



Alice Gleghorn, PhD
Director

**Proposed Revisions to Complete
List of Quality Assessment
Performance Indicator (QAPI)
List:**

**1. *New Indicator proposed for
PGB review/approval:***

None at this meeting.

**2. *Indicators with proposed
revision for PGB
review/approval:***

H 5, H 8 add 'monthly' reporting to QAPI

**3. *Indicators proposed for
PGB review/removal:***

E 2, F 1, F 4, F 5, G 2, G 3, I 1, J 1

COUNTY OF SANTA BARBARA

Complete QAPI List 10/16/2019

Quality Assessment and Performance Improvement Indicators

White Items are Items of Primary Focus / Grayed-Out Items are Items of Secondary Focus

Quality Assessment and Performance Improvement Indicators						
No	Name	Definition	Target	Accountability	Reporting	Comment
A Significant Adverse Occurrences						
1	*Sentinel Event	Event leading to death or significant impairment (per Unusual Occurrence Reporting Policy) includes Near Misses, State Reportable Events	N/A	QCM	QAPICOMMITTEE, MPC, BOARD [Monthly]	Each sentinel event is reported. The root cause analysis and prevention interventions are also reported.
2	Event Reporting Frequency(RCA)	Number of events reported of the following types: Medication-Related; Other significant/Mandated Reporting	N/A	QCM	QAPICOMMITTEE, MPC, BOARD [Monthly]	The focus will be to increase reporting of issues
B Complaints/Grievances						
1	*Patient Grievance Rate	Numerator: # of patient grievances Denominator: 100 patient days	10%	Patient Advocate	QAPICOMMITTEE, MPC [Monthly] BOARD [Quarterly]	QAPI Com mittee will oversee the effectiveness of corrective actions taken by Grievance Com mittee
2	*Clinically Related Patient Grievance	Numerator: # of grievances related to clinical care/skill Denominator: # of grievances	5%	Patient Advocate	QAPICOMMITTEE, MPC [Monthly] BOARD [Quarterly]	QAPI Com mittee will oversee the effectiveness of corrective actions taken by Grievance Com mittee
C Patient Services, Care and Safety						
1	Patient injuries during hospitalization	Numerator: Number of patient injuries w or w/o treatm ent Denominator: Number of pt days per month X 100	0%	QCM	QAPICOMMITTEE, MPC, BOARD [Monthly]	QAPI Com mittee will oversee the effectiveness of corrective actions
2	Inpatient Mortality Rate	Numerator: Number of inpatient deaths Denominator: Number of patient days per month X 100	0%	QCM	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Com mittee will oversee the effectiveness of corrective actions
3	Readmissions within 30 Days	Numerator: Number of inpatient readmissions within 30 days of discharge Denominator: Number of inpatient adm issions per month	10%	QCM	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Com mittee will oversee the effectiveness of corrective actions
4	Medical Em ergency Transfers	Numerator: Number of inpatients transferred em ergently to an acute hospital Denominator: Num ber of patient days per month X 100	2%	QCM	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Com mittee will oversee the effectiveness of corrective actions
* = required by External Authority						

Quality Assessment and Performance Improvement Indicators						
No	Name	Definition	Target	Accountability	Reporting	Comment
C Patient Services, Care and Safety (continued)						
5	Elopement Rate	Numerator: Number of Elopements Denominator: Number of inpatient days per month X 100	0%	QCM	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions
6	Suicide Management	Numerator: Number of attempted suicides Denominator: Number of patients admitted with dx of behavioral/emotional disorder	0%	QCM	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions
7	*Inpatient Falls per 100 patient days	Numerator: Number of inpatient falls reported during the month. Denominator: number of inpatient days per month X 100.	0.5	QCM	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions
8	Patient falls leading to injury requiring treatment	Number and brief description to the circumstances surrounding any inpatient or outpatient fall that required medical treatment	0%	QCM	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions
9	Rate of Initial Treatment Plans Reviewed and Approved within 24 hours of admission	Numerator: # of Medical Records reviewed for presence of Treatment Plans Reviewed and Approved within 24 Hours of Admission Denominator: Number of Inpatient Admissions	95%	QCM	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee & MPC will oversee the effectiveness of corrective actions
No	Name	Definition	Target	Accountability	Reporting	Comment
D Physician and AHP Related Issues						
1	*Rate of Complete and Timely Psychiatric Evaluations	Numerator: Number of Records Reviewed for Presence Complete and Timely Psychiatric Evaluations Denominator: Number of Records Reviewed where Psychiatric Evaluation Required	100%	QCM	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee & MPC will oversee the effectiveness of corrective actions
2	*Rate of Complete Psychotropic Medication Consents	Numerator: # of Medical Records reviewed with Presence of Psychotropic Medication Consents Present (for voluntary admissions – if not presence of state mandated Psychotropic form present) with patient and/or patient's legal guardian signature Denominator: Number of Psychotropic Medication Consents Required (e.g. # of individual psychotropic medication consent forms required in each medical record reviewed)	100%	QCM	QAPICOMMITTEE, MPC, BOARD [Monthly]	QAPI Committee & MPC will oversee the effectiveness of corrective actions
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Quality Assessment and Performance Improvement Indicators						
No	Name	Definition	Target	Accountability	Reporting	Comment
D Physician and AHP Related Issues (continued)						
3	Telephone Orders	Numerator: # of Telephone Orders signed and Dated within 24 hours Denominator: Total # of Telephone Orders Reviewed	100%	QCM	QAPI COMMITTEE, MPC, BOARD [Monthly]	QAPI Committee & MPC will oversee the effectiveness of corrective actions
4	Appropriateness of Poly-Pharmacy Antipsychotic Therapy	Numerator: Number of poly-pharmacy Antipsychotic therapy records reviewed with evidence of review of appropriateness of each drug Denominator: Number of poly-pharmacy antipsychotic therapy records reviewed	95%	QCM	QAPI COMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee & MPC functioning as P&T will oversee the effectiveness of corrective actions
5	Rate of Consultation Reports Reviewed by Physician and Noted in D/C Summary	Numerator: Number of Records Reviewed for Presence of Physician Annotated Review of Consultation in D/C Summary Denominator: Number of Records Reviewed where Consultations Present	95%	QCM	QAPI COMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee & MPC will oversee the effectiveness of corrective actions
6	*Discharge Summary Completion	Numerator: # of Medical Records with Discharge Summary Completed within 30 days of Discharge and Contains all Required Elements Denominator: Number of Inpatient Discharges	95%	QCM	QAPI COMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee & MPC will oversee the effectiveness of corrective actions
7	Discharge Progress Note Completion	Numerator: # of Medical Records with Discharge Progress Notes Completed per Policy Denominator: Number of Inpatient Discharges	100%	QCM	QAPI COMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee & MPC will oversee the effectiveness of corrective actions
No	Name	Definition	Target	Accountability	Reporting	Comment
E Laboratory Services						
1	*Average time of reporting of critical results	Mean time from resulting availability to notification of the responsible practitioner (physician or other practitioner who may initiate appropriate	30 min	QCM	QAPI COMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions
2	Mislabeled/Unlabeled Specimens	Numerator: Number of mislabeled or unlabeled specimens Denominator: Number of specimens received in laboratory	5%	QCM	QAPI COMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions (On Target for 18 months. Secondary and not a current area of focus. Recommend removal. Also monitored through incident reporting process).

*= required by External Authority

Quality Assessment and Performance Improvement Indicators

No	Name	Definition	Target	Accountability	Reporting	Comment
F Food and Nutrition Issues						
4	Rate of appropriate and accurate diets	Numerator: Number of nutritional diets accurate and appropriate for patients carbohydrate, caloric and protein needs Denominator: Number of diets reviewed	100%	Director of Dietary	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions (On target for 24 months, recommend removal, not an area of current focus)
2	Rate of correct meal preparations	Numerator: Number of meals prepared with correct menu including food portions Denominator: number of prepared meals reviewed	100%	Director of Dietary	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions
3	Number of Timely Nutritional Assessments	Numerator: Number of RD assessments performed within 72 hours for patients at high nutritional risk Denominator: number high risk nutritional patients reviewed	100%	Director of Dietary	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions
4	Proper Food Storage	Numerator: Number expired food items in kitchen refrigerators/freezers Denominator: Number of food items observed	0%	Director of Dietary	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions (On target for 18 months, recommend removal, not an area of current focus)
5	Proper Food Preparation	Numerator: Number of food temperatures within range Denominator: Number temperatures checks performed	100%	Director of Dietary	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions (On target for 18 months, recommend removal, not an area of current focus)
G Infection Prevention and Control						
1	Rate of Compliance CDC Hand Hygiene Requirements	Numerator: Number of observations when the care giver performed hand hygiene per CDC guidelines. Denominator: number of observations (opportunities)	80%	Infection Control Practitioner	QAPICOMMITTEE, MPC (IC function), BOARD [Quarterly]	QAPI Committee and the MPC performing the Infection Control Function will oversee the effectiveness of corrective actions
-2	Appropriate Cleaning /Disinfecting Products	Numerator: Number of cleaning products EPA approved for hospital use Denominator: All cleaning products (4 observations per month)	100%	Infection Control Practitioner	QAPICOMMITTEE, MPC (IC function), BOARD [Quarterly]	QAPI Committee and the MPC performing the Infection Control Function will oversee the effectiveness of corrective actions (On target for 24 months, recommend removal, not a current area of focus)
-3	Number of infections due to inadequate cleaning of showers	Numerator: Number of athlete foot infections Denominator: 100 patient days	0%	Infection Control Practitioner	QAPICOMMITTEE, MPC (IC Function), BOARD [Quarterly]	QAPI Committee and the MPC performing the Infection Control Function will oversee the effectiveness of corrective actions (On target for 24 months, recommend removal, not an area of current focus)

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Quality Assessment and Performance Improvement Indicators						
No	Name	Definition	Target	Accountability	Reporting	Comment
H Restraint / Seclusion (Violent/Self Destructive Behavior)						
1	Restraint Usage Rate	Numerator: Hours of restraint use Denominator: 1000 patient hours	volume	QCM	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions
2	Seclusion Usage Rate	Numerator: Number of "seclusion episodes" Denominator: 100 inpatient days	volume	QCM	QAPICOMMITTEE, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions
3	Appropriateness of Restraint / Seclusion Renewal at 24 hours	Numerator: Number of restraint / seclusion episodes renewed at the 24 hour time frame with evidence of in-person evaluation by LIP Denominator: Total number of renewal restraint / seclusion orders	100%	QCM	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions
4	Appropriateness of Order Time Frame	Numerator: Number of orders for restraint / seclusion meeting 4/2/1 hr time frame pursuant to age population Denominator: Total number of orders for restraint / seclusion	100%	QCM	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions
5	Restraint / Seclusion Usage – Evidence of Alternative Methods/Less Restrictive Measures	Numerator: Number of restraint / seclusion records reviewed evidence of alternative & less restrictive measures attempted or considered and rejected prior to restraint use in the Denominator: Total number of restraint / seclusion episodes reviewed	100%	QCM	QAPICOMMITTEE [Monthly] , MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions
6	Evaluation of Restraint / Seclusion	Numerator: Number of new restraint / seclusion episodes with face-to face evaluation within 1 hour of restraint / seclusion application by Qualified RN or PA or LIP Denominator: Total number of new episodes of restraint / seclusion	100%	QCM	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions
7	Restraint / Seclusion Outcome – Injuries while restrained	Numerator: Number of pt. injuries while restrained or secluded Denominator: Number of restraint / seclusion episodes per 100	0%	QCM	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions
8	Inclusion in Treatment Plan	Numerator: Number of records of restrained and/or secluded patients with inclusion of restraint/ seclusion in treatment plan Denominator: Number of patient records with restraint/ seclusion	100%	QCM	QAPICOMMITTEE [Monthly] , MPC, BOARD [Quarterly]	QAPI Committee will oversee the effectiveness of corrective actions

Quality Assessment and Performance Improvement Indicators						
No	Name	Definition	Target	Accountability	Reporting	Comment
I Medication Use/ Pharmacy Services						
—1	Medication Error Rate as a Result of Med Unavailability	Numerator: total number of medication errors occurring in patient care areas as a result of medication unavailability Denominator: Total medications dispensed (or per 100 medications dispensed)	0%	QCM	QAPICOMMITTEE, BOARD [Monthly]	QAPI Committee & MPC functioning as P&T will oversee the effectiveness of corrective actions (On target for 24 months since on site pharmacy started, recommend removal, not an area of current focus)
2	Adverse Drug Reaction Rate	Numerator: Number of adverse drug reactions Denominator: Number of medications Administered	2%	QCM	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee & MPC functioning as P&T will oversee the effectiveness of corrective actions
3	Patient Medication and Controlled Substance Labeling	Numerator: # of patient medications, including controlled substances labeled and stored according to hospital policy Denominator: number of patient stored medications	100%	QCM	QAPICOMMITTEE, BOARD [Quarterly]	QAPI Committee & MPC functioning as P&T will oversee the effectiveness of corrective actions
4	Dual licensed Signatures for Controlled Substance Destruction (one RN signature required)	Numerator: # of controlled substance destructions with dual licensed signatures (one RN signature required) Denominator: total # of controlled substance destructions	100%	QCM	QAPICOMMITTEE, BOARD [Quarterly]	QAPI Committee & MPC functioning as P&T will oversee the effectiveness of corrective actions
5	Controlled Substance Discrepancy	Numerator: # of resolved controlled substance discrepancies Denominator: total # of controlled substance discrepancies	100%	QCM	QAPICOMMITTEE, BOARD [Quarterly]	QAPI Committee & MPC functioning as P&T will oversee the effectiveness of corrective actions
6	Medication Errors	Total Number of Medication Errors	0%	QCM	QAPI COMMITTEE [Monthly] BOARD [Quarterly]	QAPI Committee & MPC functioning as P&T will oversee the effectiveness of corrective actions
No	Name	Definition	Target	Accountability	Reporting	Comment
J Environmental Services						
1	Room Cleanliness	Numerator: Number of Patient Rooms clean without visible dirt, dust Denominator: Number of patient Rooms observed	>95%	EVS Manager	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee and the MPC performing the Infection Control Function will oversee the effectiveness of corrective actions (On target for 24 months, recommend removal, not an area of current focus)
2	Cleaning / Disinfection Patient Rooms	Numerator: Number of correct responses from staff when queried on disinfectant dwell (wet/kill) times Denominator: Number of queries (2 queries per week)	>95%	EVS Manager	QAPICOMMITTEE, MPC, BOARD [Quarterly]	QAPI Committee and the MPC performing the Infection Control Function will oversee the effectiveness of corrective actions

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Quality Assessment and Performance Improvement Indicators						
No	Name	Definition	Target	Accountability	Reporting	Comment
K Environment of Care (EOC)						
1	Staff Knowledge about Unsafe/hazard Condition	Numerator: # of staff able to articulate how to report unsafe environment or hazard Denominator: # of staff interviewed	>95%	Plant Operations	Environment of Care Oversight QAPICOMMITTEE, Board [Quarterly]	EOC will oversee the effectiveness of corrective actions
2	Emergency Management Employee Education	Numerator: # of employees correctly describing their role in the event of an internal/external disaster Denominator: # of employees interviewed	>90%	Plant Operations	Environment of Care Oversight QAPICOMMITTEE, Board [Quarterly]	Executive leadership / QAPI will oversee the effectiveness of corrective actions
3	*Emergency Management Activation	1 per year	100%	Plant Operations	Environment of Care Oversight QAPICOMMITTEE, Board	EOC will oversee the effectiveness of corrective actions
4	*Fire and Internal Disaster Drills	Numerator: 1 fire and Internal Disaster drill per quarter per shift conducted Denominator: 16	100%	Plant Operations	Environment of Care Oversight QAPICOMMITTEE, Board [Quarterly]	EOC will oversee the effectiveness of corrective actions
5	Review of Escape Routes During Construction(ILSM)	Numerator: # of escape routes reviewed for unobstructed access Denominator: # of escape routes	100%	Plant Operations	Environment of Care Oversight QAPICOMMITTEE, Board [Quarterly]	EOC will oversee the effectiveness of corrective actions
6	Staff knowledge of fire plan	Numerator: # of staff articulating fire plan components correctly Denominator: # of staff queried	>90%	Plant Operations	Environment of Care Oversight QAPICOMMITTEE, Board [Quarterly]	EOC will oversee the effectiveness of corrective actions
7	Management of Physical Environment	Work order completion rate Numerator: # of work orders completed within 30 days of creation Denominator: # of work orders created	95%	Plant Operations	Environment of Care Oversight QAPICOMMITTEE, Board [Quarterly]	Executive leadership / QAPI will oversee the effectiveness of corrective actions

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