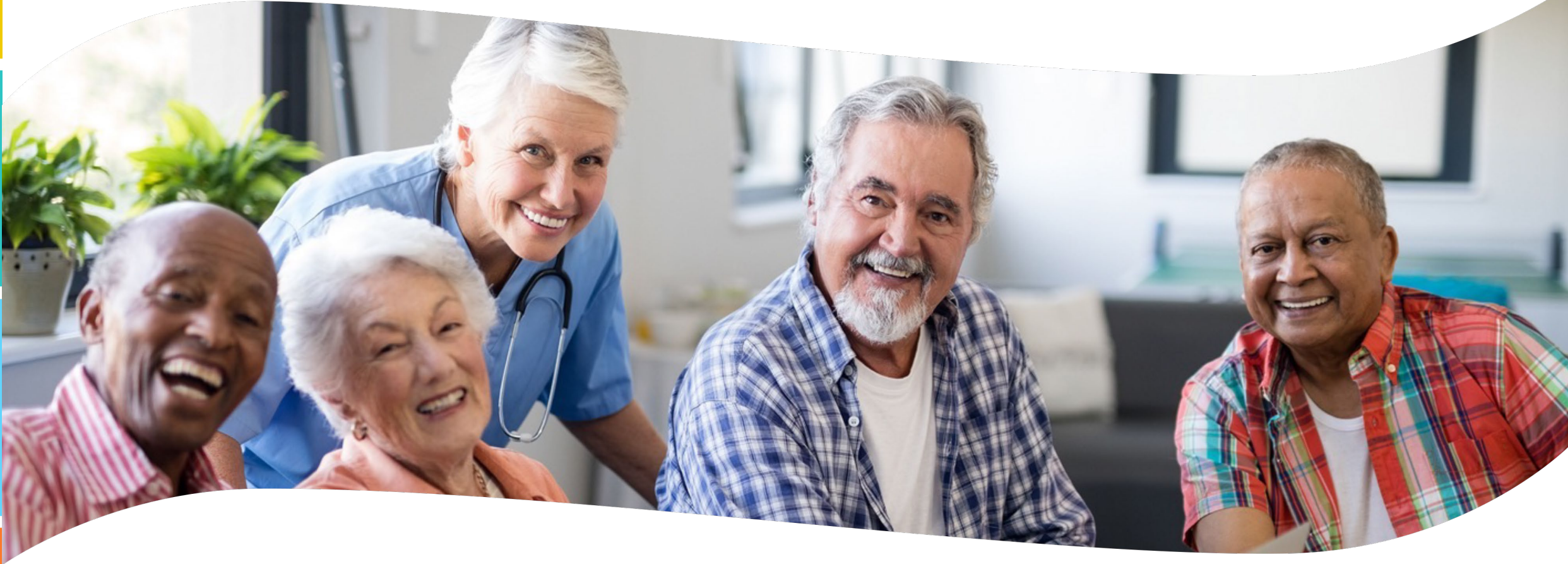


Moving Beyond Your QAPI Committee: A Culture for Safe, Reliable and Quality Care



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Lynn Wilson, MS

SENIOR QUALITY IMPROVEMENT SPECIALIST

Lynn has more than 30 years of experience with regulatory agencies for community mental health centers and nursing homes and is a nationally recognized QI leader in long-term care, behavioral health and hospice and palliative care settings. Under her leadership, behavioral health and end-of-life care practice innovations generated through frontline staff quality improvement processes have been recognized as national best practices.

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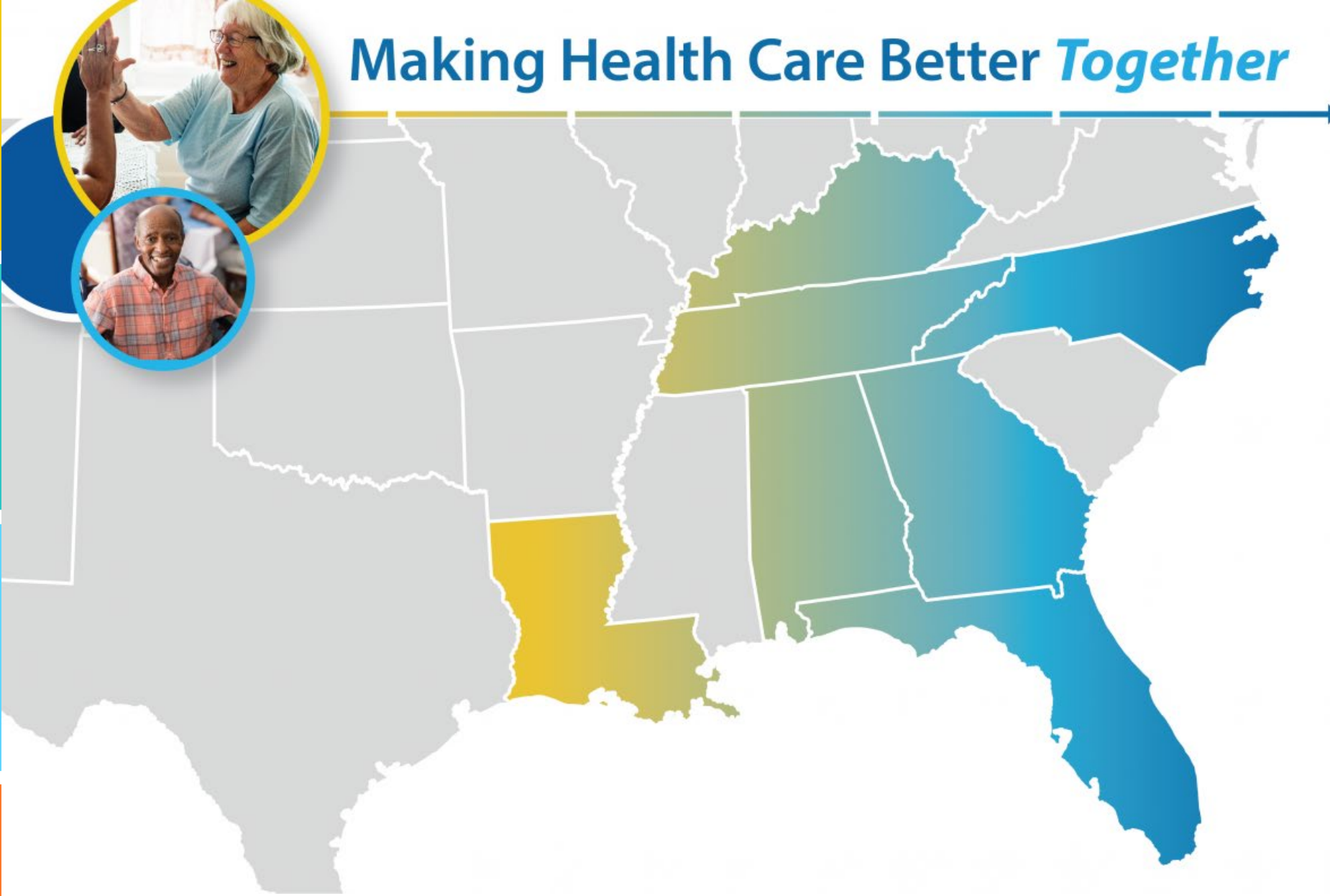
SENIOR QUALITY IMPROVEMENT SPECIALIST

Amy is a licensed nursing home administrator with over 20 years of leadership and long-term care management experience. In addition to her work as a vice president of long-term care and facility administrator, Amy has served on the boards of the Genesee Health Facilities Association (as treasurer and education committee member) and the Genesee Health Facilities Foundation. Amy serves as a New York State Department of Health Informal Dispute Resolution (IDR) panel member and has been an adjunct clinical instructor of dental hygiene at Monroe Community College. Amy has a master's degree in health promotion and a bachelor's degree in health sciences.



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About Alliant Health Solutions

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The IPRO QIN-QIO

- A federally-funded Medicare Quality Innovation Network-Quality Improvement Organization (QIN-QIO) in contract with the Centers for Medicare & Medicaid Services (CMS)
- 12 regional CMS QIN-QIOs nationally

IPRO:

New York, New Jersey, and Ohio

Health-Centric Advisors:

Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont

Qlarant:

Maryland, Delaware, and the District of Columbia

Working to ensure high-quality, safe health care for
20% of the nation's Medicare FFS beneficiaries



Learning Objectives

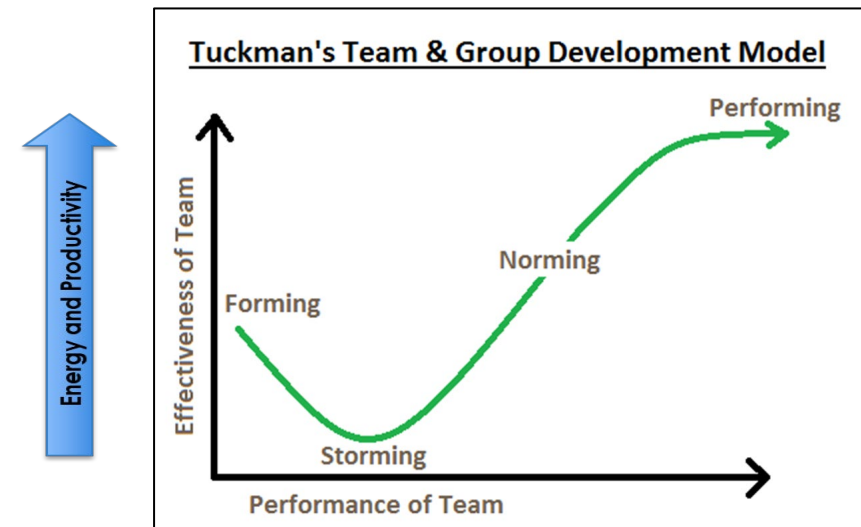
- Understand the impact of your organization's culture on performance improvement
- Complete a self-assessment using the Framework for Safe, Reliable and Effective Care
- Identify two to four strategies to move your quality culture forward

Check-In

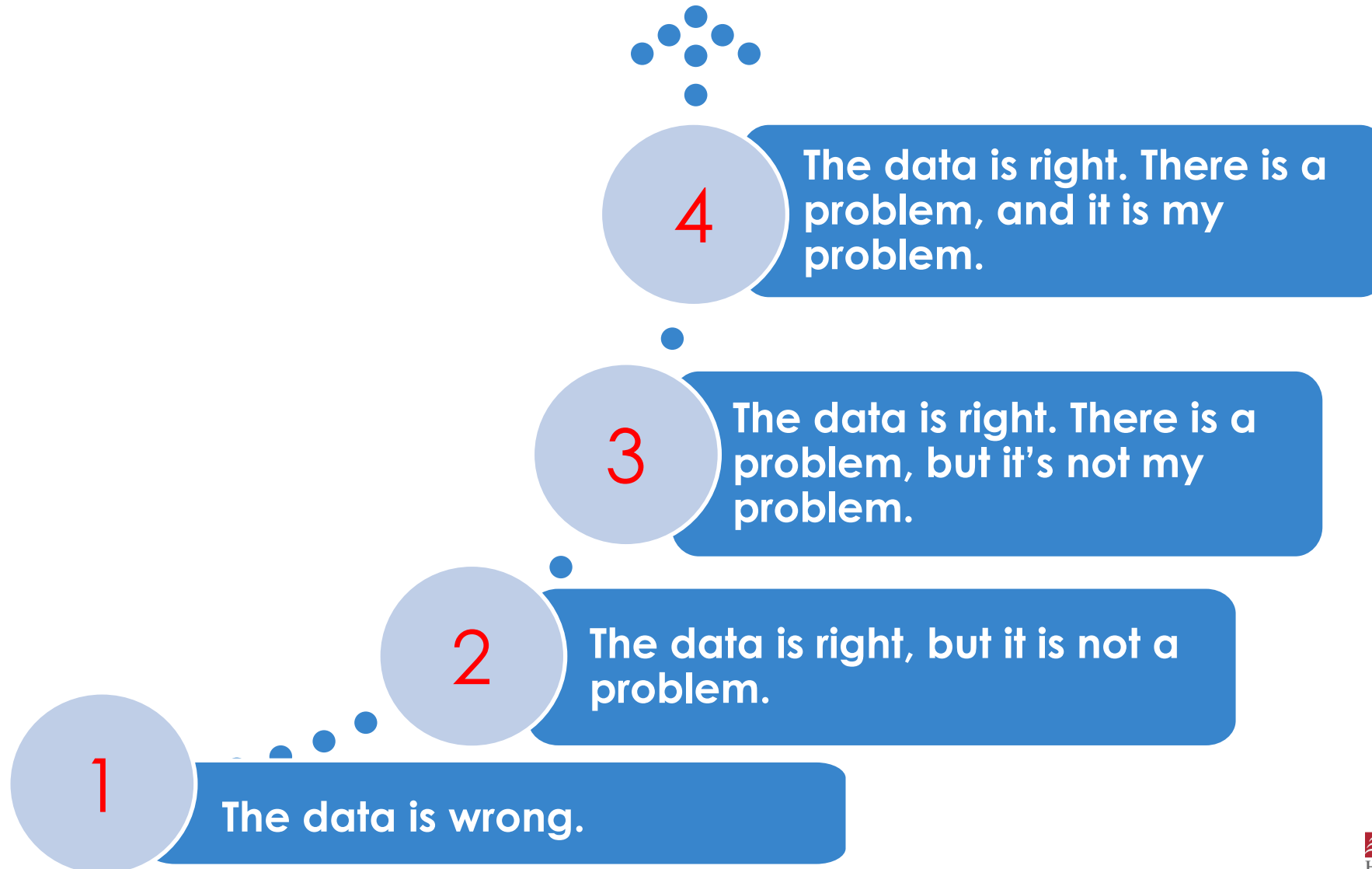
- Self-reflection on QAPI in 2023
- Share counteracting “What Goes Wrong”
- Review the developmental process of meetings
- QAPI self-assessment findings
- Self-reflection

Five Phases of a Meeting		
“What Goes Wrong in Meetings” Jamboard Input	Tools	Purpose
<ul style="list-style-type: none"> • Lack of participation • No purpose/direction • Use of data: <ul style="list-style-type: none"> ◦ Just going over numbers, gathering data – no interpretation, no follow-up action ◦ Data gets collected with lots of time invested, and nothing happens with it ◦ Data presented is not meaningful ◦ Lack of trending over time • Overlapping meetings • Presenter unprepared • Too much information • Not the right people at the meeting • Not getting to the root cause • Meeting unstructured 	Planning	Identify the purpose, goals, content (use a calendar, follow-up from the prior meeting), the person responsible, the expected outcome (e.g., decision, brainstorming for ideas, informational update, etc.), and address the content of the meeting evaluation from the prior meeting (what can we change?).
<ul style="list-style-type: none"> • No buy-in • Gripe session 	Starting	Suggested content to include: <ul style="list-style-type: none"> • Welcome • Review the overall purpose of the meeting • Icebreaker to align with mission, values, recent satisfaction survey comment or letter • Agenda review – seek agreement on topics and expected outcomes, time for each presentation and ask if anything is missing

AHS “What Goes Wrong in Meetings?”



Stages of Data Acceptance



Culture in Health Care

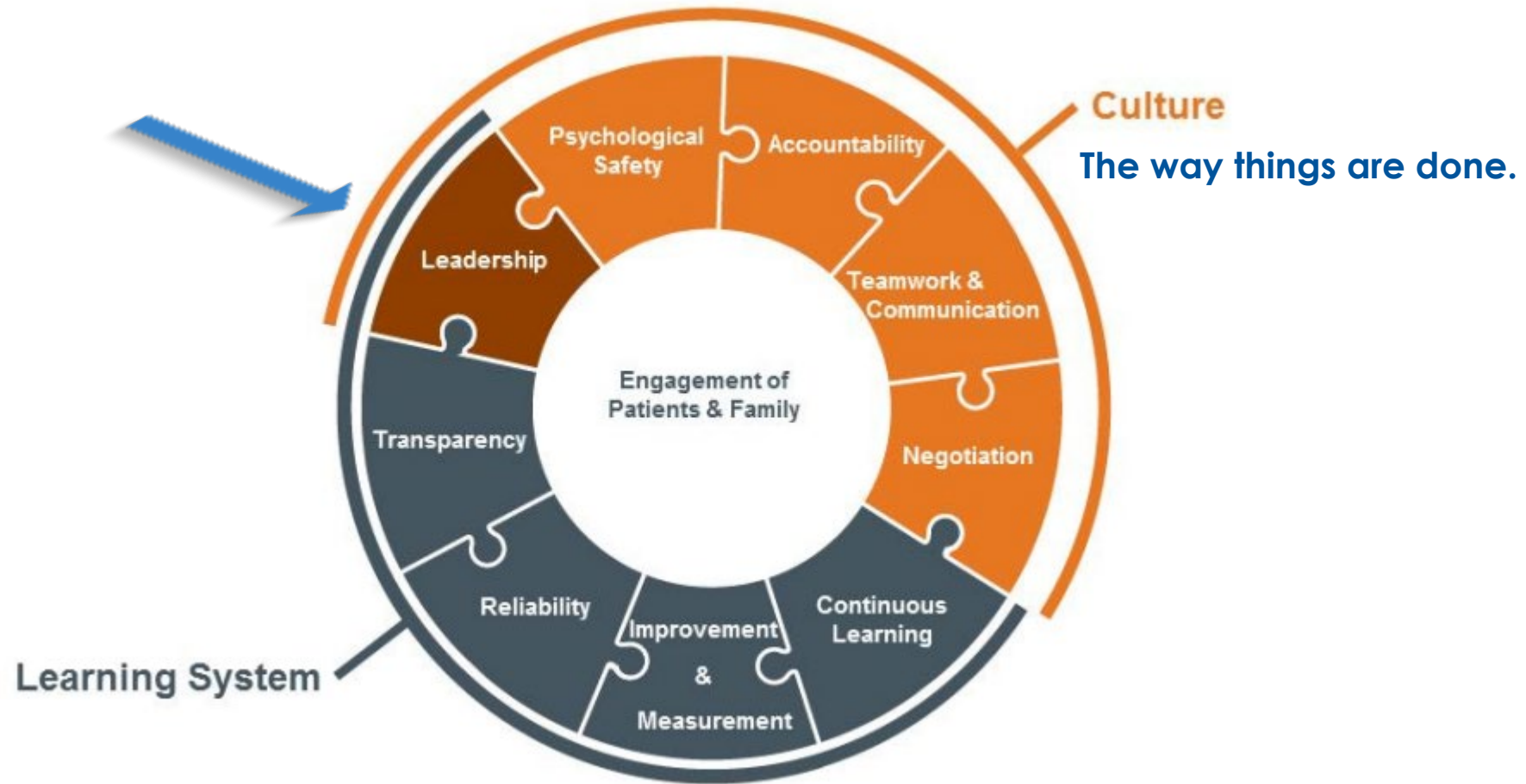
- Cultural Competence
- Cultural Sensitivity
- *Just Culture*
- Culture of Safety

Our culture is driven by leaders, the service our organizations provide to others and the collective behaviors of all individuals within the organization. Organizational culture is a living element walking the halls of organizations and embedded in messages, meetings and communication with one another.

Culture is driven by leaders.

<https://www.studereducation.com/culture-the-foundation-to-withstand-disruption/>
<https://www.studereducation.com/drive-employee-actions-that-support-a-culture-of-belonging/>

Framework: Safe, Reliable and Effective Care



<https://jamboard.google.com/d/1ggMn63OMXQzzxQW98SMG-spEyx2mt0LnmzAJTkn1fjs/edit?usp=sharing>

Source: [IHI-Diagnostic-Tool-Framework-for-Safe-Reliable-Effective-Care \(1\) \(1\).pdf](#)

Leadership's Role

"I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel."

- Maya Angelou

"Culture eats strategy for breakfast."

- Peter Drucker

"Employees want to believe their company has a meaningful purpose. They want to know that their own job is worthwhile. They want to make a difference. If all three of these conditions are accomplished, bottom-line results will follow."

-Quint Studer




Jamboard

https://bit.ly/QAPIJamboard_January2024



Leadership QAPI Rounding

- What is working well for you today?
- Is there a care provider I can recognize and why?
- Do you have the tools and equipment to do your job today?
- What feedback have you heard from residents/families about....this service or initiative?
- Are you aware of any workarounds being done because a process doesn't work?
- Tell me one thing you can do or have done to improve the patient experience or perception of care.

QAPI Leadership Rounding Guide
 Directions: Leadership rounding is a process where leaders (e.g., administrator, department heads, and nurse managers) are out in the building with staff and residents, talking with them directly about care and services provided in the organization including QAPI initiatives. Rounding with staff and residents is an effective method for leaders to hear firsthand what is going well and what issues need to be addressed within the organization. It serves as an important signal of leadership's commitment to performance improvement, and promotes a culture of QAPI in the organization. Use this to guide your rounds to monitor the progress of QAPI initiatives.
Questions to Consider Before Rounding
<ol style="list-style-type: none">1. Which leader(s) will conduct rounds?2. How frequently will rounds take place?3. What questions do you want to ask? What do you want to learn? (See sample questions below.)4. What barriers/issues have already been identified that employees should be asked about in order to gather input on solutions?
Rounding
<ol style="list-style-type: none">1. Leaders conduct rounds as planned, maintaining a positive tone, building relationships with staff by taking the time to listen and respond to employees' and residents' needs.2. Ask questions and document key points. See optional rounding form below.3. When employees raise issues or ask for help, assure them you will follow up.4. Follow up on previous issues or requests —share with staff how the issues were addressed or resolved.
To Do After Rounding
<ol style="list-style-type: none">1. Identify frequently noted issues/themes.2. Prioritize issues (e.g., by level of urgency, threat, ability to resolve).3. Conduct follow-up to show responsiveness to the issues raised (note: this may involve following up with employees individually, developing an organizational report that outlines the input collected and proposed solutions—potentially utilizing the priority levels developed in step #2—or including the findings as a component to be communicated during the next rounding session).4. Consider ways to acknowledge outstanding employee/unit efforts (e.g., thank you notes or other rewards/recognition).5. Identify training or coaching opportunities for employees/units. Plan next rounding session.

[AHRQ QAPI Leadership Rounding Guide](#)

Leave in Action

Annual QAPI Evaluation

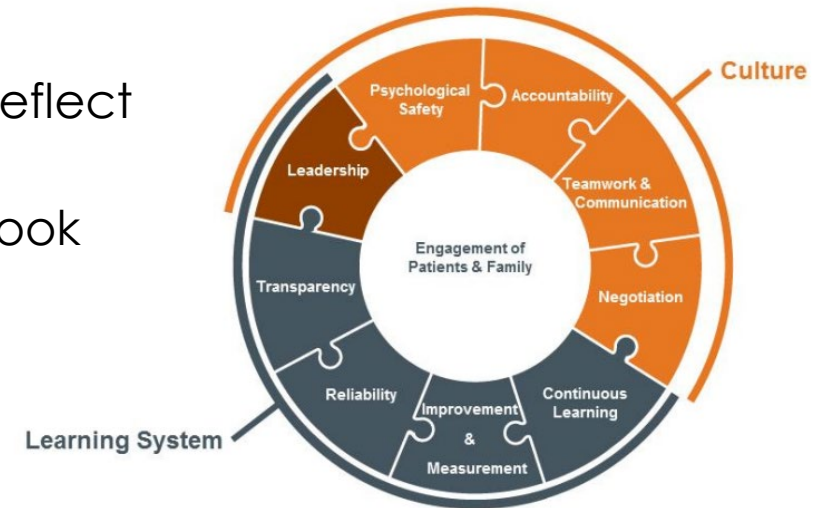
Consider the stage of development of your QAPI Committee

- What is your vision for six months from now? 12 months?
- What will you include in your Annual QAPI evaluation as you reflect on the past 12 months?
- What will you include in your Annual QAPI evaluation as you look forward to the next 12 months?

Framework for Safe, Reliable and Effective Care

During the next three, six and 12 months

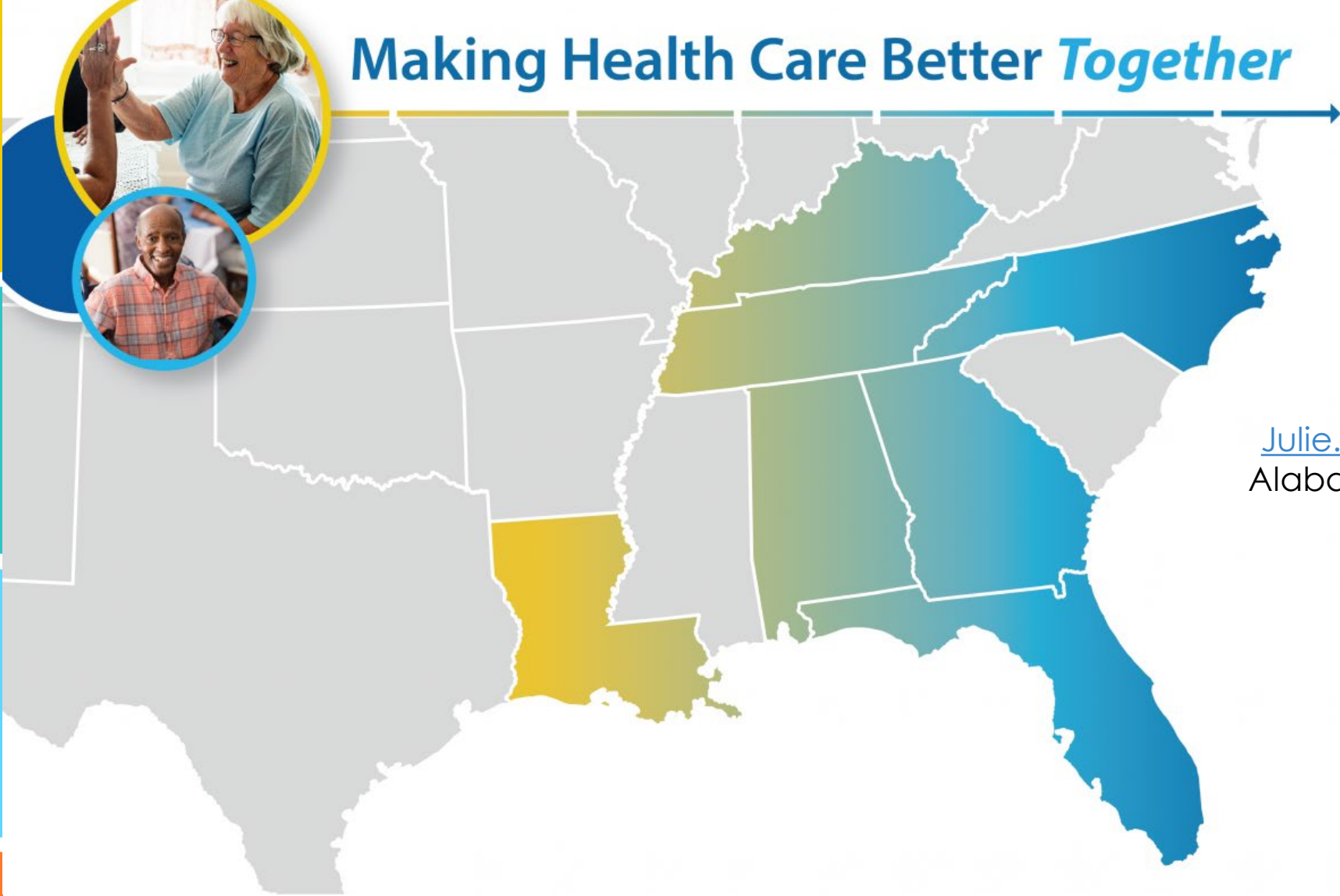
- What actions will you take to address an aspect of leadership?
- What one other component will you address in the next six months?
- What other component will you address beginning seven months from now?



Questions?



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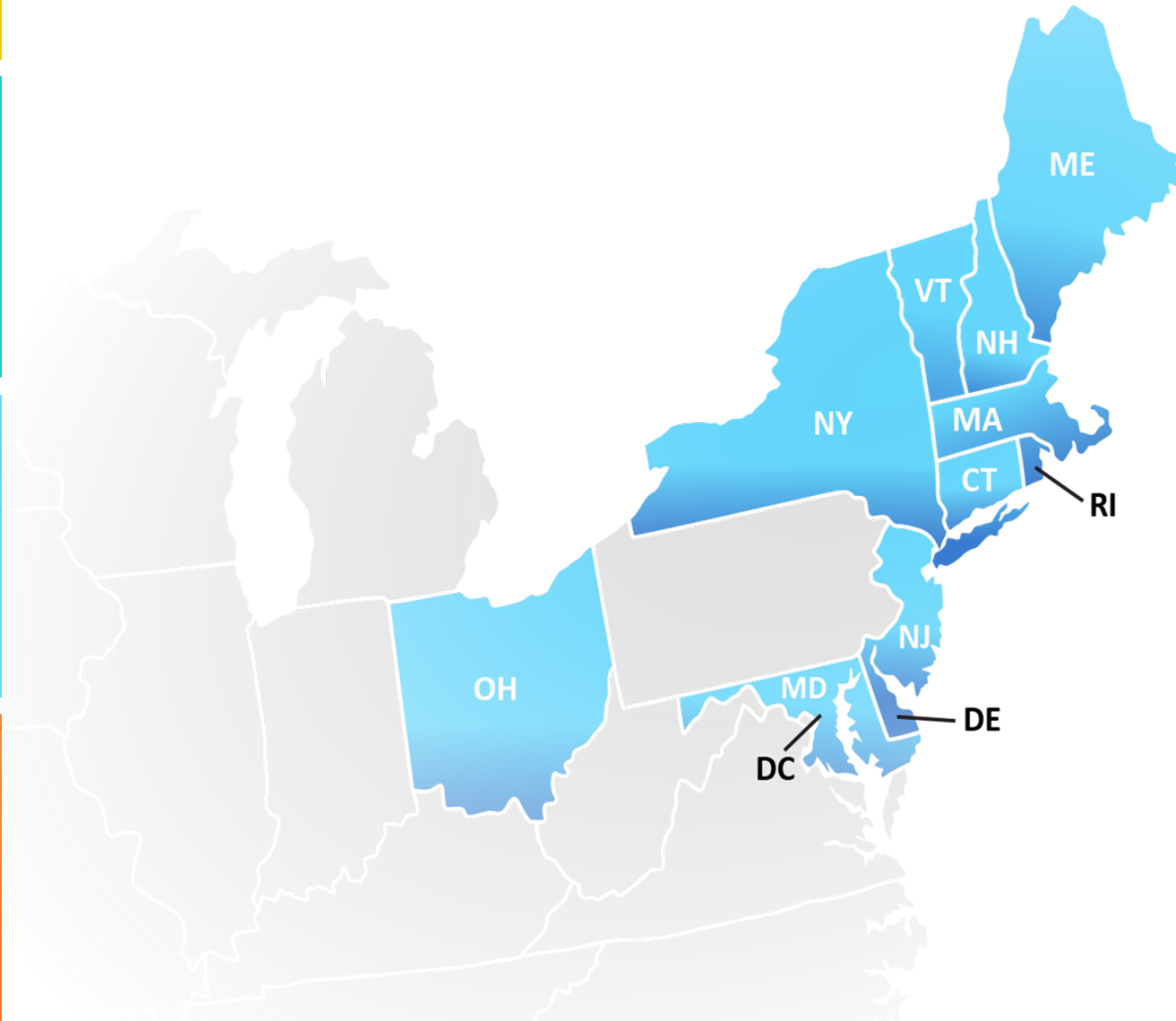


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