HOSPICE QUALITY ASSESSMENT AND PERFORMANCE IMPROVEMENT (QAPI) REVIEW

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<th>Review Date</th>
<th>Surveyor No.</th>
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Name(s) – Designated Responsible Person(s) – § DHS 131.22(6)c

Program Standards
- Develop, implement, and maintain an effective, ongoing, hospice-wide data-driven program.
- Governing body ensures program reflects complexity of the organization and services, including contracted services.
- Maintain documentary evidence of program.
- QAPI / patient safety program is evaluated annually.

Program Scope
- Show measurable improvement related to improved palliative outcomes and hospice services.
- Measure, analyze, and track quality indicators, including adverse events.

Program Data
- Use quality indicator data in the design of the program.

Program Activities
- Focus on high risk, high volume, or problem-prone areas.
- Consider incidence, prevalence, and severity of problems in those areas.
- Affect palliative outcomes, patient safety, and quality care.
- Track, analyze, and implement preventive actions for adverse events.
- Ensure improvements are sustained.

Performance Improvement Projects
QAPI programs must reflect:
- Scope, complexity, and past performance
- Hospice needs and internal organizational needs in number of projects conducted annually
- Actual and potential projects prioritized, developed, implemented, and evaluated

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Outcome

Agency Action to Improve Care

Executive Responsibilities
- Governing body is responsible for QAPI program.
- Ensures program is defined, implemented, maintained, and evaluated annually.