

	Met	Not Met	Comments
This activity should last for 30-90 minutes depending on the complexity and size of the organization.			
Participants should include representatives from: Quality Assessment or Performance Improvement, Infection Prevention and Control, Leadership, (ie: hospital board members, senior leader(s), administrator(s), Pharmacy and Therapeutics Committee, Pharmacy leader, Medical Staff, and Nursing			
OBJECTIVES			
<ul style="list-style-type: none"> To explore how the organization is using data to evaluate the safety and quality of care being provided to patients by learning about the performance improvement processes that are in place, including the management and use of data. To learn about the development, planning, implementation, evaluation, and improvement of the organization's infection control program. This will include learning how data is being used to identify and manage outbreaks as well as reduce infection. To understand how data is being used to monitor performance and improve medication management processes and safety throughout the organization. 			
Review your organization's data and performance improvement projects and be prepared to discuss the following topics:			
• Planning for data use: how does the organization identify and prioritize measurement and performance improvement projects?			
• Data collection methodology: how do you ensure that all data is collected as planned and that it is accurate and reliable?			
• What is the data aggregation, analysis, and process for turning data into useful information?			
• Data use in your organization: how is data used on an ongoing basis, how it is used in periodic performance monitoring, and project-based activities?			
• What improvement methodology or tools are being used in performance improvement initiatives?			
Data-related topics that will be discussed during this session include:			
• How is data being used to create a culture of safety ?			
• How does Leadership identify and prioritize performance improvement projects?			
• What is the process for collecting regulated data such as for quality indicators related to improved health outcomes, and the processes to check the reliability and validity of the data, such as the appropriate scope of the organization included, frequency, accuracy, and timeliness?			
• How does the organization evaluate the performance improvement program for effectiveness, including covering the scope and complexity of hospital operations and locations, if applicable?			

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• What is the program structure , for example, committees, improvement project teams, and who is involved?			
• What proactive risk assessments have been performed and what was the subject of the last one completed?			
• Safety culture surveys : what were the response rates, what did the data reveal over time, and what improvements, if any, were made as a result of the data analysis?			
• What tools are in use to monitor patient perception of safety and quality of care; response rates, results, any benchmarks in use, and any safety improvement projects			
• What processes and methods are in use to identify errors, close calls, and actual adverse events and efforts to determine that these are effective? (Refer to standard PI.01.01.01 for specific data collection and monitoring requirements.)			
• Root cause analysis process : why and when are they performed?			
Patient Safety-Related Data Collection, Monitoring, and Analysis			
• How are you evaluating the effectiveness of the hospital's suicide prevention program ?			
• Pain management program : speak about pain assessment, pain management, including non-pharmacologic approaches, and safe opioid use in the organization.			
• Patient flow : What is the process throughout the hospital and specific areas of focus, for example, emergency department wait times, instances of patient boarding, bed availability, and throughput in patient care areas?			
• What is the readmission rate and how is this data being used?			
• What data is being collected on pain assessment, pain management and safe opioid use and how is that information being used?			
• Antibiotic Stewardship <ul style="list-style-type: none"> o Who in the organization approves antibiotic stewardship protocols (for example, policies, procedures, or order sets are acceptable)? o Who makes up the antibiotic stewardship multidisciplinary team? o What does the data and reports for monitoring antibiotic use show and what improvement opportunities have there been as a result of that data? 			
• National Patient Safety Goal data			
• Contracted services performance monitoring : who is monitoring it, how often, who is the monitoring being shared with, how does this influence the renewal/discontinuation of the contract?			
• What are the organization's priorities for data collection and performance monitoring?			
• Staffing issues, compliance with employee health requirements			
Infection Prevention and Control			

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• How has the Infection Prevention and Control surveillance data collection , monitoring implementation of evidence-based practices related to CLABSI, CAUTI, MDROs, and prevention of surgical site infections, been used for performance improvement?			
• What is the process for developing the Infection Control plan, policies, and procedures, and use of nationally recognized guidelines, laws, and regulations?			
• What procedures are in place to minimize the risk of transmission of multidrug-resistant organisms (MDROs), and the relationship of these to the antibiotic stewardship program?			
• How do you monitor front-line staff's implementation of evidence-based practices to prevent CLABSI, CAUTI, MDROs, and surgical site infections? How have the results been?			
• Hand hygiene: is HH compliance being monitored and what are the results showing?			
• Staff exposure interventions: is there a process for screening for exposure and or immunity to infectious diseases staff encounter, referral for assessment, potential testing, immunization and/or prophylaxis treatment, and counseling to those who have potentially been identified with an infectious disease?			
COVID-19 vaccination requirements – speak to the organizations' program for all staff, physicians, volunteers, vendors, visitors, etc.			
• Is there a plan and resource allocation for infection control activities; planning for the influx of patients ?			
• Reporting of infection control data: who is responsible, the methodology and flow of information including state and federal reporting of communicable diseases?			
Medication Management Processes			
• What is the Medication Management process for data collection, monitoring, and analysis for drug reactions, adverse drug events, controlled substance monitoring ?			
• What is the process for implementing pre-printed (or protocol) order sets including development, approval, and regular review?			
• Are overrides of automated dispensing systems monitored; analysis of data performed, and are any actions taken in response?			
• What is the process for reporting abuse and loss of controlled substances, data collection, analysis, systems evaluation, and performance improvement initiatives?			
• What is the process for reporting , responding to, and analyzing medication administration errors, near misses, adverse drug reactions, and medication incompatibilities; use of this data to correct/improve performance ?			
• Is there education of staff and patients regarding medication safety?			
• Is there education of physicians and other licensed practitioners regarding pharmacy policies, protocols, changes, etc.?			

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<ul style="list-style-type: none"> • Antibiotic stewardship program; education, influence, and impact <ul style="list-style-type: none"> o Is there involvement of medical nursing and pharmacy staff in the antibiotic stewardship program ? o What is the composition of multidisciplinary committee and scope of oversight? o What processes have been implemented to optimize antibiotic prescribing? o Are evidence-based guidelines in use for common indications for antibiotic use; compliance monitoring with guideline(s)? o Does the antibiotic stewardship program report to hospital leadership and prescribers? 			
<ul style="list-style-type: none"> • Is there monitoring data for changes in prescribing patterns for antibiotics, opioids, or other medications; analysis of data, reporting of data, and any actions taken in response? 			