

# Performance Improvement Chapter Revisions

## Office-Based Surgery (OBS) Accreditation Program

### Performance Improvement (PI) Chapter

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#### PI.01.01.01

**Current Requirement Text:**

The practice collects data to monitor its performance.

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**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, 12, 13; PI.02.01.01, EP 1)

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**EP: 2**

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### PI.02.01.01

**Current Requirement Text:**

N/A

**Revision Type:** New

### PI.02.01.01

**New Requirement Text:**

The practice has a performance improvement plan.

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### 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 practice 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)

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**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.

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**EP: 2**

### PI.02.01.01

**Current Requirement Text:**

The practice compiles and analyzes data.

**Revision Type:** Moved

### PI.03.01.01

**New Requirement Text:**

The practice compiles and analyzes data.

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### PI.02.01.01

**Current EP Text:**

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

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**EP: 4**

### PI.02.01.01

**Current EP Text:**

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

**EP: 8**

**Revision Type:** Moved

### PI.03.01.01

**New EP Text:**

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

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**EP: 8**

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<p><b>PI.02.01.01</b>  <b>Current EP Text:</b>                      The practice monitors the use of opioids to determine if they are being prescribed safely. (See also LD.04.03.13, EP 1)</p>	<p><b>EP: 19</b>  <b>Revision Type:</b> Moved</p>	<p><b>PI.03.01.01</b>  <b>New EP Text:</b>                      The practice monitors the use of opioids to determine if they are being prescribed safely. (See also LD.04.03.13, EP 1)</p>	<p><b>EP: 19</b></p>
<p><b>PI.02.01.01</b>  <b>Current EP Text:</b>                      For practices that provide fluoroscopic services: The practice reviews and analyzes instances where the radiation exposure and skin dose threshold levels identified by the practice 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)</p>	<p><b>EP: 20</b>  <b>Revision Type:</b> Moved</p>	<p><b>PI.03.01.01</b>  <b>New EP Text:</b>                      For practices that provide fluoroscopic services: The practice reviews and analyzes instances where the radiation exposure and skin dose threshold levels identified by the practice 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)</p>	<p><b>EP: 20</b></p>
<p><b>PI.02.01.01</b>  <b>Current EP Text:</b>                      The practice provides incidence data to key stakeholders, including leaders, licensed independent practitioners, nursing staff, and other clinicians on surgical site infections.</p>	<p><b>EP: 21</b>  <b>Revision Type:</b> Moved</p>	<p><b>PI.03.01.01</b>  <b>New EP Text:</b>                      The practice provides incidence data to key stakeholders, including leaders, licensed independent practitioners, nursing staff, and other clinicians on surgical site infections.</p>	<p><b>EP: 21</b></p>
<p><b>PI.03.01.01</b>  <b>Current Requirement Text:</b>                      The practice improves performance.</p>	<p><b>Revision Type:</b> Moved</p>	<p><b>PI.04.01.01</b>  <b>New Requirement Text:</b>                      The practice improves performance.</p>	
<p><b>PI.03.01.01</b>  <b>Current EP Text:</b>                      The practice takes action on improvement priorities. (See also MM.08.01.01, EP 6)</p>	<p><b>EP: 2</b>  <b>Revision Type:</b> Moved and Revised</p>	<p><b>PI.04.01.01</b>  <b>New EP Text:</b>                      The practice acts on improvement priorities. (See also MM.08.01.01, EP 6)</p>	<p><b>EP: 2</b></p>
<p><b>PI.03.01.01</b>  <b>Current EP Text:</b>                      N/A</p>	<p><b>EP:</b>  <b>Revision Type:</b> New</p>	<p><b>PI.04.01.01</b>  <b>New EP Text:</b>                      The practice uses improvement tools or methodologies to improve its performance.</p>	<p><b>EP: 3</b></p>

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**PI.03.01.01**

**EP: 4**

**Current EP Text:**

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

**Revision Type:** Moved and Revised

**PI.04.01.01**

**EP: 5**

**New EP Text:**

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

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