Home Care Accreditation

- Established in 1988
- Approximately 6,000 programs that provide home care services directly or through a contracted individual or organization are accredited by The Joint Commission

**Home Health:** Professional services, such as skilled nursing; physical, speech or occupational therapies; medical social work and para-professional home health aide services. *Note: A federal deemed status option for Joint Commission-accredited home health agencies is available. The Centers for Medicare & Medicaid Services (CMS) retains the authority to conduct random validation surveys and complaint investigations in all certified home health agencies.*

**Hospice:** Services provided and coordinated by an interdisciplinary team for terminally ill patients, including 24-hour access to care, use of volunteers and a formalized program for bereavement care. *Note: A federal deemed status option is available to organizations seeking Medicare payment for hospice services, as well as those already Medicare certified. Organizations choosing the deemed status option for hospice are evaluated against both Joint Commission standards and Hospice Medicare Conditions of Participation.*

**Personal Care and/or Support:** Assistance with activities of daily living, management of household routine and personal care by paraprofessional personnel.

**Home Medical Equipment:** Organizations that provide Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) up to and including Complex Rehabilitation services to patients in their home either directly or through the mail (or, in some instances, organizations that bill Medicare Part B DMEPOS, regardless of where services are provided). *Note: CMS recognizes The Joint Commission to accredit DMEPOS as provided by the Medicare Modernization Act of 2003. According to CMS regulations, for DME organizations with less than 25 sites, The Joint Commission will visit all sites during the on-site survey.*

**Pharmacy:** The preparation and dispensing of medications and medication-related devices and supplies by a licensed pharmacy including but not limited to: compounding pharmacy, specialty pharmacy, radiologic pharmacy, long-term care pharmacy, mail-order pharmacy, or freestanding ambulatory infusion provider with or without clinical/consultant planning services.

**Benefits of accreditation**
- Access to an unparalleled quality framework that helps providers achieve and sustain standardized performance excellence.
- An interactive on-site survey guided by a patient tracer process that assesses standards compliance in real-time and typical business conditions.
- Nationally recognized quality achievement.
- Competitive distinction that strengthens and builds referral relationships and enhances the ability to obtain managed care contracts and work with third party payors.

Read more
- Standards and Survey process
- Cost of accreditation
- Public information on Quality Check®
- Visit our site
Access to an unmatched combination of services that support ongoing performance improvement activities, including our Leading Practice Library, informational portals on key topics, and free webinars.

**Standards**
Joint Commission standards address the home care organization’s performance in specific areas, and specify requirements to ensure that patient care and services are provided in a safe manner. The Joint Commission develops its standards in consultation with home care experts, providers and researchers, as well as measurement experts, purchasers and consumers. The *Comprehensive Accreditation Manual for Home Care* is available for purchase in both hardcover and electronic format.

**Accreditation and survey process**
The Joint Commission’s accreditation process concentrates on operational systems critical to the safety and quality of patient care. To earn and maintain accreditation, a home care organization must undergo an on-site survey within a range of 18-36 months. The objective of the survey is to evaluate the organization and provide education and guidance that will help staff continue to improve performance. Surveyors use pre-survey information to conduct a more organization-specific and consistent survey.

Surveys are conducted by professionals with at least five years of experience in home care. They include registered nurses, pharmacists, respiratory therapists, rehabilitation technologists, orthotists, prosthetists and medical equipment experts. The background and experience of the surveyor who will review an organization are related to the types of services that the organization provides, the volume of services provided, and the ownership or management structure of the home care organization. All surveyors are extensively trained and receive continuing education to keep them up-to-date on advances in quality-related performance evaluation.

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