What Happens After Your Joint Commission Survey

Your on-site survey is an important part of the accreditation decision-making process. During the on-site survey, your survey team uses the tracer methodology and other survey techniques to identify and document areas of non-compliance with Joint Commission standards. The summary of survey findings provided to you at the conclusion of your on-site survey is confidential and does not contain an accreditation decision. Your final accreditation decision is not reached until the conclusion of the post-survey activities described in this document.

Post-Survey Activities

At the Exit Conference, the survey team will review the preliminary findings they identified during the survey. The surveyors do not recommend and are not able to predict your organization’s accreditation decision. The accreditation decision is not made until all of your organization’s post-survey activities are completed.

The survey team will electronically transmit its summary of survey findings to The Joint Commission within 48 hours.

Your organization’s summary of survey findings will undergo a comprehensive review by The Joint Commission’s Central Office staff.

Following the completion of the comprehensive review, your organization’s final summary of survey findings will be posted to your organization’s “Joint Commission Connect” extranet site. The summary will indicate which findings require an Evidence of Standards Compliance (ESC) submission within 45 days or 60 days.

Once your organization’s ESC is accepted by The Joint Commission, your accreditation decision is posted to your “Joint Commission Connect” extranet site and to Quality Check (www.qualitycheck.org).

If following review by The Joint Commission’s Central Office, your organization’s survey findings meet a decision rule for Conditional Accreditation (CA) or Preliminary Denial of Accreditation (PDA), your organization will receive detailed instructions outlining the next steps in the accreditation process. These instructions will be delivered to you via your “Joint Commission Connect” extranet site, and will be posted in conjunction with your report. Decisions of Conditional Accreditation and Preliminary Denial of Accreditation are not posted to Quality Check until the decisions are finalized by the Accreditation Committee.
What Happens After Your Joint Commission Survey

Information about the ESC process is available on your secure, confidential “Joint Commission Connect” extranet site. Also, your account representative will be able to answer any questions you have about the post-survey process.

Resources
“Guidelines for Submission of Evidence of Standards Compliance” has detailed instructions on how to provide The Joint Commission with evidence that your health care organization is in compliance with standards. To access this document:

Go to: www.jointcommission.org
Select: Accreditation Programs
Select: From the blue pull-down menu, select your accreditation program
Select: From the left navigation panel, select “Accreditation Process”
Select: Under “Post Survey,” click on “Guidelines for Submission of Evidence of Standards Compliance”

The “Joint Commission Connect” extranet includes four informative documents. Using your login and password, refer to the “Post Survey” section and review:
• Evidence of Standards Compliance
• Measure of Success
• Publicity Kit
• Surveyor Evaluations

Definitions of Joint Commission terms are in the Glossary in your Accreditation Standards Manual.

What’s New in 2009
This year, many of the changes emanating from the Standards Improvement Initiative (SII), that began in 2006, will be implemented. The manuals were reorganized, an E-dition (electronic manual) was developed, and the scoring and decision processes were refined. Also, as a result of SII, some changes have been made to the survey process:
• Your organization’s summary of survey findings looks different.
• The summary will not include an accreditation decision.
• There is no longer a Supplemental Findings section in the summary of survey findings. All findings of less than full compliance require resolution via submission of Evidence of Standards Compliance.
• Survey findings will be organized by standards chapter.

You can find out more about SII and changes to the standards, scoring and accreditation decision processes, and the survey process in the Accreditation Standards Manual or E-dition.

Contact
Please direct questions to Gail Weinberger, Director, Accreditation Policy and Administration, at 630-792-5766.