

Ambulatory Care Accreditation Overview



A snapshot of the accreditation process

The Joint Commission Past and Present



Founded in 1951, The Joint Commission is the leader in accreditation, with more than 70 years of experience across the full spectrum of health care organizations. The Joint Commission is a non-governmental, not-for-profit organization.

Beginning in 1975, The Joint Commission established the Ambulatory Health Care Accreditation Program to encourage safe, high quality patient care in all types of freestanding ambulatory care facilities. Today, the Ambulatory Health Care program accredits over 2,200 organizations in a variety of settings.

The Value of Joint Commission Accreditation

The Joint Commission and its Gold Seal of Approval® is a widely recognized benchmark representing the most comprehensive evaluation process in the health care organization. Joint Commission accreditation benefits your organization by:



- **Giving you a competitive advantage** Achieving accreditation is a visible demonstration to patients and the community that your organization is committed to providing the highest quality services. It also sets you apart from other ambulatory organizations offering the same types of services.
- **Assisting recognition from insurers, associations, and other third parties** Many regulatory agencies, payers and managed care contractors require Joint Commission accreditation for reimbursement, certification or licensure, and as a key element of their participation agreements.
- **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 surveyors offer suggestions for approaches and strategies that may help your organization better meet the intent of the standards and, more importantly, improve performance of day-to-day operations.

Types of Settings Accredited

Below is a list of typical settings accredited under The Joint Commission's Ambulatory Care program.

- Ambulatory Surgery Center
- Community Health Center
- Convenient Care Clinic
- Correctional Health Care
- Diagnostic Imaging Center
- Freestanding Emergency Care
- Kidney Care/Dialysis Center
- Medical Group Practice



- Military Clinic
- Mobile Imaging
- Occupational/Worksite Health Center
- Office-Based Surgery
- Pain Clinic
- Sleep Center
- Telehealth
- Urgent Care/Immediate Care Center



Don't see your setting? We can help. Call 630-792-5286.



Eligibility

To attain Joint Commission Ambulatory Care accreditation, it is necessary that the organization:

- Offers services that can be evaluated using The Joint Commission's Ambulatory Care standards
- Is in the United States or its territories or, if outside the United States, is operated by the U.S. government, or under a charter of the U.S. Congress
- Prior to the survey has served a minimum of 10 patients, with two active patients at the time of survey

Click [here](#) for a complete list of eligibility requirements for ambulatory care organizations.



Not sure you meet eligibility requirements? We can help. Call 630-792-5286.

Applying For Accreditation

Application

The application collects essential information about your organization, including ownership and management, demographics, and 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:

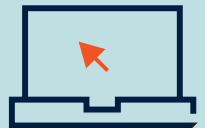
- Is in an electronic format that can be accessed by any computer
- Is valid for one year from the date submitted; submit your application and still have time to finish your preparations before the on-site survey takes place
- Allows you to indicate the month/year when you would like the survey to take place



Requesting an Application

The application is available upon request via:

- Phone: 630-792-5286
- Email: AHCQuality@jointcommission.org



Accessing and Submitting the Application

After your request is processed, you will receive an email providing log-in information to access the application. (See **1** next page). Once complete, submit the application with a \$1,700 deposit, which is applied toward your cost of accreditation. **Submitting the application without the deposit will delay the scheduling of your survey.**

Fees

The cost of accreditation is based on the on-site survey fee PLUS an annual fee each year of the accreditation cycle. Annual fees for all accreditation programs are based upon the size (for example: number of sites of care) and annual patient volumes of an organization, as determined by the information submitted in the application.



Billing Process

The Joint Commission spreads the costs of accreditation over a 3-year period. Most customers can generally expect to pay 60% of the accreditation fee for the first year (on-site survey cost PLUS annual fee), 20% the second year, and 20% the third year.



Deposit

The application is submitted with a \$1,700 deposit, which is applied toward your accreditation fee and can be paid by check, credit card or e-pay. This deposit is nonrefundable and nontransferable.



What does it cost to accredit your facility? View pricing [here](#) or call 630-792-5286.

Now You've Applied: Accreditation Preparation & Support

The Joint Commission wants you to succeed with your accreditation. To help you prepare, The Joint Commission offers a variety of hands-on support and technical resources.

Joint Commission Connect™

Joint Commission Connect is a personalized, secure extranet site, dedicated to supporting your organization.

Here **1** your organization can access the application, make fee payments, access survey preparation tools and resources and maintain accreditation expectations throughout your ongoing relationship with The Joint Commission.

Assignment of Account Executive **2**

When you gain access to Joint Commission Connect, you will be assigned a dedicated ambulatory care Account Executive who will:

- Answer your questions about survey preparation, and help you through each step of the accreditation 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, the Survey Activity Guide is dedicated to preparing you for the on-site visit and includes:

- **Survey Activity Details**

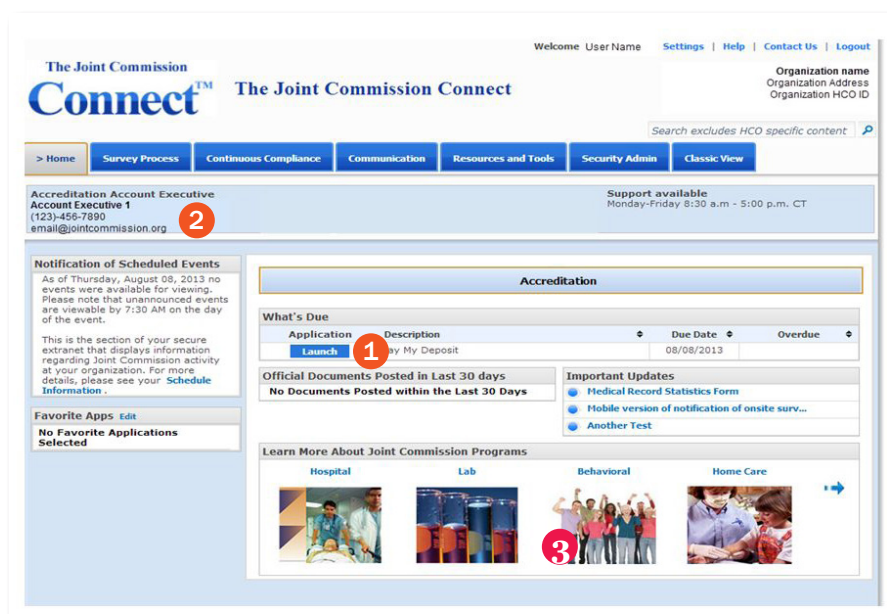
A thorough, individualized description of the specific events of the on-site review.

- **Sample Survey Agenda**

A helpful, hour-by-hour outline of the survey, showing you what to expect, whom to have available and what you'll need throughout the on-site visit.

- **Survey Document List**

A list of specific documents and information you'll need for the surveyor planning sessions on day one of your survey.



Standards Interpretation Group (SIG)

Contact SIG for information about interpreting and applying specific ambulatory standards including performance improvement, infection prevention, life safety code, or equipment and utilities management.

Review the FAQs to see topics often raised by ambulatory care organizations or submit your own question via the electronic submission form.

Visit: www.jointcommission.org/Standards.



Your On-site Survey Process

The Joint Commission's accreditation process helps organizations improve the safety and quality of care and services. The process begins with an on-site survey that assesses compliance with Joint Commission standards. Typically, on-site surveys are conducted by one or two surveyors for two days at a minimum, 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
- On-site observations and interviews with staff and patients
- Review of documents provided by the organization
- Assessment of the physical facility

Your Surveyors: Ambulatory Care Professionals

Joint Commission ambulatory care surveyors are **employees**, not volunteers, and are experienced in the ambulatory arena. As they are also currently practicing in the ambulatory care field, Joint Commission surveyors understand the day-to-day issues that confront centers 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 on-site **education** provided by surveyors offers approaches and strategies that help your organization better meet the intent of the standards and, more importantly, improve performance.

The Joint Commission ensures 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 on-site survey is an educational process. The Joint Commission evaluates its surveyors' performance continually throughout the year.

Accreditation Options



Deemed Status for Ambulatory Surgery Centers

An ambulatory surgery center (ASC) may choose to participate in a Joint Commission accreditation survey that can be used for both Medicare certification and accreditation. An ASC seeking Medicare certification through The Joint Commission must notify CMS and/or the state, submit an approved copy of the 855 B Form, copy of license if applicable and declare its intention on the Joint Commission application. A Life Safety Code® (LSC) surveyor is added for one day to the survey team for ASCs seeking this option. The LSC surveyor will be responsible for evaluating standards specific to environment of care, emergency management and life safety code.

[Learn more.](#)



Accreditation for Office-Based Surgery Practices

An office-based surgery (OBS) survey is scheduled for one day. Practices that have more than one office require a multiple-day survey. Surgical practices must meet certain eligibility requirements for accreditation under The Joint Commission's OBS Accreditation Program, such as:

- The organization is limited to business occupancy, which is defined as an occupancy that can only have three or fewer individuals at the same time, who are either rendered incapable of self-preservation in an emergency or are undergoing general anesthesia.
- The organization meets parameters for the minimum number of patients/volume of services required for organizations seeking Joint Commission initial or reaccreditation; that is, three patients served, with at least one patient having a procedure at the time of survey.

[View](#) a complete listing of eligibility requirements for office-based surgery practices.



Primary Care Medical Home Certification for Primary Care Providers

The Joint Commission Primary Care Medical Home option recognizes organizations providing superior access to care for patients and offers the potential for increased reimbursement. Built into the ambulatory on-site accreditation survey, organizations successfully completing this process will be both Joint Commission accredited and certified as a Primary Care Medical Home.

[Learn more.](#)



Advanced Diagnostic Imaging for Freestanding Imaging Centers

Suppliers furnishing the technical component (TC) of CT, MRI, PET and Nuclear Medicine services on an outpatient basis, must be accredited to receive Medicare Part B payments under the Physician Fee Schedule. The Joint Commission is designated by CMS as an approved accreditor for Advanced Diagnostic Imaging.



System Accreditation

System accreditation awards a single accreditation decision to an ambulatory "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.



Questions about accreditation options? Call 630-792-5286.

Standards and Other Requirements

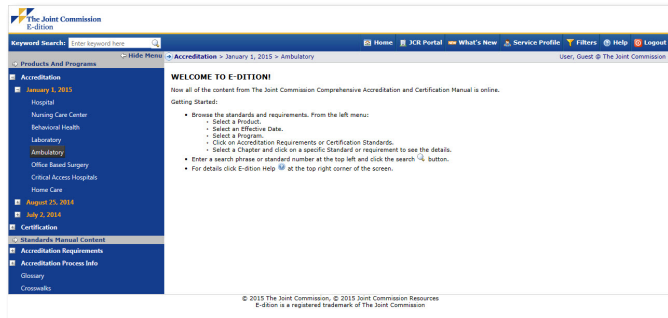
Joint Commission standards strive to reflect state-of-the-art technology and processes in ambulatory health care and provide reasonable guidelines that every ambulatory health care organization should strive to meet.

The Ambulatory Care Accreditation Program organizes its patient-focused standards around healthcare functions and processes, as listed below. Not all chapters/standards may be applicable to your individual setting.

Chapters	Summary
Environment of Care	How safe, functional and effective the environment for patients, staff and other individuals is in the organization.
Emergency Management	Ensures the provider has a disaster plan in place.
Human Resources	Processes for staff and physician management.
Infection Prevention and Control	How the provider identifies and reduces the risk of acquiring and transmitting infections.
Information Management	How well the ambulatory care provider obtains, manages and uses information to provide, coordinate and integrate services.
Leadership	Reviews structure and relationships of leadership, the maintenance of a culture of safety, quality and operational performance.
Life Safety	Only applicable to organizations designated as “ambulatory health care occupancy.” Covers requirements for ongoing maintenance of building safety requirements during and after construction. Not applicable for office-based surgery practices.
Medication Management	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.
National Patient Safety Goals (NPSG)	Specific actions ambulatory care organizations are expected to take in order to prevent medical errors, such as miscommunication and medication errors.
Provision of Care	Covers four basic areas: planning care, implementing care, special conditions, and discharge or transfer.
Performance Improvement	Focuses on using data to monitor performance, compiling and analyzing data to identify improvement opportunities, and taking action on improvement priorities.
Record of Care	Covers the planning function (components of clinical records, authentication, timeliness, and record retention) as well as documentation of items in the patient record.
Rights of the Individual	Informed consent, receiving information, participating in decision making, and services provided to respect patient rights.
Transplant Safety	Applies only to ambulatory organizations using tissues as part of the provision of care.
Waived Testing	For CLIA-approved laboratory testing, covers: policies, identifying staff responsible for performing and supervising waived testing, competency requirements, quality control, and record keeping.

Accessing the Standards

Joint Commission standards for ambulatory care settings are available in both electronic and print format and can be accessed through a variety of means.

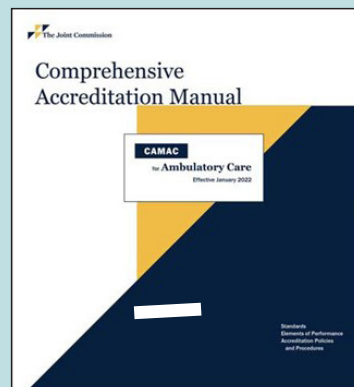


E-dition® (Electronic Standards Manual)

- Web-based version
- Filters applicable standards by selection of setting (e.g., Surgery Center, Imaging Center, Sleep Center)

How to Access

- Register for a free 90-day trial version of our standards [here](#).
- One FREE E-dition license sent upon receipt of accreditation application AND deposit
- To purchase additional licenses, contact JCR at jcrcustomerservice@pbd.com



Comprehensive Accreditation Manual

The accreditation manual includes:

- All standards
- Icons to help navigate scoring, criticality, and risk areas addressed in the Focused Standards Assessment
- Details about The Joint Commission's accreditation process, policies, and procedures
- Additional chapters on required written documentation, the early survey process, Quality Check, and more

[Learn more.](#)



Accreditation Standards Books

The accreditation standards books make a perfect reference guide—containing only the standards requirements and a Glossary. Chapters with accreditation policies and procedures, initiatives and summaries ARE NOT INCLUDED.

[Learn more.](#)



Register for a free 90-day trial version of our standards [here](#).

Accreditation Decisions

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 primarily awarded in one of these four basic categories:



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

At the end of the on-site 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.

After Your Survey...The Three Years Between On-Site Surveys

Intracycle Monitoring (ICM) Process

The Intracycle Monitoring (ICM) process helps accredited organizations maintain peak performance throughout the three-year cycle of accreditation. Facilitating this process is the **ICM Profile** – a comprehensive extranet workplace – that provides resources and tools to help identify risk points of standards compliance.

Note: ICM Tool is available, but submission is not required.

Important steps include:

- **Focused Standards Assessment (FSA)** is an electronic self-assessment tool used to identify and correct performance areas not in compliance with the standards before the next on-site survey. At approximately 12 and 24 months after a triennial survey, it is recommended that an accredited organization perform an FSA and submit any findings along with corrective actions to ensure continuous compliance.



- **TouchPoint Conference Call** is an optional conference call held annually with Joint Commission's Standards Interpretation Staff (and others as needed) to review an organization's performance.



You're Accredited - Make the Most of It!

Publicize your achievement of national accreditation and 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 Joint Commission accreditation
- Sample news releases
- Gold Seal of Approval® downloadable artwork



Following your survey, information about your accreditation status will be posted on Quality Check® at www.qualitycheck.org. Quality Check® allows anyone to search for accredited organizations within a city or state, or by type of setting.

Tools and Resources Created Exclusively for Joint Commission



SAFER® Dashboard

The SAFER Dashboard, a complimentary business intelligence tool exclusively available to Joint Commission accredited organizations, provides organization leaders visibility of survey findings across locations and enables the ability to spot trends in performance more easily, compare with peers and more confidently, and identify priority areas to address for maximum impact of outcomes. [Learn more.](#)



Accelerate PI™

This report uses a select subset the most recent and available external data from the US Centers for Medicare & Medicaid Services (CMS) Compare websites that meet Joint Commission unique criteria for impact and actionability. For each measure, the dashboard shows the organization's performance compared to national, state, and Joint Commission–accredited organization averages. [Learn more.](#)



Joint Commission Resources (JCR)

JCR offers software, publications and education events that will help you prepare for accreditation (additional costs will apply). [Learn more.](#)

Readiness Roadmap

A toolkit, accessed through Joint Commission Connect, with hundreds of documents, webinars, videos, checklists, and crosswalks that are sortable to help you find the resources you need based on where your organization is in the accreditation/certification process.



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www.jointcommission.org/AHCprogram