

- New biomedical equipment for patient care that are used to expand the types and volume of patient care services 25% or more than was stated in the most recent E-App.
- Changes in use of patient care buildings, construction of new or expansion of patient care buildings, or the occupation of buildings that are used to expand the types and volume of patient care services 25% or more than was stated in the most recent E-App, or was not reported as a patient care location, or was not included in the scope of the previous accreditation survey
- Temporary cessation of services and/or significant reduction of patient care services/volume due to extenuating circumstances
- Intentional expansion of the organization's capacity to provide services in the absence of new, renovated, or expanded facilities by 25% or greater, as measured by patient volume, scope of services, or other relevant measures
- The addition of one or more types of health care services (for example, addition of a dialysis unit)
- Implementation of a higher level of service (for example, adding inpatient invasive diagnostic cardiology when originally providing only outpatient cardiac rehabilitation)

Extension surveys are surveys limited in scope, content, and length and designed to gather information relevant to the specific changes in the hospital. JCI will determine whether an extension survey or a full survey is required based on the changes in the scope of services being provided.

For-Cause Survey

A type of survey that is limited in scope, content and length and designed to gather information on a specific issue(s) related to a high-risk patient safety event, sentinel event, or a pattern of incidents that relate to JCI standards or Accreditation Participation Requirements (APRs). A for-cause survey may be conducted after the receipt of information regarding the occurrence of any situation, event, or series of events in an accredited/certified organization that may create a significant unsafe situation or threat to health and safety.

JCIA may conduct a for-cause survey for the following reasons:

- A concern of a potential ongoing and/or *Immediate Threat to Health or Safety* within the organization
- To confirm/investigate an applicable condition(s) that resulted in the organization being classified as Preliminary Denial of Accreditation
- To confirm accreditation eligibility status following sanctions, penalties, limitation in operations imposed by a regulatory, legal, or other authoritative body, or closure of services for a period of time
- When it becomes aware of potentially serious standards or noncompliance to APRs
- Verification of implemented adverse event, regulatory or “other” required corrective actions, effectiveness, and sustainability of those actions
- When it has other valid reasons for surveying an accredited/certified organization to determine accreditation status or capability for resuming services
- When the organization demonstrates the need for additional JCI surveillance to ensure that the organization's patients are not at risk and that the hospital's compliance with all relevant JCI standards has not been interrupted
- An initial review of a patient safety event or follow-up to an event, if it is determined that there is a potential ongoing *Immediate Threat to Health or Safety* or potentially significant noncompliance with JCI standards and/or APRs

The Survey Process

Purpose of a Survey

An accreditation survey is designed to assess a hospital's compliance with JCI standards based on the following:

- Interviews with staff and patients and other verbal information
- Observations of patient care processes

- Review of policies, procedures, clinical practice guidelines, medical records, staff records, governmental and/or regulatory compliance reports, and other documents requested from the hospital
- Review of quality and patient safety improvement data, performance measures, and outcomes
- Individual *patient tracers* (that is, evaluation of a patient's care experience through the hospital care process)
- *System tracers* of organizationwide processes (for example, medication management, infection prevention and control, hazardous materials, and waste, or other high-risk, high-/low-volume, problem-prone systems, and processes)

Preparing for Survey

JCI assigns each hospital an account manager to serve as the primary contact between the hospital and JCI. This individual assists in the coordination of the presurvey activities and is available to answer questions about the following:

- Application submission and receipt, contracting, and scheduling
- Official Survey Findings Report processing and Strategic Improvement Plans
- Status of accreditation and certification certificates
- Notifying JCI of significant changes in your organization, including how to update information in *JCI Direct Connect* and the E-App
- General JCI policies and practices and the survey process
- Concerns regarding any of JCI's processes

Scheduling the Survey

JCI and the hospital select the survey date and prepare the survey agenda together to meet the hospital's needs and the requirements for an efficient survey. To reduce surveyor travel costs, JCI makes every effort to coordinate the scheduling of surveys of other hospitals in a specific country or region.

Planning the Survey Agenda

JCI assigns each hospital a Team Leader to assist in the coordination of the survey agenda planning. The Team Leader will contact the hospital approximately eight weeks in advance of the survey to coordinate logistics for the survey and prepare a survey agenda based on the size, type, and complexity of the hospital. The agenda specifies the sites JCI surveyors will visit, the types of interviews surveyors will conduct, the staff to be interviewed, and the documents that must be provided to the surveyors.

The Survey Team

Highly qualified and experienced international surveyors perform the survey. JCI conducts surveys in the English language; however, JCI makes every effort to use surveyors fluent in the language(s) used at the organization. If JCI surveyors with the appropriate language capabilities are not available, it is the responsibility of the surveyed organization to provide qualified translators who are free from conflict of interest. A typical hospital survey team consists of a physician, nurse, and hospital administrator.

Cancellation of a Survey

JCI or a hospital may cancel a survey without penalty or damages when events such as wars, terrorism, or other similar emergencies or circumstances make it impossible, illegal, or unreasonable to go forward with a survey. Cancellation due to any of the reasons cited above must be communicated in writing as soon as possible. If the hospital cancels the survey thirty (30) or fewer days prior to the start date of the survey for any reason or reasons other than those stated above, JCI will require payment of all associated direct costs plus a cancellation fee as outlined in the signed contract. If a hospital cancels the survey more than once after the survey dates are confirmed via e-mail by JCI, JCI will also require a rescheduling fee. This rescheduling fee will increase for