



Accreditation Program: Behavioral Health Care

Performance Improvement

**Standard PI.01.01.01**

The organization collects data to monitor its performance.

**Elements of Performance for PI.01.01.01**

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|--------------|---|----------|
| 1.           | The leaders set priorities for data collection. (See also LD.04.04.01, EP 1)  | <b>A</b> |
| 2.           | The organization identifies the frequency for data collection.  | <b>A</b> |
| <b>M</b> 3.  | The organization collects data on the following: Performance improvement priorities identified by leaders. (See also LD.04.04.01, EP 1)   | <b>C</b> |
| 14.          | The organization collects data on the following: Significant medication errors. (See also LD.04.04.01, EP 2; MM.08.01.01, EP 1)   | <b>A</b> |
| 15.          | The organization collects data on the following: Significant adverse medication reactions. (See also LD.04.04.01, EP 2; MM.08.01.01, EP 1)  | <b>A</b> |
| <b>M</b> 16. | The organization collects data on the following:<br>- Whether the individual served was asked about treatment goals and needs<br>- Whether the individual served was asked if his or her treatment goals and needs were met<br>- The view of the individual served regarding how the organization can improve the safety of the care, treatment, or services provided<br>(See also RI.01.01.01, EP 17, for opioid treatment programs) | <b>C</b> |
| 27.          | The organization collects data to measure the performance of high-risk, high-volume, problem-prone processes provided to high-risk or vulnerable populations, as defined by the organization. (See also LD.04.04.01, EP 2)<br>Note: Examples of such processes include the use of restraints, seclusion, suicide watch, and behavior management and treatment.  | <b>A</b> |
| 30.          | The organization considers collecting data on the following:<br>- Staff opinions and needs<br>- Staff perceptions of risk to individuals<br>- Staff suggestions for improving safety of the individuals served<br>- Staff willingness to report adverse events<br>Note: If the organization has not collected data on this topic, consideration can be demonstrated through methods such as interviews or meeting minutes.            | <b>A</b> |
| 31.          | For foster care: The agency collects data on its performance, including the safety of the placement and the maintenance or improvement of the individual's level of functioning.  | <b>A</b> |
| 32.          | For foster care: The agency collects data on the permanency of the placement and the permanency of outcome when they are within the organization's scope of services.   | <b>A</b> |

**KEY:** **A** indicates scoring category A; **C** indicates scoring category C; **2** indicates situational decision rules apply; **3** indicates direct impact requirements apply; **M** indicates Measure of Success if needed; **D** indicates that documentation is required

37. For opioid treatment programs: The program collects data about treatment outcomes and processes. **A**
- Note: Examples of data collected include the following:
- Use of illicit opioids, illegal drugs, and the problematic use of alcohol and prescription medications
  - Criminal activities and entry into the criminal justice system
  - Behaviors contributing to the spread of infectious diseases
  - Restoration of physical and mental health and functional status
  - Retention in treatment
  - Number of patients who are employed
  - Abstinence from drugs of abuse

### Standard PI.02.01.01

The organization compiles and analyzes data.

#### Elements of Performance for PI.02.01.01

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|----------|---|----------|
| <b>M</b> | 1. The organization compiles data into formats that enable them to be analyzed.   | <b>C</b> |
|          | 2. The organization identifies the frequency for data analysis.   | <b>A</b> |
|          | 4. The organization analyzes and compares internal data over time to identify levels of performance, patterns, trends, and variations.  | <b>A</b> |
|          | 5. The organization compares data with external sources, when available.<br>Note: Examples of external sources of information include the following:  | <b>A</b> |
|          | <ul style="list-style-type: none"> <li>- Recent scientific, clinical, and management literature, including Sentinel Event Alerts</li> <li>- Evidence-based guidelines or parameters</li> <li>- Performance measures</li> <li>- Reference databases</li> <li>- Other organizations with similar processes</li> </ul> |          |
|          | 8. The organization uses the results of data analysis to identify improvement opportunities. (See also LD.03.02.01, EP 5; PI.03.01.01, EP 1)  | <b>A</b> |

### Standard PI.03.01.01

The organization improves performance.

#### Elements of Performance for PI.03.01.01

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|----|---|----------|
| 1. | Leaders prioritize the identified improvement opportunities. (See also PI.02.01.01, EP 8) | <b>A</b> |
| 2. | The organization takes action on improvement priorities.                                  | <b>A</b> |
| 3. | The organization evaluates whether actions taken resulted in improvements.                | <b>A</b> |

**KEY:** **A** indicates scoring category A; **C** indicates scoring category C; **2** indicates situational decision rules apply; **3** indicates direct impact requirements apply; **M** indicates Measure of Success if needed; **D** indicates that documentation is required

4. The organization takes action when it does not achieve or sustain planned improvements.

**A**

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