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HOW TO RUN A QAPI/GOVERNANCE MEETING


Debra Stinchcomb, MBA, RN, CASC



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Before you begin...

DEFINITIONS



Governance as defined by Operating Agreement

- ✓ Who is on the GB?
What are titled positions?
- ✓ Chair
- ✓ Quorum for decisions?





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- ✓ # and types of committees
- ✓ Can state specific required committees be included as a separate agenda item? Or do they require a separate meeting...(i.e., IC Committee and Credentialing Committee)
- ✓ Frequency of meetings

Before you begin...

STATE REGULATIONS




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THE



GOAL:

Conduct appropriate meetings **with efficiency**


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Meeting Logistics Options

Consider the size of the ASC

QAPI Committee
Meets

2 weeks later
MEC, then GB

or

QAPI Committee
Meets

*QAPI only members
leave*
GB proceeds

or

Committee of
the Whole



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Best Practices

- Start on time
- Set meeting dates for the year
- Establish and communicate QAPI/MAC/Board responsibilities
 - QAPI Committee
 - Peer review
 - Appointments
- Facilitate communication among board members
- Establish routes of communication
- Use same agenda each time
 - Helps ensure all activities are met
- Ensure you follow up when indicated in previous meetings
- Ensure formal conduct



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Formal Conduct

- Agenda and prior meeting minutes
 - Send to all attendees prior to meeting
 - Have copies at the meeting
- Meet in Person
- Supporting Documentation
- Vote on required items with motion, second, approvals or no approval
- Document minutes in a format that is easy to follow
 - Discussion
 - Action taken (votes on action items)
 - Follow up (show that follow up has occurred)



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Roberts Rules for Small Boards | 12 or less members

1. Board members do not have to stand or be recognized by the chair in order to speak or make motions.
2. Motions need not be seconded.
3. A board member may speak any number of times on a question, and motions to close or limit debate are generally not permitted.
4. A motion does not have to be pending in order to discuss a subject informally.
5. Votes can be taken initially by a show of hands.
6. If a proposal is perfectly clear to everyone it may be voted on even though no formal motion has been made.
7. In putting questions to a vote, the chairman need not stand.
8. The chairman can participate in debate just as any other board member.

<https://harkerlepore.com/articles/roberts-rules-for-small-boards/>



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Email Vote



- Use sparingly
- Ensure you hear back from all board members
- Copy or save emails with voting actions and file with meeting minutes



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QAPI Agenda

<div> <div><Facility Name></div> <div>Quality Assessment Performance Improvement Committee Meeting</div> <div><Date></div> </div>	
I. Call to Order	F. Physical Environment
II. Approval of Meeting Minutes <Date of Last Meeting>	<ul style="list-style-type: none"> Physical Environment Checklist/Audit OSHA Other Planned Action
III. Old Business	G. Incident Reports
IV. New Business	<ul style="list-style-type: none"> Incident Report Summary Peer Review of Incident Reports Near Miss Reporting Summary Other Planned Action
A. Pharmacy and Therapeutics	H. Performance Measures
<ul style="list-style-type: none"> Formulary Edits Consulting Pharmacy Audits Medication Errors Other Planned Action 	<ul style="list-style-type: none"> QI Indicator Monitoring Dashboard Cancellations Facility Utilization Other Planned Action
B. Tissue	I. QI Studies
<ul style="list-style-type: none"> Positive Lab/Pathology Reports Other Planned Action 	<ul style="list-style-type: none"> QI Study (current and planned) Benchmarking Study Other Planned Action
C. Infection Control	J. Policies and Procedures
<ul style="list-style-type: none"> Monthly Infection Control Queries Infection Control Surveillance Audits Postop Infection Investigation Hand Hygiene Monitoring Other Planned Action 	<ul style="list-style-type: none"> New Revised Other Planned Action
D. Medical Records	K. Business Operations
<ul style="list-style-type: none"> Medical Records Audit Other Planned Action 	<ul style="list-style-type: none"> Scheduling Other Planned Action
E. Patient Satisfaction	V. Other Business
<ul style="list-style-type: none"> Patient Satisfaction Patient Complaints and/or Grievances Other Planned Action 	VI. Adjournment



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Quality Improvement Indicator Dashboard

QUALITY IMPROVEMENT INDICATOR DASHBOARD

YEAR: 2021

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
CLINICAL EFFECTIVENESS													
# of outpatient admissions who experience a post operative Infections													0
# of outpatient admissions that experienced a complication related to their procedure													0
# outpatient admissions who receive a pre-operative prophylactic antibiotic and received the antibiotic within 1 hour of cut/burn/quest time													0
# of outpatient admissions experiencing a burn prior to discharge													0
# of outpatient admissions that experienced a Fall prior to discharge													0
# of outpatient admissions that experienced any of the following Wrong site, side, patient, procedure, implant													0
# of outpatient admissions requiring a Hospital Transfer prior to discharge													0
# of outpatient admissions requiring a Hospital Admission after discharge from facility													0
ASC 13 - Normothermia Outcomes (2018)													0
ASC 14 - Unplanned Anterior Viscerotomy (2018)													0
TRACKING OF IDENTIFIED ISSUES													
% procedures that time out documented													0
% H&P completed and updated													0
# of charts reviewed that had documentation issues for Nurses													0
# of Pharmacy consultant report narcotic documentation issues													0
# of Pharmacy consultant report pharmacy inspection concerns													0
# of Physicians that were 15 minutes or more late to start procedures													0
# of risk management incident reports													0
RELATIONSHIPS													
% patients that were satisfied with their visit, would recommend the facility, and return here for surgery													0
Physician satisfaction (measured yearly)													0
OPERATIONAL EFFECTIVENESS													
# of cases for the month													0
# of cases Turned down due to scheduling conflicts													0
# of Marketing Calls													0
Block Utilization Issues													0
Block release notifications to offices within 72hrs of release													0
# of patients that have their procedure cancelled after admission													0
Net Revenue per case													0
Point of service collections													0
Salary cost per case													0
Supply cost per case with implants													0
FTES													0
SAFETY													
# Environmental/Safety concerns													0

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QAPI Meeting Minutes

<Facility Name> Quality Assessment and Performance Improvement Committee Meeting Minutes <Date>

MEETING CALLED TO ORDER <Time>

Present:	<Names w/ Title>
Absent:	<Names w/ Title>

APPROVAL OF MINUTES

Discussion	Action Taken	Follow Up
The QAPI meeting minutes from <date> were reviewed.	The Clinical Director approved the minutes from <date>.	N/A

OLD BUSINESS

Agenda Item	Discussion	Action Taken	Follow Up
Quality Reporting	Follow up on sign up on HARP for ASC reporting. This was completed since last meeting and was completed prior to May 17th.	N/A	N/A

NEW BUSINESS

Pharmacy and Therapeutics			
Agenda Item	Discussion	Action Taken	Follow Up
Formulary edits		N/A	N/A
Consulting Pharmacy audits	Audit found expired medications on the crash cart in March.	N/A	N/A
Medication Errors	None	N/A	N/A
Medication Refrigerator	Audit found Temperature requirement changes for vaccine storage (non-COVID). Policy change to measure only once daily vs twice daily. Developed new policy.	Upon motion made, seconded, the updated policy for Medication Refrigerator Temperature was unanimously approved by the QAPI Committee to go to the GB for final review and approval.	Provide staff Inservice for vaccine storage (non-COVID).

Tissue			
Agenda Item	Discussion	Action Taken	Follow Up

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QAPI Meeting Minutes

Infection Control			
Agenda Item	Discussion	Action Taken	Follow Up

Medical Records			
Agenda Item	Discussion	Action Taken	Follow Up

Patient Satisfaction			
Agenda Item	Discussion	Action Taken	Follow Up

Physical Environment			
Agenda Item	Discussion	Action Taken	Follow Up

Incident Reports			
Agenda Item	Discussion	Action Taken	Follow Up

Performance Measures			
Agenda Item	Discussion	Action Taken	Follow Up

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QAPI Meeting Minutes

QI Studies			
Agenda Item	Discussion	Action Taken	Follow Up

Policies and Procedures			
Agenda Item	Discussion	Action Taken	Follow Up

Business Operations			
Agenda Item	Discussion	Action Taken	Follow Up

<Insert>			
Agenda Item	Discussion	Action Taken	Follow Up

OTHER BUSINESS

Agenda Item	Discussion	Action Taken	Follow Up

MEETING ADJOURNED <Time>

REVIEWED AND APPROVED BY CLINICAL DIRECTOR:

DATE: _____

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ANNUAL QAPI Activities

Review these items **only once/year**
at one of your quarterly QAPI Meetings



- ✓ Contracted Services
- ✓ QAPI program
- ✓ IC program
- ✓ EMP program
- ✓ HVA
- ✓ Review Delegations of Authority/Committee membership
- ✓ Review risk assessments and update as necessary

Facility Building and Category (per 2012 NFPA Life Safety Code)
Hazard Vulnerability Analysis
Infection Control
Operating & Procedure "Wet" Area Risk Assessment
Tuberculosis

TJC Accredited Facilities Only:

Emergency Management Plan
Equipment/Medical Equipment
Fire Safety
Handling of Hazardous Materials and Waste
Safety and Security for People



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Medical Advisory Committee (MAC) Agenda

<Facility Name> Medical Advisory Committee Meeting Agenda <Date>

- I. Call to Order
- II. Approval of Meeting Minutes <Date of Last Meeting>
- III. Old Business
- IV. New Business
 - A. QAPI Review/Approval
 - B. Credentialing Review/Approval
 - C. Peer Review
 - D. Document and Policy Review/Approval
 - E. Operational Issues
- V. Other Business
- VI. Adjournment

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Governing Body Agenda

<Facility Name>
Governing Body/ Medical Advisory Committee Meeting Agenda
<Date>

- I. Call to Order
- II. Approval of Meeting Minutes <Date of Last Meeting>
- III. Old Business
- IV. New Business
 - A. QAPI Committee Report (examples listed as necessary and applicable)
 - Annual Contract Services Review
 - Annual QAPI and IC Review
 - Annual/Biannual Emergency Preparedness Program Review
 - Review of State and CMS Survey findings
 - Mandatory Quality Reporting Program
 - Review of Mock Survey Findings
 - Annual Policy and Procedure Review and Approval
 - Other
 - Planned Action
 - B. Credentialing and Appointments
 - Medical Staff Appointments/Reappointments
 - Peer Review Report
 - QAPI Committee Appointment (as necessary)
 - Appointments (as necessary);
 - List appointments
 - Other
 - Planned Action
 - C. Operational Issues (examples below)
 - New staff, Staff Turnover, Staffing Changes
 - Surgery Schedule and Block Times
 - Equipment Repairs/Purchases
 - Other
 - Planned Action
 - D. Financial Issues (examples below)
 - Financial Statement Review
 - KPI Dashboard
 - Annual Budget
 - Fee Schedule Review and Approval
 - Other
 - Planned Action
- V. Other Business
- VI. Adjournment

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Governing Body Meeting Minutes

<Facility Name>
Governing Body/MAC Meeting
<Date>

MEETING CALLED TO ORDER <Time>

Present:	<Names w/ Title>
Absent:	<Names w/ Title>

APPROVAL OF MINUTES

Discussion	Action Taken	Follow Up
The GB/MAC meeting minutes from <date> were reviewed.	The Governing Body approved the minutes from <date>.	N/A

OLD BUSINESS

Agenda Item	Discussion	Action Taken	Follow Up
Bring forward any business from previous meetings that required follow up			

NEW BUSINESS

QAPI Committee Report			
Agenda Item	Discussion	Action Taken	Follow Up

Credentialing and Appointments			
Agenda Item	Discussion	Action Taken	Follow Up
Medical Staff Appointments/Reappointments	The credentialing files for the following surgeons were reviewed: John Smith, MD Suzie Quisenberry, MD Dan Brown, PA	Upon motion made and seconded, the appointments/reappointments were approved as presented.	Correspondence to providers notifying them of their status.
Peer Review Report	Random Peer Review conducted per policy. No issues determined. No incident-based Peer Review this quarter.	N/A	Any f/u to issue or action
QAPI Committee Appointments			
Delegations of Authority			

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Governing Body Meeting Minutes

Operational Issues			
Agenda Item	Discussion	Action Taken	Follow Up

Financial Issues			
Agenda Item	Discussion	Action Taken	Follow Up

<insert>			
Agenda Item	Discussion	Action Taken	Follow Up

OTHER BUSINESS

Agenda Item	Discussion	Action Taken	Follow Up

MEETING ADJOURNED <Time>

REVIEWED AND APPROVED BY GOVERNING BODY:

DATE: _____

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Annual Governing Body Activities

Review & Approve these items **only once/year**
at one of your quarterly GB Meetings



- ✓ Contracted services as above and approve for another year
- ✓ QAPI program
- ✓ IC program
- ✓ EMP program
- ✓ Risk assessments and update as necessary
- ✓ All policies/procedures
- ✓ Annual Operating Budget

TJC Accredited Facilities Only:

- ✓ Each EC management plan including objectives, scope, performance & effectiveness (including safety, security, hazardous materials, fire, medical equipment and utility systems)
- ✓ Flu vaccine declination

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Meeting Minute Maintenance

- Transcribe them ASAP
- File consistently
 - Data for meetings separate from agendas/minutes?
- Do not include PHI or MD names in your meeting minutes
- Remember, Boards have legal liability and fiduciary responsibilities
- Meeting minutes reflect the decision making and effectiveness of the board
- Minutes are in draft form until approved by the Committee/Board at the next meeting



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**THIS
MEETING IS
ADJOURNED**

Debra@pss4asc.com



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Available on
eSupport



Operations/Quality Management/Overview



HOME ESUPPORT ▾ BLOG ▾ FORUM ACCOUNT ▾

QUALITY MANAGEMENT: OVERVIEW

CMS Conditions for Coverage require ASCs to comply with the following condition:

416.43 Condition: Quality Assessment and Performance Improvement

The ASC must develop, implement and maintain an ongoing, data-driven quality assessment and performance improvement (QAPI) program.

This Condition includes the following standards:

- 416.43(a) Standard: Program Scope
- 416.43(b) Standard: Program Data
- 416.43(c) Standard: Program Activities
- 416.43(d) Standard: Performance Improvement Projects

The QAPI Committee should meet and report quarterly on all aspects of the program. Assume that you have documented all required delegations of authority and committee delegations as well as, credentialing approvals contract approvals.

MEETING AGENDAS/MINUTES AND DATA TRACKING DASHBOARDS

- ▢ MAC/GB Meeting Agenda
- ▢ MAC/GB Meeting Minutes
- ▢ QAPI Meeting Agenda
- ▢ QAPI Meeting Minutes
- ▢ Business Office KPI Dashboard
- ▢ QAPI Indicator Dashboard

QUALITY MANAGEMENT

Overview

Risk Management
Quality Improvement Study
QI Study Library
Benchmarking
Peer Review
QAPI Resources

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TOOLKIT ASC QUARTERLY MEETINGS

- QAPI and GB Meeting Agendas
- QAPI and GB Meeting Minutes
- QAPI Indicator Tracking Dashboard
- Business Office KPI Dashboard

www.progressivesurgicalsolutions.com/asc-meetings-toolkit



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SAVE THE DATE

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MARCH 3-4 · 2022 | DALLAS, TX

WWW.ASCNURSELEADERSHIP.COM

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Upcoming Webinars

DATE	🕒	CE	WEBINAR TOPIC	SPEAKER
June	No webinar this month			
July 26	20 min		How to Make a Performance Appraisal Effective	Regina Boore
August 20	60 min	RN, CASC	Problem Employees How to Manage, How to Win	Abtin Mehdizadegan
September 27	20 min		Customer Service in the ASC Enhancing the Patient Experience	Laurie Brown
October 29	60 min	RN, CASC	Life Safety Risk Assessment What is it and What is Required	John Crowder, Jr.
November 29	20 min		Annual Survey Watch Report	Vanessa Sindell
December 17	60 min	RN, CASC	Credentialing Review	Crissy Benze

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