QAPI

Quality Assurance and Performance Improvement

Director of Clinical Affairs and Quality Improvement

Quality Assurance Performance Improvement (483.75)

Requiring all LTC facilities to develop, implement, and maintain an effective comprehensive, data-driven QAPI program that focuses on systems of care, outcomes of care and quality of life.

The center must:

- Maintain documentation & demonstrate ongoing program;
- Present plan to survey team at first annual recertification survey that occurs following final regulations and annually thereafter;
- Present documentation & evidence of ongoing program's implementation to State Agency, Federal Surveyor or CMS on request:
  - ➢ Design & Scope, address full range of care & services provided;
  - ➢ All systems of care & management practices;
  - ➢ Include clinical care, quality of life, and patient choice;
  - ➢ Use best evidence to define & measure goals that reflect predictive processes of care to achieve expected outcomes;
  - ➢ Reflect the complexities, unique care, and services

    that the center provides.

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Intent & Purpose

Have a system that:

a. Monitors and investigates current practices to
- prevent adverse events
- increases consistent use of evidence based practices

b. Creates teams to make changes to achieve better outcomes

QAPI requirements phased in

QAPI requirements will be enforced over three phases:

1- Nov 2016, 2- Nov 2017, and 3- Nov 2019

Most of the requirements for the QAPI program will be implemented in **Phase 3.**

QAPI Phase 2 Initial QAPI Plan must be provided to State Agency Surveyor at annual survey (November 2017)

QAPI Detailed Checklist-Phase 1

Tool: QAPI Detailed Checklist (Phase 1)
483.75: Quality Assurance and Performance Improvement (QAPI)

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Purpose & Intent of 483.75: To develop, implement, and maintain an effective comprehensive, data-driven QAPI program that focuses on systems of care, outcomes of care, and quality of life.

QAPI requirements will be enforced over three phases (I- Nov 2016, II- Nov 2017, and III- Nov 2019). Most of the requirements for the QAPI program will be implemented in Phase 3. This checklist highlights the QAPI requirements that **must** be implemented in **Phase 1** (Nov 28, 2016).

Phase 1 – Checklist

Regulation	Necessary Actions
(g) Quality assessment and assurance. (1) A facility must maintain a quality assessment and assurance (QAA) committee consisting at a minimum of: (i) The director of nursing services; (ii) The Medical Director or his or her designee; (iii) At least three other members of the facility's staff, at least one of who must be the administrator, owner, a board member or other individual in a leadership role; (iv) Infection Control and Prevention Officer (AKA Infection Preventionist) – Phase 3	Form a QAA Committee for your center with at least the following five staff members: ☐ Director of nursing services (DON) ☐ Medical Director ☐ _____ (Leadership Representative) ☐ _____ ☐ _____ ☐ Infection Preventionist (Phase 3) *Note: Centers may add additional members based on needs and priorities of the center.*

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QAPI Plan – Phase 2

I. QAPI Goals/Purpose Statement

II. Scope

III. Guidelines for Governance and Leadership

IV. Feedback, Data Systems, and Monitoring

V. Guidelines for Performance Improvement Projects (PIPs)

VI. Systematic Analysis and Systemic Action

VII. Communications

VIII. Evaluation

IX. Establishment of the Plan

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Example Purpose Statement

describes how QAPI will support the overall vision and mission

The purpose of QAPI in our organization is to take a proactive approach to continually improving the way we care for and engage with our residents, caregivers, and other partners so that we may realize our vision to(reference **vision**).

To do this, all employees will participate in ongoing QAPI efforts which support our mission by (reference **mission**)

Example: QAPI Guiding Principles/Scope

- QAPI has a prominent role in our management and board functions, on par with monitoring reimbursement and maximizing revenue.

- Our organization uses QAPI to make decisions and guide our day-to-day operations.

- The outcome of QAPI in our organization is the quality of care and the quality of life of our residents.

- QAPI includes all employees, all departments and all services provided.

- QAPI focuses on systems and processes, rather than individuals. The emphasis is on identifying system gaps rather than on blaming individuals

Governance and Leadership

- Develops a culture that involves leadership seeking input from facility staff, residents, and their families and/or representatives.
- A key QAPI person
- Support, resources and training to staff
- Working systems and policies
- Incorporate QAPI into all your meetings
- Make QAPI visible

Feedback, Data Systems and Monitoring

- Monitor care and services, drawing data from multiple sources
- Using Performance Indicators to monitor care processes and outcomes
- Reviewing findings against benchmarks and/or targets the facility has established for performance.
- Tracking, investigating, and monitoring Adverse Events

Performance Improvement Projects (PIPs)

- A concentrated effort on a particular problem in one area
- Gathering information systematically to clarify issues or problems, and intervening for improvement
- Activities must track medical errors and adverse resident events, analyze their causes, and implement preventive actions and mechanisms that include feedback and learning throughout the center.
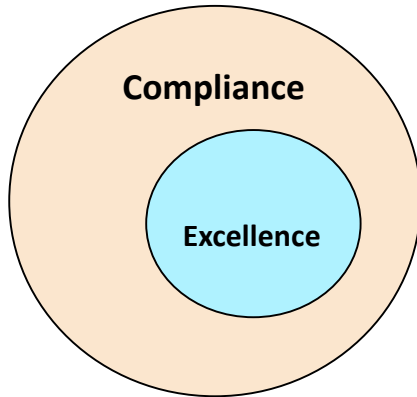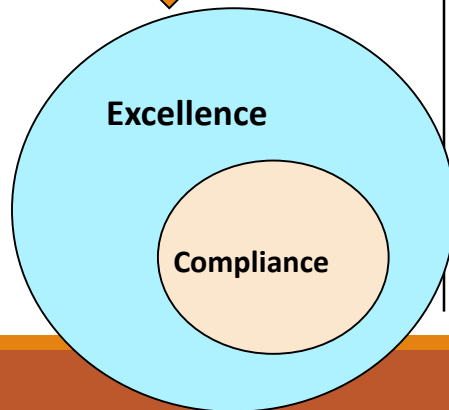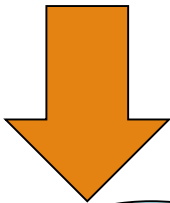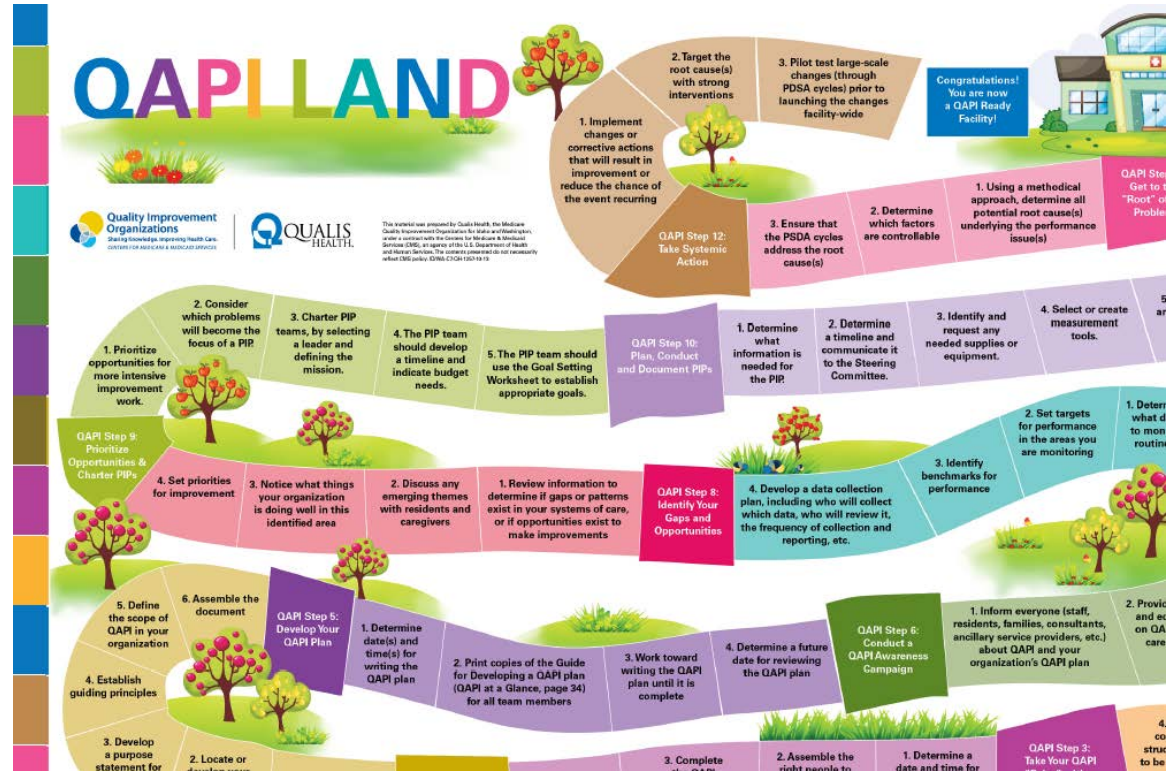
Systematic Analysis and Systemic Action

- Big picture approach
- Focus on continual learning and continuous improvement
- Demonstrate proficiency in the use of Root Cause Analysis.

Make it Visible

Deploy QAPI through all levels of the organization.

Purpose and Intent

- To determine what resources are necessary to care for residents competently during day-to-day operations and emergencies

- May be used to make decisions about direct care staff needs as well as capabilities to provide services to the residents in your facility

- Intent: For the facility to evaluate their resident population and identify resources needed to provide necessary person-centered care and services required by residents.
  - Resident profile and factors that impact care and support needs
  - Services and care offered based on resident needs
  - Facility resources needed to provide competent care for residents.

Facility Assessment

Resources:

- CMS – QAPI
- AHCA/NCAL ED
- AHCA/NCAL – QAPI
- HSAG – QAPI Electronic Resource Library
- CAHF Clinical & Quality Tools
  - Process Tool Framework

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