Dear Colleague,

Thank you for your interest in The Joint Commission’s Home Care Accreditation Program. Achieving Joint Commission accreditation is an unmatched recognition of your commitment to consistent, high quality care for your patients/clients, their families, your staff and the community.

This guide will provide an overview of our program; eligibility requirements, the application process, the onsite survey and our standards, as well as information regarding available resources and a list of contact numbers to call if you have additional questions.

We hope that this will provide you with the information necessary to guide you through your accreditation process decision. If you would like to speak with one of our team members regarding specific questions, please contact us by phone at 630-792-5070 or by email at homecare@jointcommission.org. We look forward to working with you soon.

Sincerely,

Margherita Labson, RN, MSHSA
Executive Director,
Home Care Accreditation Program

The Joint Commission®
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The Joint Commission Past and Present

Founded in 1951, The Joint Commission is the leader in accreditation, with more than 60 years of experience across the full spectrum of health care organizations. The Joint Commission is a non-governmental, not-for-profit organization.

The Value of Joint Commission Accreditation

The Joint Commission and its Gold Seal of Approval™ is the most widely recognized quality and safety distinction in the health care industry. Joint Commission accreditation benefits your organization by:

- **Giving you a competitive advantage** Achieving accreditation is a visible demonstration that your organization is committed to providing the highest quality services. It sets you apart from other providers in your market based on the quality of your services.

- **Assisting in recognition from insurers, associations, and other third parties** Many payers, regulatory agencies, and managed care contractors require Joint Commission accreditation for reimbursement, certification or licensure, and as a key element of their participation agreements.

- **Improving liability insurance coverage** By enhancing risk management efforts, accreditation may improve access to, or reduce the cost of liability insurance coverage. Find the latest list of liability insurers that recognize Joint Commission accreditation at: [www.jointcommission.org/liability_insurers](http://www.jointcommission.org/liability_insurers).

- **Helping organize and strengthen your improvement efforts** Accreditation encompasses state-of-the-art performance improvement concepts that help you continuously improve quality and standardize your processes of care.

- **Enhancing staff education** The accreditation process is designed to be educational. Joint Commission onsite surveyors offer suggestions and strategies that may help your organization better meet the intent of the standards and, more importantly, improve performance of day-to-day operations.
Below is a list of services accredited under The Joint Commission’s Home Care program:

- Home health agencies
- Hospice
- Personal Care/Companion Care/Non-Medical Services
- DMEPOS
- Oxygen
- Infusion
- Mail order pharmacy
- LTC pharmacy
- Specialty pharmacy

Questions about eligibility? Call us at 630-792-5070.

Requesting an Application is Easy

Application

The request for an application is available on our website at www.jointcommission.org/homecare. The application collects essential information about your organization, including ownership and management, demographics, and the types and volume of patient services provided. With this information, The Joint Commission determines the number of days required for a survey, the composition of the survey team and the services to be reviewed. The application:

- Is in an electronic format that can be accessed from any computer
- Is valid for one year from the date submitted. This allows you to submit your application and still have time to finish your preparations before the onsite survey takes place
- Allows you to select the month/year you would like the survey to take place, or specific dates you would like to avoid

Accessing and Submitting the Application

After your request is processed, you will receive an email providing log-in information to access the application (See page 7). To process your application, a nonrefundable deposit (which is applied toward your cost of accreditation), is required.

Submitting the application without the deposit will delay the scheduling of your survey. Call us at 630-792-5070 to discuss the deposit.
The cost for Joint Commission home care accreditation is determined by the number of services you provide, daily patient volumes for each service (rentals or sales of equipment for DME providers) and the number of locations from which service is provided.

- Accreditation costs include two fee components: an annual fee invoiced each year and an onsite fee, invoiced in the year in which your survey is conducted. Onsite surveys are conducted once every three years. Accreditation is awarded for a three-year period.

- Annual fees for most small, single service home care providers average $1,600 with onsite survey fees of approximately $3,240.

- Providers selecting a deemed survey option to fulfill Medicare certification requirements for home health and/or hospice will have a longer onsite survey and therefore slightly higher onsite survey fees.

Some of the complimentary services that are part of your complete accreditation package include:

- Dedicated Account Executive to guide you through the survey process
- Dedicated extranet site which conveniently houses all your Joint Commission activities in one location
- 24/7 access to our Standards “Help Desk” that can provide insight on the application of requirements in your specific setting
- Electronic version of our requirements manual, including updates
- A collaborative, onsite survey conducted by seasoned industry professionals able to share innovative best practices
- Formal Certificates of Accreditation and Certification for posting
- Newsletters to keep you informed of enhancements or updates to the survey process and requirements
- Online Media Kit with ideas to help publicize your achievement
- Marketing support via the Quality Check Website listing of accredited organizations accessed by numerous referral sources, payers and consumers
- Access to customer-only online educational tools including the Leading Practice Library

We encourage providers to contact us directly with any pricing questions. Having knowledge of your typical daily patient volume will help us to provide you with a more accurate estimate of your fees. Call us at 630-792-5070.
The Joint Commission wants your organization to be successful with accreditation. To help you prepare, we offer a variety of hands-on support and technical resources.

1 **Joint Commission Connect™**
   Joint Commission Connect™ is a personalized extranet site, dedicated to supporting your organization. Here, your organization can access the application, make fee payments, and maintain accreditation and certification expectations throughout your ongoing relationship with The Joint Commission.

2 **A Dedicated Account Executive**
   When you gain access to Joint Commission Connect™, you will be assigned an Account Executive who will:
   - Answer your questions about survey preparation and help you through each step of the process
   - Analyze your application and contact you if there are any questions or items requiring clarification
   - Update changes to your demographic information including address, contact name(s), services, etc.
   - Assist you with other Joint Commission contacts and questions
   - Support your post-survey activities

**Survey Activity Guide**
Accessible via Joint Commission Connect™ and our website, the Survey Activity Guide is dedicated to preparing you for the on-site visit and includes:

- **Survey Activity Details**: A thorough, individualized description of the specific events that comprise a typical, on-site review.

  **Sample Survey Agenda**: A helpful, hour-by-hour outline of the survey, showing you what to expect, whom to have available at your facility and what you’ll need throughout the onsite visit.

- **Ready-to-Go List**: A list of specific documents and information you’ll need for the surveyor planning sessions on day one of your survey.

**Standards Help Desk**
Call our standards help desk for information about applying specific standards to your setting. This resource is available by phone or through the Joint Commission website at www.jointcommission.org/Standards/OnlineQuestionForm.

**Standards Frequently Asked Questions (FAQs)**
Answers to FAQs for many areas of potential importance to your organization are posted on our website. You may find answers to your specific questions by checking the FAQs section of our website before calling or emailing us. Visit www.jointcommission.org/standards.
The Joint Commission’s accreditation process helps organizations improve the safety and quality of care and services. The process begins with an onsite survey that assesses compliance with Joint Commission standards. Typically, onsite surveys are conducted by one surveyor for two days and involve:

- ‘Tracing’ the patient’s experience - looking at services provided by various care providers and departments within the organization as well as ‘hand-offs’ between them
- Onsite observations and interviews with surveyors
- Review of documents provided by the organization
- Assessment of the physical facility

Your first Joint Commission accreditation survey needs to be scheduled within twelve months from the time we receive your application. In the application, you’ll indicate the date you will be ready for your initial onsite survey. The Joint Commission will then schedule the survey as soon thereafter as possible.

You can also indicate “up to” or “as many as” 15 dates that you would not like the survey to be conducted. Your account executive will work with you to schedule your survey, and you will have at least 30 days notice of the exact date that the surveyor(s) will be there.

Joint Commission surveyors are employees, not volunteers, and are experienced in the industry. Joint Commission surveyors understand the day-to-day issues that confront providers and have the hands-on expertise to help organizations resolve them. The Joint Commission organizes a surveyor, or team of surveyors, to match an organization’s needs and unique characteristics.

The collaborative, onsite education provided by surveyors offers strategies that help your organization better meet the intent of the standards and, more importantly, improve performance.

The Joint Commission strives for surveyor consistency by providing a minimum one week of initial training and a minimum of 10 days of continuing education annually to keep surveyors up-to-date on advances in quality-related performance evaluation. Part of the training is ensuring that your onsite survey is an educational process. The Joint Commission evaluates its surveyors’ performance continually throughout the year.
Standards and Other Requirements

Joint Commission standards reflect the key components to delivering consistent, safe, high quality care and service. Our *Comprehensive Accreditation Manual* contains patient-focused standards organized around healthcare functions and processes. Chapters include:

<table>
<thead>
<tr>
<th>Environment of Care</th>
<th>How safe, functional and effective the environment for patients, staff and other individuals is in the organization.</th>
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</thead>
<tbody>
<tr>
<td>Emergency Management</td>
<td>Ensures the provider has a disaster plan in place.</td>
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<tr>
<td>Human Resources</td>
<td>Processes for staff and staff management.</td>
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<tr>
<td>Infection Prevention and Control</td>
<td>How the provider identifies and reduces the risk of acquiring and transmitting infections.</td>
</tr>
<tr>
<td>Information Management</td>
<td>How well the provider obtains, manages and uses information to provide, coordinate and integrate services.</td>
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<tr>
<td>Leadership</td>
<td>Reviews structure and relationships of leadership, the maintenance of a culture of safety, quality and operational performance.</td>
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<tr>
<td>Life Safety</td>
<td>Covers requirements for ongoing maintenance of building safety requirements during and after construction.</td>
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<tr>
<td>Medication Management</td>
<td>Addresses the stages of medication use, including: selection, storage and safe management of medications, ordering, preparing and dispensing, administration, and monitoring of effect and evaluation of the processes.</td>
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<tr>
<td>National Patient Safety Goals (NPSG)</td>
<td>Specific actions healthcare organizations are expected to take in order to prevent medical errors, such as miscommunication and medication errors.</td>
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<tr>
<td>Provision of Care</td>
<td>Covers four basic areas: planning care, implementing care, special conditions, and discharge or transfer.</td>
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<tr>
<td>Performance Improvement</td>
<td>Focuses on using data to monitor performance, compiling and analyzing data to identify improvement opportunities, and taking action on improvement priorities.</td>
</tr>
<tr>
<td>Record of Care</td>
<td>Covers the planning function (components of clinical records, authentication, timeliness, and record retention) as well as documentation of items in the patient record.</td>
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<tr>
<td>Rights of the Individual</td>
<td>Informed consent, receiving information, participating in decision making, and services provided to respect patient rights.</td>
</tr>
<tr>
<td>Waived Testing</td>
<td>For CLIA-approved laboratory testing, covers: policies, identifying staff responsible for performing and supervising waived testing, competency requirements, quality control, and record keeping.</td>
</tr>
<tr>
<td>Required Written Documentation</td>
<td>Identifies elements of performance in the manual requiring written documentation. See the Required Written Documents chapter in the manual for complete details.</td>
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</table>
Accessing the Standards

E-dition (Electronic Standards Manual):
This web-based version of the standards manual can be accessed electronically. One FREE license is sent upon receipt of application and deposit. Request a 60-day trial on our website.

Comprehensive Manual (Print Version):
Printed standards manuals can be purchased at www.jcrinc.com or by calling 1-877-223-6866.

Special Accreditation Options

Deemed Status for Home Health or Hospice Centers
A home health or hospice may choose to participate in a Joint Commission accreditation survey that can be used for both Medicare certification and accreditation to ensure a timely survey. A provider seeking Medicare certification through The Joint Commission must first complete and receive verification of their 855a form from CMS before applying for accreditation. This form can be found at www.cms.gov. Additional steps regarding this special survey process can be found on our website.

System Accreditation
System accreditation awards a single accreditation decision to a home care system, usually a large organization, composed of a corporate office or a main site, and multiple sites. Under this option, the main site is visited to assess system-wide policies and functions and then a random sample of sites are visited to assess the execution of the policies and the delivery of care.

Early Survey Option
The Early Survey Option is utilized by organizations not actively caring for patients, but needing to provide evidence (to payers, state and/or federal regulators) of their intent to obtain ‘full’ accreditation.
The final accreditation decision, which is valid for approximately three years, is based on an organization’s compliance with Joint Commission standards. Accreditation decisions are awarded in one of six categories:

- Accredited
- Preliminary Accreditation
- Accreditation with Follow-up Survey
- Contingent Accreditation
- Preliminary Denial of Accreditation
- Denial of Accreditation

At the end of the onsite survey, a “Summary of Survey Findings Report” is left with the organization to identify any Requirements for Improvement (RFIs). Organizations with RFIs will have a set period of time to submit evidence to show that the organization is now in full compliance with those standards.

Tools and Resources Created for Joint Commission Customers

Joint Commission Center for Transforming Healthcare

The Joint Commission Center for Transforming Healthcare works to solve health care’s most critical safety and quality problems. With its Targeted Solutions Tool™ the Center uses a systematic approach to analyze specific breakdowns in care and their causes, and provide solutions to these problems for Joint Commission customers. Learn more about Center projects at:


The Leading Practice Library™

The Leading Practice Library offers real life solutions successfully implemented by accredited organizations that support patient safety and quality health care. The documents are cross-referenced to corresponding chapters in Joint Commission standards manuals. The Leading Practice Library can be accessed from your dedicated extranet site.

Newsletters

Sign up on our website to receive email alerts and free newsletters to keep informed of updates to our program.
### Preparation Timeline

<table>
<thead>
<tr>
<th>Joint Commission Activity</th>
<th>Your Activity</th>
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<tbody>
<tr>
<td>Upon receipt of your request for an application:</td>
<td>Staff member(s) with knowledge of your organization's services, programs, sites, and volume should complete and return the Application for Accreditation with a prepayment for initial survey.</td>
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<tr>
<td>Email message sent with access to the electronic Application for Accreditation.</td>
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</tr>
<tr>
<td>Upon receipt of your Application for Accreditation and deposit:</td>
<td>Work with your account executive to schedule your survey. It should be within 12 months of your application submission date. Log in and gain familiarity with your “Joint Commission Connect™” extranet site, and review the “Survey Activity Guide” posted there for in-depth information on what happens during an on-site survey.</td>
</tr>
<tr>
<td>• You are assigned an Account Executive.</td>
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<tr>
<td>• You will receive a complimentary electronic copy of the Comprehensive Accreditation Manual.</td>
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<tr>
<td>• You are given access to a complimentary 6-month online subscription to Perspectives: The Official Newsletter of The Joint Commission.</td>
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<tr>
<td>• You are given access to the Focused Standards Assessment (FSA) tool for use as a comprehensive pre-survey assessment.</td>
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<tr>
<td>30 days before onsite survey:</td>
<td>Confirmation of survey dates and name(s) of surveyor(s) are communicated.</td>
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<tr>
<td>Confirmation of survey dates and name(s) of surveyor(s) are communicated.</td>
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<tr>
<td>Onsite survey:</td>
<td>During the survey, staff should be available as outlined on the survey agenda (See the Survey Activity Guide posted on your Joint Commission Connect™ website).</td>
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<tr>
<td>Surveyor(s) arrive for your onsite survey. At the conclusion of the survey, you receive a copy of the summary report, which details the preliminary findings during the onsite survey.</td>
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<tr>
<td>2-10 days after survey:</td>
<td>Review any findings and make plans for corrections (submitting an Evidence of Standards Compliance report) within the specified time ranges, usually 45-60 days.</td>
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<tr>
<td>Your final report detailing your survey findings and your organization’s accreditation decision is posted on your organization’s extranet site. An email is sent to alert you that the final report has been posted. The invoice for the onsite fee is posted.</td>
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<tr>
<td>45-60 days after final report is posted:</td>
<td>For any accreditation requirements scored as partial or non-compliant, you submit your Evidence of Standards Compliance to The Joint Commission, which identifies the action taken and, if indicated, the measure(s) of success you will track over the next four months to show compliance is sustained.</td>
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<tr>
<td>The Joint Commission reviews any Evidence of Standards Compliance reports you submitted.</td>
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</table>
## Preparation Timeline

<table>
<thead>
<tr>
<th>Joint Commission Activity</th>
<th>Your Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Monthly:</strong></td>
<td>N/A</td>
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<tr>
<td><strong>Two times per year:</strong></td>
<td>Updates to the electronic version of the Accreditation Manual are made available to each accredited organization on the Joint Commission Connect™ extranet site.</td>
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<tr>
<td><strong>Annually (except for a year in which an on-site survey is conducted):</strong></td>
<td>N/A</td>
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<tr>
<td><strong>Annually:</strong></td>
<td>Invoice for annual fee is posted in January to organization’s secured extranet site.</td>
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<tr>
<td><strong>Within 30 days of any significant organizational changes:</strong></td>
<td>An update form for this purpose can be found on the organization’s extranet site, or email the information to your account executive. A decision about appropriate follow-up will be made based upon the type and extent of the change.</td>
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</table>
You’re Accredited - Make the Most of It!

Free Publicity Kit

Publicize your achievement in receiving The Joint Commission’s Gold Seal of Approval™ by notifying patients, the public, the local media, third-party payers and referral sources. Available at www.jointcommission.org/publicitykit, The Joint Commission offers free publicity assistance including:

• Suggestions for celebrating your accreditation
• Guidelines for publicizing your accreditation
• Sample news releases
• Downloadable Gold Seal of Approval™ artwork

Following your survey, information about your accreditation status will be posted on Quality Check® at www.qualitycheck.org. Quality Check® allows potential patients and referrers to search for accredited organizations within a city, state, or by type of setting.
Need More Information?

<table>
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<tr>
<th>Questions About:</th>
<th>Please Contact...</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Getting Started:</strong></td>
<td><strong>The Business Development Team:</strong></td>
</tr>
<tr>
<td>• How to get started</td>
<td>Call: 630-792-5070</td>
</tr>
<tr>
<td>• The overall accreditation process</td>
<td>Email: <a href="mailto:homecare@jointcommission.org">homecare@jointcommission.org</a></td>
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<tr>
<td>• The cost of accreditation</td>
<td>Website: <a href="http://www.jointcommission.org">www.jointcommission.org</a></td>
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<tr>
<td>• How to get a free trial of the standards</td>
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<td>• How to request an application</td>
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<tr>
<td>• Staff training resources</td>
<td></td>
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<tr>
<td><strong>Managing The Accreditation Process:</strong></td>
<td><strong>An Account Executive:</strong></td>
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<tr>
<td>• Completing the application</td>
<td>Call: 630-792-3007</td>
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<td>• Scheduling a survey date</td>
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<td>• Specific issues related to ongoing</td>
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<tr>
<td>accreditation</td>
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<td><strong>Our Standards:</strong></td>
<td><strong>The Standards Group:</strong></td>
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<tr>
<td>• Complying with specific standards</td>
<td>Call: 630-792-5900, Option 6</td>
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<td></td>
<td>Website: <a href="http://www.jointcommission.org/standards">www.jointcommission.org/standards</a></td>
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<tr>
<td><strong>Manuals, Education and Training:</strong></td>
<td><strong>Joint Commission Resources (JCR):</strong></td>
</tr>
<tr>
<td>• Obtaining printed or electronic</td>
<td>Call: 877-223-6866</td>
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<tr>
<td>standards manuals</td>
<td>Email: <a href="mailto:jcrcustomerservice@pbd.com">jcrcustomerservice@pbd.com</a></td>
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<tr>
<td>• Custom education for your organization</td>
<td>Website: <a href="http://www.jcrinc.com">www.jcrinc.com</a></td>
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