



# Quality Improvement (QI) and Quality Assurance and Performance Improvement (QAPI) Foundations

Session 2





## Announcements

- 1. Didactic Sessions:** begin promptly at 1:30 pm and will be locked after 1:40 pm.
- 2. TNT Program Questions:** please email [TNTEducation@ph.lacounty.gov](mailto:TNTEducation@ph.lacounty.gov) email address only.
- 3. Save the TNT Website:** <http://publichealth.lacounty.gov/acd/TNTProgram.htm>.
- 4. Logging into the sessions** with facility credentials will only provide credit toward facility attendance.
  - For individual attendance credit, each participant must log in with individual credentials.
  - To receive credit, your log in must clearly indicate your name. Anybody that is logged in with a phone number will not be given credit for attendance.
  - Names entered in the chat to identify the phone numbers will not be accepted.
- 5. Post-session Evaluation Survey:** only Designated Participants are eligible to take the survey and receive CEUs/Certificates.
- 6. TNT Communication:** Please read in detail.
- 7. Small Group sessions:** Starting this week. Invitations with information to be sent today.

# Housekeeping

Please do not unmute or start your video.



Click here to raise or lower your hand.



Click here to see the participants list.



Unmute

Start video

Share



Click here to turn captions on.

Please do not share your screen.

Click here to access the chat and choose to send messages to Everyone.



# Session Schedule

Topics	Date	Link
1 - Transforming Nursing Home Care Together (TNT) Program - Introduction	Wednesday, July 6th, 10:00-11:00 am	<p><b>Join using this link:</b> <a href="https://lacpublichealth.w ebex.com/lacpublichealt h/j.php?MTID=m4eb4f9c 0019845cbbb6495fedf2a caa6">https://lacpublichealth.w ebex.com/lacpublichealt h/j.php?MTID=m4eb4f9c 0019845cbbb6495fedf2a caa6</a>.</p>
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<http://publichealth.lacounty.gov/acd/docs/TNTProgramSchedule.pdf>



## TNT Program Objectives

- Enhance quality improvement and quality assurance performance improvement (QAPI) at LA County SNFs by providing foundational quality improvement education across all roles in SNFs.
- Empower SNF staff to initiate performance improvement projects (PIPs) and own QI in their facility.
- Improve resident safety and clinical outcomes .



## Session 2 Objectives

- An overview of Quality in Healthcare, specifically focused on SNFs.
- Examples of Quality Improvement in day-to-day work.
- Understand the power of QAPI and how to use it.

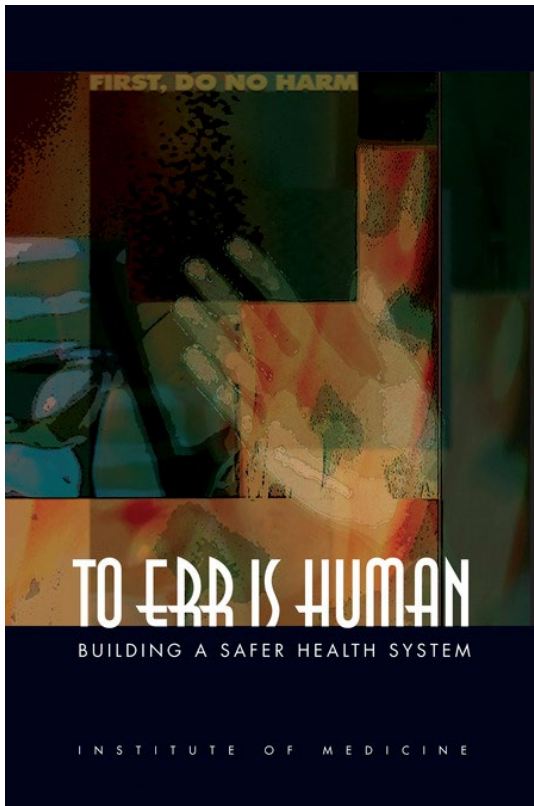


# What is Healthcare Quality?



## Institute of Medicine

### *Crossing the Quality Chasm: A New Health System for the 21<sup>st</sup> Century (2001)*



- Focused on closing the gap between what we know to be good health care and the health care that people actually receive.
- Recommended a redesign of the American health care system by providing six “Aims for Improvement”: Safety, Effectiveness, Patient-Centeredness, Timeliness, Efficiency, and Equity.
- Set forth a specific direction for policymakers, health care leaders, clinicians, regulators, purchasers and others to improve the US health care system.

IOM: Crossing the Quality Chasm.

<http://www.ihl.org/resources/Pages/ImprovementStories/AcrosstheChasmSixAimsforChangingtheHealthCareSystem.aspx>



## Dimensions of Quality – Six Aims for Improvement

- Healthcare should be:



## Dimensions of Quality

- **Safe Care – *Do No Harm***
  - Safety for all patients, in all processes, all the time
  - Avoiding injuries to patients from the care that is intended to help them
- **Example Measures**
  - Healthcare associated infections
  - Stage III & IV decubitus ulcers
  - Previously vaccinated resident gets an extra dose



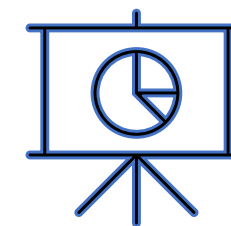


## Audience Question: What are Other Examples of Safe Care Measures?

- Unexpected death in a resident without DNR/DNI
- CAUTI infections
- Hand hygiene compliance
- Using 2 patient identifiers

## Dimensions of Quality

- **Effective Care**
  - Produces the desired result
  - Evidence-based
  - Emphasis on preventing disease, early detection
  - Avoidance of over or under use of techniques/care
- **Example Measures**
  - Antimicrobial stewardship
  - Vaccine screening and administration





## Audience Question: What are Other Examples of Effective Care Measures?

- Evaluating urinary catheter necessity
- Re-hospitalization/readmission rates
- Extended/re-use of PPE

## Dimensions of Quality

- **Patient-Centered Care** – *Providing care that is responsive to:*
  - Individual patient preferences, needs and values
  - Assuring that patient values guide all clinical decisions
- **Example Measures**
  - Resident complaint data
  - Resident satisfaction
  - Resident participation in the Interdisciplinary Team (IDT)





## Audience Question: What are Other Examples of Patient-Centered Care Measures?

- Adherence to advanced directives
- Family satisfaction/complaints
- Family participation in IDT
- Resident feeding preferences
- Adequate number of communications with family/next of kin
- Language services available – **also equitable care**

## Dimensions of Quality

- **Timely Care** – *reducing waits and sometimes harmful delays for those who:*
  - Receive care
  - Give care
- **Example Measures**
  - Time for call light to be answered
  - Turnaround times for medication orders





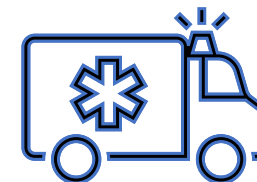


## Audience Question: What are Other Examples of Timely Care Measures?

- Time to physician/nursing assessment
- Time to DME delivery
- Time to specialist appointment

## Dimensions of Quality

- **Efficient Care** – *Avoiding waste, including:*
  - Waste of equipment
  - Supplies
  - Ideas
  - Energy
- **Example Measures**
  - Supply costs
  - Lost equipment





## Audience Question: What are Other Examples of Efficient Care Measures?

- Time spent by Infection Prevention staff performing non-IP tasks
- Overstaffed/unnecessary meetings
- Overall staff satisfaction scores and participation in surveys.

## Dimensions of Quality

- **Equitable Care** – *Providing care that does not vary in quality due to personal characteristics such as:*
  - Gender
  - Ethnicity
  - Geographic location
  - Socio-economic status
- **Example Measures**
  - Patient complaint data
  - Comparing quality of care based on gender, ethnicity, geographic location, or socio-economic status





## Audience Question: What are Other Examples of Equitable Care Measures?

- Interpretation access – **also patient-centered care**
  - Patients assessed for language/accessibility needs
  - Are interpreters available? Yes/no
  - Number of instances interpretation services used within x time
- Staff Diversity Training

## Dimensions of Quality





# The Changing Paradigms of Quality

## From:

- Quality to satisfy regulators
- Retrospective focus (inspecting quality in)
- Measurement of “disquality”; quality as the absence of negative outcomes or injuries
- Quality measurement and improvement limited to the acute care, inpatient environment

## To:

- Quality to satisfy the Mission and the market
- Prospective focus (Planning quality in)
- Measurement of quality: quality as the presence of positive characteristics
- Quality expands focus to the measurement and improvement of community health status and partnership with care continuum

# SNF Quality Monitoring

## External

- Nursing Home Care Compare/Five-Star Quality Rating – Consumer Website
  - CDC's National Healthcare Safety Network (NHSN) - Infection Measures/Surveillance
  - Nursing Home Quality Initiative (NHQI)
  - Medicare Fee For Service Billing Data
  - Health Inspections

## Internal

- Quality Assurance and Performance Improvement (QAPI) - Quality Improvement Standards and Best Practices

<https://www.cdc.gov/nhsn/index.html>

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/Downloads/usersguide.pdf>

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





# History of Quality Assurance and Performance Improvement (QAPI)





# History of QAPI

- Previously known as Quality Assessment and Assurance.
- QAPI is part of the Affordable Care Act passed by Congress in 2010.
- QAPI programs should include development of standards and provision of technical assistance to develop best practices to meet those standards.
- This part of the ACA expands the level and scope of required QAPI activities so facilities can continuously identify and correct deficiencies in quality, as well as make sustainable programs for performance improvement.



## QAPI History

- September 2011, CMS launched a prototype QAPI program in some nursing homes.
- Used the information gathered from this prototype to develop tools and resources for facilities to use to establish their QAPI programs.
- Also established the Five Elements of QAPI: a general framework for implementing a QAPI program in nursing homes.

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

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



## Element 1: Design and Scope

- Address all systems of care and management practices
- Aim for safety and high quality with all clinical interventions while emphasizing autonomy and choice in daily life for residents
- Utilize best available evidence to define and measure goals
- Have in place a written plan



## Element 2: Governance and Leadership

- Governing body and/or administration should ensure adequate supplies and resources for QAPI projects
- Governing body should ensure QAPI is a priority despite staff turnover and hold staff accountable for doing projects
- Designate staff for QAPI projects, develop facility-wide training, ensure availability of staff time, equipment, and technical training



## Element 3: Feedback, Data Systems, and Monitoring

- Put in place systems to monitor care and services
- Feedback systems include input from staff, residents, and families
- Use performance indicators to monitor care processes and outcomes, then review those findings against benchmarks or targets that the facility has established for performance
- Tracking, investigating, and monitoring adverse events with action plans to prevent recurrences



## Element 4: Performance Improvement Projects

- Concentrated effort on particular problems in areas the facility deems need improvement
- Gathering information systematically and intervening with improvements



## Element 5: Systematic Analysis and Systemic Action

- Systematic approach to determine when in-depth analysis is needed
- Thorough and highly structured process to determine when or how problems are caused or exacerbated by the way care or services are organized or delivered
- Facility is expected to be proficient in Root Cause Analysis
- Systemic actions look across all systems to prevent future events and promote sustained improvement, with a focus on continual learning





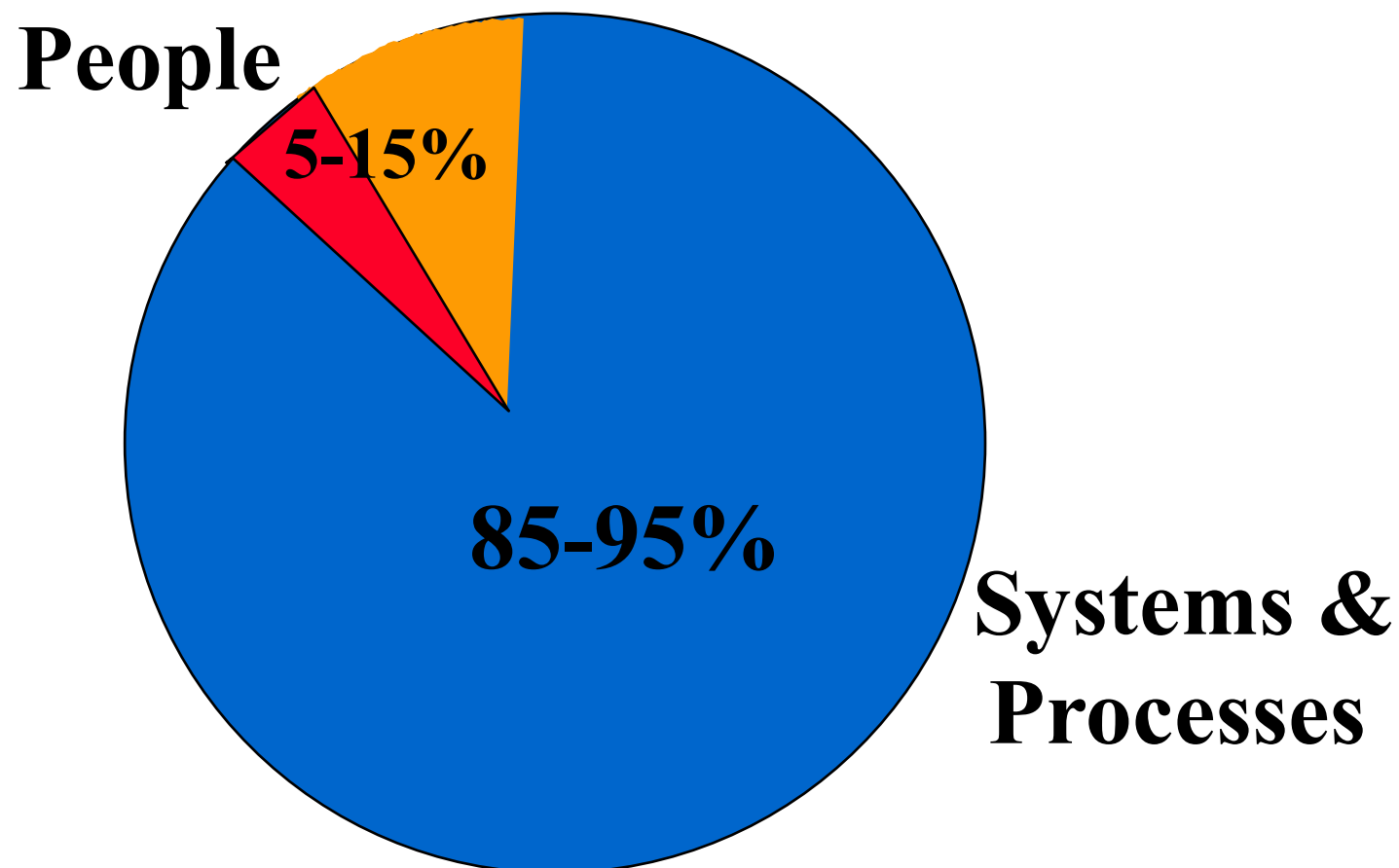
# Making Changes



# Model for Change



# Opportunities for Improvement





**“You should not use an old map  
to explore a new world”**

**Albert Einstein**



## Resources

- Institute of Medicine: Crossing the Quality Chasm
  - <http://www.ihi.org/resources/Pages/ImprovementStories/AcrosstheChasmSixAimsforChangingtheHealthCareSystem.aspx>
- National Health Safety Network
  - <https://www.cdc.gov/nhsn/index.html>
- Nursing Home Five Star Quality Rating System
  - <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/Downloads/usersguide.pdf>
- Centers for Medicare/Medicaid QAPI Definition
  - <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/qapidefinition>
- Five elements of QAPI
  - <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/Downloads/qapifiveelements.pdf>



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**Questions?**