

Performance Improvement Chapter Revisions

Ambulatory Health Care (AHC) Accreditation Program

Performance Improvement (PI) Chapter

PI.01.01.01

Current Requirement Text:

The organization collects data to monitor its performance.

PI.01.01.01

Current EP Text:

The leaders set priorities for and identify the frequency of data collection. (See also LD.03.07.01, EP 2)

EP: 1

Revision Type: Consolidated

LD.03.07.01

New EP Text:

As part of performance improvement, leaders do the following:

- Set priorities for performance improvement activities and patient health outcomes
- Give priority to high-volume, high-risk, or problem-prone processes for performance improvement activities
- Identify the frequency of data collection for performance improvement activities
- Reprioritize performance improvement activities in response to changes in the internal or external environment

(See also PI.01.01.01, EPs 2, 3, 5, 6, 7, 12, 13; PI.02.01.01, EP 1)

EP: 2

Ambulatory Health Care (AHC) Accreditation Program

PI.02.01.01

Current Requirement Text:

N/A

Revision Type: New

PI.02.01.01

New Requirement Text:

The organization has a performance improvement plan.

PI.02.01.01

Current EP Text:

N/A

EP:

Revision Type: New

PI.02.01.01

New EP Text:

Performance improvement priorities established by organization leaders are described in a written plan that includes the following:

- The defined process(es) needing improvement, along with any stakeholder (for example, patient, staff, regulatory) requirements, project goals, and improvement activities
- Method(s) for measuring performance of the process(es) identified for improvement
- Analysis method(s) for identifying causes of variation and poor performance in the process(es)
- Methods implemented to address process deficiencies and improve performance
- Methods for monitoring and sustaining the improved process(es)

(See also LD.03.07.01, EP 2)

EP: 1

PI.02.01.01

Current EP Text:

N/A

EP:

Revision Type: New

PI.02.01.01

New EP Text:

Leadership reviews the plan for addressing performance improvement priorities at least annually and updates it to reflect any changes in strategic priorities and in response to changes in the internal or external environment.

EP: 2

PI.02.01.01

Current Requirement Text:

The organization compiles and analyzes data.

Revision Type: Moved

PI.03.01.01

New Requirement Text:

The organization compiles and analyzes data.

PI.02.01.01

Current EP Text:

The organization analyzes and compares internal data over time to identify levels of performance, patterns, trends, and variations.

EP: 4

Revision Type: Moved

PI.03.01.01

New EP Text:

The organization analyzes and compares internal data over time to identify levels of performance, patterns, trends, and variations.

EP: 4

Ambulatory Health Care (AHC) Accreditation Program

PI.02.01.01

EP: 6

Current EP Text:

Revision Type: Moved

The organization reviews and analyzes incidents where the radiation dose index (computed tomography dose index [CTDIvol], dose length product [DLP], or size-specific dose estimate [SSDE]) from diagnostic CT examinations exceeded expected dose index ranges identified in imaging protocols. These incidents are then compared to external benchmarks.

Note 1: While the CTDIvol, DLP, and SSDE are useful indicators for monitoring radiation dose indices from the CT machine, they do not represent the patient's radiation dose.

Note 2: This element of performance does not apply to dental cone beam CT radiographic imaging studies performed for diagnosis of conditions affecting the maxillofacial region or to obtain guidance for the treatment of such conditions.

PI.03.01.01

EP: 6

New EP Text:

The organization reviews and analyzes incidents where the radiation dose index (computed tomography dose index [CTDIvol], dose length product [DLP], or size-specific dose estimate [SSDE]) from diagnostic CT examinations exceeded expected dose index ranges identified in imaging protocols. These incidents are then compared to external benchmarks.

Note 1: While the CTDIvol, DLP, and SSDE are useful indicators for monitoring radiation dose indices from the CT machine, they do not represent the patient's radiation dose.

Note 2: This element of performance does not apply to dental cone beam CT radiographic imaging studies performed for diagnosis of conditions affecting the maxillofacial region or to obtain guidance for the treatment of such conditions.

PI.02.01.01

EP: 8

Current EP Text:

Revision Type: Moved

The organization uses the results of data analysis to identify improvement opportunities.

PI.03.01.01

EP: 8

New EP Text:

The organization uses the results of data analysis to identify improvement opportunities.

PI.02.01.01

EP: 11

Current EP Text:

Revision Type: Moved

For ambulatory surgical centers that elect to use The Joint Commission deemed status option: The number and scope of distinct improvement projects conducted annually reflects the scope and complexity of the ambulatory surgical center's services and operations.

PI.03.01.01

EP: 11

New EP Text:

For ambulatory surgical centers that elect to use The Joint Commission deemed status option: The number and scope of distinct improvement projects conducted annually reflects the scope and complexity of the ambulatory surgical center's services and operations.

PI.02.01.01

EP: 19

Current EP Text:

Revision Type: Moved

The organization monitors the use of opioids to determine if they are being prescribed safely. (See also LD.04.03.13, EP 1)

PI.03.01.01

EP: 19

New EP Text:

The organization monitors the use of opioids to determine if they are being prescribed safely. (See also LD.04.03.13, EP 1)

PI.02.01.01

EP: 20

Current EP Text:

Revision Type: Moved

For organizations that provide fluoroscopic services: The organization reviews and analyzes instances where the radiation exposure and skin dose threshold levels identified by the organization are exceeded.

Note: Radiation exposure thresholds may be established based on metrics such as reference-air kerma, cumulative-air kerma, kerma-area product, or fluoroscopy time. (See also PC.02.01.01, EP 30)

PI.03.01.01

EP: 20

New EP Text:

For organizations that provide fluoroscopic services: The organization reviews and analyzes instances where the radiation exposure and skin dose threshold levels identified by the organization are exceeded.

Note: Radiation exposure thresholds may be established based on metrics such as reference-air kerma, cumulative-air kerma, kerma-area product, or fluoroscopy time. (See also PC.02.01.01, EP 30)

Ambulatory Health Care (AHC) Accreditation Program

PI.02.01.01

EP: 21

Current EP Text:

The organization provides incidence data to key stakeholders, including leaders, licensed independent practitioners, nursing staff, and other clinicians on surgical site infections.

Revision Type: Moved

PI.03.01.01

EP: 21

New EP Text:

The organization provides incidence data to key stakeholders, including leaders, licensed independent practitioners, nursing staff, and other clinicians on surgical site infections.

PI.03.01.01

Current Requirement Text:

The organization improves performance.

Revision Type: Moved

PI.04.01.01

New Requirement Text:

The organization improves performance.

PI.03.01.01

EP: 2

Current EP Text:

The organization takes action on improvement priorities. (See also MM.08.01.01, EP 6)

Revision Type: Moved and Revised

PI.04.01.01

EP: 2

New EP Text:

The organization acts on improvement priorities. (See also MM.08.01.01, EP 6)

PI.03.01.01

EP:

Current EP Text:

N/A

Revision Type: New

PI.04.01.01

EP: 3

New EP Text:

The organization uses improvement tools or methodologies to improve its performance.

PI.03.01.01

EP: 4

Current EP Text:

The organization takes action when it does not achieve or sustain planned improvements. (See also MM.09.01.03, EP 5)

Revision Type: Moved and Revised

PI.04.01.01

EP: 5

New EP Text:

The organization acts when it does not achieve or sustain planned improvements. (See also MM.09.01.03, EP 5)

PI.03.01.01

EP: 10

Current EP Text:

For ambulatory surgical centers that elect to use The Joint Commission deemed status option: The ambulatory surgical center implements preventive strategies throughout the facility targeting adverse patient events and makes certain that all staff are familiar with these strategies. (See also LD.03.09.01, EPs 2–4 and 9)

Revision Type: Moved

PI.04.01.01

EP: 10

New EP Text:

For ambulatory surgical centers that elect to use The Joint Commission deemed status option: The ambulatory surgical center implements preventive strategies throughout the facility targeting adverse patient events and makes certain that all staff are familiar with these strategies. (See also LD.03.09.01, EPs 2, 3, 4, 9)

Ambulatory Health Care (AHC) Accreditation Program

PI.03.01.01

EP: 11

Current EP Text:

Revision Type: Moved

For organizations that elect The Joint Commission Primary Care Medical Home option: The organization uses the data it collects on the patient's perception of the safety and quality of care, treatment, or services to improve its performance. This data includes the following:

- Patient experience and satisfaction related to access to care, treatment, or services and communication
- Patient perception of the comprehensiveness of care, treatment, or services
- Patient perception of the coordination of care, treatment, or services
- Patient perception of the continuity of care, treatment, or services

PI.04.01.01

EP: 11

New EP Text:

For organizations that elect The Joint Commission Primary Care Medical Home option: The organization uses the data it collects on the patient's perception of the safety and quality of care, treatment, or services to improve its performance. This data includes the following:

- Patient experience and satisfaction related to access to care, treatment, or services and communication
- Patient perception of the comprehensiveness of care, treatment, or services
- Patient perception of the coordination of care, treatment, or services
- Patient perception of the continuity of care, treatment, or services

PI.03.01.01

EP: 12

Current EP Text:

Revision Type: Moved

For ambulatory surgical centers that elect to use The Joint Commission deemed status option: The organization's quality assurance and performance improvement activities demonstrate the following:

- Measurable improvement in patient health outcomes
- Improvements in patient safety by using quality indicators or performance measures associated with improved health outcomes
- Improvements in patient safety through efforts to identify and reduce medical errors

PI.04.01.01

EP: 12

New EP Text:

For ambulatory surgical centers that elect to use The Joint Commission deemed status option: The organization's quality assurance and performance improvement activities demonstrate the following:

- Measurable improvement in patient health outcomes
- Improvements in patient safety by using quality indicators or performance measures associated with improved health outcomes
- Improvements in patient safety through efforts to identify and reduce medical errors