

Chapter 1 : JCI Accreditation Standards 6th calendrierdelascience.com - PDF Free Download

The table includes each standard's current number in the 6th edition as well as its number from the 5th edition. some standards are new to the 6th edition. and the JCI Standards Advisory Panel for patient safety and quality of care issues not addressed in the 5th edition hospital standards. and € evolving health care practices and the.

The mission of Joint Commission International JCI is to improve the safety and quality of care in the international community through the provision of education, publications, consultation, and evaluation services. Joint Commission Resources educational programs and publications support, but are separate from, the accreditation activities of Joint Commission International. Attendees at Joint Commission Resources educational programs and purchasers of Joint Commission Resources publications receive no special consideration or treatment in, or confidential information about, the accreditation process. No part of this publication may be reproduced in any form or by any means without written permission from the publisher. Printed in the U. For more information about Joint Commission International, please visit <http://www.jointcommission.org>. Contents Standards Advisory Panel Health Care Organization Management Standards Academic Medical Center Hospital Standards Each of the five previous editions have sought to reflect the most current thinking in patient safety practices and concepts to help accredited and nonaccredited organizations uncover their most pressing safety risks and advance their goals for continuous quality improvement. This tradition carries on with the 6th edition as it seeks to continue the work of making health care as safe as possible. The Joint Commission International Accreditation Standards for Hospitals contain the standards, intents, measurable elements MEs , a summary of changes for this edition of the JCI hospital standards, a summary of key accreditation policies and procedures, a glossary of terms, and an index. This introduction is designed to provide information on the following topics: The JCI standards development process is a collaboration between JCI, accredited organizations, and experts in quality and safety. This new edition takes into account developments in the science of quality improvement and patient safety as well as the experiences of the organizations that used the 5th edition hospital standards to improve the safety and quality of care in their organizations. The development process included the following: These focus groups were conducted in 16 countries, in regions around the world. How are the standards organized? The standards are organized around the important functions common to all health care organizations. This approach is now the most widely used around the world and has been validated by scientific study, testing, and application. The standards are grouped into three major areas: The standards apply to the entire organization as well as to each department, unit, or service within the organization. What are the Academic Medical Center hospital standards and do they apply to my organization? The Academic Medical Center AMC hospital standards were developed and first published in to recognize the unique resource such centers represent for health professional education and human subjects research in their community and country. This section of standards contains two chapters: Unless deliberately included in the quality framework, education and research activities often are the unnoticed partners in patient care quality monitoring and improvement. To address this concern, the standards in these two chapters present a framework for including medical education and research into the quality and patient safety activities of academic medical center hospitals. Many health care organizations may consider themselves to be academic medical centers. Academic medical center hospital applicants must meet each of the following three criteria: The applicant hospital is organizationally or administratively integrated with a medical school. The applicant hospital is the principal site for the education of both medical students undergraduates and postgraduate medical specialty trainees for example, residents or interns from the medical school noted in criterion 1. At the time of application, the applicant hospital is conducting medical research with approval and oversight by an Institutional Review Board IRB or research ethics committee. All hospitals meeting the eligibility criteria must comply with the requirements in these two chapters as well as the other requirements detailed in this manual in order to be accredited by JCI. These standards are available in the international public domain for use by individual health care organizations and by public agencies seeking to improve the quality of patient care. To assist such organizations, JCI has provided a document that lists the

standards but not the intent statements and MEs that can be downloaded at no cost from the JCI website. The translation and use of the standards as published by JCI requires written permission. When a concept is addressed by the JCI standards and by the laws or regulations of a national or local authority, JCI requires that an organization follow whichever body has set the higher or stricter requirement. For example, JCI requires that organizations use two patient identifiers in a variety of processes. However, if that same national standard allows the use of bed number as an identifier, a practice JCI explicitly prohibits, the organization is prohibited from doing so. In this case, the organization would need to use three identifiers the stricter national requirement and would be prohibited from using bed number as an identifier the stricter JCI requirement. How do I use this standards manual? This international standards manual can be used to accomplish the following: Please note that these are neither the complete list of policies nor every detail of each policy. Hospitals must be compliant with the APRs at all times during the accreditation process. However, APRs are not scored like standards during the on-site survey; hospitals are considered either compliant or not compliant with the APRs. When a hospital is not compliant with a specific APR, the hospital will be required to become compliant or risk losing accreditation. Standards JCI standards define the performance expectations, structures, or functions that must be in place for a hospital to be accredited by JCI. The bulleted lists in the intent statement are considered advisory and serve as a helpful explanation of practices that might meet the standard. Numbered or lettered lists in the intent statement include required elements that must be in place in order to meet the standard. Measurable Elements MEs Measurable elements MEs of a standard indicate what is reviewed and assigned a score during the on-site survey process. The MEs for each standard identify the requirements for full compliance with the standard. There are many changes to this 6th edition of the hospital manual. A thorough review is strongly recommended. This 6th edition of the hospital manual includes a summary of changes to the manual immediately preceding the Accreditation Participation Requirements chapter. This summary identifies new standards, new measurable elements, an explanation of the changes, as well as text that has been edited from the 5th edition for the purpose of providing increased clarity and additional examples. Other changes to the hospital manual include: With this feature, JCI is continuing to provide support for its standards by citing important evidence that provides assistance with compliance. As in the 5th edition, some standards require the hospital to have a policy, procedure, or other type of written document for specific processes. Those standards are indicated by a P icon after the standard text. All written policies, procedures, and programs will be scored together at MOI. To make the examples more apparent to the user, the term for example is printed in bold text. Many terms are defined within intents; look for these key terms in italics for example, leadership. All key terms are defined in the glossary in the back of this edition. Information and experience related to the standards will be gathered on an ongoing basis. If a standard no longer reflects contemporary health care practice, commonly available technology, quality management practices, and so forth, it will be revised or deleted. It is current practice that the standards are revised and published approximately every three years. For hospitals accredited under the 5th edition of the standards, this is the date by which they now must be in full compliance with all the standards in the 6th edition. Standards are published at least six months in advance of the effective date to provide time for organizations to come into full compliance with the revised standards by the time they are effective. For hospitals seeking accreditation for the first time, the effective date indicates the date after which all surveys and accreditation decisions will be based on the standards of the 6th edition. Any survey and accreditation decisions before the effective date will be based on the standards of the 5th edition. Academic medical center hospital applicants must meet each of the criteria above in addition to the following three criteria: Those clinical services that are planned and thus not identified in the E-App and begin operations at a later time will require a separate extension survey to evaluate those services. Medical research Medical research conducted at the academic medical center hospital represents varied medical areas or specialties within the institution and includes basic, clinical, and health services research. Such research may include clinical trials, therapeutic interventions, development of new medical technologies, and outcomes research, among others. In some cases, the number has changed for example, a standard may have moved to a new location in the 6th edition or two standards may now be combined into one. In addition, a description of changes is provided, and if the standard has new

measurable elements or is a new standard, a checkmark appears in one of the last two columns.

Chapter 2 : JCI Standards ASC Archives - Page 2 of 3 - | Page 2

Joint Commission International Accreditation Standards for Hospitals, 6th Edition, provides the basis for accreditation of hospitals throughout the world. Joint Commission International (JCI) standards define the performance expectations, structures, and functions that must be in place for a hospital to be accredited by JCI.

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The changes to this 6th edition of the hospital standards were influenced and guided by several sources, including suggestions from JCI-accredited organizations, JCI surveyors and consultants, and the JCI Standards Advisory Panel for patient safety and quality of care issues not addressed in the 5th edition hospital standards.

Chapter 4 : Joint Commission International - Qcgrowcompany

JOINT COMMISSION INTERNATIONAL ACCREDITATION STANDARDS FOR HOSPITALS, 6TH EDITION Joint Commission International A division of Joint Commission Resources, Inc. The mission of Joint Commission International (JCI) is to improve the safety and quality of care in the.

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As with all JCI standards, this edition contains the complete set of standards, statements of intent for each standard, and measurable elements for assessing compliance with each standard. This structure will permit.

Chapter 6 : JACIE Accreditation | EBMT

The 6th. Edition JCI Standard for Hospital Update June 8, Bangkok Hospital Headquarter Patrawan Jansiri Head of TQCI Department Bangkok Hospital Headquarter.

Chapter 7 : New JCI standard and systems | IMTJ

GLD Overview The term leaders is used to indicate that one or more individuals are accountable for the expectation(s) 33 Standards, MEs, 20 P.