

QUALITY ASSESSMENT AND PERFORMANCE IMPROVEMENT (QAPI) QUALITY IMPROVEMENT ACTIVITY (QIA) MONITORING FORM

Increasing the Number of Patients on the Transplant Waiting List

Facility Name: _____ Date of QAPI Meeting: _____

Attendees: _____

1. List the change idea from the Transplant Change Package that you are working on this month:

2. Report this month's progress from implementing your change idea (e.g., more interested patients, more referrals to the transplant center, or other metric you are tracking):

Monitoring Metrics							
Number of Patients:	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May
Newly educated about transplant or referral process							
Newly interested in transplant							
Newly referred to a transplant center							

1. What barriers remain to patients being educated, referred, or waitlisted?

2. Provide feedback from the QAPI meeting attendees: _____

3. Provide feedback from patient(s): _____

4. What is the facility's plan for next month?

5. Other discussion or comments:

Facility Administrator Signature/Date

Facility Medical Director Signature/Date