COVID-19 Rapid Response Network for Nursing Homes Week 10
Theme of the Week: QAPI and the 4Ms Framework
July 6 – 10, 2020

| Data Minute Takeaways: | • Repeated point prevalence surveys in SNFs can identify asymptomatic COVID-19 cases, inform cohorting and IPC practices, and guide prioritization of health department resources as shown in this [CDC report](https://www.cdc.gov) out of Detroit, MI.  
• The NYTimes wrote an [article](https://www.nytimes.com) looking at the racial inequity of COVID-19.  
• An [article](https://www.journals.org) from the Journal of Infection shares that compared with influenza, COVID-19 patients may be less likely to present with bacterial co-infection.  
• Two sisters are combatting loneliness by sending letters to senior citizens in self-isolation. Over 2,500 volunteers have sent over 21,000 letters and cards to over 5,000 seniors in 39 nursing homes. [Get involved](https)! |
| Policy Update Takeaways: | • CMS Administrator, Seema Verma, [stated](https://www.cms.gov) that nursing homes should not take on COVID-19 patients if they are not prepared to take care of them.  
• Identify local QIO/QINs that are available to help during the pandemic [here](https://www.aahan.org).  
• AMDA has released a [white paper](https://www.amda.org) advocating for the inclusion of a Medical Director in QAPI programs.  
• [Caring for the Ages](https://www.caringfortheages.org) published an [article](https://www.journals.org) by Nina Flanagan, PhD, GNP-BC, PMHCS-BC on QAPI: Nursing Challenges and Successes. |
| Best Practice Takeaways: | • Primary drivers to reducing COVID-19 related mortality and morbidity in IHI’s [Nursing Home COVID-19 Driver Diagram](https://www.ihi.org) include: 1) Use effective leadership and management; 2) Prevent new infections in residents; 3) Effectively care for residents and staff; and 4) Maintain safe operations. We need your expertise—please provide your feedback, suggestions, and ideas to the diagram [here](https).  
• A [QAPI](https://www.cms.gov) plan is a written plan that describes the processes the facility will follow to conduct its QAPI program and QAA committee functions. QAPI’s are federally regulated and reviewed for [compliance](https://www.cms.gov).  
• Use IHI’s [Quality Improvement Essentials Toolkit](https://www.ihi.org), [5 Whys: Finding the Root Cause of a Problem](https://www.ihi.org), and [RCA²: Improving Root Cause Analyses and Actions to Prevent Harm](https://www.ihi.org) to strengthen your QAPI plan.  
• QAPI Steering Committees should consider structural measures (e.g. PPE needed), process measures (e.g. % of staff and residents tested), and outcome measures (e.g. % who have recovered).  
• Use the [SBAR technique](https://www.ihi.org) to effectively communicate with your team: Situation (What is going on with the resident?), Background (What is the clinical background or context?), Assessment (What do I think the problem is?), and Recommendation (What would I recommend?).  
• Consider using CUS words (concerned, uncomfortable, stop-this is a safety issue) to escalate an issue with a colleague.  
• Explore AHRQ’s [TeamSTEPPS® 2.0 for Long-Term Care](https://www.ahrq.gov). |
| One Good Thing Highlights: | • From Glenn B.: “Ran a half marathon.”  
• From Alan B.: “Garden is full of beautiful blooms!”  
• From Rebecca B.: “A gorgeous week by the lake with my family and dogs!”  
• From Maria P.: “Hummingbird at bird feeder this morning.”  
• From Maria M.: “My daughter was accepted to an ED Residency at St. Thomas in our town! So proud!” |