



EMPOWERING STAFF THROUGH QAPI

CINDY FRONNING RN, GERO-BC, IP-BC, AS-BC, RAC-CT, CDONA, FACDONA, EFLA, CALN, QAPI-BC
EXECUTIVE DIRECTOR NADONA

© 2024 National Association of Directors of Nursing Administration in Long Term Care, Inc. (NADONA LTC). All rights reserved.



1

OBJECTIVES

1. Identify three areas where QAPI/QAA could play a role.
2. Describe 3 factors that make a QAPI program successful
3. List 3 areas that are included in a culture that focuses on patient safety and a blameless environment for staff and choices?

2



HISTORY OF QAPI

- QA: “**Quality Assessment**” is an evaluation of a process and/or outcomes of a process to determine if a defined standard of quality is being achieved.”
- QA: “**Quality Assurance**” is the organizational structure, processes, and procedures designed to ensure that care practices are consistently applied and the facility meets or exceeds an expected standard of quality. Quality assurance includes the implementation of principles of continuous quality improvement.”

3



HISTORY OF QAPI CONT.

- QA&A: “**Quality Assessment and Assurance**” is a management process that is ongoing, multi-level, and facility-wide. It encompasses all managerial, administrative, clinical and environmental services, as well as the performance of outside (contracted or arranged) providers and suppliers of care and services.” This process is continuous and had the following objectives prior to the Final Rule (Medicare and Medicaid Programs; Reform of Requirements for Long-Term Care Facilities):
 - To keep systems functioning “satisfactorily and consistently including maintaining current practice standards”
 - To prevent deviation from appropriate care processes
 - To determine and identify any issues and concerns with systems in the facility and
 - To correct inappropriate care processes”

4



HISTORY OF QAPI CONT.

- QAPI – Quality Assurance Performance Improvement

“QAPI is the coordinated application of two mutually-reinforcing aspects of a quality management system: Quality Assurance (QA) and Performance Improvement (PI). QAPI takes a systematic, comprehensive, and data-driven approach to maintaining and improving safety and quality in nursing homes while involving all nursing home caregivers in practical and creative problem solving.

5

HISTORY OF QAPI CONT.

- Quality Assurance (QA) and Performance Improvement (PI).

- QA is the specification of standards for quality of service and outcomes, and a process throughout the organization for assuring that care is maintained at acceptable levels in relation to those standards. QA is on-going, both anticipatory and retrospective in its efforts to identify how the organization is performing, including where and why facility performance is at risk or has failed to meet standards.
- PI (also called Quality Improvement - QI) is the continuous study and improvement of processes with the intent to **better services** or **outcomes**, and **prevent or decrease** the likelihood of **problems**, by identifying areas of opportunity and testing new approaches to fix underlying causes of persistent/systemic problems or barriers to improvement. PI in nursing homes aims to improve processes involved in health care delivery and resident quality of life. PI can make good quality even better.

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/qapidefinition>

© 2024 NADONA LTC

6

6

QA&A VS QAPI

- **Quality Assessment & Assurance (QA&A) is the committee (people) who oversee the quality assessment and performance improvement process (QAPI). They assess the findings and assure that quality is provided.**
- **QA&A = the management of QAPI plan / process/program – make sure the program is initiated and working**
- **QAPI = is a process which outlines the steps that need to be taken to ensure that the quality of care is provided.**

© 2024 NADONA LTC

7

7

WHAT IS QAPI?

- Merger of two complementary approaches to quality management
 - Quality Assurance (QA)
 - Performance Improvement (PI).
- **QAPI**, a comprehensive approach to ensuring high quality care
 - Both involve seeking and using information, but they differ in keyways:

<ul style="list-style-type: none"> ■ QA <ul style="list-style-type: none"> ■ QA is a process of meeting quality standards and assuring that care reaches an acceptable level. ■ Nursing homes typically set QA thresholds to comply with regulations. ■ They may also create standards that go beyond regulations. ■ QA is a reactive, retrospective effort to examine why a facility failed to meet certain standards. ■ QA activities do improve quality, but efforts frequently end once the standard is met. 	<ul style="list-style-type: none"> ■ PI <ul style="list-style-type: none"> ■ is a proactive and continuous study of processes ■ with the intent to prevent or decrease the likelihood of problems ■ by identifying areas of opportunity and testing new approaches to fix underlying causes of persistent/systemic problems. ■ PI in nursing homes aims to improve processes involved in health care delivery and resident quality of life. ■ PI can make good quality even better.
--	---

© 2024 NADONA LTC

8

8

HOW INVOLVED IS THE QAPI IN THE FACILITY?

- QAPI should become a part of the culture of the facility.
 - It is more than a monthly-quarterly meeting
 - It is more than a few audits and PIPs (Performance Improvement Projects)
 - QAPI is **mentioned 127 times in the SOM (State Operations Manual) Appendix PP and QAA is mentioned 100 times under various non-QAPI/QAA FTags.**

© 2024 NADONA LTC

9

9

HOW INVOLVED IS THE QAPI IN THE FACILITY? CONT.

- Other Tags (Areas that QAPI plays a role in)
 - **F 600- F607 Freedom from Abuse, Neglect, and Exploitation**
 - **F686 – Skin**
 - **F688 ROM**
 - **F689 Accidents**
 - **F692 Nutrition/Hydration**
 - **F698 Dialysis**
 - **F757 Unnecessary Drugs**
 - **F758 Psychotropic Drugs**
 - **F801 Qualified Dietary Staff**
 - **F837 Governing Body**
 - **F838 Facility Assessment**
 - **F841 Responsibilities of Medical Director**
 - **F865 –F868-QAA Activities**
 - **F880 Infection Control-F882 Infection Preventionist**

© 2024 NADONA LTC

10

10

QAPI IN REVIEW

- Quality Assurance and Performance Improvement (QAPI) is a type of quality management program which takes a **systematic, interdisciplinary, comprehensive and data-driven approach to maintaining and improving safety and quality.**
- An interdisciplinary approach **encompasses all managerial, and clinical, services,** which includes care and services provided by outside (contracted or arranged) providers and suppliers.
- Each facility must **develop, implement and maintain an effective,** comprehensive, data driven **QAPI program** that focuses on indicators of the outcomes of care and quality of life.
- The facility must **maintain and be able to provide documentation and evidence** of its ongoing QAPI program, which meets the requirements of §483.75
- The QAPI regulation **requires a written plan.** A QAPI plan is the written plan containing the process that will guide the nursing home's efforts in assuring care and services are maintained at acceptable levels of performance and continually improved. The plan describes how the facility will conduct its required QAPI and Quality Assessment and Assurance (QAA) committee functions.

© 2024 NADONA LTC

11

11



OUTCOME OF QAPI

- QAPI amounts to much more than a provision in Federal statute or regulation; it represents an ongoing, organized method of doing business to achieve optimum results, involving all levels of an organization.

12

KEY DIFFERENCES BETWEEN QA AND PI EFFORTS.

	QUALITY ASSURANCE	PERFORMANCE IMPROVEMENT
Motivation	Measuring compliance with standards	Continuously improving processes to meet standards
Means	Inspection	Prevention
Attitude	Required, reactive	Chosen, proactive
Focus	Outliers: "bad apples" Individuals	Processes or Systems
Scope	Medical provider	Resident care
Responsibility	Few	All

QA + PI = QAPI

U.S. Department of Health and Human Services, Health Resources and Services Administration. Quality Improvement adapted from <http://www.hrsa.gov/healthit/toolbox/HealthITAdoptiontoolbox/QualityImprovement/whatarediffhwqapi.html>

© 2024 NADONA LTC

13

13

WHY QAPI IS IMPORTANT



- Rewards of QAPI:
 - Competencies that equip you to solve quality problems and prevent their recurrence;
 - Competencies that allow you to seize opportunities to achieve new goals;
 - Fulfillment for caregivers, as they become active partners in performance improvement; and
 - Above all, better care and better quality of life for your residents.

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/Downloads/QAPIAtaGlance.pdf>
© 2024 NADONA LTC

14

14

BENEFITS OF QAPI TO A FACILITY

- A culture of continuous assessment and improvement
- Fewer mistakes
- Improved patient care and outcomes
- Enhanced quality and efficiency of care
- Improved staff satisfaction
- Reduced costs
- Stronger star ratings
- Better reimbursements and referrals

© 2024 NADONA LTC

15

15

GOALS OF QAPI

- Quality of Care
- Quality of Life
- Resident Choice

© 2024 NADONA LTC

16

16

WHAT ARE YOU CURRENTLY DOING IN QAPI?

- Are you creating systems to provide care and achieve compliance with nursing home regulations?
- Are you tracking, investigating, and trying to prevent recurrence of adverse events?
- Are you comparing the quality of your home to that of other homes in your state or company?
- Are you receiving and investigating complaints?
- Are you seeking feedback from residents and front-line caregivers?
- Are you setting targets for quality?
- Are you striving to achieve improvement in specific goals related to pressure ulcers, falls, restraints, or permanent caregiver assignment; or other areas; (for example by joining the Advancing Excellence Campaign)?
- Are you committed to balancing a safe environment with resident choice?
- Are you striving for deficiency-free surveys?
- Are you assessing residents' strengths and needs to design, implement, and modify person-centered, measurable and interdisciplinary care plans?

You are already partly there. All of this is part of QAPI.

© 2024 NADONA LTC

17

17

CMS DEFINITIONS

- **“Adverse Event”** is defined in §483.5 as an untoward, undesirable, and usually unanticipated event that causes death or serious injury, or the risk thereof.
- **“Corrective Action”**: A written and implemented plan of action for correcting or improving performance in response to an identified quality deficiency. Use of the term corrective action in this guidance is not synonymous with a Plan of Correction (formal response to cited deficiencies). This is also separate from the written QAPI plan.
- **High risk**”: Refers to care or service areas associated with significant risk to the health or safety of residents, e.g., tracheostomy care; pressure injury prevention; administration of high risk medications such as warfarin, insulin, and opioids.
- **“High Volume”**: Refers to care or service areas performed frequently or affecting a large population, thus increasing the scope of the problem, e.g., transcription of orders; medication administration; laboratory testing.
- **“Incidence”**: is a measure of the number of new cases of a characteristic that develop in a population in a specified time period. National Institute of Mental Health (NIMH) (<https://www.nimh.nih.gov/health/statistics/what-is-prevalence.shtml>, accessed 12/21/2020).

https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_tcf.pdf

18

18

CMS DEFINITIONS CONT.

- **“Indicator”**: measurement of performance related to a particular care area or service delivered. Used to evaluate the success of a particular activity in achieving goals or thresholds.
- **“Medical Error”**: is a deviation from the process of care, which may or may not cause harm to the resident.
- **“Near Miss”**: is a serious error or mishap that has the potential to cause an adverse event but fails to do so because of chance or because it is intercepted. It is also called a potential adverse event.
- **“Prevalence”**: is the proportion of a population who have a specific characteristic in a given time period. NIMH (<https://www.nimh.nih.gov/health/statistics/what-isprevalence.shtml>, accessed 12/21/2020).
- **“Problem-prone”**: Refers to care or service areas that have historically had repeated problems, e.g., call bell response times; staff turnover; lost laundry.
- **“Systematic”**: describes a step by step process that is structured, so that it can be replicated.
- **“Systemic”**: embedded within, and affecting a system or process.

© 2024 NADONA LTC

19

19

QAPI FEATURES

- Using data to not only identify your quality problems, but to also identify other opportunities for improvement, and then setting priorities for action
- Building on residents’ own goals for health, quality of life, and daily activities
- Bringing meaningful resident and family voices into setting goals and evaluating progress
- Incorporating caregivers broadly in a shared QAPI mission
- Developing Performance Improvement Project (**PIP**) teams with specific “charters”
- Performing a **Root Cause Analysis** to get to the heart of the reason for a problem
- Undertaking systemic change to eliminate problems at the source
- Developing a feedback and monitoring system to sustain continuous improvement

© 2024 NADONA LTC

20

20

•**Example mission statement:** We empower individuals to save money while saving the planet by intersecting creative, sustainable packaging with wearable technology that educates, inspires, and drives Earth-friendly action.

•**Example vision statement:** To change the way we think about saving the planet.

•**Example values:** Tomorrow-minded, knowledge is power, assume best intentions, sustainability.

Vision Statements

Mission Statements

Principles / Core Values

© 2023 NADONA LTC 21

21

VISION VS. MISSION	
Vision	Mission
BBC: "To be the most creative organization in the world"	BBC : "To act in the public interest, serving all audiences through the provision of impartial, high-quality and distinctive output and services which inform, educate and entertain."
Disney: "To make people happy."	Disney: " To entertain, inform and inspire people around the globe through the power of unparalleled storytelling, reflecting the iconic brands, creative minds and innovative technologies that make ours the world's premier entertainment company."
Google: "To provide access to the world's information in one click"	Google: "To organize the world's information and make it universally accessible and useful."
IKEA: "To create a better everyday life for the many people"	IKEA: "To offer a wide range of well-designed, functional home furnishing products at prices so low that as many people as possible will be able to afford them."
LinkedIn: "Create economic opportunity for every member of the global workforce"	LinkedIn: " To connect the world's professionals to make them more productive and successful."
Walmart: " Be THE destination for customers to save money, no matter how they want to shop. "	Walmart: to save people money so they can live better".

© 2023 NADONA LTC 22

22

PURPOSE STATEMENT EXAMPLES

- Example #1: The purpose of QAPI in our organization is to take a proactive approach to continually improving the way we care for and engage with our residents, caregivers and other partners so that we may realize our vision to **[reference aspects of vision statement here]**. To do this, all employees will participate in ongoing QAPI efforts which support our mission by **[reference aspects of mission statement here]**.
- Example #2: Our organization’s written QAPI plan provides guidance for our overall quality improvement program. Quality assurance performance improvement principles will drive the decision making within our organization. Decisions will be made to promote excellence in **quality of care, quality of life, resident choice**, person directed care, and resident transitions. Focus areas will include all systems that affect resident and resident representative satisfaction, quality of care and services provided, and all areas that affect the quality of life for persons living and working in our organization.

The administrator will assure that the QAPI plan is reviewed minimally on an annual basis by the QAA committee. Revisions will be made to the plan ongoing, as the need arises, to reflect current practices within our organization. These revisions will be made by the QAA committee.

Revisions to the QAPI plan will be communicated as they occur to board members, residents, resident representatives and staff through meetings and newsletters.

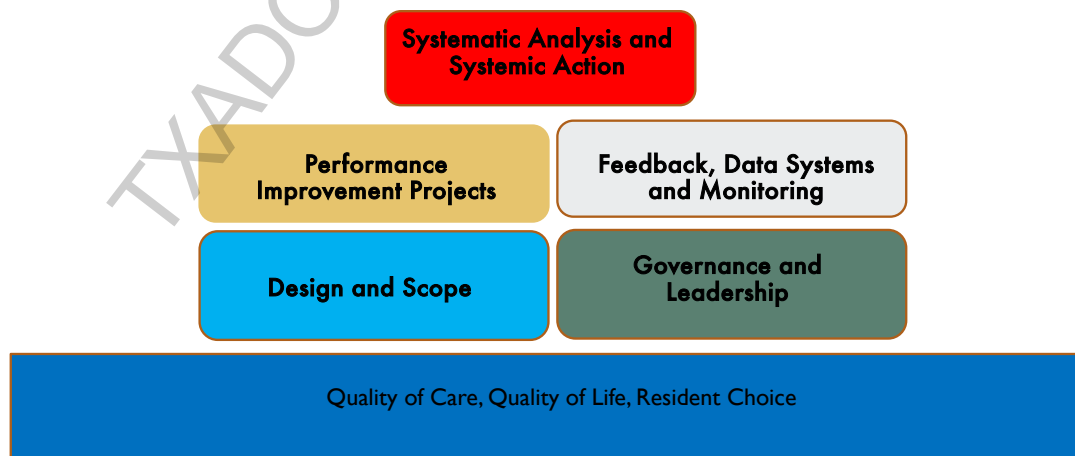
https://www.superiorhealthqa.org/wp-content/uploads/QAPI-Plan-How-To-Guide_010423_reviewed.pdf

© 2023 NADONA LTC

25

25

FIVE ELEMENTS FOR FRAMING QAPI



© 2024 NADONA LTC

26

26

5 ELEMENTS OF QAPI

■ Element 1: Design and Scope

- A QAPI program must be ongoing and comprehensive, dealing with the full range of services offered by the facility, including the full range of departments.
- When fully implemented, the QAPI program should address all systems of care and management practices, and should always include clinical care, quality of life, and resident choice.
- It aims for safety and high quality with all clinical interventions while emphasizing autonomy and choice in daily life for residents (or resident's agents).
- It utilizes the best available evidence to define and measure goals. Nursing homes will have in place a written QAPI plan adhering to these principles

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/Downloads/qapifiveelements.pdf>
© 2024 NADONA LTC

27

27

5 ELEMENTS OF QAPI CONT.

■ Element 2: Governance and Leadership

- The governing body and/or administration of the nursing home develops a culture that involves leadership seeking input from facility staff, residents, and their families and/or representatives.
- The governing body assures adequate resources exist to conduct QAPI efforts.
- This includes designating one or more persons to be accountable for QAPI; developing leadership and facility-wide training on QAPI; and ensuring staff time, equipment, and technical training as needed.
- The Governing Body should foster a culture where QAPI is a priority by ensuring that policies are developed to sustain QAPI despite changes in personnel and turnover.
- Their responsibilities include, setting expectations around safety, quality, rights, choice, and respect by balancing safety with resident-centered rights and choice.
- The governing body ensures staff accountability, while creating an atmosphere where staff is comfortable identifying and reporting quality problems as well as opportunities for improvement.

© 2024 NADONA LTC

28

28

5 ELEMENTS OF QAPI CONT.

■ **Element 3: Feedback, Data Systems and Monitoring**

- The facility puts systems in place to monitor care and services, drawing data from multiple sources.
- Feedback systems actively incorporate input from staff, residents, families, and others as appropriate.
- This element includes using Performance Indicators to monitor a wide range of care processes and outcomes and reviewing findings against benchmarks and/or targets the facility has established for performance.
- It also includes tracking, investigating, and monitoring Adverse Events that must be investigated every time they occur, and action plans implemented to prevent recurrences.

5 ELEMENTS OF QAPI CONT.

■ **Element 4: Performance Improvement Projects (PIPs)**

- A Performance Improvement Project (PIP) is a concentrated effort on a particular problem in one area of the facility or facility wide; it involves gathering information systematically to clarify issues or problems and intervening for improvements.
- The facility conducts PIPs to examine and improve care or services in areas that the facility identifies as needing attention.
- Areas that need attention will vary depending on the type of facility and the unique scope of services they provide.

5 ELEMENTS OF QAPI CONT.

■ Element 5: Systematic Analysis and Systemic Action

- The facility uses a systematic approach to determine when in-depth analysis is needed to fully understand the problem, its causes, and implications of a change.
- The facility uses a thorough and highly organized/ structured approach to determine whether and how identified problems may be caused or exacerbated by the way care and services are organized or delivered.
- Additionally, facilities will be expected to develop policies and procedures and demonstrate proficiency in the use of Root Cause Analysis. Systemic Actions look comprehensively across all involved systems to prevent future events and promote sustained improvement.
- This element includes a focus on continual learning and continuous improvement.

31

QAPI Self-Assessment Tool



Directions: Use this tool as you begin work on QAPI and then for annual or semiannual evaluation of your organization's progress with QAPI. This tool should be completed with input from the entire QAPI team and organizational leadership. This is meant to be an honest reflection of your progress with QAPI. The results of this assessment will direct you to areas you need to work on in order to establish QAPI in your organization. You may find it helpful to add notes under each item as to why you rated yourself a certain way.

Date of Review: _____ Next review scheduled for: _____

Rate how closely each statement fits your organization	Not started	Just starting	On our way	Almost there	Doing great
Our organization has developed principles guiding how QAPI will be incorporated into our culture and built into how we do our work. For example, we can say that QAPI is a method for approaching decision making and problem solving rather than considered as a separate program. Notes:					
Our organization has identified how all service lines and departments will utilize and be engaged in QAPI to plan and do their work. For example, we can say that all service lines and departments use data to make decisions and drive improvements, and use measurement to determine if improvement efforts were successful. Notes:					
Our organization has developed a written QAPI plan that contains the steps that the organization takes to identify, implement and sustain continuous improvements in all departments; and is revised on an ongoing basis. For example, a written plan that is done purely for compliance and not referenced would not meet the intent of a QAPI plan. Notes:					

QAPI SELF-ASSESSMENT TOOL

32

HOW YOUR QAPI PROCESS CAN BECOME EFFECTIVE & SUCCESSFUL

- Is able to identify issues proactively, before trends become serious problems.
- They select (Performance Improvement Projects (PIPs) in areas of: High-risk, High volume, Problem-prone
- Use CMS has 5 strategic elements that are basic building blocks to form your plan
- Your centers needs and facility assessment will drive your plan
- Involves All Staff – all levels involved in planning & improving systems & processes
 - Direct care staff have valuable and unique input; vital to the success of PI

© 2024 NADONA LTC

33

33

JUST CULTURE (BLAMELESS CULTURE)

- Within a blameless culture, leaders blame processes, not people.
- They focus on understanding why something happened, not who is responsible.
- By striving to identify the root cause of an issue, they create systems that prevent it from happening again.
- This process of depersonalizing mistakes can make a real difference.
- Culture is everything.
 - In a “no blame” setting, team members are willing:
 - to openly communicate risks and opportunities,
 - they are more likely to experiment uncovering new possibilities and
 - they will work closely together to recover when there is an issue

© 2024 NADONA LTC

34

34

JUST CULTURE

- **You want to create an open, fair and just culture**
 - Staff feel comfortable to report and discuss errors
- **You want to create a learning culture**
 - We need to learn from our mistakes and make sure staff are aware of them.
- **You want to create safe systems**
 - Time outs, double check of high alert medications, do not work nurse over 60 hours a week to prevent fatigue etc.
- **You want to manage behavioral choices**

© 2024 NADONA LTC

35

35

JUST CULTURE (CONT'D)

- **Consider the Human factor design to reduce the rate of error**
 - **Example: When cardioverting the machine automatically reverted to defibrillation and the patient died so let's redesign the machine**
- **Redundancy or repetition to limit the effects of failure (mistake proofing)**
- **Balance duty against organizational and individual values**
 - **There are three duties in Just Culture:**
 - **Duty to avoid causing unjustified risk or harm**
 - **Duty to produce an outcome**
 - **Duty to follow a procedural rules**

© 2024 NADONA LTC

36

36

JUST CULTURE PRINCIPLES

- **Values and expectations; what is important to the organization**
- **System design- continual redesign of systems and address processes and systems so it does not happen to someone else**
 - **Coaching and open environment**
- **Peer to peer coaching: helping one another to stay safe and make sure things are being done correctly**

37

37

JUST CULTURE PRINCIPLES (CONT'D)

- **Responses to human error- willing to discuss this and discipline does not help if one makes a **mistake****
- **Responses to reckless behavior- take action if **reckless behavior** to one who knowingly endangers a patient- needs to be fair culture**

© 2024 NADONA LTC

38

38

JUST CULTURE PRINCIPLES CONT.

- **Severity bias in rejection of no harm no foul, it is not based on only looking at issue if patient was harmed.**
- **Equity is about being fair and consistent with every employee group and all are set for the same expectations.**

© 2024 NADONA LTC

39

39

PLEASE USE "CUS" WORDS BUT *ONLY* WHEN APPROPRIATE!



40

40



EMPOWER

- **Definition:**
 - To give (someone) the authority or power to do something.
 - To make (someone) stronger and more confident, especially in controlling their life and claiming their rights.
 - To give qualities or abilities to
- **What Is Empowerment in the Workplace?**
 - Empowerment in the workplace means enabling employees:
 - to take ownership of their work and
 - contribute to meaningful decision-making.
 - In a culture of empowerment, company leaders:
 - delegate responsibilities,
 - share information freely, and
 - seek out input from members of their team.

© 2024 NADONA LTC 41

41

EMPOWERMENT

- Empowerment is viewed as a process or an outcome.
- It is a process by which people, organizations, and communities gain power.
 - Example: Empowerment reflects a quality or property a nurse possesses, allowing for influence over their environment.
- The focus of empowerment as an outcome is more on solutions than problems.
- Empowerment at the facility level is people uniting to accomplish common goals.
- Two underlying assumptions exist in the literature regarding empowerment and the community.
 - First, every person has the potential to become empowered.
 - Second, it is an assumption that empowered communities develop from empowered individuals working together to achieve a mutual goal for that community.
- Fostering relationships within the community is an integral part of successful empowerment.

© 2024 NADONA LTC 42

42

WHY IS EMPLOYEE EMPOWERMENT IMPORTANT?

- **Improves engagement**
 - Empowered employees feel more invested in their company's mission, are more willing to step up when extra work is required and are more likely to make contributions that can lead to meaningful change.
- **Retains top talent**
 - Capitalize on what they're good at and interested in.
 - When employees are doing a good job, they're more likely to enjoy it, and workers who are happy at their jobs are more likely to stick around.
- **Accelerates professional development**
 - Professional development is beneficial personally since it feeds into employee engagement.
 - It's also a win for the organization, which reaps the benefits of a more skilled workforce.
- **Supports strong leaders**
 - When empowered, managers can better connect with their staffers and provide what their team needs to succeed.
 - Empowered managers are transparent with information that employees value and processes become more optimized thanks to direct input from the employees who work through those processes daily.
- **Strengthens financial performance**
 - Empowered workers are more likely to embrace and even be drivers of change, which can yield creative solutions and innovative business developments and increase financial well being.

© 2024 NADONA LTC

43

43

10 WAYS TO EMPOWER OTHERS AS A LEADER

- **1. Practice Fierce Love** “I’m not going to butter you up or lie to you. I’m going to do what I can to push you to the edge of who you can be.”
- **2. Make Sure They’re Doing Great Work**
 - Three Buckets of Work (These aren’t labels of quality, but of meaning and impact.)
 - **Bad Work** is work that’s pointless, meaningless, a waste of time and energy. It’s the kind of work that makes people feel like they don’t have an impact. Eventually, they resign themselves to feeling like a small meaningless cog in a huge, heartless machine.
 - **Good Work** is solid, productive, important – but not anything they’re particularly thrilled, excited or stretched by doing. It’s your people at 6.5/10, not 9/10.
 - **Great Work** is the work that’s meaningful, important, and makes a difference. It’s the work that makes people smile and say: “This is why I signed up for this job in the first place. This is what I want to be doing.”

© 2024 NADONA LTC

44

44

10 WAYS TO EMPOWER OTHERS AS A LEADER CONT.

- **3. Tell Less, Ask More** To unlock greatness and empower your people, you need to rethink how you engage with others by becoming a connoisseur of seven powerful questions.
 - “What’s on your mind?”
 - “And what else?”
 - “What’s the real challenge here for you?”
 - “What do you (really) want (from me)?”
 - “How can I help?”
 - “If you’re saying yes to this, what are you saying no to?”
 - “What was most useful for you?”
- **4. Raise the TERA Quotient**
 - **Tribe** is all about whether the brain thinks you’re on the same side or not. If it feels your loyalty, the TERA quotient gets a boost.
 - **Expectation** is about the brain deciphering if it can predict what’s up ahead. Crystal-clear expectations mean safety.
 - **Rank?** Well, it’s not solely about your title – it’s about the power game. The brain’s wondering, “Are you a bigger fish or a smaller one?” Lower my status, and the safety level dips.
 - **Autonomy** – that’s a biggie, and Daniel Pink nailed it in his brilliant book *Drive*. It’s about the brain asking, “Do I have a say here?” Feeling a sense of choice amps up the reward factor in a situation.
- Your role as an empowering leader is to amp up that TERA quotient whenever possible by asking questions like “What’s on your mind?”

© 2024 NADONA LTC

45

45

10 WAYS TO EMPOWER OTHERS AS A LEADER CONT.

- **5. See Them and Recognize Their Contributions**
 - People feel empowered when they make ongoing progress on stuff that matters.
 - Notice this progress and celebrate their achievements.
 - Being generous with praise and giving credit where credit is due is a great way to boost the TERA quotient and make your people feel seen and heard.
 - How you celebrate will depend on the individual.
 - Words of affirmation
 - Gifts
 - Physical touch
 - Quality time
 - Acts of service
- **6. Tame Your Advice Monster**
 - Instead of giving advice, listen and ask more questions
 - When you’re able to stay curious, you begin to empower people not by giving them the answer but by *helping them find their own answer* – not by rescuing them but by helping them find their own path.

© 2024 NADONA LTC

46

46

10 WAYS TO EMPOWER OTHERS AS A LEADER CONT.

7. Start Fast...

- Get right down to business
- Get to the heart of an issue quickly. Ask a question "What's on your mind?"
- You'll also be empowering your employee, because you're shifting the dynamic of power as you relinquish control of the conversation.

8. ...And Finish Strong

- To finish strong and encourage learning, make things stick by asking the learning question: "What was most useful for you?"
- it provides you with feedback
- Encourages your employee to find value in the conversation, leaving them feeling that the interaction was useful.

9. Actually Listen Actively

- Don't jump in with a solution, next steps etc.
- Ask "How can I help?"
- Until the question is explicitly asked and answered, neither of you is entirely clear as to what they actually need and want.

10. Keep Practicing!!

At its core, it's about trusting workers to do the jobs they were hired to do and continuously supporting them with the resources they need to improve, ultimately yielding better business outcomes.

© 2024 NADONA LTC

47

47

WHAT DOES EMPOWERMENT LOOK LIKE TO THE STAFF?

- It enables me to do more
- It enables me to think and provide input
- It enables me to be a solution developer instead of a problem identifier
- It makes me feel better about my self and my job
- I feel more invested in my facility
- I feel more equal to my team members
- I feel more valued and appreciated
- I like being treated like I have something to offer that is important
- I feel challenged and learning new things beyond the day-to-day tasks

© 2024 NADONA LTC

48

48

HOW DOES EMPOWERMENT WORK WITHIN QAPI?



© 2024 NADONA LTC

49

49

EMPOWERMENT AND QAPI

1. Define the goals and benefits

- a. Communicate the vision, the purpose, and the expected outcomes of the process improvement project.
- b. Explain how the process improvement will benefit the employees, the customers, and the organization as a whole.
- c. By understanding the goals & benefits, this will help your employees understand the value and relevance of the process improvement activities, and motivate them to participate and contribute.

2. Involve your employees in the analysis and design

- a. Involve them in the analysis and design of the current and future processes
- b. Solicit their input, feedback, and suggestions on how to identify and eliminate waste, inefficiency, and variation in the processes.
- c. Encourage them to share their ideas, insights, and best practices on how to improve the processes.
- d. **Through this process, it** will help them develop a sense of ownership and responsibility for the process improvement activities and leverage their expertise and experience.

© 2024 NADONA LTC

50

50

EMPOWERMENT AND QAPI CONT.

3. Provide training and support

- a. Provide training and support for the implementation and evaluation of the process improvement project
- b. Equip your employees with the necessary skills, tools, and resources to execute and monitor the process improvement activities.
- c. Offer guidance, coaching, and feedback to help them overcome challenges, resolve issues, and achieve results.
- d. This will help your employees develop confidence and competence in the process improvement activities, and ensure their success and satisfaction.

4. Recognize and reward your employees

- a. Recognize and reward their efforts and achievements.
- b. Acknowledge and appreciate their contributions, innovations, and improvements in the processes.
- c. Celebrate and reward their outcomes, impacts, and benefits in the organization.
- d. This will help them develop pride and passion in the process improvement activities, and foster a culture of continuous improvement and collaboration.

51

EMPOWERMENT AND QAPI CONT.

5. Solicit feedback and suggestions

- a. solicit feedback and suggestions from them on how to sustain and improve the process improvement project.
- b. ask them for their opinions, perspectives, and recommendations on how to maintain and enhance the performance and quality of the processes.
- c. listen to their concerns, challenges, and frustrations on how to overcome and prevent any barriers or risks in the process improvement activities.
- d. This will help your employees develop a sense of involvement and empowerment in the process improvement activities and promote a culture of learning and innovation.

6. Implement feedback and suggestions

- a. Implement feedback and suggestions from them on how to sustain and improve the process improvement project.
- b. Act on their input, feedback, and suggestions on how to optimize and refine the processes.
- c. Communicate the changes, updates, and results of the process improvement activities.
- d. This will help your employees develop a sense of impact and value in the process improvement activities and demonstrate your commitment and appreciation.

52



SUMMARY

- QAPI goals are: Quality of Care; Quality of Life & Resident Choice
- 5 elements for framing QAPI; Design & Scope; Governance & Leadership; Feedback, Data Systems & Monitoring; PIPS & Systematic & Systemic Action
- Empowerment & what it looks like in the workplace
- Why empowerment is important
- How as Leaders we can empower others
- How to staff view empowerment
- How to empower staff through QAPI
- **Key Thought:**
The more we empower our staff in every way possible, the more our staff will grow, remain, be loyal and the better our organizations will be financially, culturally, and the higher-quality care will be provided.

© 2024 NADONA LTC

53

53

REFERENCES


- "Empower." *Vocabulary.com Dictionary*, Vocabulary.com, <https://www.vocabulary.com/dictionary/empower>. Accessed 14 Sep. 2024.
- <https://dictionary.cambridge.org/us/dictionary/english/empowering>
- [https://www.ahcancal.org/Survey-Regulatory-Legal/Pages/QAPI.aspx#:~:text=Quality%20Assurance%20and%20Performance%20Improvement%20\(QAPI\)%20is%20a%20data%20driven,care%20reaches%20a%20certain%20level.](https://www.ahcancal.org/Survey-Regulatory-Legal/Pages/QAPI.aspx#:~:text=Quality%20Assurance%20and%20Performance%20Improvement%20(QAPI)%20is%20a%20data%20driven,care%20reaches%20a%20certain%20level.)
- <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/qapidefinition>
- <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/Downloads/QAPIAtaGlance.pdf>
- https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltc.pdf
- <https://www.ncbi.nlm.nih.gov/books/NBK430929/>
- <https://www.quora.com/How-would-you-define-empowerment-in-the-workplace-Could-you-give-a-good-example>
- <https://www.mbs.works/empowering-others/#:~:text=Empowerment%20means%20inviting%20people%20to,and%20be%20their%20best%20self.>
- <https://www.mbs.works/empowering-others/#:~:text=Empowerment%20means%20inviting%20people%20to,and%20be%20their%20best%20self.>
- <https://www.4cornerresources.com/blog/empowerment-in-the-workplace-what-it-is-and-why-it-matters/#:~:text=What%20is%20Empowerment%20in%20the,from%20members%20of%20their%20team.>
- <https://www.linkedin.com/advice/1/how-can-you-empower-your-employees-process-improvement>

© 2024 NADONA LTC

54

54

THANK YOU



This Photo by Unknown Author is licensed under CC BY

CINDY FRONNING
CINDY@NADONA.ORG
651-324-8415

© 2024 NADONA LTC

TXADONA Conference 2024