Nursing Care Center Overview Guide

A snapshot of the accreditation & certification processes for nursing care centers
Dear Colleague,

Thank you for your interest in The Joint Commission’s Nursing Care Center Accreditation program and its Specialty Certification options. Achieving Joint Commission accreditation and certification is an unmatched recognition of your commitment to consistent, high quality care for your patients/residents, their families, your staff and the community.

This guide will provide an overview of our program; eligibility requirements, the application process, the on-site survey and our standards, as well as information regarding additional resources and a list of contact numbers to call if you have additional questions.

We hope that this will provide you with the information necessary to guide you through your accreditation process decision. If you would like to speak with one of our team members regarding specific questions, please contact us by phone at 630-792-5020 or by email at NCC@jointcommission.org. We look forward to working with you.

Sincerely,

Gina Zimmermann
Executive Director
Nursing Care Center Accreditation Services

*Founded in 1951*, The Joint Commission is the leader in accreditation, with more than 60 years of experience across the full spectrum of health care organizations. The Joint Commission is a non-governmental, not-for-profit organization.
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The Value of Joint Commission Accreditation

The Gold Seal of Approval® from The Joint Commission is the most widely recognized quality and safety distinction in the health care industry. Joint Commission accreditation benefits your organization by:

- **Giving you a competitive advantage**
  Achieving accreditation is a visible demonstration that your organization is committed to providing the highest quality services. It sets you apart from other providers in your market based on the quality of your services.

- **Assisting recognition from insurers, associations, and other third parties**
  Many payors, regulatory agencies, and managed care contractors require Joint Commission accreditation for reimbursement, certification or licensure, as a key element of their participation agreements.
**Improving liability insurance coverage**
By enhancing risk management efforts, accreditation may improve access to, or reduce the cost of liability insurance coverage.

**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 on-site surveyors offer suggestions and strategies that help your organization better meet the intent of the standards and, more importantly, improve performance of day-to-day operations.
Eligibility Requirements

Organizations may apply for Joint Commission accreditation if all of the following requirements are met:

- The organization is in the United States or its territories or, if outside the U.S., is operated by the U.S. government or under a charter of the U.S. Congress.
- The organization is identified as a nursing home, skilled nursing facility, or as having long-term care beds as designated by the state, Medicare/Medicaid, or another government agency.
- The organization assesses and improves the quality of its care, treatment, and/or services.
- 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 addressed by Joint Commission standards.
- The organization has served at least five patients/residents, and has at least two active patients/residents at the time of survey.
- For small homes with up to 18 beds, the minimum number of patients or residents required for organizations seeking accreditation for the first time is 3, with at least 2 active at the time of survey.

Questions about Eligibility?
Call Us 630-792-5020

Requesting an Application is Easy

Application

To request an application, simply call 630-792-5020. The application collects essential information about your organization, including ownership and management, demographics, and the 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 (accessible from any computer with internet connectivity)
- Is valid for one year from the date submitted. This allows you to submit your application and still have time to finish your preparations before the on-site survey takes place
- Allows you to select the month/year you would like the survey to take place, or specific dates you would like to avoid

Accessing and Submitting the Application

After your request is processed, you will receive an email providing login information to access the application (See page 8 and other online tools). To process your application, a nonrefundable deposit (which is applied toward your cost of accreditation), is required.

Submitting the application without the deposit will delay the scheduling of your survey. Call us at 630-792-5020 to discuss the deposit.

Accreditation and Specialty Certification Options

Achieving Joint Commission accreditation and certification helps your organization foster better outcomes, meet QAPI requirements, reduce deficiency citations, and improve patient safety culture. This distinction can help strengthen referrals and your referral relationships, gain access to contracts, and often help organizations receive reduced rates for liability insurance. Organizations that seek certification must also successfully meet all foundational accreditation requirements.
Memory Care Certification

Memory Care certification helps organizations minimize risk and improve care for patients and residents with all levels of cognitive impairment. Memory Care certification requirements include:

- Specialized care and service programming, centered around a patient or resident’s unique needs, preferences, abilities and interests, that are led by a qualified individual experienced and trained in the care of patients or residents with dementia.
- Advanced staff training and demonstrated competence in current best practices of dementia care.
- Engaging mealtime, social and recreational experiences designed for patients or residents with dementia that include families and opportunities for intergenerational activities.
- Provision of a safe, functional environment that minimizes noises and confusing visual stimuli for patients and residents with dementia.
- An organizational learning culture, demonstrated by nursing home participation in activities sponsored by a national organization relating to dementia care.
- Availability of support groups for family members of patients or residents with dementia.

Disease-Specific Care Certification

Disease-Specific Care Certification is earned by programs or services that may be based within or associated with a nursing care center and seeks to provide a rigorous review of a specific program within the health care setting. Examples of programs that may be certified are rehabilitation, cardiac or stroke rehab.

Integrated Care Certification

Integrated Care Certification is voluntary certification that reviews how well a health care system that includes a nursing care center(s) handles information sharing, including handoffs, IT integration and other integration points.

Post-Acute Care Certification

Post-Acute Care certification helps organizations build an effective framework to address the unique care needs of higher acuity or short stay patients. The standards highlight the importance of effective care transitions with the goal of minimizing the risk of unnecessary hospitalizations. Post-Acute Care requirements include:

- The use and monitoring of clinical practice guidelines, established or specially developed protocols to guide the provision of post-acute care services.
- Documented training that helps staff identify early warning signs of a patient’s change in condition and how to respond to the decline.
- A dedicated, qualified staff member responsible for the provision of post-acute care services.
- Established communication criteria and processes to facilitate effective transitions in a patient or resident’s care.
- Data collection and performance monitoring relevant to patient readmissions.
Complimentary Services Part of Your Complete Accreditation Package

- Dedicated account executive to guide you through the survey process
- Dedicated extranet site which conveniently houses all your Joint Commission activities in one location
- 24/7 access to our “Standards Help Desk” that can provide insight on the application of requirements in your specific setting
- Electronic version of our standards manual, including updates
- A collaborative, on-site survey conducted by seasoned industry professionals able to share innovative best practices
- Formal Certificates of Accreditation and Certification for display in your facility.
- Newsletters to keep you informed of enhancements or updates to the survey process and requirements
- Online media kit with ideas to help you publicize your achievement
- Marketing support via the Quality Check® website listing of accredited organizations accessed by numerous referral sources, payors and consumers
- Access to customer-only online educational tools including the Leading Practices Library

Accreditation and certification is awarded for a three year period. Annual fees are invoiced each year during the accreditation cycle. An on-site fee is invoiced during the year your survey is conducted. Onsite surveys are conducted once every three years. Both components of our fee — the annual and onsite, are calculated based on the services provided and your “average daily census.”

We encourage providers to contact us directly with any pricing questions. Having knowledge of your typical daily patient volume will help us to provide you with a more accurate estimate of your fees. Call us at 630-792-5020.
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 extranet site, dedicated to supporting your organization. Here, your organization can access the standards application, make fee payments, and maintain accreditation and certification expectations throughout your ongoing relationship with The Joint Commission.

A Dedicated Account Executive

When you gain access to Joint Commission Connect®, you will be assigned an Account Executive who will:

- Answer your questions about survey preparation and help you through each step of the 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, detailed description of the events that comprise a typical, on-site review.

- **Sample Survey Agenda**
  A helpful, hour-by-hour outline of the survey, showing you what to expect, whom to have available at your facility and what you’ll need throughout the on-site visit.

- **Ready-to-Go List**
  A list of specific documents and information you’ll need for the surveyor planning sessions on Day One of your survey.

Standards Help Desk

Contact our standards help desk via phone or online for information about applying specific standards to your setting.

Frequently Asked Questions (FAQs)

Answers to FAQs for many areas of potential importance to your organization are posted on our website.
Standards and Other Requirements

Joint Commission standards reflect the key components to delivering consistent, safe, high quality care and service. Our Comprehensive Accreditation Manual contains patient-focused standards organized around health care functions and processes. Standards address:

<table>
<thead>
<tr>
<th>ACCREDITATION MANUAL CHAPTERS</th>
<th>Description</th>
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<tbody>
<tr>
<td>Environment of Care</td>
<td>Fosters a safe, functional and effective environment for patients, staff, and other individuals in the organization.</td>
</tr>
<tr>
<td>Emergency Management</td>
<td>Effective disaster preparedness.</td>
</tr>
<tr>
<td>Human Resources</td>
<td>Processes for staff and staff management.</td>
</tr>
<tr>
<td>Infection Prevention and Control</td>
<td>How the provider obtains, manages, and uses information to provide, coordinate, and integrate services</td>
</tr>
<tr>
<td>Information Management</td>
<td>How well the provider obtains, manages and uses information to provide, coordinate, and integrate services.</td>
</tr>
<tr>
<td>Leadership</td>
<td>Reviews structure and relationships of leaderships, the maintenance of a culture of safety, quality, and operational performance.</td>
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<tr>
<td>Life Safety</td>
<td>Covers requirements for ongoing maintenance of building safety requirements during and after construction.</td>
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<tr>
<td>Medication Management</td>
<td>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 process.</td>
</tr>
<tr>
<td>National Patient Safety Goals’ (NPSG)</td>
<td>Specific actions health care, organizations are expected to take in order to prevent medical errors, such as miscommunication and medication errors.</td>
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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 surveyor for two days and involve:

- ‘Tracing’ the patient’s or resident’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 surveyors
- Review of documents provided by the organization
- Assessment of the physical facility

Scheduling your First Survey

Your first Joint Commission accreditation survey needs to be scheduled within twelve months from the time we receive your application. In the application, you’ll indicate the date you will be ready for your initial on-site survey. The Joint Commission will then schedule the survey as soon thereafter as possible.

You can also indicate 15 dates that you would not like the survey to be conducted. Your account executive will work with you to schedule your survey, and you will have at least 30 days notice for initial surveys that the surveyor(s) will be there.
## ACCREDITATION MANUAL CHAPTERS

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Description</th>
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<tr>
<td>Provision of Care</td>
<td>Covers four basic areas: planning care, implementing care, special conditions, and discharge of transfer.</td>
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<tr>
<td>Performance Improvement</td>
<td>Focuses on using data to monitor performance, compiling, and analyzing data to identify improvement opportunities, and taking action on improvement priorities.</td>
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<tr>
<td>Record of Care</td>
<td>Covers the planning function (components of clinical records, authentication, timeliness, and record retention) as well as documentation of items in the patient records.</td>
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<tr>
<td>Rights of the Individual</td>
<td>Informed consent, receiving information, participating in decision making, and services provided to respect patient rights.</td>
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<tr>
<td>Waived Testing</td>
<td>For CLIA-approved laboratory testing, covers: policies, identifying staff responsible for performing and supervising waived testing, competency requirements, quality control, and record keeping.</td>
</tr>
<tr>
<td>Required Written Documentation</td>
<td>Identifies elements of performance requiring written documentation. See the Required Written Documents chapter in the manual for complete details.</td>
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| Optional Certification Requirements   | Post-Acute Care Certification  
  – Addresses processes key to safe, effective transition from acute care to a lower level of care setting or a return home  
  Memory Care Certification  
  – Addresses processes key to patients or residents with all levels of memory impairment |

### Your Surveyors: Seasoned Industry Professionals

Joint Commission surveyors are experienced in the industry, understand the day-to-day issues that confront providers, 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 Joint Commission provides 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. The Joint Commission evaluates its surveyors’ performance continually throughout the year.

The collaborative, on-site **education** provided by surveyors offers strategies that help your organization better meet the intent of the standards and, more importantly, improve performance.
# Preparation Timeline

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<tr>
<th>JOINT COMMISSION ACTIVITY</th>
<th>YOUR ACTIVITY</th>
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<tbody>
<tr>
<td>Upon receipt of your request for an application</td>
<td>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.</td>
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<tr>
<td>Email message sent with access to the electronic application for accreditation.</td>
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<tr>
<td><strong>Upon receipt of your application for accreditation and deposit</strong></td>
<td>Work with your account executive to schedule your survey. It should be within 12 months of your application submission date.</td>
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<tr>
<td>You are assigned an account executive.</td>
<td>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.</td>
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<tr>
<td>You will receive a complimentary copy of the Comprehensive Accreditation Manual.</td>
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<tr>
<td>You are given access to a complimentary 6-month online subscription to Perspectives, the official newsletter of The Joint Commission.</td>
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<tr>
<td>You are given access to the Focused Standards Assessment tool for use as a comprehensive pre-survey assessment.</td>
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</tr>
<tr>
<td><strong>30 days before the on-site survey</strong></td>
<td>Confirmation of survey dates and name(s) of surveyor(s) are communicated.</td>
</tr>
<tr>
<td>Confirmation of survey dates and name(s) of surveyor(s) are communicated.</td>
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</tr>
<tr>
<td><strong>On-site survey</strong></td>
<td>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).</td>
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<tr>
<td>Surveyor(s) arrive for your on-site survey.</td>
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<tr>
<td>At the conclusion of the survey, you receive a copy of the summary report, which details the preliminary findings during the on-site survey.</td>
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<tr>
<td><strong>2 – 10 days after survey</strong></td>
<td>Review any findings and make plans for corrections (submitting an Evidence of Standards Compliance report) within the specified time ranges, usually 45-60 days.</td>
</tr>
<tr>
<td>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.</td>
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</tr>
<tr>
<td>JOINT COMMISSION ACTIVITY</td>
<td>YOUR ACTIVITY</td>
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<tr>
<td><strong>60 days after final report is posted</strong></td>
<td>The Joint Commission reviews any Evidence of Standards Compliance reports you submitted. For any accreditation requirements scored as partial or non-compliant, you submit your Evidence of Standards Compliance to The Joint Commission, which identifies the action taken and, if indicated, the measure(s) of success you will track over the next four months to show compliance is sustained.</td>
</tr>
<tr>
<td><strong>Monthly</strong></td>
<td>N/A</td>
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<tr>
<td><strong>Two times per year</strong></td>
<td>Updates to the electronic version of the accreditation manual are made available to each accredited organization on the Joint Commission Connect extranet site.</td>
</tr>
<tr>
<td><strong>Annually (except for a year in which an on-site survey is conducted)</strong></td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Annually</strong></td>
<td>Invoice for annual fee is posted in January to organization’s secured extranet site.</td>
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<tr>
<td><strong>Within 30 days of any significant organizational changes</strong></td>
<td>An update form for this purpose can be found on the organization’s extranet site, 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.</td>
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E-dition® (Electronic Standards Manual)

This web-based version of the standards manual can be accessed electronically. One FREE license is sent upon receipt of a completed application and deposit. *Request a 90-day trial on our website.*

Comprehensive Accreditation Manuals

To order the standards or to access additional resources to help you prepare for accreditation, visit [www.jcrinc.com](http://www.jcrinc.com) or call 1-877-223-6866.

Joint Commission Resources

Joint Commission Resources provides innovative solutions to help health care organizations improve patient safety and quality through the provision of education, publications, and evaluation services. For additional educational resources, visit [www.jcrinc.com](http://www.jcrinc.com) or call 1-877-223-6866.
Joint Commission Center for Transforming Healthcare

The Joint Commission Center for Transforming Healthcare works to solve health care’s most critical safety and quality problems such as hand hygiene compliance, hand-off communications and falls. With its Targeted Solutions Tool® the Center uses a systematic approach to analyze specific breakdowns in care and their causes, and provide solutions to these problems for Joint Commission customers.

The Leading Practice Library

The Leading Practice Library offers real life solutions successfully implemented by accredited organizations that support patient safety and quality health care. The documents are cross-referenced to corresponding chapters in Joint Commission standards manuals.

Free Publicity Kit

Publicize your achievement in receiving The Gold Seal of Approval® by notifying patients, the public, the local media, third-party payors and referral sources. The Joint Commission offers free publicity assistance including:

- Suggestions for celebrating your accreditation
- Guidelines for publicizing your accreditation
- Sample news releases
- Downloadable The Gold Seal of Approval® artwork

Quality Check®

Following your survey, information about your accreditation status will be posted on Quality Check® at www.qualitycheck.org. Quality Check® allows potential patients and referrers to search for accredited organizations within a city, state, or by type of setting.
Need More Information?

Getting Started
- How to get started
- The overall accreditation process
- The cost of accreditation
- How to get a free trial of the standards
- How to request an application
- Staff training resources

CONTACT: THE BUSINESS DEVELOPMENT TEAM
Phone: 630-792-5020
Email: NCC@jointcommission.org

Managing the Accreditation Process
- Completing my application
- Scheduling a survey date
- Specific issues related to ongoing accreditation

CONTACT: YOUR ACCOUNT EXECUTIVE
Phone: 630-792-3007

Our Standards
- Complying with specific standards

CONTACT: THE STANDARDS INTERPRETATION GROUP
Website: www.jointcommission.org/Standards

Manuals and System Training
- Obtaining printed or electronic standards manuals
- Custom education for your organization
- On-demand Web-based education

CONTACT: JOINT COMMISSION RESOURCES (JCR)
Phone: 877-223-6866
Email: jrcustomerservice@pbd.com
Website: www.jcrinc.com