DEPARTMENT OF HEALTH SERVICES
Division of Quality Assurance
F-62318 (01/2024)

STATE OF WISCONSIN
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CFR § 418.58
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HOSPICE QUALITY ASSESSMENT AND PERFORMANCE IMPROVEMENT (QAPI) REVIEW

Facility Name	Provider Number	License Number
Review Date	Surveyor Number	

How often do you have QAPI meetings? *(Provide Minutes)*

Program Standards *(L559)*

- ☐ Develop, implement, and maintain an effective, ongoing, hospice-wide data-driven program.
- ☐ Governing body ensures program reflects complexity of the organization and services, including contracted services.
- ☐ Maintain documentary evidence of program.
- ☐ QAPI/patient safety program is evaluated annually.

Program Scope

- ☐ Show measurable improvement related to improved palliative outcomes and hospice services. *(L561)*
- ☐ Measure, analyze, and track quality indicators, including adverse patient events, and other aspects of performance that enable the hospice to assess processes of care, hospice services, and operations. *(L562) (How do you decide on quality indicators?)*

Program Data *(L563)*

- ☐ Use quality indicator data, including patient care, and other relevant data, in the design of its program. **– (All patient services/all activities that impact patient/family care should be evaluated.)**

Program Activities

The Hospice must use the data collected to do the following:

- ☐ Monitor the effectiveness and safety of services and quality of care.
- ☐ Identify opportunities and priorities for improvement. *(L564)*
- ☐ The frequency and detail of the data collection must be approved by the hospice's governing body. *(L565)*
- ☐ Focus on high risk, high volume, or problem-prone areas. *(L566)*
- ☐ Consider incidence, prevalence, and severity of problems in those areas. *(L567)*
- ☐ Affects palliative outcomes, patient safety, and quality care. *(L568)*
- ☐ Track, analyze, and implement preventive actions for adverse events. *(L569)*
- ☐ Ensure improvements are sustained. *(L570)*

Performance Improvement Projects *(L571)*

QAPI programs must reflect:

- ☐ Scope, complexity, and past performance of the hospice's services and operations. *(L572)*
- ☐ Hospice needs and internal organizational needs in number of projects conducted annually
- ☐ Actual and potential projects prioritized, developed, implemented, and evaluated
- ☐ The hospice must document what performance improvement projects are being conducted, the reasons for conducting these projects, and the measurable progress achieved on these projects. *(L573)*

Topic	Date Started

Outcome – Is the program demonstrating measurable improvement? (Provide documentation of improvement)

Agency Action to Improve Care

Executive Responsibilities

Governing body is responsible for ensuring the following: *(L574)*

- ☐ That an ongoing program for quality improvement and patient safety is defined, implemented, maintained, and evaluated annually. *(Provide evidence of evaluation/how evaluated)*
- ☐ That the hospice wide QAPI efforts address priorities for improved quality of care and patient safety, and that all improvement actions are evaluated for effectiveness. *(L575)*
- ☐ That the one or more individuals who are responsible for operating the QAPI program are designated (approved by governing body). *(L576)*

   Name of Designated Responsible Person: _____