

# Public Information Policy<sup>1</sup>

## Introduction

The Joint Commission is committed to making relevant and accurate information about health care organizations available to interested parties. Information regarding a health care organization's quality and safety can help organizations improve their services. This information may also help educate consumers and health care purchasers in making informed choices about health care. At the same time, it is important that confidentiality of certain information be maintained to encourage candor in the accreditation and certification processes. The Joint Commission's primary vehicle for providing public information are Quality Check<sup>®</sup> and Quality Reports.

*Quality Check.* - Quality Check is The Joint Commission's website for making available descriptive and performance information about accredited organizations and certified programs.

*Quality Reports.* - The Quality Reports are publicly available and include relevant and useful information about the quality and safety of care provided in individual Joint Commission-accredited organizations and –certified programs. Quality Reports are created at the organization level and contain information reflecting an organization's accreditation and/or certification status, its compliance with National Patient Safety Goals, and performance measurement results, as appropriate. Quality Reports are available on the Joint Commission's Quality Check website.

## Publicly Available Accreditation and Certification Information

Joint Commission Quality Reports for each accredited organization and/or certified program include the following information:

- The date of an organization's/program's most recent full on-site survey/review, and if the organization/program has had any subsequent surveys/reviews since its last full survey/review.
- The accreditation/certification decision based on the most recent full on-site survey/review, as well as any subsequent updates to the decision.
  - Organizations that are successful in obtaining accreditation following an initial survey will be posted on the Quality Check website.
  - Programs that achieve certification will be posted on the Quality Check website.
- For organizations in the accreditation renewal process, with an accreditation decision of Contingent Accreditation, Preliminary Denial of Accreditation, or Denial of Accreditation<sup>2</sup> the standards with Requirements for Improvement leading to the decision.
- Services included within the scope of the organization's accreditation and/or certification decision.
- A list of an organization's previous accreditation and/or program's certification decisions and the effective date of those decisions for the past seven (7) years
  - If the organization had a previous decision of Contingent Accreditation or Preliminary Denial of Accreditation, the standards with Requirements for Improvement.
- The receipt of national quality recognition awards, as recognized by the Board of Commissioners

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<sup>1</sup> This policy meets the requirements of the Health Insurance Portability and Accountability Act of 1996.

<sup>2</sup> Denial of Accreditation decisions, for organizations which were in the accreditation renewal process, will be posted on the Quality Check website for a duration of one year from the rendering of the accreditation decision

- Attainment of Top Performer® on Key Quality Measures designation from The Joint Commission
- Compliance with National Patient Safety Goal requirements.
- Performance against National Quality Improvement Goals (core measures)

Each accredited organization/certified program is afforded the opportunity to prepare a commentary of up to two pages regarding its Quality Report. The commentary will accompany any organization/program Quality Reports distributed by The Joint Commission, whether via hard copy or The Joint Commission's website.

When performance measurement data is included in Quality Reports, such data will be accompanied by information regarding its source or derivation; accuracy, reliability, and validity; and appropriate uses of the data.

An organization's Quality Report may be obtained via the Customer Service Department or through Quality Check.

### **Release of Aggregate Data**

The Joint Commission reserves the right to publish or release aggregate data. Protected health information will not be made publicly available. Performance data displayed on Quality Check are available to any interested party at no cost and may be downloaded electronically in a series of predefined report formats through a linked webpage called "Quality Data."<sup>3</sup>

## **Information That Is Publicly Disclosed on Request**

### **Release of Accreditation and Certification Information**

In addition to information provided in Quality Reports, the following information may be obtained by writing or calling The Joint Commission:

- For organizations that were previously Denied Accreditation, are no longer certified, or withdrew from the accreditation/certification process
  - The organization's accreditation and/or certification history (for the past 7 years)
  - Standards, for which The Joint Commission had no or insufficient evidence of resolution when an organization withdrew from accreditation and was subsequently Denied Accreditation

### **Sentinel Event Information**

As applicable, confirmation of the occurrence of a sentinel event at an accredited organization for the three year period prior to the date of the request and the Joint Commission's intent to apply its Sentinel Event Policy or other applicable procedures to this occurrence.

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<sup>3</sup> This information is not available for ambulatory health care organizations and office based surgery practices

## Release of Aggregate Complaint-Related Information

The Joint Commission addresses all incidents that pertain to alleged patient safety or quality of care issues within the scope of Joint Commission standards. Information about complaints<sup>4</sup> may be forwarded by the Center for Medicare and Medicaid Services (CMS) or other federal or state agencies having oversight responsibilities for health care organizations, federal or state legislators or legislative committees on behalf of constituents, or may be received directly from patients, families, payers, or health care professionals. As used here, the term *complaint* includes potentially relevant reports that are received from federal or state agencies, identified in the media, or otherwise obtained by The Joint Commission. It is the policy of The Joint Commission that it will only disclose patient-identifiable information if authorized by the patient, as consistent with its business associate obligations, or otherwise authorized by law. For any other party than the complainant, The Joint Commission will not disclose patient name or identifiable information, per the Health Insurance Portability and Accountability Act (HIPAA) of 1996.

Upon request from any party, The Joint Commission releases the following aggregate information relating to complaints about an accredited organization or a certified program for the three-year period prior to receipt of the request: When an unannounced or unscheduled survey/review is based on information derived from a complaint or public sources, a summary of the standards areas<sup>5</sup> for which Requirements for Improvement were issued as a result of the Joint Commission's evaluation activities.

## Release of Specific Complaint-Related Information

The Joint Commission also provides the following information as appropriate to complainants regarding their complaints (and those authorized by the complainant), or other individuals who have knowledge regarding a specific complaint:

- Confirmation of the receipt of the complaint and that it will be reviewed to determine what, if any, Joint Commission action is warranted
- Any determination that the complaint is not related to Joint Commission requirements
- If The Joint Commission has decided not to take action regarding an organization's accreditation/a program's certification decision, the complainant is to be so advised.
- If the complaint is related to Joint Commission requirements, upon completion of review, the course of action that was taken regarding the complaint, including the standards areas that were evaluated.
- If The Joint Commission has decided not to take action regarding an organization's accreditation/a program's certification decision as a result of the complaint review, the complainant is to be so advised.
- If The Joint Commission has taken action regarding an organization's accreditation/a program's certification decision as a result of an on-site complaint review, the noncompliant standards leading to that decision will be made publically available on Quality Check.

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<sup>4</sup> The term Complaint refers to an alleged adverse event, unsafe condition, or concern.

<sup>5</sup> The term Standard Area refers to the focus area of the complaint review as it relates to the Joint Commission's standards. Depending on the review status or outcome of the complaint review, the level of information provided may vary.

## **Data Release to Government Agencies and Organizations with Which The Joint Commission Performs Coordinated Survey Activities<sup>6</sup>**

The Joint Commission makes available to federal, state, local, or other governmental certification or licensing agencies or public health agencies, or any other appropriate enforcement agency, specific accreditation-related information under the following circumstances:

- When The Joint Commission identifies a serious situation in an organization that may jeopardize the health or safety of patients or the public and immediately takes action to deny accreditation
- When The Joint Commission identifies a serious situation, or a significant pattern of risk in an organization that may have jeopardized the health or safety of previous patients or the public, or that represents risk that extends beyond the organization, such as an incident involving the reuse of contaminated instruments
- If the health care organization or other individual reports the issue to the appropriate authorities, The Joint Commission will evaluate whether it, too, should report the issue.

Additional information is made available when an organization is certified for participation in a federal or state program or licensed to operate by a state agency on the basis of its accreditation. In addition, The Joint Commission may make available information to organizations with which The Joint Commission performs coordinated survey activities. The Joint Commission may advise the organization's chief executive officer and will provide timely notice to local, state, and federal authorities having jurisdiction. The information available to government agencies and organizations with which The Joint Commission performs coordinated survey activities includes the following:

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<sup>6</sup> Section 92, PL 96-499, the Omnibus Budget Reconciliation Act of 1980, requires that Medicare providers include, in all their contracts for services costing \$10,000 or more in any 12-month period, a clause allowing the Secretary of the U.S. Department of Health and Human Services (DHHS), the U.S. Comptroller General, or their representatives to examine the contract and the contractor's books and records. The Joint Commission herein stipulates that if its charges to any such organization amount to \$10,000 or more in any 12-month period, the contract or any agreement on which such charges are based and any of the Joint Commission's books, documents, and records that may be necessary to verify the extent and nature of Joint Commission costs will be available to the Secretary of DHHS, the Comptroller General, or any of their duly authorized representatives for four years after the survey. The same conditions will apply to any subcontracts The Joint Commission has with related organizations if the payments under such contracts amount to \$10,000 or more in any 12-month period .

- Notification of official decision to render Accreditation with Follow-up Survey, Contingent Accreditation, Preliminary Denial of Accreditation, or Denial of Accreditation, including the rationale for the decision
- Complaint information requested by CMS in accordance with the Joint Commission’s deeming authority, including the content of the complaint submitted to the Joint Commission, if the allegation(s) results in an on-site visit
- Complaint information, including the content of the complaint submitted to the Joint Commission, if the allegation(s) results in an on-site visit is shared with:
  - CMS in accordance with The Joint Commission’s deeming authority
  - A state regulatory agency that has entered into a written information-sharing agreement.
  - An organization with which The Joint Commission conducts coordinated survey activities
- Upon request from CMS, the following information is shared:
  - All final Requirements for Improvement
  - A statement, if any, from the organization regarding its views on the validity of The Joint Commission survey findings
  - A copy of the corrective action submitted by the organization.
  - The results of any follow-up survey, if warranted.
- For governmental agencies, notification of upcoming full surveys and retrospective dates of other surveys conducted, such as random unannounced or for-cause surveys, only if the governmental agency enters into an information-sharing agreement with The Joint Commission and agrees to maintain the confidentiality of the unannounced survey dates
- A copy of the *Official Accreditation Decision Report and Decision letter*
  - For CMS upon request respecting deemed status determinations.
  - For state agencies that have entered into specific information-sharing agreements that permit provider-authorized release of such reports to the state agency.
  - Upon request from state agencies that are acting on behalf of CMS as contractors.
- The Joint Commission will report to CMS or the Office of the Inspector General, as appropriate, in the event that there is credible evidence of potential identification of fraud and abuse, or other criminal or civil law violation and upon notice to the health care organization.

## Data Release to Cooperative Accrediting Bodies

The Joint Commission makes available to accrediting bodies with which it has formal cooperative agreements relevant portions of Official Accreditation Decision Reports and complaint-related information which are pertinent to the accrediting activities of the cooperative partner. Judgments as to pertinence are made solely by The Joint Commission. (For a list of organizations with which The Joint Commission has cooperative agreements, see [http://www.jointcommission.org/facts\\_about\\_the\\_cooperative\\_accreditation\\_initiative/](http://www.jointcommission.org/facts_about_the_cooperative_accreditation_initiative/).)

## Joint Commission Right to Clarify

The Joint Commission reserves the right to clarify information, even if the information involved would otherwise be considered confidential, when an organization disseminates inaccurate information regarding its accreditation/certification.

## Confidential Information

The Joint Commission keeps information received or developed during the accreditation/certification process confidential, such as:

- The *Official Accreditation Decision Report*, unless its submission is required by a governmental agency (see “Data Release to Government Agencies and Organizations with Which The Joint Commission Performs Coordinated Survey Activities”), is required by organizations with which The Joint Commission performs coordinating surveys, or is requested by an accredited body with which The Joint Commission has a formal agreement (see “Data Release to Cooperative Accrediting Bodies”)
- Information learned from the organization before, during, or following the accreditation survey, which is used to determine compliance with specific accreditation standards.
- An organization’s comprehensive systematic analysis and related documents prepared in response to a sentinel event or in response to other circumstances specified by The Joint Commission
- All other materials that may contribute to the accreditation/certification decision
- Written staff analyses and Accreditation Committee minutes and agenda materials
- Any data from an organization’s participation in the ICM process and related corrective action plan.
- The identity of any individual who files a complaint about an accredited organization, except when the complaint is shared by The Joint Commission with a governmental entity, an organization with which The Joint Commission performs coordinated surveys, or accrediting organizations with which The Joint Commission has formal complaint-sharing agreements and the receiving organization has agreed to maintain the confidentiality of the complainant. In instances when the receiving organization cannot assure the confidentiality of the complainant, any complainant-identifying information shall be redacted by The Joint Commission prior to sharing.

This policy applies to all organizations with an accreditation and/or certification history, subject to any requirements of any applicable laws.