

Survey Eligibility Criteria for Office-Based Surgery



For organizations first seeking accreditation*, several questions have been added to the electronic application for accreditation (E-App) that require applicants to make certain attestations regarding their backgrounds.

Any office-based surgery organization may apply for Joint Commission accreditation if all the following eligibility 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 or under a charter of the U.S. Congress.
- If required by law, the organization has a license or registration to conduct its scope of services. The organization can demonstrate that it continually assesses and improves the quality of its care, treatment, and/or services. This process includes a review by clinicians, including those knowledgeable in the type of care, treatment, and/or services provided at the organization.
- The organization identifies the services it provides, indicating which care, treatment, and/or services it provides directly, under contract, or through some other arrangement.
- The organization provides services that can be evaluated by The Joint Commission's standards.
- The tests, treatments, or interventions provided at the organization are prescribed or ordered by a licensed independent practitioner[†] in accordance with state and federal requirements.
- 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.
- 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 must be surgeon-owned or surgeon-operated (for example, a professional services corporation, private physician office, or small group practice).
- The organization provides invasive procedures to patients. Local anesthesia, minimal sedation, conscious sedation, or general anesthesia are administered. (Excluded are practices that limit procedures to excisions of skin lesions, moles, and warts and abscess drainage limited to the skin and subcutaneous tissue.)

Questions may be directed to your account executive (630-792-3007) for current customers or to Business Development for applicants (630-792-5259).

* Organizations that are new to The Joint Commission include those that have never been surveyed by The Joint Commission or have not been accredited for at least four months.

[†] A licensed independent practitioner is an individual permitted by law and by the organization to provide care, treatment, or services without direction or supervision. A licensed independent practitioner operates within the scope of his or her license, consistent with individually granted clinical privileges. When standards reference the term licensed independent practitioner, this language is not to be construed to limit the authority of a licensed independent practitioner to delegate tasks to other qualified health care personnel (for example, physician assistants and advanced practice registered nurses) to the extent authorized by state law, or a state's regulatory mechanism, or federal guidelines, and by organizational policy.