

Ask an IP

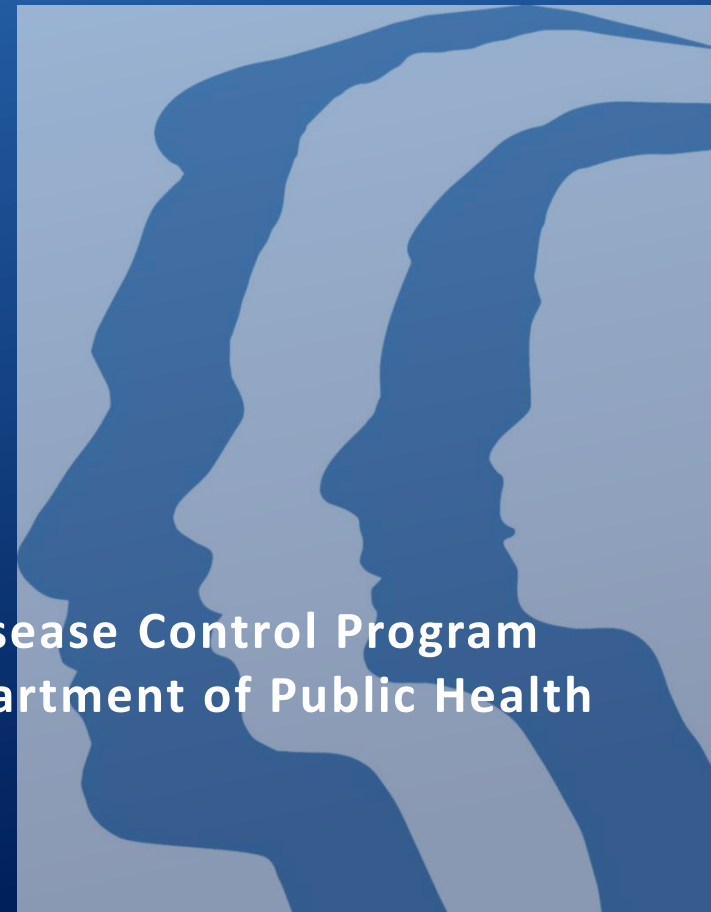
Learning and Communication Series

Week 3 – Introduction to QAPI in SNFs

Wednesday, March 23rd, 2022



Acute Communicable Disease Control Program
Los Angeles County Department of Public Health





Disclosures

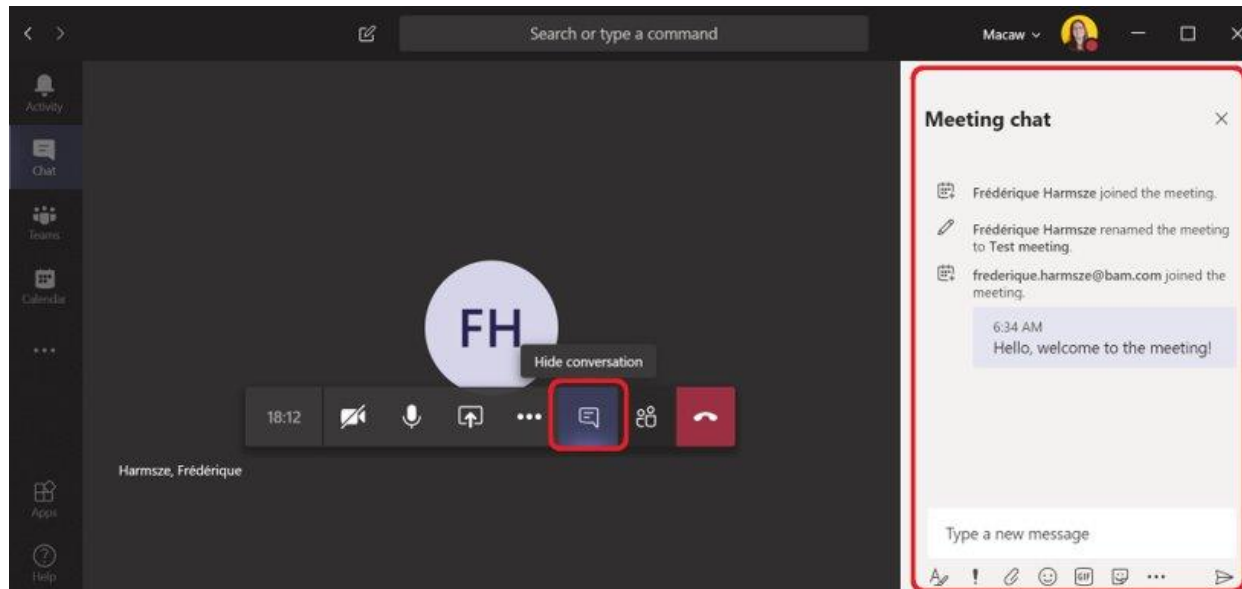
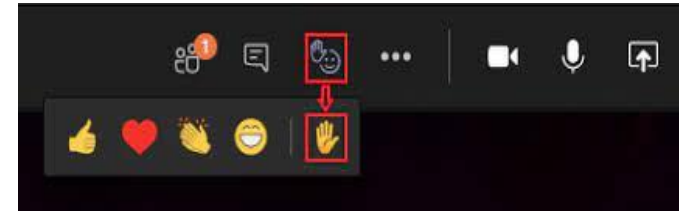
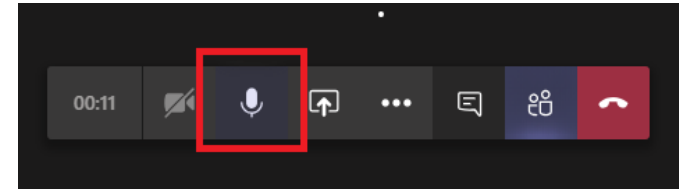
There is no commercial support for today's call

Neither the speakers nor planners for today's call have disclosed any financial interests related to the content of the meeting

This call is meant for healthcare facilities and is off the record and reporters should log off now

Housekeeping

- How to Mute/Unmute (Ctrl+ Shift+ M):
 - Press the Mute button on your phone if dialing in
- How to Raise Hand:
- How to use Chat:





Reminder

The purpose of this Learning and Communication Series is to **review core infection prevention practices** (beyond COVID-19) that must be used in all care settings, and to **foster discussion** among LA County Skilled Nursing Facilities about infection control practices.

We would like to remind everyone that the LAC DPH SNF COVID-19 Guidance has been updated as of 2-25-2022. Please take time to review this updated information. We will not be reviewing COVID-19 guidelines (including CDPH AFLs) during these sessions.

Link to Guidelines:

<http://publichealth.lacounty.gov/acd/ncorona2019/healthfacilities/snf/prevention/>



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Slides and

Recordings: <http://publichealth.lacounty.gov/acd/infectionpreventionseries.htm>



Objectives

- Review the **definition** of QAPI and why it is important for Infection Prevention.
- Highlight **five elements of QAPI** for Skilled Nursing Facilities.
- Provide examples of **performance improvement projects** in Skilled Nursing Facilities
- Foster discussion among LA County Skilled Nursing Facilities about infection control practices



What is QAPI?

- QA = Quality Assurance
- PI = Performance Improvement

QAPI takes a systematic, comprehensive, and data-driven approach to maintaining and improving safety and quality in nursing homes, while engaging all staff members in creative problem solving.



Quality Assurance

- QA is the specification of standards for quality of service and outcomes, and a process throughout the organization for assuring that care is maintained at acceptable levels in relation to those standards.
- QA is on-going, proactive, and retrospective in its efforts to identify how the organization is performing, including where and why facility performance is at risk or has failed to meet standards.



Performance Improvement

- PI is the continuous study and improvement of processes in order to improve services and outcomes, and proactively decrease the likelihood of problems, by identifying areas of opportunity and testing new approaches to fix underlying causes of ongoing problems or barriers to improvement.
- PI in nursing homes aims to improve processes involved in health care delivery and resident quality of life.
- PI can make good quality even better.

1. References: <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/OAPI/qapidefinition>



Why is QAPI important?

- Competencies that equip you to solve quality problems and prevent their recurrence
- Competencies that allow you to seize opportunities to achieve new goals
- Fulfillment for caregivers, as they become active partners in performance improvement
- Above all, better care and better quality of life for your residents.

1. References: <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/Downloads/QAPIAtaGlance.pdf>



Why is QAPI important for Infection Prevention?

- QAPI helps us to assess the current processes and outcomes of infection prevention practices and measures and helps us to improve the quality of each.
- QAPI is an interdisciplinary initiative that promotes consistent and effective improvements in the realms of patient care, infection prevention, patient and staff safety, and much more.

5 Elements of QAPI in SNF

- PIP (Performance Improvement Projects)
- Design and Scope
- Leadership Involvement
- Feedback, Data, and Monitoring
- Systematic Analysis and Systemic Action



Design and Scope

- Things to consider:
 - Clinical care
 - Quality of life
 - Resident choice
 - Written plan to adhere to best practices
 - How goals and initiatives will be measured





Leadership Involvement

- Things to consider:
 - Accountable shareholders (leadership, IP, DSD, DON, etc.)
 - Training for leadership and facility staff on QAPI
 - Ensuring leadership has given staff the time, equipment, and training needed to participate in QAPI
 - Creating an atmosphere of accountability
 - Creating a workplace where staff are comfortable identifying and reporting quality and problem-solving solutions

Feedback, Data, and Monitoring

- Things to consider:
 - Why, who, what, where, and when?
 - Why is this data being collected/monitored?
 - Who is collecting this data? Who are we presenting this data to?
 - What exactly is being collected/monitored routinely?
 - What is expected to be presented on and in what setting (meeting)?
 - When will the data be observed, reported?
 - Where is the data being gathered, collected, and reported to?

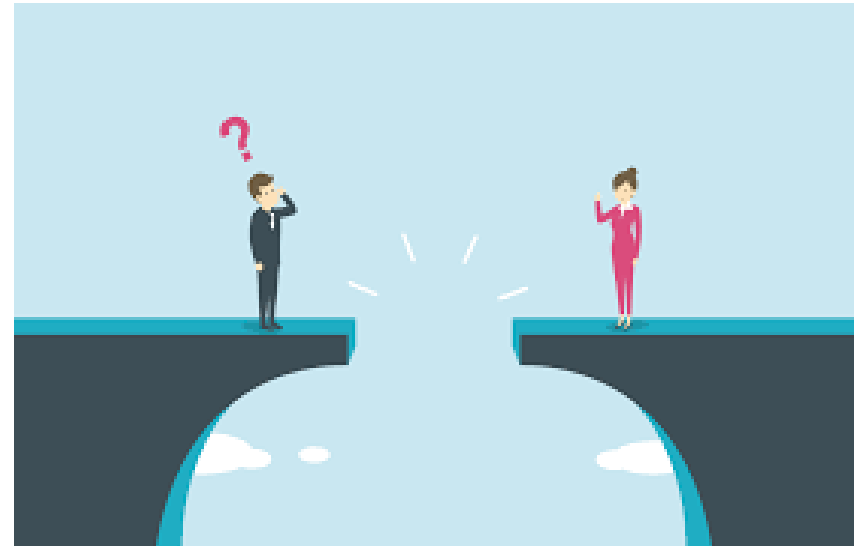


Systematic Analysis and Systemic Action

- Things to consider:
 - Root Cause Analysis
 - Systemic actions to prevent future adverse events or fallouts
 - Focus on continuous learning and improvement
 - Applying lessons learned from identifying problems and areas that need improvement

Performance Improvement Project (PIP)

- ICAR (Infection Control Assessment and Response)
 - Example of a Gap Assessment





ICAR Domains (Measured by Gap Analysis/Assessment)

- I. Infection Control Program and Infrastructure
- II. Healthcare Personnel and Resident Safety
- III. Surveillance and Disease Reporting
- **IV. Hand Hygiene**
- V. Personal Protective Equipment (PPE)
- VI. Respiratory/ Cough Etiquette
- VII. Antibiotic Stewardship
- VIII. Injection safety and Point of Care Testing
- **IX. Environmental Cleaning**

Example: Hand Hygiene Performance Improvement Project

- Start with adherence monitoring tool (direct observations)
- Measure baseline hand hygiene adherence rates
- Keep track of findings and report on consistent basis
- Present material to key stakeholders
- Target education and resources to improvement hand hygiene adherence percentages





Example: Hand Hygiene Performance Improvement Project



Healthcare-Associated Infections Program Adherence Monitoring Hand Hygiene

Assessment completed by:
Date:
Unit:

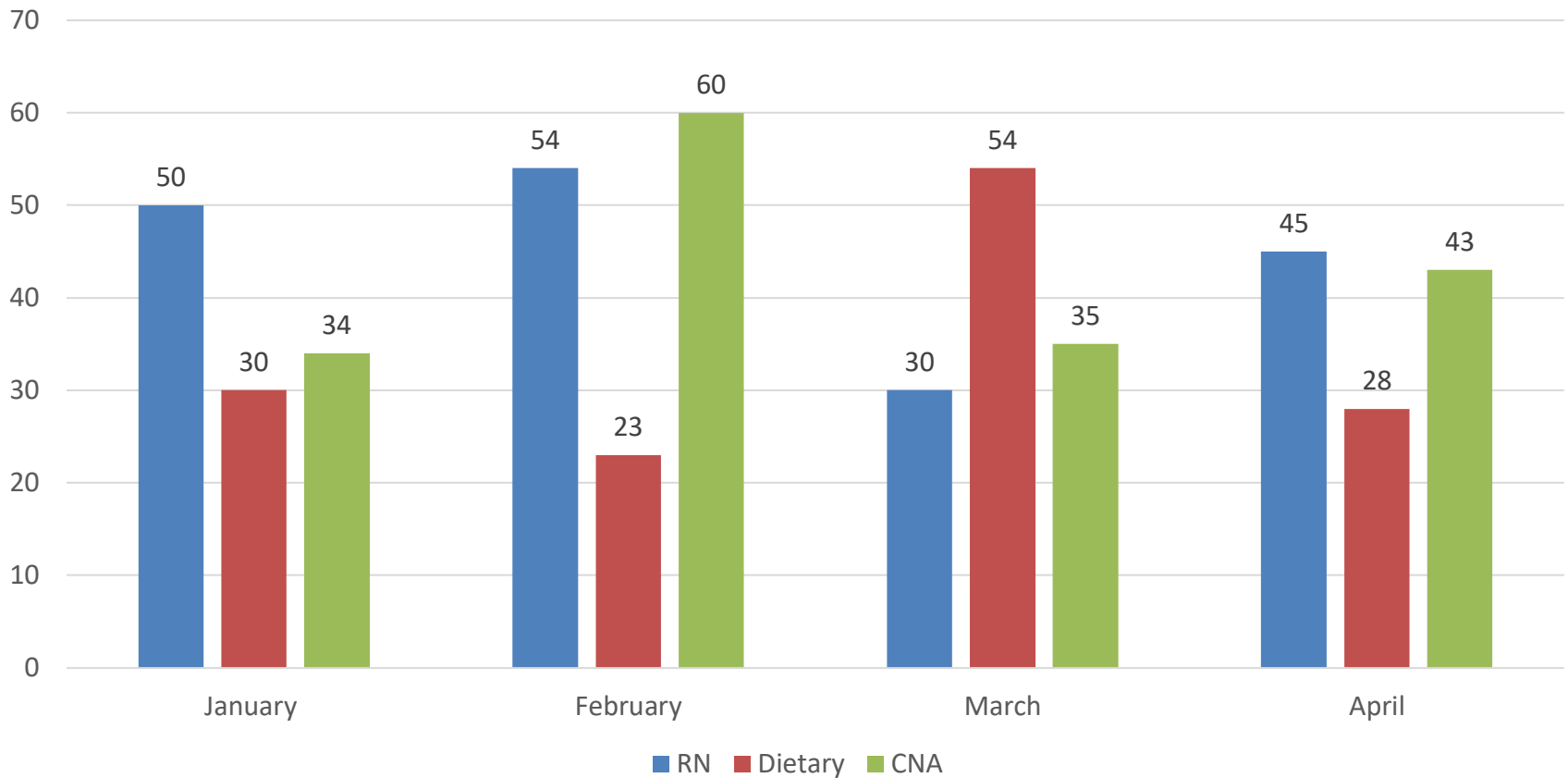
Regular monitoring with feedback of results to staff can improve hand hygiene adherence. Use this tool to identify gaps and opportunities for improvement. Monitoring may be performed in any type of patient care location.

Instructions: Observe at least 10 hand hygiene (HH) opportunities per unit. Observe a staff member and record his/her discipline. Check the type of hand hygiene opportunity you are observing. Indicate if HH was performed. Record the total number of successful HH opportunities and calculate adherence.

HH Opportunity	Discipline	What type of HH opportunity was observed? (select/ <input checked="" type="checkbox"/> 1 per line)	Was HH performed for opportunity observed? <input checked="" type="checkbox"/> or \emptyset
<i>Example</i>	N	<input type="checkbox"/> before care/entering room* <input type="checkbox"/> before task <input type="checkbox"/> after body fluids <input type="checkbox"/> after care* <input checked="" type="checkbox"/> upon leaving room <i>*Remember: Hand hygiene should be performed before <u>and</u> after glove use</i>	<input checked="" type="checkbox"/>
HH1.		<input type="checkbox"/> before care/entering room <input type="checkbox"/> before task <input type="checkbox"/> after body fluids <input type="checkbox"/> after care <input type="checkbox"/> upon leaving room	
HH2.		<input type="checkbox"/> before care/entering room <input type="checkbox"/> before task <input type="checkbox"/> after body fluids <input type="checkbox"/> after care <input type="checkbox"/> upon leaving room	
HH3.		<input type="checkbox"/> before care/entering room <input type="checkbox"/> before task <input type="checkbox"/> after body fluids <input type="checkbox"/> after care <input type="checkbox"/> upon leaving room	
HH4.		<input type="checkbox"/> before care/entering room <input type="checkbox"/> before task <input type="checkbox"/> after body fluids <input type="checkbox"/> after care <input type="checkbox"/> upon leaving room	
HH5.		<input type="checkbox"/> before care/entering room <input type="checkbox"/> before task <input type="checkbox"/> after body fluids <input type="checkbox"/> after care <input type="checkbox"/> upon leaving room	
HH6.		<input type="checkbox"/> before care/entering room <input type="checkbox"/> before task <input type="checkbox"/> after body fluids <input type="checkbox"/> after care <input type="checkbox"/> upon leaving room	
HH7.		<input type="checkbox"/> before care/entering room <input type="checkbox"/> before task <input type="checkbox"/> after body fluids <input type="checkbox"/> after care <input type="checkbox"/> upon leaving room	
HH8.		<input type="checkbox"/> before care/entering room <input type="checkbox"/> before task <input type="checkbox"/> after body fluids <input type="checkbox"/> after care <input type="checkbox"/> upon leaving room	



Example: Hand Hygiene Adherence Monitoring



Example: EVS Performance Improvement Project

- Start with adherence monitoring tool (direct observations)
- Measure baseline EVS adherence rates
- Keep track of findings and report on consistent basis
- Present material to key stakeholders
- Target education and resources to improvement EVS adherence percentages



Reference: https://www.cdph.ca.gov/Programs/CHCO/HAI/CDPH%20Document%20Library/AdherenceMonitoring_EVS_Approved_013020.pdf



Example: EVS Performance Improvement Project



Healthcare-Associated Infections Program Adherence Monitoring
Environmental Cleaning and Disinfection

Assessment completed by:
Date:
Unit:

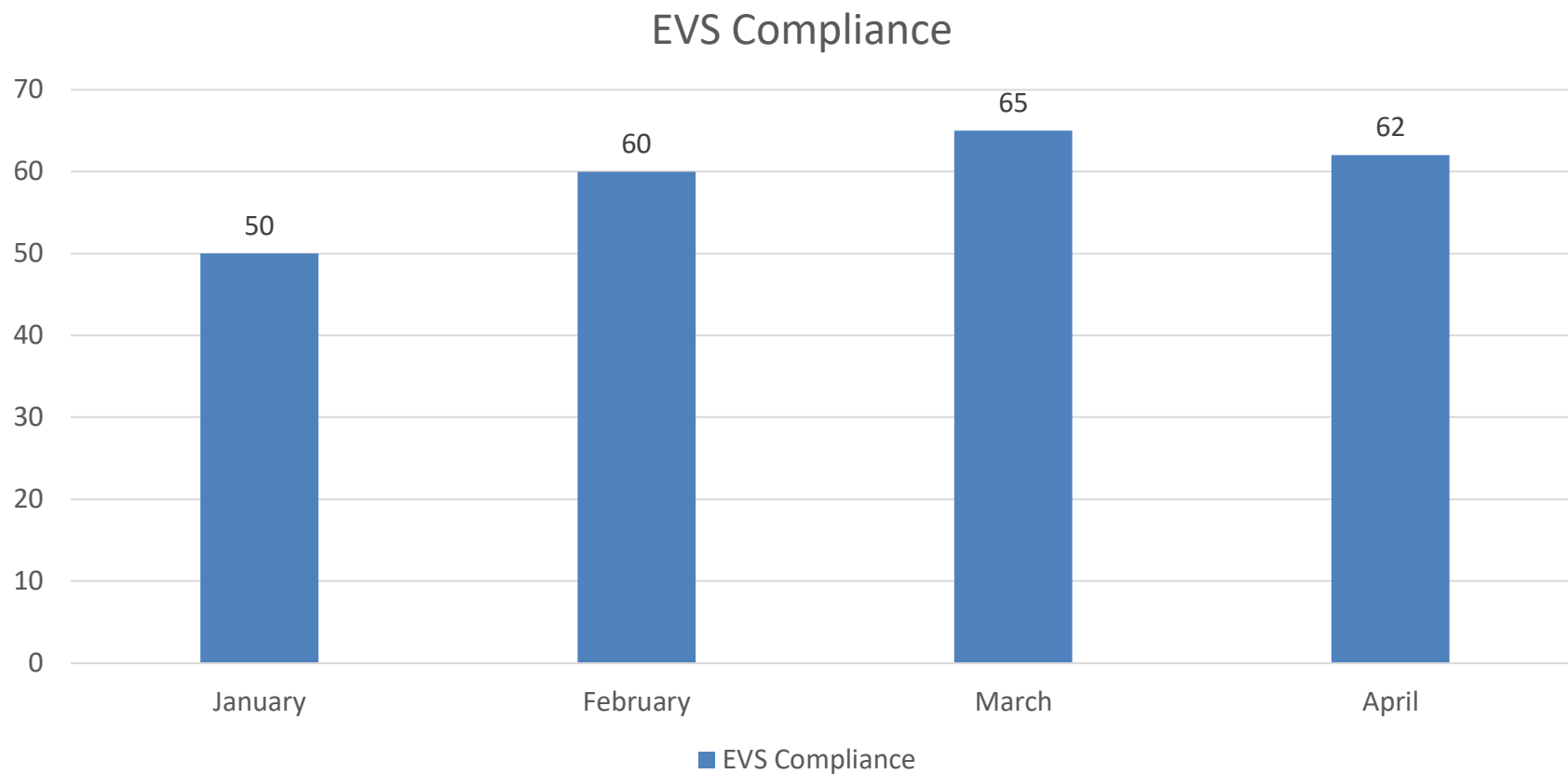
Regular monitoring with feedback of results to staff can maintain or improve adherence to environmental cleaning practices. Use this tool to identify gaps and opportunities for improvement. Monitoring may be performed in any type of patient care location.

Instructions: Observe at least two (2) different environmental services (EVS) staff members. Observe each practice and check a box if adherent (“Yes”) or not adherent (“No”). In the right column, record the total number of “Yes” responses for adherent practices observed and the total number of observations (“Yes” + “No”). Calculate adherence percentage in the last row.

Environmental Cleaning Practices		EVS Staff 1	EVS Staff 2	EVS Staff 3	Adherence by Task	
					# Yes	#Observed
ES1.	Detergent/disinfectant solution is mixed and stored according to manufacturer’s instructions.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
ES2.	Solution remains in wet contact with surfaces according to manufacturer’s instructions.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
ES3.	Cleaning process avoids contamination of solutions and cleaning tools; a clean cloth is used in each patient area, and the cloth is changed when visibly soiled.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
ES4.	Standard cleaning protocol is followed to avoid cross-contamination (e.g. from top to bottom, patient room to bathroom, and clean to dirty)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
ES5.	Environmental Services staff use appropriate personal protective equipment (e.g. Gowns and gloves are used for patients/residents on contact precautions upon entry to the Contact precautions room.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
ES6.	Hand hygiene is performed throughout the cleaning process as needed, including before and after glove use.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
ES7.	High-touch surfaces* are thoroughly cleaned and disinfected after each patient. Mark “Yes” if Fluorescent Marker Assessment Tool result is 100%; mark “No” if <100%.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
ES8.	There are no visible tears or damage on environmental surfaces or equipment.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
ES9.	The room is clean, dust free, and uncluttered.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		



Example: EVS Adherence Monitoring





Resources

- CMS “QAPI at a Glance”
 - <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/Downloads/QAPIAtaGlance.pdf>
- EVS Adherence Monitoring Tool
 - https://www.cdph.ca.gov/Programs/CHCQ/HAI/CDPH%20Document%20Library/AdherenceMonitoring_EVS_Approved_013020.pdf
- Hand Hygiene Adherence Monitoring Tool
 - <https://www.cdph.ca.gov/Programs/CHCQ/HAI/CDPH%20Document%20Library/AdherenceMonitoringHandHygieneApproved101516.pdf>



Resources

- AHRQ (Agency for Healthcare Research and Quality)
 - <https://www.ahrq.gov/ncepcr/tools/pf-handbook/mod4.html>
- CDC STRIVE (CDC States Targeting Reduction in Infections via Engagement)
 - <https://www.cdc.gov/infectioncontrol/pdf/strive/CBT102-508.pdf>
- HRSA (U.S. Department of Health and Human Resources: Health Resources and Services Administration)
 - <https://www.hrsa.gov/sites/default/files/quality/toolbox/508pdfs/qualityimprovement.pdf>



Programming

Session	Date (2022)	Topic
Week 1	March 9 th , 2022	Personal Protective Equipment (PPE)
Week 2	March 16 th , 2022	Office Hours
Week 3 (today!)	March 23 rd , 2022	Introduction to QAPI in SNFs
Week 4	March 30th, 2022	Office Hours
Week 5	April 6 th , 2022	Introduction to Microbiology
Week 6	April 13 th , 2022	Office Hours
Week 7	April 20 th , 2022	Environmental Services (EVS)
Week 8	April 27 th , 2022	Office Hours
Week 9	May 4 th , 2022	Multi-Drug Resistant Organisms (MDRO)
Week 10	May 11 th , 2022	Office Hours



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Questions

