

Shorter Time Frame for Second Survey Under the Early Survey Policy

Organizations that choose the two-part Early Survey Policy for initial accreditation can now select a shorter time frame for completing the second survey. This change, **effective immediately for all accreditation programs**, comes in response to customer requests to more quickly come into compliance with state legislative or other regulatory requirements. [Previous requirements for initial accreditation were aligned with a 4-month track record, which was eliminated from the Early Survey Policy in January 2008 (see January 2008 *Perspectives*, pages 4 and 5).]

An organization seeking to be accredited for the first time by The Joint Commission may choose the Early Survey Policy option described in “The Accreditation Process” (ACC) chapter of its *Comprehensive Accreditation Manual* (provided in the box beginning below). When an organization chooses this option, The Joint Commission conducts two on-site surveys.

The Joint Commission can conduct the first survey as early as two months before the organization begins its operations, provided that the organization meets certain criteria. Generally, the first survey uses a limited set of standards and assesses only the organization’s physical facilities, policies and procedures, plans, and related structural considerations. For this reason, organizations undergoing the first survey under this policy are not recognized by the Centers for Medicare & Medicaid Services (CMS) to meet deemed status requirements.

The Joint Commission grants Preliminary Accreditation to an organization that is in satisfactory compliance with a subset of the standards and their elements of performance (EPs) assessed during the first survey. The Preliminary Accreditation decision includes assignment of an additional announced survey against the full set of applicable standards. (**Note:** *The first and second surveys will be unannounced for organizations seeking to*

Joint Commission
Requirement

Official Publication of Joint Commission Policy Change
Changes to the Early Survey Policy

APPLICABLE TO ALL ACCREDITATION PROGRAMS

Effective Immediately

Early Survey Policy

The figure highlights the Early Survey Policy option. An organization that wants to be accredited for the first time by The Joint Commission may choose the Early Survey Policy option described here.

Early Survey Policy	
First Survey <ul style="list-style-type: none">● Conducted up to two months before opening● Licensed (according to law and regulation)● Building identified, constructed, and equipped● CEO or administrator, director of clinical or medical services (medical director), and nurse executive identified● Identified opening date● Announced (except for deemed status purposes)● Limited set of standards (physical plant, policies and procedures)● Outcome: Preliminary Accreditation	Second Survey <ul style="list-style-type: none">● Timeframe selected by the organization within four months after the decision from the first survey of the acceptance of its first ESC● Announced Unannounced (except for deemed status purposes)● Full survey● Outcome: Change in Preliminary Accreditation decision to Accredited, Provisional Accreditation, Conditional Accreditation, Preliminary Denial of Accreditation, or Denial of Accreditation. The effective date of the accreditation decision is the day after the second survey if the organization does not receive any RFIs. If the organization receives at least one RFI and therefore must submit an ESC that resolves all RFIs, the effective date of the accreditation decision is then set retroactively as the date the successful ESC is submitted.


Figure. Early Survey Policy

meet CMS deemed status requirements.) Previously, this time frame extended to four to six months after the first survey. This change in policy allows the organization to have a survey when it chooses to do so within four months of the acceptance of the organization's Evidence of Standards Compliance. This second survey provides the more comprehensive assessment that CMS will recognize for deemed status.

This policy stems from a decision rule change published in the August 2009 *Perspectives* issue (p. 12):

PA01 The organization has demonstrated compliance with the selected standards used in the first survey conducted under the Early Survey Policy.

Note: *The first survey is conducted using a defined subset of applicable standards. A Preliminary Accreditation decision remains in effect until the organization completes the second full survey.*

Changes to the policy are shown in the box on pages 4, 5, and 8, with additions in underline text and deletions in ~~striketrough~~. 

Changes to the Early Survey Policy (continued)

Early Survey Policy (Preliminary Accreditation)

A. Eligibility. The Early Survey Policy is available to any organization that is currently not accredited, except an organization that has been denied accreditation. An organization must declare during the application process that it wishes to be surveyed under this policy.

B. The First Survey. When an organization chooses to be surveyed under the Early Survey Policy, The Joint Commission conducts two on-site surveys, both of which will be announced, unless the organization is using accreditation to meet deemed status purposes. The Joint Commission can conduct the first survey as early as two months before the organization begins operating its operations, provided that the organization meets the following criteria:

- It is licensed or has a provisional license, according to applicable law and regulation.
- The building in which the services will be offered or from which the services will be coordinated is identified, constructed, and equipped to support such services.
- It has identified its CEO or administrator, its director of clinical or medical services, and its nurse executive, if applicable.
- It has identified the date it will begin operations.

Generally, the first survey uses a limited set of standards and assesses only the organization's physical facilities, policies and procedures, plans, and related structural considerations. For this reason, organizations surveyed under this policy are not recognized by CMS to meet the requirements for Medicare certification.

C. Preliminary Accreditation. The Joint Commission grants Preliminary Accreditation to an organization that is in satisfactory compliance with a limited subset of the standards and their EPs assessed in the first survey. An organization that is not in satisfactory compliance must reapply and begin the accreditation process again.

The Preliminary Accreditation decision includes assignment of an additional announced survey against the full set of applicable standards within six months of the first survey. **(Note: The survey will be unannounced for organizations seeking to meet CMS deemed status requirements.)** The survey assesses the organization's evidence of compliance with all applicable EPs with the standards for at least four months.

For an organization operating that has begun its operations when the survey is conducted, if it does not receive any RFIs, the effective date for its Preliminary Accreditation decision is the day after the survey is conducted if the organization does not receive any RFIs. If the organization receives at least one RFI and therefore must submit an acceptable ESC report that resolves all RFIs, the effective date for Preliminary Accreditation is the date of the acceptable ESC submission.

For an organization not in operation at the time of the survey, if it does not receive any RFIs, the effective date for its Preliminary Accreditation decision is the day after it begins its operations ~~operating if the organization does not receive any RFIs~~. If the organization receives at least one RFI and therefore must submit an acceptable ESC report that resolves all RFIs, the effective date for Preliminary Accreditation is ~~then set retroactively as~~ the date of the acceptable ESC submission. **If the (Note: Any organization is not in operation at the time of survey, the organization must confirm in writing the date it begins operating its operations.)**

A Preliminary Accreditation decision remains in effect until the organization has completed a second, full survey or until The Joint Commission has withdrawn the Preliminary Accreditation. The Joint Commission may withdraw Preliminary Accreditation in the following situations:

Continued on page 8

Changes to the Early Survey Policy (continued)

- If an organization that was not providing services at the time of the first survey does not begin providing services when expected
- If an organization does not meet the survey eligibility criteria (see above)
- If an organization fails to accept the date of the second survey
or
- If an organization is found to be not in satisfactory compliance with the applicable standards and their EPs

In any of these cases, the organization must begin the accreditation process again.

D. The Second Survey. The second survey under the Early Survey Policy is an **announced** full accreditation survey.

(Note: The second survey will be unannounced for organizations seeking to meet CMS deemed status requirements.) The Joint Commission conducts this survey at the following times:

- Approximately six months after the first survey
- ~~At least four months after the organization begins operating~~
or
- At a timeframe selected by the organization within four months of the acceptance of its first ESC for organizations seeking to meet CMS deemed status requirements

Based on survey results, the organization's accreditation decision then changes to one of the following:

- Accredited
- Provisional Accreditation
- Conditional Accreditation
- Preliminary Denial of Accreditation
or
- Denial of Accreditation

The effective date of the accreditation decision is the day after the second survey if the organization does not receive any RFIs. If the organization receives at least one RFI and therefore must submit an acceptable ESC report that resolves all RFIs, the effective date for Accreditation is ~~then set retroactively as~~ the date of the acceptable ESC submission. The organization's accreditation cycle begins the day after the second survey was conducted, unless The Joint Commission reached a decision to deny accreditation. ~~Submission of an acceptable ESC may be required based on the survey finding.~~