



Facts about hospital accreditation

The Joint Commission has accredited hospitals for more than 60 years and today it accredits approximately 4,168 general, children's, long term acute, psychiatric, rehabilitation and specialty hospitals, and 378 critical access hospitals, through a separate accreditation program. Approximately 82 percent of the nation's hospitals are currently accredited by The Joint Commission.

Coming in 2012!

The Joint Commission and SGS Group are joining forces to offer hospitals and critical access hospitals in the United States the option of pursuing both accreditation and certification to various ISO and industry best practice standards. This program will combine The Joint Commission's modern health care quality and safety standards, survey process, and accountability performance measures with SGS management system audits. SGS, a public company, is the world's leading verification, inspection, certification, and testing company focused on providing independent certification and quality assurance services through its worldwide network of subsidiaries, branches and agencies. The ISO option can be customized. Health care organizations can pursue certification at the system or hospital level, or certify departments such as radiology, laboratory, pharmacy, food service or health information management. All areas of an organization are eligible to be certified. Hospitals have the option of selecting from a menu of certifications and testing including:

- ISO 9001 (quality management system)
- ISO 14001 (environmental management)
- ISO 27001 (information security)
- OSHAS 18001 (occupational health and safety)
- ISO 17025 (testing and calibration laboratories)
- Food safety testing and certification

The Joint Commission accreditation decision and the SGS ISO certification decision will be separate. The survey activities of SGS and The Joint Commission can be combined during the organization's routine accreditation survey approximately every three years. A surveillance or recertification audit will be conducted by SGS annually. The combined Joint Commission/SGS option will be available in 2012.

Eligibility

Any health care organization may apply for Joint Commission accreditation under the Hospital Accreditation Standards if all the following requirements are met:

- The organization is in the United States or its territories or, if outside the United States, is operated by the U.S. government, under a charter of the U.S. Congress.
- The organization assesses and improves the quality of its services. This process includes a review of care by clinicians, when appropriate.
- The organization identifies the services it provides, indicating which services it provides directly, under contract, or through some other arrangement.
- The organization provides services addressed by the Joint Commission's standards.
- If the organization uses its Joint Commission accreditation for deemed status purposes, the organization meets the Centers for Medicare & Medicaid Services definition of a "hospital."

Benefits of accreditation

Hospitals seek Joint Commission accreditation because it:

- Helps organize and strengthen patient safety efforts.
- Strengthens community confidence in the quality and safety of care, treatment and services.
- Provides a competitive edge in the marketplace.

- Improves risk management and risk reduction.
- May reduce liability insurance costs.
- Provides education on good practices to improve business operations.
- Provides professional advice and counsel, enhancing staff education.
- Provides a customized, intensive review.
- Enhances staff recruitment and development.
- Provides deeming authority for Medicare certification.
- Recognized by insurers and other third parties.
- Provides a framework for organizational structure and management.
- May fulfill regulatory requirements in select states.

Standards

Joint Commission standards address the hospital's performance in specific areas, and specify requirements to ensure that patient care is provided in a safe manner and in a secure environment. The Joint Commission develops its standards in consultation with health care experts, providers and researchers, as well as measurement experts, purchasers and consumers. For 2011, the standards-based performance areas for hospitals are:

Environment of Care	National Patient Safety Goals
Emergency Management	Nursing
Human Resources	Performance Improvement
Infection Prevention and Control	Provision of Care, Treatment, and Services
Information Management	Record of Care, Treatment, and Services
Leadership	Rights and Responsibilities of the Individual
Life Safety	Transplant Safety
Medication Management	Waived Testing
Medical Staff	

Survey process

To earn and maintain accreditation, a hospital must undergo an on-site survey by a Joint Commission survey team. The survey team can include one or more health care professionals, including a physician, nurse, life safety code specialist, or hospital administrator who has senior management level experience. Joint Commission surveys are unannounced, with a few exceptions. An organization can have an unannounced survey between 18 and 36 months after its previous full survey. For example, if an organization's last survey was January 1, 2009, it could have its survey as early as July 1, 2010 or as late as January 1, 2012 (18 to 36 months). A survey is designed to be individualized to each organization, to be consistent, and to support the organization's efforts to improve performance. During an accreditation survey, The Joint Commission evaluates an organization's performance of functions and processes aimed at continuously improving patient outcomes. This assessment is accomplished through evaluating an organization's compliance with the applicable standards in the manual, based on the following:

- Tracing the care delivered to patients
- Verbal and written information provided to The Joint Commission
- On-site observations and interviews by Joint Commission surveyors
- Documents provided by the organization

Performance measurement requirements

The Joint Commission's ORYX® initiative integrates outcomes and other performance measurement data into the accreditation process. ORYX measurement requirements are intended to support Joint Commission accredited organizations in their quality improvement efforts. In 2002, accredited hospitals began collecting data on standardized – or “core” – performance measures. In 2004, The Joint Commission and the Centers for Medicare & Medicaid Services began working together to align measures common to both organizations. These standardized common measures, called Hospital Quality Measures, are integral to improving the quality of care provided to hospital patients and bringing value to stakeholders by focusing on the actual results of care. Measure alignment benefits hospitals by making it easier and less costly to collect and report data because the same data set can be used to satisfy both CMS and Joint Commission requirements.

Hospital information available to the public

The Joint Commission has a longstanding commitment to providing meaningful information about the comparative performance of accredited organizations to the public. The Quality Check® Web site, www.qualitycheck.org, launched in 1996, fulfills this commitment. Quality Check allows consumers to search for accredited and certified organizations and it provides each organization's Quality Report. Quality Reports® include detailed information about a hospital's performance and how it compares to similar hospitals.

Cost of accreditation

Annual fees for hospitals are based on the size and the service complexity of individual hospitals and range from \$2,180 to \$37,245. Customers receive the annual fee invoice in January of each year. The on-site survey fee is billed within five days of the survey's completion. The fee billed covers the direct costs of the survey. Health systems have the option to receive a corporate orientation or corporate summation. These can be conducted by the team leader or by a selected team member. The Joint Commission Connect extranet includes a fee calculator to help estimate annual subscription billing costs for current customers. New customers and customers who desire more information, including a weighted volume worksheet for annual fees, can contact The Joint Commission's Pricing Unit at pricingunit@jointcommission.org or (630) 792-5115.

For more information

For questions about standards, contact the Standards Interpretation Group at (630) 792-5900 or standards@jointcommission.org. For questions about hospital accreditation services, call (630) 792-3007. Corporate offices for systems of accredited organizations (i.e. multi-hospital systems in all states) should call (630) 792-5778.