



Summary of Key Accreditation Policies

This section provides a high-level summary of Joint Commission International's (JCI's) accreditation policies for hospitals and academic medical centers. Full policies and procedures are posted on your organization's secure *JCI Direct Connect* extranet site. The policies can be grouped into the following categories:

1. Before Survey
 - Seeking JCI accreditation
 - Applying for accreditation
2. During Survey
 - The survey process
 - Cost of surveys
 - The on-site survey
3. After Survey
 - Accreditation decisions
 - Public disclosure and confidentiality
 - Maintaining accreditation
 - Accreditation renewal

Seeking JCI Accreditation

Basis of the Accreditation Process

Evaluation of compliance with the *Joint Commission International Accreditation Standards for Hospitals*, 8th Edition, is the basis of the hospital accreditation process. When accredited, hospitals are expected to demonstrate continuous compliance with current editions of the standards at all times of the accreditation cycle.

JCI publishes new standards and notifies health care organizations at least six months in advance of the effective date to provide time for hospitals to come into full compliance with the revised and new standards by the *effective date*. For hospitals seeking accreditation for the first time, the effective date indicates the date after which all surveys and accreditation decisions will be based on the new standards.

Any on-site or other accreditation-related activity (for example, videoconferences, extension surveys, for-cause surveys) or evidence of compliance submitted (for example, data, policies and procedures, root cause analyses and action plans, or self-assessments) after the effective date must be consistent with the current edition of the standards.

Accreditation Timeline

Every hospital prepares for its initial or triennial JCI on-site survey differently. A sample timeline followed by many hospitals appears below.

Before Survey:

- 24 months before survey—New initial applicants complete the initial registration process (IRP). When approved, then complete and submit the electronic application for accreditation (E-App) for survey, if ready. Obtain JCI standards and begin education on the standards and implementation of the expectations.
- Note:** Many organizations begin this process by attending one of the many educational programs JCI offers around the world. For more on the process of getting started, see the guidance offered on JCI's website.
- 9–24 months before survey—Improve practices to ensure that they meet the requirements of the standards. Train staff on these new practices. Evaluate effectiveness and refine as necessary.
- 6–12 months before survey—Assess readiness; update the electronic profile, review the E-App, submit for the initial or triennial survey, and schedule dates.
- 4–6 months before survey—Receive, complete, and sign the JCI survey contract.
- 2 months before survey—JCI Survey Team Leader contacts the hospital to determine the survey logistics and agenda.

Survey:

- Scheduled survey conducted.

After Survey:

- Within 20 calendar days after the survey—Receive accreditation decision and Official Survey Findings Report from JCI.
- Within 10 calendar days of receiving the Official Survey Findings Report, the organization may submit a written request to JCI Accreditation for a revision of the report (*see* “General Postsurvey Policies” on the JCI website).
- 6–12 months before triennial survey date—Update and submit E-App for survey and schedule survey dates.
- The timeline may be accessed on the JCI website at <https://www.jointcommissioninternational.org/pathway/>.

Applying for Accreditation

The Application Process

A hospital applying for JCI accreditation for the first time (known as *initial applicants*) may begin their accreditation journey by completing a webform available at <https://www.jointcommissioninternational.org/accreditation/jcia-contact-us/>.

Following a review of the webform, the organization will be provided with a link to submit an initial registration. Upon approval of the initial registration, the organization will be sent a login and password to *JCI Direct Connect* (*see* below) to complete and submit an E-app for review by JCI Accreditation Central Office staff. The E-App provides detailed information and key statistics that create a hospital profile needed for JCI to manage its accreditation process, develop a contract for survey, and plan the survey agenda and on-site evaluation process. The E-app should be submitted approximately 6 to 12 months prior to the survey dates requested. The E-app provides the information needed to develop a contract specifying cost, number of surveyors, and number of survey days.

Hospitals already accredited or certified apply for continued accreditation or certification via the E-App on *JCI Direct Connect* 6 to 12 months prior to the survey dates requested. The hospital must notify JCI within 30 days—or at least 30 days before the scheduled survey date—of any change to the information reported in the survey application.