Behavioral Health Care Accreditation Milestones For organizations requesting a first survey.

	JOINT COMMISSION ACTIVITY	YOUR ACTIVITY
Upon receipt of your request for an application.	Email message sent with access to the electronic application for accreditation.	Staff member(s) with knowledge of your organization's services/programs, sites, and volume should complete and return the application for accreditation with a \$1,700 non-refundable/non- transferable deposit for initial survey.
Upon receipt of your application for accreditation and deposit	 You are assigned an Account Executive. You will receive a complimentary copy of E-dition, our online accreditation manual. You are given access to a complimentary online subscription to <i>Perspectives</i>, the official newsletter of The Joint Commission. 	Work with your account executive to schedule your survey. It should be within 12 months of your application submission date. Log on 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.
30 days before the On-Site Survey	Verification of survey dates and name(s) of surveyor(s) are communicated by email to CEO and primary accreditation contact.	Call your Account Executive promptly if you have questions.
On-site Survey	Surveyor(s) arrive for your on-site survey. At the conclusion of the survey, you receive a copy of the summary report, which details the preliminary findings during the on-site survey.	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).
2 – 10 days after survey	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 on-site fee is posted.	Review any findings and make plans for corrections (submitting an Evidence of Standards Compliance report) within the specified time ranges, usually 60 days.



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Up to 60 days after final report is posted	The Joint Commission reviews any Evidence of Standards Compliance reports you submitted to resolve findings.	For any accreditation requirements scored as non-compliant, you submit your Evidence of Standards Compliance to The Joint Commission, which identifies the action(s) taken to demonstrate compliance.
Monthly	Each accredited organization receives an electronic copy of <i>Perspectives,</i> which is the official source for updates to standards, policies, and procedures.	Staff should review all changes featured in <i>Perspectives</i> to keep abreast of changes and developments in the accreditation requirements and survey process.
Annually	Invoice for annual fee is posted in January to organization's secure extranet site.	Organization updates data contained in its application for accreditation.
Annually (except for a year in which an on-site survey is conducted)		Organizations are encouraged to complete the Focused Standards Assessment (ICM tool) on their Joint Commission Connect [™] extranet site. Staff should review any updates to act on new and modified standards and elements of performance, scoring guidelines, policies, and procedures.
18-36 Months after initial survey	Surveyor(s) will arrive unannounced (or with short notice) to conduct your re-survey.	See the Accreditation Process (ACC) chapter in your manual for a list of exceptions to unannounced surveys.
Within 30 days of any significant organizational changes (as defined in the <i>CAMBHC</i>)	Update your application and/ 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.	The organization must notify The Joint Commission of any significant change in the organization (as defined in the "Official Accreditation Policies and Procedures" chapter in the accreditation manual).