|  |  |  |  |
| --- | --- | --- | --- |
| **Category** | | | **Data** |
| Data entered by | | |  |
| Date of entry | | |  |
| Metric for month of |  | Year of |  |
| **Occupancy** | | | |
| Number of residents in the facility on the last Friday of the month | | |  |
| **Nursing Staff (excludes agency)** | | | |
| **Employed by the facility** | | |  |
| Number of full- and part-time RNs/LPNs on the facility’s payroll  on the last Friday of the month | | |  |
| Number of full- and part-time CNAs/NAs on the facility’s payroll  on the last Friday of the month | | |  |
| **Length of employment** | | |  |
| Number of full- and part-time RNs/LPNs who have been employed for one year or more  on the last Friday of the month | | |  |
| Number of full- and part-time CNAs/NAs who have been employed for one year or more  on the last Friday of the month | | |  |
| **Shifts and absenteeism** | | |  |
| Number of shifts scheduled for RNs/LPNs from the first day through the last day of the month | | |  |
| Number of shifts for which RNs/LPNs did not report to work from the first day through the last day of the month | | |  |
| Number of shifts scheduled for CNAs/NAs from the first day through the last day of the month | | |  |
| Number of shifts for which CNAs/NAs did not report to work from the first day through the last day of the month | | |  |

|  |  |
| --- | --- |
| **Quality of Care** | |
| **Acquired Pressure Sores** |  |
| Number of residents with pressure ulcers on the last Friday of the month |  |
| Of the residents counted above, the number with documentation of having the pressure ulcer(s) upon admission |  |
| **Resident Pressure worsened** |  |
| Number of residents with pressure sores worsened on the last Friday of the month |  |
| **Residents with Physical restraints** |  |
| Number of residents with physical restraints on the last Friday of the month |  |
| **Residents with unplanned weight loss/gain** |  |
| Number of residents with unplanned significant weight loss or gain on the last Friday of the month |  |
| **Residents receiving influenza vaccine** |  |
| The number of residents who received the influenza vaccine during the most recent influenza season, either in the facility or outside the facility |  |
| **Falls** |  |
| Number of residents who have experienced one or more falls with major injury from the first through the last day of the month |  |

Data collected on the last Friday of the month are used to calculate a same-day snapshot of all facilities nationwide enrolled in the GHCA QIP Program. The same-day “snapshot approach” is widely used in government-produced and other research statistics.

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