guide or access the rules on the JCI website.

**JCI Accreditation Awards**

To gain accreditation, organizations must demonstrate acceptable compliance with all standards and achieve a minimal numerical score on these standards as identified in the decision rules. Accredited organizations receive an Official Survey Findings Report and award certificate. The report indicates the level of compliance with JCI accreditation standards achieved by the organization.

**Length of JCI Accreditation Awards**

An accreditation award is valid for three years unless revoked by JCI accreditation. The award is retroactively effective on the first day after JCI accreditation completes the organization's initial or triennial full survey or the first day after JCI accreditation completes a follow-up survey, if required subsequent to the initial or triennial full survey. An organization's accreditation is not automatically renewed after three years. Rather, an organization seeking to continue its accreditation must again undergo a full accreditation survey, resolve any follow-up conditions, and again be found to be in satisfactory compliance with the standards and International Patient Safety Goals.