

Performance Improvement Chapter Revisions

Laboratory (LAB) Accreditation Program

Performance Improvement (PI) Chapter

PI.01.01.01

Current Requirement Text:

The laboratory collects data to monitor its performance.

PI.01.01.01**Current EP Text:**

The laboratory 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, 6, 7, 17; PI.02.01.01, EP 1)

EP: 2

Laboratory (LAB) Accreditation Program

PI.02.01.01

Current Requirement Text:

N/A

Revision Type: New

PI.02.01.01

New Requirement Text:

The laboratory 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 laboratory 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 laboratory compiles and analyzes data.

Revision Type: Moved

PI.03.01.01

New Requirement Text:

The laboratory compiles and analyzes data.

PI.02.01.01

Current EP Text:

The laboratory uses statistical tools and techniques to analyze and display data.

EP: 3

Revision Type: Moved

PI.03.01.01

New EP Text:

The laboratory uses statistical tools and techniques to analyze and display data.

EP: 3

PI.02.01.01

Current EP Text:

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

EP: 4

Laboratory (LAB) Accreditation Program

PI.02.01.01

EP: 5

Current EP Text:

Revision Type: Moved

The laboratory compares data with external sources, when available.
 Note: Examples of external sources of information include the following:

- Recent scientific, clinical, and management literature, including Sentinel Event Alerts
- Practice guidelines or parameters
- Performance measures
- Reference databases
- Other organizations with similar processes and standards that are periodically reviewed and revised

PI.03.01.01

EP: 5

New EP Text:

The laboratory compares data with external sources, when available.
 Note: Examples of external sources of information include the following:

- Recent scientific, clinical, and management literature, including Sentinel Event Alerts
- Practice guidelines or parameters
- Performance measures
- Reference databases
- Other organizations with similar processes and standards that are periodically reviewed and revised

PI.02.01.01

EP: 8

Current EP Text:

Revision Type: Moved

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

PI.03.01.01

EP: 8

New EP Text:

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

PI.03.01.01

Current Requirement Text:

Revision Type: Moved

The laboratory improves performance.

PI.04.01.01

New Requirement Text:

The laboratory improves performance.

PI.03.01.01

EP: 2

Current EP Text:

Revision Type: Moved and Revised

The laboratory takes action on improvement priorities.

PI.04.01.01

EP: 2

New EP Text:

The laboratory acts on improvement priorities.

PI.03.01.01

EP:

Current EP Text:

Revision Type: New

N/A

PI.04.01.01

EP: 3

New EP Text:

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

PI.03.01.01

EP: 4

Current EP Text:

Revision Type: Moved and Revised

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

PI.04.01.01

EP: 5

New EP Text:

The laboratory acts when it does not achieve or sustain planned improvements.

Laboratory (LAB) Accreditation Program

PI.03.01.01

EP: 5

Current EP Text:

The laboratory develops and maintains a quality management system that directs and controls its quality improvement activities. *

Footnote *: Additional information can be found in the current edition of Clinical and Laboratory Standards Institute (CLSI) document GP26 (Quality Management System: A Model for Laboratory Services).

Revision Type: Moved

PI.04.01.01

EP: 6

New EP Text:

The laboratory develops and maintains a quality management system that directs and controls its quality improvement activities. *

Footnote *: Additional information can be found in the current edition of Clinical and Laboratory Standards Institute (CLSI) document GP26 (Quality Management System: A Model for Laboratory Services).
