P. Preface: Organizational Profile. The Organizational Profile is a snapshot of your organization, the key influences on how you operate, and the key challenges you face.

P.1 Organizational Description. Describe your organization’s operating environment and your key relationships with patients and stakeholders, suppliers, and partners.

P.2 Organizational Situation. Describe your organization’s competitive environment, your key strategic challenges and advantages, and your system for performance improvement.

1. Leadership
1.1 Senior Leadership. Describe how senior leaders’ personal actions guide and sustain your organization. Describe how senior leaders create an environment for customer engagement, innovation, and high performance. Describe how senior leaders communicate with your workforce and key customers.

1.2 Governance and Societal Responsibilities. Describe your organization’s approach to responsible governance and leadership improvement. Describe how you ensure legal and ethical behavior, fulfill your societal responsibilities, and support your key communities.

2. Strategic Planning
2.1 Strategy Development. Describe how your organization establishes a strategy to address its strategic challenges and leverage its strategic advantages and strategic opportunities. Describe how your organization makes key work system decisions. Summarize your organization’s key work systems and its key strategic objectives and their related goals.

2.2 Strategy Implementation. Describe how you convert your strategic objectives into action plans. Summarize your action plans, how you deploy them, and your key measures or indicators of progress. Project your future performance on these measures or indicators relative to key comparisons.

3. Customer Focus
3.1 Voice of the Customer. Describe how your organization listens to your patients and stakeholders and gains information on their satisfaction, dissatisfaction, and engagement.

3.2 Customer Engagement. Describe how your organization determines health care service offerings and patient and stakeholder communication mechanisms to support patient and stakeholder needs.

Element 2: Governance and Leadership. The governing body and executive leadership of the nursing home develops and leads a QAPI program, working with input from facility staff, as well as from residents and their families and/or representatives. The governing body assures the QAPI program is adequately resourced to conduct its work. They are responsible for: establishing policies to sustain the QAPI program despite changes in personnel and turnover; setting priorities for the QAPI program and building on the principles identified in the design and scope; setting expectations around safety, quality, rights, choice, and respect; and for ensuring that while staff are held accountable, there exists an atmosphere in which staff are encouraged to identify and report quality problems as well as opportunities for improvement.

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 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 residents’ agents). It utilizes the best available evidence to define and measure goals.
stakeholders. Describe how your organization builds patient and stakeholder relationships.

4. Measurement, Analysis, and Knowledge Management
4.1 Measurement, Analysis, and Improvement of Organizational Performance. Describe how you measure, analyze, review, and improve organizational performance by using data and information at all levels and in all parts of your organization. Describe how your organization uses comparative and customer data to support decision making.

4.2 Management of Information, Knowledge, and Information Technology. Describe how your organization manages and grows its knowledge assets and learns. Describe how you ensure the quality and availability of the data, information, software, and hardware needed by your workforce, suppliers, partners, collaborators, and customers.

Element 3: Feedback, Data Systems, and Monitoring. The facility puts in place systems 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.

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.

5. Workforce Focus
5.1 Workforce Environment. Describe how you manage workforce capability and capacity to accomplish your organization's work. Describe how you maintain a supportive and secure work climate.

5.2 Workforce Engagement. Describe how you develop workforce members, managers, and leaders to achieve high performance, including how you engage them in improvement and innovation.

Element 4: Performance Improvement Projects (PIPs). The facility conducts PIPs to examine and improve care or services in areas that are identified as needing attention. A PIP project typically 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. PIPs are selected in areas important and meaningful for the specific type and scope of services unique to each facility.

6. Operations Focus
6.1 Work Systems. Describe how you design, manage, and improve your key work processes to deliver products that achieve patient and stakeholder value and organizational success and sustainability. Summarize your organization's key work processes.

6.2 Work Processes. Describe how you control costs, manage your supply chain, offer a safe workplace, prepare for potential emergencies, and innovate for the future to ensure effective operations and deliver patient and stakeholder value.

Source: Compiled by Christopher Laxton from Baldrige Performance Excellence Program Criteria and the five QAPI Elements of the CMS Quality Assurance and Performance Improvement initiative