

Quality Assessment & Performance Improvement (QAPI)

FACILITY NAME:					PROVIDER NUMBER:	
DATE Started:					TEAM MEMBERS	
Date Completed:					Facility	
PROBLEM STATEMENT:					1.	
					2.	
GOAL:					3.	
					4.	
BASELINE DATA:					5.	
					6.	
ROOT CAUSE(S):					7.	
					8.	
					9.	
BARRIER(S):					External Members::	
					1.	
					2.	
					3.	
TASKS	RESPONSIBLE TEAM MEMBER	START DATE	ESTIMATED COMPLETION DATE	ACTUAL COMPLETION DATE	COMMENTS (STATUS, OUTCOMES, EVALUATION, ETC.)	

Quality Assessment & Performance Improvement (QAPI)

FACILITY NAME:					PROVIDER NUMBER:	
TASKS	RESPONSIBLE TEAM MEMBER	START DATE	ESTIMATED COMPLETION DATE	ACTUAL COMPLETION DATE	COMMENTS (STATUS, OUTCOMES, EVALUATION, ETC.)	
<p>COMMENTS: For all QAPI projects a metric or measurement should be established as the baseline and the process should be re-measured periodically to track progress in achieving the pre-determined improvement goal or target. The top three root causes of the barriers to improvement are determined by the committee after a thorough assessment of the problem. Develop strategies to over- come barriers & then implement a plan of improvement.</p>						