

QAPI Step 7

Develop a Strategy for Collecting & Using Data

Effective use of data will help ensure that decisions are made based on fact, and not on an assumption of the truth. Just as a physician needs data about a patient to diagnose a condition, QAPI teams and PIP teams will need data to ensure they are targeting the right areas.

Action Step	Who Is Responsible?	Date Completed
Determine what data to monitor routinely.		
Set targets for performance in the areas you are monitoring.		
Identify benchmarks for performance.		
Develop a data collection plan, including who will collect which data, who will review it, the frequency of collection and reporting, etc.		

Questions for Team Discussion

1. What data do our facility routinely monitor? How are these data displayed and used?

2. What benchmarks will we use when assessing our performance?

3. How can we make better use of the data we have? Do we track and trend our progress over time?

4. How are data shared with others in the organization? Staff? Residents/families? The Board or corporate office?

Surpassing the Hurdles

1. What barriers do you anticipate with these action steps?

2. What additional information does your team need?

3. What additional resources would be helpful?

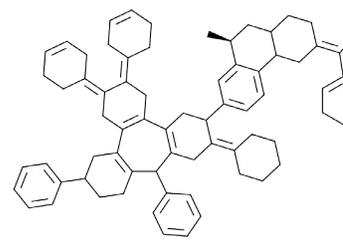
4. What structures can you create to help ensure your success with this step?

QAPI Step 7

Develop a Strategy for Collecting & Using Data

Suggestions for Implementing Step 7

- Areas to consider for data monitoring include clinical care areas, medications, resident/family complaints, hospitalizations, state survey results and business and administrative processes.
- When setting targets, consider the long-term as well as short-term goals.
- When identifying benchmarks, you can look at your performance compared to nursing homes in your state and nationally using [Nursing Home Compare](#). Generally, because every facility is unique, the most important benchmarks are often based on your own performance.



QAPI Step 8

Identify Your Gaps & Opportunities

Whether you are reviewing data from the Minimum Data Set (MDS) or quality measure reports, data from satisfaction surveys or consultant reports, or any other source, be sure you are identifying any trends in the data you review. Use this time to observe for any areas where processes are breaking down.

Action Step	Who Is Responsible?	Date Completed
Review information to determine if gaps or patterns exist in your systems of care, or if opportunities exist to make improvements.		
Discuss any emerging themes with residents and caregivers.		
Notice what things your organization is doing well in identified areas.		
Set priorities for improvement.		

Questions for Team Discussion

1. When reviewing your data, what stands out?

2. How strong is your organizational capacity for assessing facility systems (e.g., policies, protocols, actual care delivery)?

3. What are some areas of strength and weakness?

4. What opportunities do you see?

Surpassing the Hurdles

1. What barriers do you anticipate with these action steps?

2. What additional information does your team need?

3. What additional resources would be helpful?

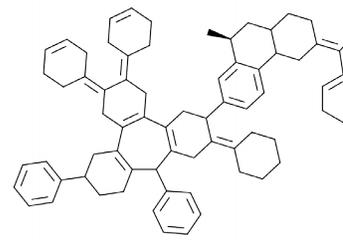
4. What structures can you create to help ensure your success with this step?

QAPI Step 8

Identify Your Gaps & Opportunities

Suggestions for Implementing Step 8

- Measure important indicators of care that are relevant and meaningful to the residents that you serve.
- Guide and empower staff to solve problems. For example, leaders should respond to problems that are raised—not by proposing a solution, but by asking the team to investigate and determine what they believe would work best.
- Hold short stand-up meetings with managers and staff for each shift to identify concerns, resources, needs, etc.
- Establish the nursing home as a learning organization in which all staff identifies areas for improvements.
- Regularly discuss processes and systems to identify areas for improvement—in meetings as well as everyday interactions.
- Empower residents to get involved in identifying areas of improvement.



QAPI Step 9

Prioritize Opportunities & Charter PIPs

Be sure you are choosing areas that you consider important (e.g., areas of high risk, frequent occurrence, or areas that are known problems). Remember that not all identified problems require PIPs, but for those that do, the projects need to be structured, or “chartered.”

Action Step	Who Is Responsible?	Date Completed
Prioritize opportunities for more intensive improvement work.		
Consider which problems need the focus of a PIP.		
Charter PIP teams, by selecting a leader and defining the mission.		
PIP teams should develop timelines and indicate budget needs.		
PIP teams should use the Goal Setting Worksheet to establish appropriate goals.		

Questions for Team Discussion

1. How will organizational priorities be determined?

2. Who will be responsible for monitoring the overall progress of our PIPs?

3. What education is needed for PIP teams?

Surpassing the Hurdles

1. What barriers do you anticipate with these action steps?

2. What additional information does your team need?

3. What additional resources would be helpful?

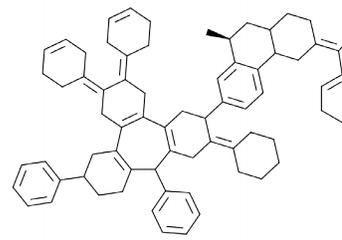
4. What structures can you create to help ensure your success with this step?

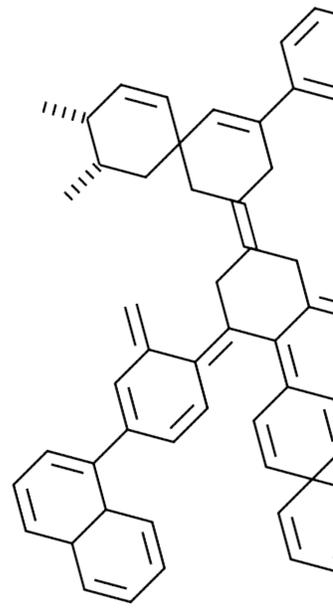
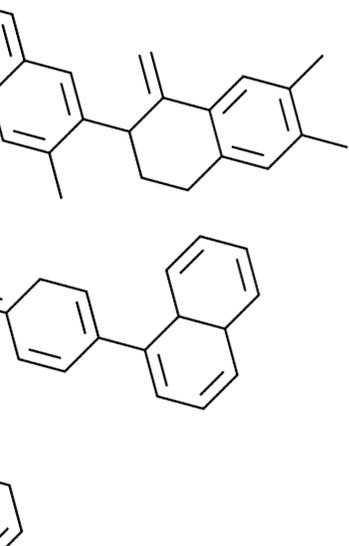
QAPI Step 9

Prioritize Opportunities & Charter PIPs

Suggestions for Implementing Step 9

- Get everyone involved in setting goals—residents, staff, family members, and Board members.
- If practices are not making sense or are frustrating to staff, residents or family, do not settle for “this is just the way it has to be,” challenge and sort out what you have control over, and look for ways to address improvements.





Go to
www.atomalliance.org/QAPI
for more information