

# Making a difference in the lives we touch through quality assurance and performance improvement.

***MISSION STATEMENT****: (Print and save on template)*

***DATE OF MEETING:***

| **ATTENDING** (List name and title; save on template) | **YES** | **NO** |
| --- | --- | --- |
| medical director |  |  |
| administrator |  |  |
| director of nursing |  |  |
| qaa coordinator |  |  |
| environmental services |  |  |
| pharmacy |  |  |
| rd/dm |  |  |
| social services |  |  |
| activities |  |  |
| human resources |  |  |
| board member |  |  |

(insert action plan table from previous meeting)

| ***QUALITY OF LIFE/QUALITY OF CARE*** |
| --- |
| ***ITEM*** | ***SYSTEM CHAMPION*** | ***REPORT*** | ***ACTION*** | ***PIP*** |
| ***Quality Measures:**** *Quality measures > 75% and identify trends/causes.*
 | ***ALL*** |  |  |  |
| ***Facility Focus:**** *Antipsychotic reduction*
* *Advancing excellence*
* *Activities*
* *Call lights*
* *Enhancing resident centered care*
* *Advanced care planning*
* *Other*
 | ***DON******SS******RD/DM******ACT******ALL******ALL*** |  |  |  |
| ***Infection Control:**** *Resident infection rate*
* *Staff infection rate*
* *Trends by location and organism*
 | ***ICN*** |  |  |  |
| ***Mock Survey:**** *Benchmark set/met*
 | ***ALL*** |  |  |  |
| ***State Survey/Nursing Home Compare:**** *Finds*
* *Barriers*
* *Survey readiness*
* *Benchmarks set/met*
* *Star rating*
 | ***ALL*** |  |  |  |
| ***EMR:**** *Totally rolled out?*
* *Accurate*
* *Reports being utilized*
* *Case mix*
 | ***ALL*** |  |  |  |
| ***Care Transitions Rehospitalization/******Discharges:**** *30 day discharge benchmark and results*
* *Follow up on residents discharged home*
 | ***DON******SS*** |  |  |  |
| ***Pilot Projects:**** *Interact 3*
* *Others*
 | ***ALL*** |  |  |  |

| ***ITEM*** | ***SYSTEM CHAMPION*** | ***REPORT*** | ***ACTION*** | ***PIP*** |
| --- | --- | --- | --- | --- |
| ***Policies:**** *Current ones updated*
* *New ones implemented*
 | ***DON*** |  |  |  |
| ***Secured Unit:**** *New programs*
* *Issues that need attention*
 | ***DON*** |  |  |  |
| ***Pharmacist Report:**** *Physician response to recommendations*
* *Tracking and trending of medication*
 | ***PHARM*** |  |  |  |
| ***Recruitment and Retention:**** *Turnover rate by department*
* *Efforts to recruit and retain*
* *Trends of exit interviews*
 | ***HR*** |  |  |  |
| ***Staff Satisfaction:**** *Progression of top two areas identified in staff survey*
 | ***ALL*** |  |  |  |
| ***Orientation/Training:**** *# of new people starting per department*
 | ***ALL*** |  |  |  |
| ***Incident Reports/Safety:**** *Trends and tracking*
* *Falls benchmark/trends*
* *Reportable to the State*
* *Work comp trends*
 |  |  |  |  |
| ***Resident Council:**** *Recommendation from Council*
 |  |  |  |  |
| ***Concern Forms:**** *Tracking/trending of staff and family issues*
* *24-48 hour follow-up done?*
 | ***SS*** |  |  |  |
| ***Family/Resident Survey:**** *Progression of top two areas identified*
 | ***ADM*** |  |  |  |
| ***Daily Rounding:**** *Items/areas identified*
 | ***ADM******DON*** |  |  |  |
| ***Other:*** |  |  |  |  |

**ACTION PLAN**

| ***GOAL*** | ***ACTION*** | ***PROCESS CHAMPION*** | ***TARGET DATE*** | ***COMPLETION DATE*** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
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This material was prepared by SDFMC, the Medicare Quality Improvement Organization for South Dakota, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. 10SOW-SD-C7-13-XXX.

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