

# Person Centered Planning and Quality Improvement

Defining, Measuring, and Improving the Quality of  
Life of People.

Part 2

# Why do we need to collect data?

Data helps us to identify problems and make improvements that enhance the quality of life of people. Data should be collected on an on-going basis.

# Why should we continuously define and measure quality?

To ensure promises made to each individual are kept and improve the quality of life of all people.

# Quality Assurance and Performance Improvement<sup>1</sup>

Can we develop a Quality Assurance and Performance Improvement (QAPI) program?

**Yes!** Though not required by regulations, a quality improvement or QAPI program is a proactive, comprehensive and ongoing approach to improving the quality of the services.

# Quality Assurance and Performance Improvement

An effective QAPI program contributes to and protects self-determination, independence, productivity, integration and inclusion of individuals with disabilities in all facets of community life.

# What does the process look like?

1. *Create* performance monitoring systems
2. *Identify* common performance indicators
3. *Develop* comparable data collection strategies
4. *Collect & Analyze* data
5. *Develop & Implement* improvement strategies
6. *Train* staff
7. *Sustain* improvements

# Are all the steps necessary?

**Yes!** The focus of the QAPI program is on whether there is an effective, ongoing and data-driven system in place for identifying problematic events, policies, or practices and taking actions to remedy them, and then following up on those actions to determine if they were effective in improving performance and quality.

QAPI programs should be developed, implemented, and maintained in an ongoing, data-driven manner.

Ongoing means the program is a continuing one, not just a one-time effort.

This includes collecting and analyzing data at regular intervals; taking actions to address problems identified in the analyses, as well as new data collection to determine if the corrective actions were effective.

Data-driven: The program should identify, in a systematic manner, what data it will collect to measure various aspects of quality of care; the frequency of data collection; how the data will be collected and analyzed; and evidence that the program uses the data to assess quality and stimulate performance improvement.

An effective program should be able to demonstrate measurable improvement in individuals' outcomes as well as measure, analyze, and track adverse events that may occur.

Where do we start?

# Program Activities:

1. Set priorities for performance improvement activities.
2. Choose quality indicators and measurements. What is measured will determine where to focus your efforts to make changes that improve performance.

# Program Activities continued...

3. Collect and analyze data on the indicators.
4. Implement actions to correct identified problems.
5. Train staff.
6. Sustain improvements.

# What is an Indicator?

There are a variety of types of indicators that are currently in use for measuring and improving quality of services.

Indicators differ in terms of how the data is collected, and how frequently the data should be collected.

# Three Types of Indicators

- **Outcomes** indicators measure results of care.
- **Process of Care** indicators measure how often the standard of care was met for individuals with a diagnosis related to that standard.
- **Individual Perception** indicators measure an individual's experience of the care he/she receives in the facility.

# Factors to Consider

Consider the following when selecting indicators that will shape improvement activities:

- The rate or frequency at which problems occur related to area measured by the indicator.
- The prevalence, i.e., how widespread something is at a given point in time.
- The severity of problems.

Tell me more about the program data.

# Program Data

1. The program should incorporate quality indicator data, including individuals' care and other relevant data regarding furnished services.

# Program Data

2. The data collected should be used to monitor the effectiveness and safety of services and quality of care as well as identify opportunities that could lead to improvements and changes in individuals' lives.

# Active Data Collection

It is imperative to actively collect data related to those measures, and at the intervals, called for by the QAPI program.

Staff responsible for data collection should be trained in appropriate techniques to collect and maintain the data.

What comes after data collection?

# Data Analysis

After collecting the data, analyze it to monitor performance. This should be conducted by personnel with appropriate qualifications to interpret quantitative data.

Analysis should take place at regular intervals, in order to avoid too much time elapsing before you are able to detect problem areas.

Once there is a thorough analysis of the data, identify improvement strategies that are designed to address the underlying causes.

Analysis of the data should also be used to identify areas where there is room for improvement in performance, as well as follow-up actions to improve performance.

What comes next?

# Implement Improvement Strategies

Once analysis of the data has identified opportunities for improvement, you should develop changes in policies, procedures, equipment, etc., as applicable, to accomplish improvements in the identified areas of weakness.

# Sustaining Improvements

Additionally, you should implement preventive strategies designed to reduce the likelihood of re-occurring events.

You should have a method to ensure improvements are sustained over time.

# Staff Training

You should make all staff aware of the preventative and improvement strategies that have been adopted.

What about performance improvement projects?

# Performance Improvement Projects

1. The number and scope of improvement projects should reflect the scope and complexity of the services and operations.
2. You should document the projects that are being conducted. The documentation should include the reason(s) for implementing the projects and a description of the results.

# Performance Improvement Projects

3. Improvement projects should be based on the types of services provided as well as other aspects of the operation.
4. You should keep records on performance improvement projects.
5. Each project should include an explanation of why the project was undertaken and the data collected that resulted in improvements in individuals' outcomes.

# References

<sup>1</sup> *State Operations Manual Appendix L - Guidance for Surveyors: Ambulatory Surgical Centers*. (Rev. 76, 12-22-11). Retrieved from [http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/som107ap\\_l\\_ambulatory.pdf](http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/som107ap_l_ambulatory.pdf) (pp. 67–78).

*Send comments or questions to*  
*[fsb@dhw.idaho.gov](mailto:fsb@dhw.idaho.gov)*