

Quality Assessment & Performance Improvement (QAPI)

FACILITY NAME:	The Village at Summerville a Presbyterian Community	PROVIDER NUMBER:			
DATE Started:	12/1/2015	TEAM MEMBERS			
Date Completed:		Facility			
PROBLEM STATEMENT:	7 out of 39 pain assessments report moderate to severe pain scores	1.	Medical Director		
GOAL:	Reduce the number of incidents of moderate to severe pain scores reported	2.	Administrator		
BASELINE DATA:		3.	Director of Nursing		
ROOT CAUSE(S):		4.	Wound Nurse		
Resident's and nursing staff are not knowledgeable regarding the pain score and when to treat pain.		5.	RN Staff member		
Pain Medications not ordered to		6.			
Nursing staff not evaluating the existing cause and frequency of pain.		7.			
BARRIER(S):		8.			
		9.			
		External Members::			
		1.			
		2.			
		3.			
TASKS	RESPONSIBLE TEAM MEMBER	START DATE	ESTIMATED COMPLETION DATE	ACTUAL COMPLETION DATE	COMMENTS (STATUS, OUTCOMES, EVALUATION, ETC.)
Assigned Nurse will instruct new residents on the Wong Baker and Numerical pain scale,	Wound Nurse	12/1/2015	Ongoing		
The Assigned nurse will distribute a copy of the pain score in numerical form and Wong Baker as a teaching guide.	Wound Nurse	12/1/2015	Ongoing		

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Re-educate staff and resident's as needed.	Wound Nurse	12/1/15	Ongoing			
<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>						