QAPI Plan Workshop Session 4: Take Me To Your Leader

Krista: Good afternoon and welcome to today's "QAPI Plan Workshop" webinar "Take Me to Your Leader" presented by Quality Insights, Quality Innovation Network. We will get started with today's program in just few moments, but first a few housekeeping items. This is the fourth of seven sessions that will take place this summer. You will need to register for each session separately. If you have not yet registered for sessions five through seven, please contact your local Quality Insights Project coordinator and he or she will help you. Contact information will be included later in the presentation.

All participants entered today's webinar in "listen only" mode. Should you have a question during today's webinar, we ask that you please type it into either the chat or the Q and A box to the right of your screen. Questions will be addressed at the end.

Today's webinar is being recorded. The recording and the slides you see today will both be posted on My Quality Insights in the "Reducing Healthcare-Acquired Conditions in Nursing Homes" section. Following the conclusion of today's webinar, you will be asked to complete a short evaluation. We thank you in advance for your completion of the evaluation, as it helps us know how we did and how to shape future programs.

Today's speaker is Quality Insights' "Reducing Healthcare-Acquired Conditions in Nursing Homes" project coordinator from West Virginia, Pam Meador, to whom I would like to turn the program over. Pam?

Pam Meador: Thank you, Krista. Okay, well I want to welcome everybody to session four of the QAPI Plan Workshop. It seems like we're becoming old friends and I can't believe it's already been two weeks since session three, but it has. And here we are, getting ready for session four, which is entitled "Take Me to Your Leader". Writing this, I kind of felt like an alien, but now I'm good and we are gonna get started and, as always, we're first going to begin with the review.

Hopefully, by now you have done action steps in one, two, and three. One of the things that I know most of you guys have done is the QAPI self-assessment. And here in West Virginia, several of you have sent those to us and we thank you for that, and in the other states as well. If you have not done that yet, we encourage you to do that. We really use those assessments for future educational purposes and helping facilities to get on track with where they need to be, get some help with areas that facilities across the States are having problems alike, and just basically knowing where you're at and where you're going. So if you haven't done that, we encourage you to do that, and if you need further help with that, again, notify your project coordinator in your state and we can do that.

As of last week, you should have written, first of all, how you are going to consistently and uniformly write your goals across your QAPI work that you're gonna be doing, and you wrote a policy on how your were going to do that. You also had written your Scope

of Service Statement and your list for how you're going to use QAPI to improve your clinical care. To improve the quality of life for your residents, to make sure you include resident choices in all the decision makings that you're doing, and how to make a seamless care transition whenever you are having to transition a resident from one setting to another.

So all of those lists would have been made by now and you also should have done an inclusion statement for the "Fantastic 4" that we listed above. You should have also have written a list of your data sources that the places you plan on getting your data from, your evidence-based sources where you're gonna get your evidence from, and your best practice sources as the statement for using those items. A

And I also wanted to, before we move on, talk a little bit about a question regarding policy and procedure, and that in writing policies and procedures, you want to be very careful in writing such specifics. Thinking about that across the past couple of weeks, I really appreciate you guys asking these questions and putting this stuff in to us because it really helps improve what I'm doing. For many facilities, having a very specific QAPI Plan is gonna be a necessity in order for folks to know how to use it. In other instances, facilities may wish to be more general, more non-specific in writing the items that we talk about. All of these items have to be in your plan. All of these things that have to be addressed in your plan based on the requirements set forth by CMS.

Now, how they're going to view this, how they're gonna survey on this stuff, I can't tell you. As you all know, those who have been through Survey, it's an individualized process. And even though Survey is many times, and for the most part, objective, there's a lot of subjective that goes into it. So we're gonna be learning as we go across. And the good part about this is that your plan is to be written ... By when? When does it have to be written by? And I know I can't hear you, but I know you're screaming, "November 28th of 2017, this plan has to be written." But it doesn't have to be fully implemented until November 28th of 2019. So that gives us two years to work out the bugs.

If we wrote a list of data sources, for example, and you realize during your ... The two years after your plan is written, you realize some of those data sources you included in there that you're not gonna use, those can be removed. And the ones that you come across that you want to add to it, you can add those. That's what I meant by this being a fluid document. We can work out the bugs, make sure we know this backward and forward, we know how to use the QAPI Plan that we're writing, and if we write errors in there into the plan, which you will ... You're gonna write things in there that you're gonna go back and you're gonna look at and you're gonna go, "Oh, what was I thinking? That's not what I want to do or not how I want to address this or how the team, not just I, but the steering committee or the QAPI team of the board of directors or whoever ... That's not how I want to move forward on that." And that's okay. You can change it. And my screen went black and there it is again.

Anyway, I just wanted to address ... First off, I appreciate the questions. Especially the hard questions, even though they make me stumble and stammer and you make me think, and that hurts. It burns, but it's okay because eventually we are all learning this together. This is new for the long-term care community and we are gonna get through

this. And I really am proud of you guys for sticking through. And again, if you have any questions, please don't hesitate to ask them. That doesn't mean I'm gonna know the answer right away, but it does mean I will get back to you if I can.

Okay. Here we go. Session four. And the first portion of this is "From the Top" and I want to stress this ... And why didn't ... There it goes. I want to stress this. A success in QAPI hinges on engagement and support from top-level management. Now, who is top-level management? That differs in each one of your facilities. You could have a board of directors, you could have a corporation, it could be the administrator/owner of the facility. So who the top-level management is varies, but it does not matter. If you are a top-level management, then you have to be engaged and supportive of the QAPI process, which means you have to understand it.

With that being said, success in QAPI hinges on engagement and support from top-level management. Can't say that enough. You have to understand it and you have to use it. And then finally, same difference. This hinges ... The success for your facility on this hinges on engagement and support. Not just "thou shalt have a QAPI program and follow it", but actually being involved in the process. That's basically what session four is focusing on, how leaders and the top-level management, board of directors, steering committee ... How you can engage and support the folks that are boots on the ground.

Okay. Action steps for the first portion. And this session, session four, is a little bit longer than the rest. There is a little bit more writing that you're gonna have to do, a little bit more thinking about how you're going to incorporate some of these examples, the examples are a bit longer ... And I want to say something else about the examples that we put in here.

This is basically me coming up with examples and stealing this from other QIOs and stealing it from this area that has written an example for that, and it's just a conglomeration of different ideas and things that are exactly what I'm saying they are. They're examples. So if you're gonna go through and look at these examples and use them, that's fine, but you have to make them individualized. If you don't make these examples individualized, you're setting yourself up for failure because there's things in here that you might not even have in your facility or have at your disposal or be using. So anything that you're using as far as these example goes, please make sure you're going through and making them individualized.

So, "Integration of Top Level". First thing you've got to do is figure out who your top-level management is and/or your board of directors and describe how they are gonna have responsibilities associated with QAPI. How they are gonna be engaged and supportive and how they are gonna be accountable for the QAPI program in your facility, which involves sustainability and coordination. The team should brainstorm together examples of how this is going to happen and who should be involved with that brainstorming. If nobody else, the board of directors or the top-level management. Those folks need to be aware of what they're gonna be responsible for. And if they're the ones putting this information out, then they need to be letting everyone else, like the steering committee or whoever else, know what is expected of them in regards to their responsibilities and their accountability.

Here are some examples of things that you could come up with how top-level management is responsible and accountable for QAPI. Some examples could be QAPI work is discussed in the board meetings. And it needs to be addressed as that. "This is the QAPI section and this is what we're discussing as far as QAPI goes." Data review with leadership should be included with the top-level management. Some of the outcomes of QAPI PIPs could be shared at the board meetings. Input from leadership on PIP selections. Now, what's a "PIP"? A "PIP" is a project ... No, it's a "performance improvement project" and we're gonna be talking about those ... I think it's in section six. I'm thinking. I haven't written that one yet, but I'm not thinking it's in section five, it's in section six.

Some other ideas, resources. Resource review for all overall QAPI foundation. What are some other resources that the board of directors or the top-level management may be able to provide the facility? And resources review for individual QAPI PIPs. So if you're looking at the individual PIPs, then there's gonna be different resources for each one of them. And maybe that's something that you will want the board of directors to be aware of, is some of the individual resources. But those are just some ideas of what you can put on how top-level management is gonna be responsible and accountable to the facility's QAPI process.

And then, once you just brainstorm all that and you determine what level you want to be on, you're gonna write a statement with all of those things included. And here is one of those examples. "The board of directors" ... And I've abbreviated it so you could read it on the slide. "The board of directors for blank nursing home will be engaged and supportive of the QAPI foundation as evidenced by providing appropriate and adequate resourcing through needs assessments, providing input to the Steering Committee regarding QAPI and prioritizing projects." And then you can add more or take away some, whichever you want to do. "The board of directors will be accountable for assuring QAPI will be a sustainable foundation for decision making and problem solving for the facility through coordination and supporting the facility Steering Committee through reviewing and providing feedback on outcomes of the various PIPS, providing benchmarks for data reported, etc., etc."

And I want to point out here the fact that, if your facility ... For example, if it's not going to be the board of directors that's providing the benchmarks for data, that's going to be the Steering Committee, then you wouldn't put that in there. And I just want to point out how you can make these more individualized.

And then "Integration of Top Level, continued". "Describe in a statement how QAPI activities will be reported to this top level management or board of directors." And you always want to include who is responsible for this. If you don't put who is responsible for these duties, it's not gonna get done. And one of the main words here, and I'm gonna flip back real quick, one of the main words is ... The second little dash down "accountability". If this statement states that the facility administrator is responsible for making sure all of these items are being delivered to the board of director, then that's the person who is accountable and there's no question about it.

So, there's another example; how the activities will be reported to top-level management. "The facility administrator has responsibility and is accountable to the board of directors for ensuring that QAPI is implemented throughout blank nursing home." And then you can read on down through there. I do want to point out, on down through there it says, "The administrator will attend all board of director meetings, report on and solicit input on all QAPI ..."

Now, I am not a lawyer and I don't even play one on television, but I can tell you that when you're writing these things, you have to be careful with words like "will attend all board of director meetings" because as wonderful as administrators are, they do take vacation days, they do get sick, there are things that happen that they could not attend. So including safe words in there like "or designee", and instead of saying "all QAPI activities", you could put "solicit input on QAPI activities" or ... Just be careful with the verbiage and consult those who are really good at this lawyer speak because, again, any ... One of the things that I was taught when writing policies and procedures, words like "any" or "all" and "never" and words like that that are so finite are kind of dangerous ground. Now, sometimes you have to use those words, but think about that when you're writing these statements.

"Sustainability - Part One". Now, we're gonna have several parts to sustainability. To me, sustainability is one of the hardest things we do. We're really good at getting things started. We're really good at getting going and solving problems, but sometimes we fall short in sustaining whatever it is we've fixed. And I think the reason behind that is because everything in long-term care is a priority. Doesn't matter what it is. If pain control is a priority, whether the broccoli is too tough is a priority, making sure that there's not peeling paint is a priority ... Everything is a priority and sometimes sustainability gets put in the back seat. So we have to take a look at the sustainability of all of these items and kind of direct how we're gonna make sure that our QAPI foundation is sustained.

And in this one, in part one, in a statement, you want to name one or more team members who are accountable ... Or who is accountable for QAPI. Who is accountable for QAPI leadership and QAPI coordination? And then below that, in a statement, name the Steering Committee who provide QAPI structure and core support. Now, I put those in two separate bullet points because in some facilities, this may be two separate individuals or two separate teams. If it's a facility with a board of directors, then the folks that are in the first bullet point, those who are accountable for QAPI leadership and coordination, may be that board of directors. And then the Steering Committee is your facility administrator and your director of nursing and your medical director and all those other people that are required to be on the Steering Committee or the QAA Committee, whatever you call it.

But then again, in other facilities, that might be the same team. The ones who are accountable for leadership and coordination may be the very same folks that are on the Steering Committee. So you want to, again, individualize the sustainability portion to your facility and include in there the folks who are gonna be responsible for this.

And at the bottom, I put "don't list names, only list positions". So if it's your administrator and your director of nursing and your medical director, and then the other person ... You want a CNA on there or you want a ... Whoever you want on this Steering Committee, you want to put their positions as opposed to ... Pam Meador is gonna be on here and Sheila Barnet's gonna be here ... It's positions, not names.

Continuing the "Sustainability - Part One" is a couple of examples. And I did two examples on this one. I did one that was a little less specific and then the next you see will be one that's a little bit more specific. I did listen to the ideas, but I only did it on this one because this one is long. But you kind of get an idea of how you need to do this. You can either make it, again, more specific or less specific.

The example for this one ... "The leadership and coordination for the QAPI foundation for Pam Meador nursing home will be known as the Steering Committee and will be comprised of the following: ..." Excuse me. And it lists the facility positions that's gonna be on the Steering Committee. For a more specific example, holy moly ... And I'm telling you, I know my weaknesses. I know I am extremely detail-oriented and I'm going to therapy for that, but folks I'm not getting any headway. So anybody knows Doctor [inaudible 00:22:53], you can hook me up, please do. But otherwise, here we go.

Here's a more specific example of who is responsible for leadership and who is responsible for coordination of [inaudible 00:23:14]

Krista: Just one moment please. We do realize that we have lost audio, so just hold one moment while we figure out what the problem is. [inaudible 00:23:50]

Pam is gonna be calling back in in just a moment. If you could just please hold on for one moment, we will get her back on the phone. We do apologize for the technical difficulties. One moment please. [inaudible 00:24:23]

Pam?

Pam Meador: Yes.

Krista: Hi, we hear you now.

Pam Meador: Okay. Okay. I apologize, I lost audio for a minute. Can everybody hear me now?

Krista: I can hear you. I think we're good now, so ...

Pam Meador: Okay. What was the last thing you heard me say? 'Cause I was prattling on.

Krista: I think you had just started on the slide that you're on right now.

Pam Meador: Okay. All right. Let's do that again. This is the one where I was telling you that if ... This one is the more specific example of sustainability. And again, I said I know what my problems are, I'm in therapy for trying to be so detail-oriented, but so far it's not

successful. Any of my therapy. So this is just an example of a more specific sustainability based on the leadership and the coordination and the structure and the support from the Steering Committee. And I apologize for the technical. We've been having phone problems down here in southern West Virginia and I knew it was gonna be a trouble. I knew it was gonna be trouble.

Okay. Here we go. Now, sustainability still continued, you're gonna write a statement describing how the Steering Committee will work together, communicate, and coordinate QAPI activities. You're gonna want to write in this statement how often your Steering Committee is gonna meet, how you guys are gonna communicate in between meetings. And I've listed a couple of ideas on here such as email, listserv, if you're gonna use a communication book, if you're gonna use some kind of a QAPI blog that maybe your CNAs and your nurses and your housekeepers and your dietary managers or whoever ... Or dietary folks ... Everybody [inaudible 00:27:25] access to. And then you're going to designate a method of [inaudible 00:27:34] plans, discussions, and activities. All in this statement. So basically, how is your Steering Committee going to [inaudible 00:27:45] together in order to make this happen, your QAPI plan happen.

Okay. There it is. And here are some examples for this. Now this one is, again, something that you're going to have to make sure that it is exactly what you're gonna be doing. In this example, it says, "The Steering Committee will meet monthly and as needed." It could be ... And I'm not sure, I can't remember and I don't think there is a specific ... I think it may be quarterly. How often does ... Can anybody chime in on chat and make sure that I'm correct on that? I'm pretty sure it's quarterly that the Steering Committee has to meet as afar as regulations go. But is quarterly enough? Is that gonna be enough for the Steering Committee to be an effective QAPI foundation?

So in your example ... I put "the Steering Committee will meet monthly and as needed. QAPI activities and outcomes will be on the agenda of every staff meeting and shared with residents and family members through their respective councils and monthly newsletters. The minutes from all meetings will be posted throughout the organization. The Steering Committee will communicate through an intra-departmental listserv between scheduled meetings, maintained by the facility administrator or designee." So if you're gonna use that example, but you don't have a monthly newsletter, be careful. You don't want to put that in there if you're not gonna do it.

And then the next couple of examples talks about how the Steering Committee will have responsibilities ... What their responsibilities are to the stakeholders, to the residents, to the families, to the staff. And it talks about how decision making and problem solving will be through the QAPI process. So just a couple of examples on that.

"Sustainability - Part Two". What we want to do here is we want to plan for how you will be providing education on QAPI. Now, remember, this is the plan on how you're gonna do it. Once the plan is written, here's what we're gonna do. We're going to make sure the leadership is developed in QAPI. Leadership doesn't come out the box knowing how to do this, so they need to be trained, which is probably a lot of folks on this call. And this is what you're doing. You're already starting your leadership development in QAPI.

There's gonna be facility-wide education on what QAPI is and we're gonna do this through using outside QAPI training from your ... Like your friendly neighborhood QIO or from CMS, or if your state offers ... Like your healthcare associations. Sometimes, they offer trainings. So we're gonna provide education on QAPI through these different routes.

We're also gonna provide internal QAPI information training through ... We're gonna do mailings to our residents, to our staff, to our visitors, to our families, we're gonna put up posters, we're gonna have in-services, we're gonna have discussions about QAPI at care conferences, so that when we say "Q-A-P-I" or "kwah-pee" or whatever to a family member or whatever, they know what we're talking about. And we're also gonna have discussions during team huddles, etc., etc., etc. How are you gonna get QAPI into the daily speak at your facility?

You want to be sure when you're planning for educating on QAPI that you're including all your stakeholders. Everybody that you work with, your residents, your families, your staff, your consultants, your vendors, your activities volunteers ... All of those folks should be brought into this QAPI foundation. They should understand it. And then you want to draft a statement regarding how your facility will educate on QAPI. Again, can't stress enough, be sure if you put it in there that you're gonna do it.

For example, "QAPI principles will be introduced to staff, volunteers, board members, residents, duh, duh-duh, duh-duh ... By the Steering Committee." This education will occur through meetings, mailings, the QAPI information board ... Which lots of you may not have, but you might want to after this is over. And during council sessions, resident council, family council, whatever. And just put that into your statement of sustainability.

Part three. You're gonna want to write a statement to describe QAPI as a priority. You have to get input from your board of directors or your top-level management because, again, this is a commitment. And if they're not engaged and supportive of this, then it's not gonna be a success. You have to write this statement as a commitment, you have to deliver it to your stakeholders as a commitment because it has to be a commitment. This is not something that's just gonna be going away.

Some ideas to include in this priority statement is that caregivers are to be given adequate time, equipment, technical training, that QAPI is gonna be the decision-making approach and the problem-solving approach in your facility, period. And here is another example of the priority statements for QAPI sustainability. And I'm not gonna read those. Once you get copy of the slides, you can kind of read through there and adjust anything that you need. And besides, all the other sessions, we've been done by now and this one's still going strong. And I knew this one was gonna be long and laborious, but it is what it is.

Okay. "Sustainability - Part Four". You need to have brainstorm session for resources. Now, what do you consider a resource? And I just listed a few ideas that came to my head and some things that I've read about that are gonna be resources within your QAPI foundation. Of course, time, money, staffing, equipment are the ones that I have listed

there. And remember, this statement is in general. Every time you have a PIP or a charter team or anything like that, it's gonna vary on what you need.

Some of the bigger system problems that you have, it's gonna take a little bit more time, a little bit more money, and a little bit more staff to solve than if you have an individual problem that you need to bring folks together and solve quickly. So it's gonna vary, so this is in general. This statement is a general statement. And again, this is a fluid, working document meaning that, when you find that you have underbid on something in general and you can adjust it or if you found out you've went way overboard on something, you can adjust it ... It's a fluid document, meaning it's changeable, it's fixable, it's made to move with the growth of your facility.

And now you're gonna write a statement indicating how you will determine if the resources are adequate. How are you gonna determine if you're spending enough time with your QAPI process? If there's enough money to fund it? If you have enough staff to cover when you have to take someone for a charter team and you have enough staff to cover for that person for the fifteen, twenty minutes, however long they are going to be involved in that? You have to determine how you're going to do that and making sure that your resources are adequate. And you want to be realistic with your measurement methods and you can use ideas such as the staff interviews, resident interviews, family interviews, your five-star rating. How are we doing with it? Where are you standing? Your budget reviews, I'm sure that's one that everybody will be using as a measure because if you're making it rain with dollar bills that's not seeing a return, then there's gonna be ... Somebody's gonna want to talk about that. I'm not sure who, but somebody's going to.

And here's an example of sustainability as far as resources go. As you can see, I've included administrator and the financial officer in this because business office doesn't get out to this too easy either. So we're gonna include them in there as well. And you can read that, I'm not gonna read the example. Again, you can take the time to do that and kind of adjust it to where you need it to be.

"Sustainability - Part Five". "Prepare to address in a statement how to obtain and maintain caregiver proficiency in QAPI." Now, before, we wrote how we're gonna educate everybody on what QAPI is, get them to understand the process, but now we're gonna talk about how we're gonna make sure everybody is proficient in using QAPI. And again, we've got two years to make sure folks are proficient, but in those two years we're gonna have changeover in staff. I know that shocks you, I know that's not something that normally happens in long-term care, but there is a potential for change in staff in two years. And I'm speaking of course tongue-in-cheek, of ... Turnover is a huge opportunity for improvement in our industry and we want to make sure that we address that with proficiency in QAPI.

The first step in this is becoming proficient. You want to make sure once the plan is written that there is a lesson plan derived from it. There's something ... And those of you that are educators in this crowd, my heart is right there with you. I love teaching and lesson plans is a must. So you take this plan when it's written and we're gonna write a lesson plan from it. And we're gonna train all staff on this lesson plan. And then we're

gonna place this training in our orientation programs. Many times, that orientation is left out with new programs. So there's a new something comes along, we train everybody in the building, sometimes we forget to put into orientation for our new staff. So we've got to be sure to include QAPI as a big piece of the orientation program.

And then the second step is to maintain proficiency. First step was to become proficient, second step is to maintain proficiency. And this includes revamping our lesson plans when we revamp the QAPI plan itself. Those have to be in joint with each other. They have to be matching. We also want to make sure there is retraining, how often you're gonna do the retraining on QAPI, who is required to attend this training in QAPI, and how are we gonna make sure that everybody gets it? How are we gonna evaluate the effectiveness? Is everybody getting better at it? And how are we gonna know that?

And one of the ideas that I had when I was thinking about this is are problems getting solved? An example I use is when we have a problem, a lot of times we have a committee ... Meets. Gets together and we form a team to work on this problem. Well, that problem, that team, continues to meet and meet and meet and meet and we get nowhere. And that's one of the things that QAPI is supposed to do. It's to teach you and your team how to have these focused problem-solving meetings quickly and solve problems with rapid success and we test the solutions and make sure it's sustainable. And it teaches you how to do that. That's not a part of what we're doing when we're writing the plan. That's gonna be the next step, when you learn how to use this plan.

And I know Pennsylvania, our sister state, is doing a lot of good stuff with training folks on how to use this plan and that's something that we're gonna roll out to the rest of you guys later on down the road. They're kind of being the guinea pigs and they're ding a fantastic job, so that's something that the QIO is gonna help you with once we get the plans written and that part over with.

When you write this statement about maintaining proficiency, you want to be sure to write in there how the team will consistently use the process improvement tools that you're gonna determine that your facility's gonna use and how the changed techniques are gonna be implemented. And again, that's something we're gonna address in a later session because different companies and different facilities use different tools. There's all kinds of different performance improvement systems and tools and things you can choose from and there's not one that's any better than the other one. And most of them, those of you who are nurses, it focuses a lot around the nursing process is basically what we're looking at. And we'll be talking about that later on in another session.

And here is one of my wordy, big ol' examples on making sure that the staff becomes and remains proficient in the QAPI process.

Finally, down to the action item list. First thing, our action item is we're gonna write a statement describing top-level management's responsibilities and accountability, including roll details. We're gonna write a statement describing who will report to top-level management and how. Write a statement about who top-level management is and who is one the Steering Committee, and again, remember that could be one in the same

or it could be two separate groups of people. We're gonna write a statement about the Steering Committee details. We're gonna write an education plan statement. We're gonna write a QAPI priority statement, a resource list statement addressing adequacy and all those other things that were listed on that slide. And then we're gonna write a caregiver proficiency statement.

So those are our action items for session four. And I am glad that this one is over. It was a doozy to write and I'm telling you, you guys definitely deserve the duck tape award because you are able to fix just about anything in the long-term care industry.

A couple of things before we get to questions. This session is going to have a three week interval to finish the action items, which means our next one is ... And I had it open and while I was talking, I shut it, of course. It is July the 12th. So that gives you three weeks to get all of these various requirements on the action items written and ready to go. So it's a little bit extra time and the next session is going to be on data. And data. And more data. And monitoring that data. And those of you who are numbers people, you'll just love this one. Those of you that are like me and are not ... What is it? There's two kind of people in this world ... No, there's three kind of people in this world, ones who like math and ones who don't or ones who are good at math and ones who aren't. So that's basically where I stand and we're going to meet them on the 12th at two o'clock and work on session five.

And here are your project coordinators for your state. If you ... Again, QAPI self-assessments, send it to any one of these folks. And we will now switch it back over to Krista and we'll have about fifteen minutes for question and answer.

Krista: Thank you Pam. And once again, if you do have a question for Pam, please type it into either the chat or the Q and A box on the right side of your screen and I will read your question to her and have her answer them. Our first question, Pam, is, "How realistic is it to include QAPI in orientation when days are very limited? It takes a lot of time and expertise to implement this."

Pam Meador: I completely understand that and you're right, it does take a lot of time and expertise, but this is gonna become ... I don't call it a foundation just because they say it's not a program. I call it a foundation because every thing that your team is going to be doing, all your problem solving, even your improvements that you're gonna be making, even on areas that aren't problems, you're going to be using the QAPI process. You're going to be using this format. And if you don't start teaching folks on the onset about what QAPI is and that you are committed to this and you're committed to it as evidence to buy, including it in orientation, and taking the time and ... And that's another thing, where leadership has to have a commitment to this.

I've always said orientation is very time-constraint. There's a huge time constraint when it comes to orientation as it is. And that's an area that maybe leadership needs to focus on as a resource. Put orientation as a resource. That's a good point and I'm glad you mentioned that because that's another resource, orientation. If we train our folks on QAPI right off the box and they come in knowing that QAPI is as important to us as making sure the med path is accurate and that you are able to wash your hands

appropriately and that you are able to follow the policies and the procedures and the regulations set forth by this company, but QAPI is right up there, that's a priority commitment. So it's something that, if you're gonna make it a commitment, it has to be in orientation or you're setting it up for very poor success.

Krista: Thank you. And our next question is, "Under the 'Sustainability - Part Two' section with ... The example mentioned QAPI principles. Is this the guiding principles we created already?"

Pam Meador: Okay. So let me flip back to "Sustainability - Part Two". Part deu. "QAPI principles will be introduced to staff, volunteers ..." Yeah, you will absolutely be able to include your QAPI principles and your vision statement. Very good observation. Yes. Those QAPI principles that you wrote back, I think it was session two, will be part of how you are introducing this to everybody. Good catch.

Krista: I'm just waiting to see if there's any other questions. That was all that was in the queue. Once again, if you have any questions, now's the time to type the into the chat or the Q and A box on the right side of the screen.

Pam Meador: I think everybody's wanting to get off early. It's a beautiful day and I don't blame them.

Krista: It appears that we do not have any other further questions at this time.

Pam Meador: Okay. Well, I appreciate everybody and we will have a happy, happy 4th of July. And I will miss you for that extra week, but there we go. We'll see you on the 12th.

Krista: Thank you very much for your attendance and this session is now concluded.

Pam Meador: Thank you.