**Topic Area: <INSERT>**

*Visit the* [*HQIN Resource Center*](https://hqin.org/resource/action-plan-templates/) *to access additional action plan templates on topics including infection control, vaccination and hand hygiene.*

**Conduct Root Cause Analyses for Each Identified Gap or Opportunity:**

* Determine contributing factors, events, system issues and processes involved
* Utilize RCA tools as appropriate (e.g., [5 Whys Worksheet](https://hqin.org/resource/five-whys-worksheet/), [QAPI Fishbone Diagram](https://hqin.org/resource/qapi-fishbone-diagram/), Cause & Effect Diagram)
* Conduct a [Plan-Do-Study-Act (PDSA)](https://nam02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fhqin.org%2Fwp-content%2Fuploads%2F2021%2F03%2FPDSA-Worksheet-508.pdf&data=05%7C01%7Clfinch%40hqi.solutions%7C62686d1b484f4cbb5aee08dbf123fc86%7Cd2798d0f9fe24eacbdf166c9890342c9%7C0%7C0%7C638368909098562408%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=9PuwxE9Onb6eeea7k3%2F1l1pedMpNVeGv7F04o%2F7XkTM%3D&reserved=0) to test intervention, review results and adjust actions needed

**Identify Infection Prevention and Control Gaps & Areas of Opportunity:**

* [CDC’s Infection Control Assessment and Response (ICAR) Tool for General Infection Prevention and Control (IPC) Across Settings](https://www.cdc.gov/hai/prevent/infection-control-assessment-tools.html)
* Review previous survey findings, federal and state regulations and CDC updates for long-term care facilities
* Check [CMS Quality Safety & Oversight (QSO) memos](https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Policy-and-Memos-to-States-and-Regions)

The sample RCA, actions, interventions, best practices and metrics illustrated here to address identified infection prevention areas of opportunity are solely intended as example guidance. Your team should perform an infection prevention gap analysis/risk assessment and build a customized action plan to best meet the needs of your specific organization and community.

**1**

|  |
| --- |
| **Area of Opportunity**  |
| **EXAMPLE:** <Insert> |
| **Root Cause Analysis** **(specify each root cause and address each within the action plan) -*See examples below-***  |
| 1. <Insert>
 |
| 1. <Insert>
 |
| 1. <Insert>
 |
| 1. <Insert>
 |
| **S.M.A.R.T. Goal: (Specific, Measurable, Achievable, Relevant, Time-based)** |
| **EXAMPLE:** <Insert> by [SPECIFIC DATE] |

**2**

| **Project Start/Completion Date** | **Specific Actions & Interventions** | **Person/Team Responsible***\*Include QAPI Committee* | **Ongoing Monitoring & Surveillance** | **Resources & Additional Comments** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  | **4** |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **5** |  |  |  | **3** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  | * Download and distribute recommended resources from the [Health Quality Innovation Network Resource Center](https://hqin.org/resources/) (Copy and paste resource titles in the search bar at the top right side of the page)
 |  |  | * Customize as appropriate
 |

**8**

**4**