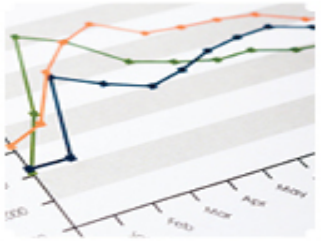
OkDCN Oklahoma Dementia Care Network

Quality Care Transitions



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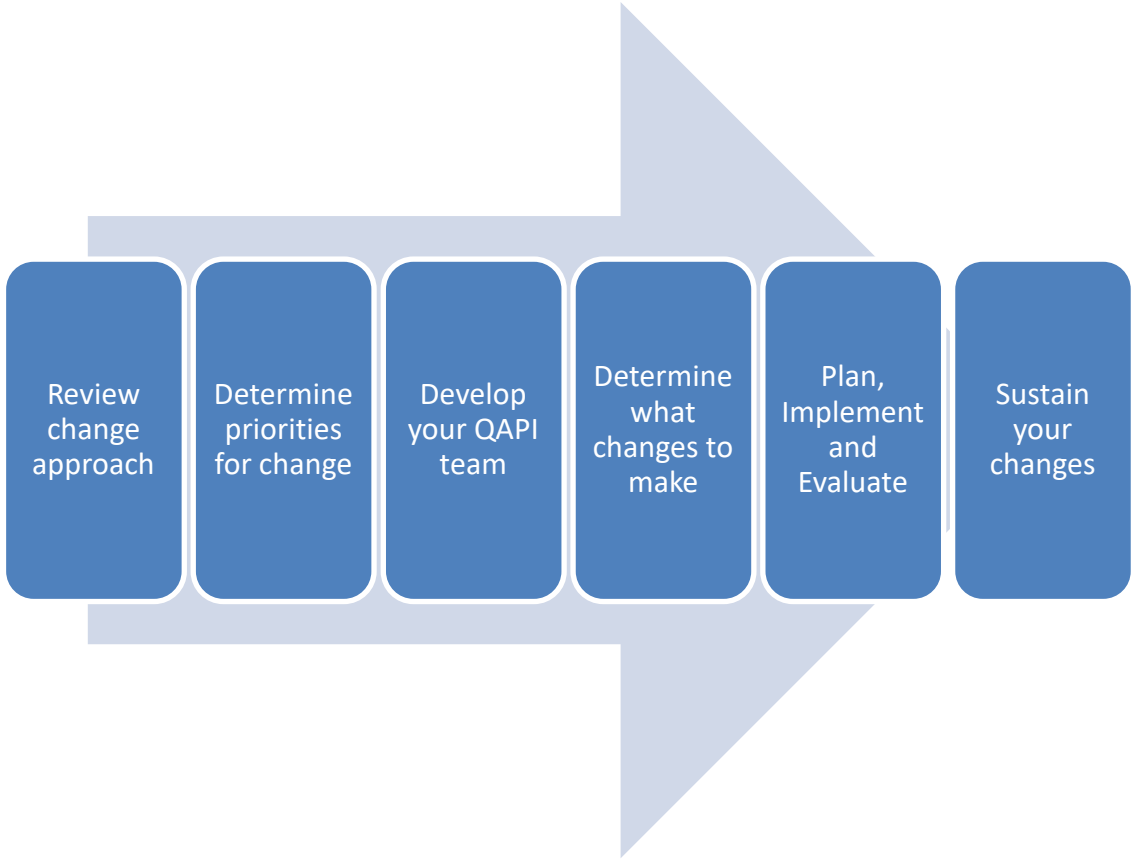
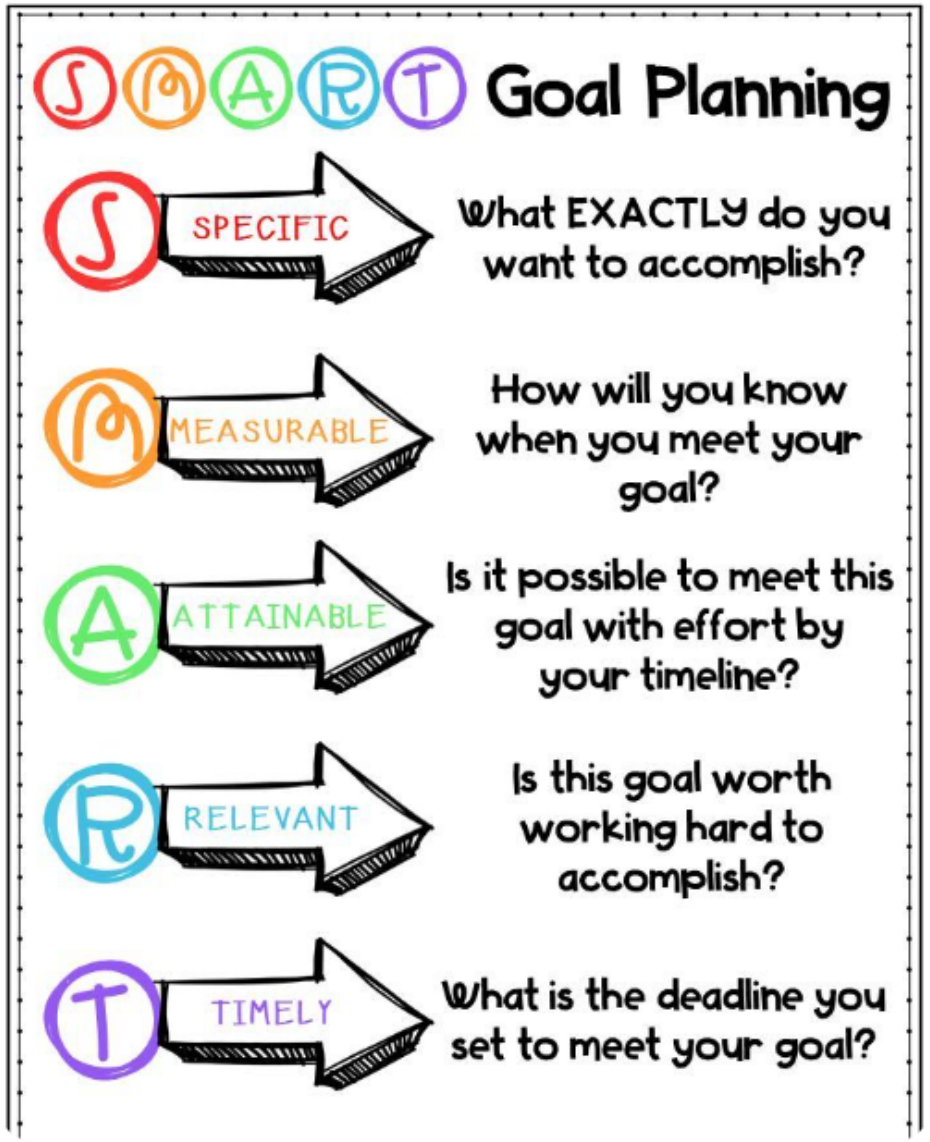
How many of you would say your resident care transitions go perfectly every time?

- YES
- NO

SIX STEPS TOWARDS IMPLEMENTING STRATEGIES TO IMPOSE CHANGE



Set your Goal for Better Care Transitions



Goal Setting Worksheet

Goal Setting Worksheet

QAPI

Directions: Goal setting is important for any measurement related to performance improvement. This worksheet is intended to help QAPI teams establish appropriate goals for individual measures and also for performance improvement projects. Goals should be clearly stated and describe what the organization or team intends to accomplish. Use this worksheet to establish a goal by following the SMART formula outlined below. Note that setting a goal does **not** involve describing what steps will be taken to achieve the goal.

Describe the business problem to be solved:

Use the SMART formula to develop a goal:

SPECIFIC

Describe the goal in terms of 3 'W' questions:

- What do we want to accomplish?
- Who will be involved/affected?
- Where will it take place?

MEASURABLE

Describe how you will know if the goal is reached:

- What is the measure you will use?
- What is the current data figure (i.e., count, percent, rate) for that measure?
- What do you want to increase/decrease that number to?

ATTAINABLE

Defend the rationale for setting the goal measure above:

- Did you base the measure or figure you want to attain on a particular best practice/average score/ benchmark?
- Is the goal measure set too low that it is not challenging enough?
- Does the goal measure require a stretch without being too unreasonable?

RELEVANT

- Briefly describe how the goal will address the business problem stated above.

TIME-BOUND

Define the timeline for achieving the goal:

- What is the target date for achieving this goal?

- https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/downloads/QAPIGoalSetting.pdf

Improving Care Transitions

Personal Preferences

- Personality
  - Some things about me
  - What makes me happy?
  - What makes me unhappy?
  - What helps me cope?
- Independence
  - Best time of Day
  - I feel strongly about being able to
  - A recent major event that affects
  - I prefer physical activity by
  - Personal Hygiene preferences
  - Healthcare team
- Future Concerns

What makes me happy?

☐ Being outside / inside	☐ Relaxing	☐ A TV show
☐ Travel or outings	☐ Reading/being read to	☐ Certain hobbies / activities
☐ Certain music or sounds	☐ Being around pets	☐ Certain meals / food
☐ Visiting family or friends	☐ A special place	☐ Other:

What details should your care providers know?

What makes me unhappy?

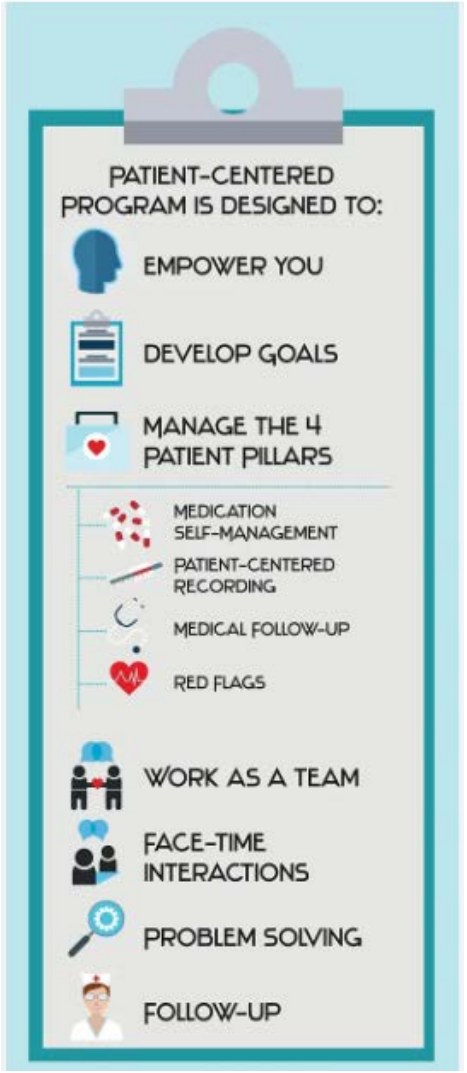
☐ Certain noises	☐ Eating	☐ Storms / Bad Weather
☐ Certain smells or tastes	☐ Being alone	☐ Crowds
☐ Being rushed	☐ Having limited choices	☐ Darkness
☐ Being moved/startled	☐ Slipping / falling	☐ Death
☐ Certain animals	☐ Lack of privacy	☐ Other dislikes:

What details should your care providers know?

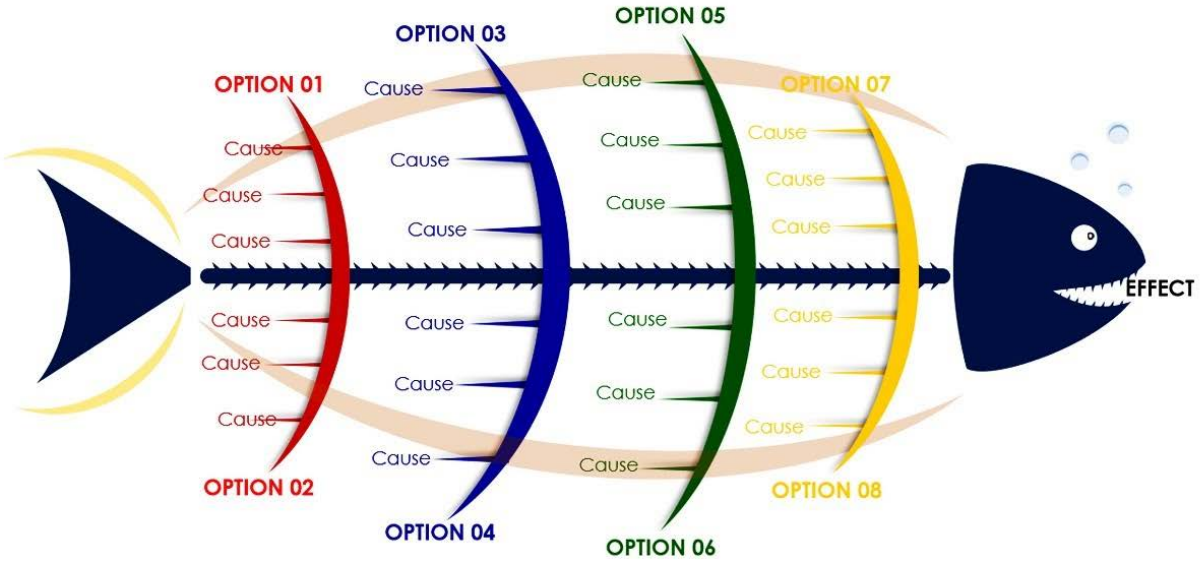
MY FUTURE CONCERNS

☐ Pain / medication management	☐ Being a burden	☐ Housing situation
☐ Independence (mental / physical)	☐ Finances	☐ Health problems
☐ Loss of caregivers	☐ Mobility	☐ Unfinished business
☐ Loss of privacy	☐ Death / End-of-Life	☐ Other:

How would you like your current care providers to help you cope with these concerns?



CAUSE AND EFFECT / FISHBONE DIAGRAM



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Begin the change

PIP Care Transitions

Conduct a Root Cause Analysis

Discovery from your team huddles

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Looking for Quality Care Transitions

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