

RESOLVING RESIDENT GRIEVANCES

QAPI in a Culture Change
Environment

Tuscola County Medical Care Community
Caro, MI



OBJECTIVE

Discuss action steps to implement
QAPI with resident grievance
process

“Quality is never an accident; it is always the result of high intention, sincere effort, intelligent direction and skillful execution; it represents the wise choice of many alternatives.”

Goal: Develop a culture built around Quality -

A little about our Overall Quality Program

- Developed a functioning Quality Management Committee/Program in 2000
- All Departments Participated & Learned from Interaction
- Essentially a Reporting System
- As Deficits were identified, the Department Head “fixed,” monitored and reported results.
- Teams were usually formed within own department (not interdisciplinary), but solutions often impacted other departments.

2012 – Began Developing a QAPI Program

- QAPI arrived late in 2012
- Began educating ourselves
- Converted Quality Management Committee to Performance Improvement Process Committee (PIP).
- First “Official” PIP Meeting – January 2013.

Oxygen Room
HOSPITAL RE-ADMISSIONS
Notification of Change of Condition
UNNECESSARY MEDICATIONS
Radiology Utilization
BOWEL CARE
Medication Errors
Infection & Immunization Rates
CONTROLLED SUBSTANCE MONITOR
Refrigerator Temps
FOLEY CATHETER RATE/CHANGE/INFECTION
New Pharmacy Orders
SAFETY ROUNDS
Medication Room Audits
Review of Recaps
T.P. Yellow Lines in Place on Bed & Breda Chain
Bed Rails Admission/Quarterly
BOWEL & BLADDER PATTERNS
Documentation Supporting Continued Use of Restraints & Enablers
PRESSURE ULCER RATING
ROM MDS ASSESSMENTS ENTERED WEEKLY
New Admission/Re-admission ROM Assessments
Restorative Programs Upon Discharge from Therapy
DINING OBSERVATIONS
Resident Emergency ID Tag Readiness
Evacuated Placement & Readiness
Accidents & Incidents
ALARM REDUCTION
Antibiotic QI

ACTION STEPS FOR DEVELOPMENT OF FACILITY-WIDE QAPI

- First, all departments must be monitoring functions in their areas of expertise
- Must maintain data
- These tools identify areas of concern

WHEN CONCERNS ARE IDENTIFIED

- Concern(s) reported in PIP meeting
- A team is needed to investigate **root cause**
- Team Leader is appointed by PIP Cmte

FOLLOWING PIP MEETING

- New Team Leader selects team members
- Diverse group / Interdisciplinary
- Schedule team meeting

QAPI PROCESS



- Team identifies root cause of issue
- Brainstorms solutions using PDSA cycle
- Team develops a plan - solution may be big or small
- Plan is reported back to PIP Committee

SIGNIFICANT CHANGES

- If solution involves significant financial expenditures or plant changes, issue is taken to the Administrative Team for discussion and may also require Board approval.

RESIDENT GRIEVANCES

QAPI PROCESS IMPROVEMENT IN A CULTURE CHANGE ENVIRONMENT

GRIEVANCE TOOLS

- Resident Council
- Abaqis Quality Management System
- Focused Review Coordinator
- Daily Vigilance

RESIDENT COUNCIL

- Meets Monthly
- Always ask for concerns & they are given freely
- Community Liaison assisting the Council uses a specific form to document resident concerns
- Form is routed to the appropriate Department Head for action (or no action)
- Department Head responds in writing on the form, and returns it to Liaison who will report back to the Resident Council.

Examples

ABAQIS

- Abaqis is a Quality Management software solution
- We utilize it to ensure Quality of Care and Quality of Life for all residents
- It is based on the QIS Survey process & coordinates with all F-tags
- A Team of professional staff use the software to conduct standardized interviews & observations weekly with residents, families & staff
- These interviews are geared to identify any concerns in a timely & systematic manner

ABAQIS

- We receive quarterly risk analysis reports from Abaqis relating to a variety of F-tags
- This allows us to identify key deficits that can be brought to PIP for review

Examples

FOCUSED REVIEW COORDINATOR

Do you have a "quality" nurse or other person responsible for fielding resident issues?

You can't afford not to have one, because when you don't, who ends up dealing with those issues?

Your DON.

Don't you need the DON doing a dozen other things?

FOCUSED REVIEW COORDINATOR

- In our system, this is an RN position
- FRC receives notification of issues in a variety of ways
 - Directly from resident/family
 - From a Staff Member: Nurse, CENA, Housekeeper
 - Reviewing Incident Reports

Examples

Last but not least.....

DAILY VIGILANCE

Every single staff member needs to be empowered to report any issues that seem to be a resident concern.

WE HOPE THIS INFORMATION
HAS BEEN USEFUL FOR YOU

Questions??

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