Integrating Performance Expectations on Accountability Measures into Standards
Hospital Accreditation Program

**PI.02.01.01**
The hospital compiles and analyzes data.

**Elements of Performance for PI.02.01.01**

1. The hospital compiles data in usable formats.
2. The hospital identifies the frequency for data analysis.
3. The hospital uses statistical tools and techniques to analyze and display data.
4. The hospital analyzes and compares internal data over time to identify levels of performance, patterns, trends, and variations.
5. The hospital compares data with external sources, when available.
6. The hospital analyzes its organ procurement conversion rate data as provided by the organ procurement organization (OPO). (See also TS.01.01.01, EP 1)
   Note: Conversion rate is defined as the number of actual organ donors over the number of eligible donors defined by the OPO, expressed as a percentage.
7. The hospital analyzes its organ procurement conversion rate data as provided by the organ procurement organization (OPO). (See also TS.01.01.01, EP 1)
   Note: Conversion rate is defined as the number of actual organ donors over the number of eligible donors defined by the OPO, expressed as a percentage.
8. The hospital uses the results of data analysis to identify improvement opportunities. (See also LD.03.02.01, EP 5; PI.03.01.01, EP 1)
12. When the hospital identifies undesirable patterns, trends, or variations in its performance related to the safety or quality of care (for example, as identified in the analysis of data or a single undesirable event), it includes the adequacy of staffing, including nurse staffing, in its analysis of possible causes.
   Note 1: Adequacy of staffing includes the number, skill mix, and competency of all staff. In their analysis, hospitals may also wish to examine issues such as processes related to work flow; competency assessment; credentialing; supervision of staff; and orientation, training, and education.
   Note 2: Hospitals may find value in using the staffing effectiveness indicators (which include National Quality Forum Nursing Sensitive Measures) to help identify potential staffing issues. (Refer to the “Staffing Effectiveness Indicators” (SEI) chapter)
13. When analysis reveals a problem with the adequacy of staffing, the leaders responsible for the hospital-wide patient safety program (as addressed at LD.04.04.05, EP 1) are informed, in a manner determined by the safety program, of the results of this analysis and actions taken to resolve the identified problem(s). (See also LD.03.05.01, EP 7)
14. At least once a year, the leaders responsible for the hospital-wide patient safety program review a written report on the results of any analyses related to the adequacy of staffing and any actions taken to resolve identified problems. (See also LD.04.04.05, EP 13)
PI.02.01.03
The hospital improves its performance on ORYX accountability measures.

Elements of Performance for PI.02.01.03

1. The hospital achieves a composite performance rate of at least 85% on the ORYX accountability measures transmitted to The Joint Commission.