

# Implementing a QAPI Process to comply with CMS expectations and improve quality of care

## DESCRIPTION

CMS defines QAPI as the merger of two complementary approaches to Quality: Quality Assurance (QA) and Performance Improvement (PI). While CMS has not imposed regulations around QAPI, they do expect facilities to adopt a data-driven, proactive approach to improving the quality of life, care and services for residents.

The problem many facilities are facing is out of standard Quality Indicator scores, placing them at risk for potential negative survey outcomes. Follow the instructor as she shares case study examples of facilities facing this very problem and how to address it. It starts with Root Cause Analysis, a method of problem solving used to identify the primary cause of a program so that you can determine what happened, why it happened and reduce the likelihood of it happening again. Next, it requires adopting a QAPI process to review results and create an action plan.

In the end this results in reduction in potential negative survey outcomes, enhanced programs specific to reduction in negative Quality Indicator Outcomes, pain management interventions, accurate MDS item set coding, psychotropic drug reduction, and reduction in pressure ulcers through wound management.

## LEARNING OBJECTIVES

1. Review what QAPI means and how CMS is expecting facilities to adopt a data-driven, proactive approach to improving quality.
2. Understand how Root Cause Analysis (RCA) can play a role in your QAPI process
3. Discuss real-world case study examples facing problems with Quality Indicator scores and strategies to improve them.