

COMMUNITY HEALTH CENTERS CONTINUOUS QUALITY IMPROVEMENT PLAN 2001



DEFINITION: *Continuous Quality Improvement is a method of continuously examining processes and making them more efficient and effective.*

PURPOSE: *To foster an environment in which quality of patient care and customer satisfaction is the primary goal. To engage and empower staff in problem identification, resolution and continuous quality monitoring. To report activities to the governing body, as directed, and Celebrate Success.*

GOALS: *(A) To educate staff on the need for and the scope of a quality improvement process (B) To involve staff and foster a multi-disciplinary approach to problem identification and resolution, to include barriers to care, and to achieve compliance with the highest standards within the constraints of available resources (C) To develop appropriate reporting mechanisms (D) To develop mechanisms for assessing progress and continuously monitoring and evaluating the effectiveness, efficiency and efficacy of the care environment.*

The Board of Directors-Executive Committee.

The Continuous Quality Improvement (CQI) Plan will include a focal point for reporting activities to the governing body. This will be accomplished through the Executive Committee of the Board of Directors. The Executive Committee consists of the following board members:

- President
- Vice-President
- Treasurer
- Secretary
- At-large member
- At-large member

Purpose. To receive and review activities of the staff in relation to continuous quality improvement activities and to assure that quality of care and customer satisfaction is maintained.

Responsibility/Requirements. The Executive Committee of the Board will represent the target population in providing input into the CQI process. The Committee will meet quarterly to receive and review CQI reports.

Reporting. Actions taken by the Executive Committee will be documented in meeting minutes.

The Central Committee.

The Continuous Quality Improvement Plan will include a multi-disciplinary Central Committee which will be representative of each primary care site and other associated programs operated under the umbrella of the corporation. The Central Committee will be comprised of the following staff positions:

- Executive Director
- Practice Manager
- Associated Services Representative
- Medical Records Representative
- Medical Provider-
- Medical Provider-
- Midlevel Provider
- Clinic Coordinator-
- Clinic Coordinator-
- Ryan White III Representative

For the Year 2001, the Central Committee Chair will be appointed by the Executive Director. In subsequent years, the chairperson will be selected by the membership.

Purpose. The purpose of the Central Committee will be to assign, direct and monitor activities of the Continuing Improvement Teams (CIT).

Responsibility/Requirements. Central Committee members will serve as a liaison to CITs and to staff and will communicate and implement approved projects through general staff meetings, clinical staff meetings, development of policies, procedures, protocols, as deemed necessary. The Central Committee will continuously examine processes through utilization of the AmbuQual parameters guide with the goal of making processes more efficient and effective. The Central Committee will meet monthly, at a minimum.

Scope: The Central Committee will review, evaluate and monitor parameters of care to include the following:

- Provider Staff Performance
- Support Staff Performance
- Continuity of Care
- Medical Record System
- Patient Risk Minimization
- Patient Satisfaction
- Patient Compliance
- Accessibility
- Appropriateness of Service
- Cost of Service

Reporting. Activities of the Central Committee will be documented in meeting minutes. Minutes will be posted in a central location in each site operated by the corporation. Activities of the Central Committee will be reported to the Board of Directors' Executive Committee on a quarterly basis. Such reports will be the responsibility of the Central Committee Chair, in conjunction with the Medical and Executive Director(s).

Medical Professional Continuing Improvement Team (CIT)

The Medical Professional CIT will replace the "Clinical Staff" meeting and will be comprised of the following staff positions:

- Medical Director, Chair
- Staff Physicians-
- Staff Physicians-
- Mid-Level Practitioners-
- Mid-Level Practitioners-
- Pharmacist

The chairperson and at least one additional member will sit on the Central Committee.

- Purpose:**
- (1) Review standards and resolve compliance issues as identified and assigned by the Central Committee.
 - (2) Research and resolve Degree of Excellence concerns identified by staff and assigned by the Central Committee.
 - (3) To research and resolve Patient Concerns identified by consumers and assigned by the Central Committee.
 - (4) Identify and resolve professional quality of clinical care issues.
 - (5) Actively pursue resolution of unmet Health Care Plan objectives.
 - (6) Review policies/procedures related to the provision of medical professional services within the organization.

Responsibility/Requirements: The Medical Professional CIT assumes responsibility for medical professional care issues, concerns, standards, policies, procedures, protocols and short-term objectives. Monthly CIT meetings are expected at a minimum, increased frequency, as needed.

Reporting: The Medical Professional CIT will report monthly to the Central Committee and include documentation of assigned problem resolution. Special reporting will be required for problem focused and procedural audit recommendations. Teams are expected to submit recorded minutes of all meetings.

Medical Support Continuing Improvement Team (CIT)

The Medical Support CIT will be comprised of the following staff positions:

Staff Nurse,
Clinic Coordinator,
Staff Nurse-
Laboratory/Instrument Tech
Medical Record Coordinator
Customer Service Rep-
Customer Service Rep-

The chairperson and at least one additional member will sit on the Central Committee

- Purpose:**
- (1) To review standards and resolve compliance issues identified and assigned by the Central Committee.
 - (2) To research and resolve Degree of Excellence concerns identified by staff and assigned by the Central Committee.
 - (3) To identify and resolve clinical support and quality of care issues within parameters of the clinical support team.
 - (4) To identify and resolve Patient Concerns identified by consumers and assigned by the Central Committee.
 - (5) To review policies and procedures related to the provision of clinical support services.

Responsibility/Requirements: The Medical Support CIT assumes responsibility for medical support service issues, concerns, standards, policies and procedures. Monthly meetings are expected at a minimum, with increased frequency as needed.

Reporting: The Medical Support CIT will report monthly to the Central Committee and include documentation of assigned problem resolution. Teams are expected to submit recorded minutes of all meetings.

Associated Services Continuing Improvement Team (CIT)

The Associated Services CIT will be comprised of the following staff positions:

Midlevel WCHC, Chair
Outreach Coordinator
Health Educator
Caminos de Salud Coordinator
Health Check Coordinator
Social Worker
Midlevel HFHC
Physician

The chairperson and at least one additional member will be chosen to sit on the Central Committee.

- Purpose: (1) To review standards and resolve compliance issues identified and assigned by the Central Committee
(2) To research and resolve Degree of Excellence concerns identified by staff and assigned by the Central Committee
(3) To research and resolve Patient Concerns identified by consumers and assigned by the Central Committee
(4) To actively pursue resolution of unmet Health Care Plan objectives related to associated services.
(5) To review policies and procedures related to the provision of Associated Services within the organization.

Responsibility/Requirements: The Associated Services CIT assumes responsibility for provision of ancillary care issues, concerns, standards, policies, procedures and short-term objectives. Monthly meetings are expected at a minimum, with increased frequency as needed.

Reporting: The Associated Services CIT will report monthly to the Central Committee and include documentation of assigned problem resolution. Teams are expected to submit recorded minutes of all meetings.

Administrative/Risk Management Continuing Improvement Team (CIT)

The Administrative/Risk Management Continuing Improvement Team will be comprised of the following staff positions:

Practice Manager, Chair
Finance & Grants Compliance Officer
Administrative Assistant
Clinic Coordinator HFHC
Revenue Associate
Customer Service Representative

The chairperson and at least one additional member will sit on the Central Committee.

- Purpose:** (1) To review standards and resolve compliance issues identified and assigned by The Central Committee.
- (2) To research and resolve Degree of Excellence concerns identified by staff and assigned by the Central Committee
 - (3) To research and resolve Patient Concerns identified by consumers and assigned by the Central Committee.
 - (4) To identify and resolve issues which cross departmental lines and have the potential to impact on the quality of care.
 - (5) To review related policies and procedures within the organization.
 - (6) To identify and resolve quality of care issues related to risk management, safety and security.
 - (7) To actively pursue resolution of unmet Annual Plan objectives related to Risk Management, Administration and/or Financial management.

Responsibility/Requirements: The Administrative/Risk Management CIT assumes responsibility for safety issues, human resources, finance and administratively related concerns, standards, policies and procedures. Monthly meetings are expected at a minimum, with increased frequency as needed.

Reporting: The Administrative/Risk Management CIT will report monthly to the Central Committee and include documentation of assigned problem resolution. Teams are expected to submit recorded minutes of all meetings.

**COMMUNITY HEALTH CENTER, INC.
CONTINUOUS QUALITY IMPROVEMENT
CENTRAL COMMITTEE**

DESCRIPTION OF DUTIES: CENTRAL COMMITTEE VICE-CHAIR
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The Central Committee Vice-Chair will be responsible for facilitating meetings of the Central Committee in the absence of the Committee Chairperson.

The Central Committee Vice-Chair will be responsible for the recording and production of minutes in the absence of the Recording Secretary.

If so requested by the Chairperson, the Vice-Chair will work with the Recording Secretary to set the agenda for the monthly meeting.

Officers of the Central Committee, including the Vice-Chair, will have a thorough working knowledge of the CQI Plan and will advise and assist other committee members and Continuing Improvement Teams, upon request.

The Vice-Chair will assist the Chairperson in making required reports to the Board of Directors and the general staff, if so requested.

The Vice-Chair will assist the Chairperson in creating a comprehensive annual report to the Board of Directors.

Approved May 2001

**COMMUNITY HEALTH CENTER, INC.
CONTINUOUS QUALITY IMPROVEMENT
CENTRAL COMMITTEE**

DESCRIPTION OF DUTIES: CENTRAL COMMITTEE CHAIRPERSON

The Central Committee Chairperson will be responsible for facilitating meetings of the Central Committee.

In conjunction with the Recording Secretary, the Chair will prepare the meeting agenda prior to each monthly meeting.

The Central Committee Chairperson will maintain a working knowledge of the CQI Plan and will advise and assist Committee members and Continuing Quality Improvement Teams upon request.

The Central Committee Chairperson will not be a voting member of the Committee except in the case of a tie. Should a tie vote exist, the Chairperson will vote to break the tie.

The Chairperson will assure that CITs meet regularly and report, as appropriate, to the Central Committee.

The Central Committee Chairperson will facilitate work assignments to the various CITs and will assure that proper documentation and tracking of assignments exists in Central Committee files.

The Central Committee Chairperson will meet, upon request, with the Executive Committee of the Board of Directors to discuss the progress of the Continuing Quality Improvement program.

On a quarterly basis, the Central Committee Chairperson will up-date the general staff on the progress and/or results achieved through the CQI program.

At the close of the calendar year, the Committee Chairperson, in conjunction with the Executive Director, will prepare an annual report to the Board of Directors documenting the activities and achievements of the CQI program.

**COMMUNITY HEALTH CENTER, INC.
CONTINUOUS QUALITY IMPROVEMENT
CENTRAL COMMITTEE**

DESCRIPTION OF DUTIES: RECORDING SECRETARY

The Recording Secretary will be responsible for recording, preparing and distributing minutes of the Central Committee.

The Recording Secretary will maintain the CQI Tracking Log and will document all Team assignments and follow-up reviews.

In conjunction with the Committee Chairperson, the Recording Secretary will prepare and distribute the agenda for monthly meetings of the Central Committee. Posting of Central Committee minutes will also be handled by the Recording Secretary.

As an officer of the Central Committee, the Recording Secretary will maintain a thorough working knowledge of the CQI Plan and will advise and assist other committee members and CITs, upon request.

The Recording Secretary will periodically review documentation from the various Teams and will notify the Central Committee Chairperson of any problems.

Approved May 2001