

CHAPTER 1

Quality Management System Overview

The mission of the Quality Management (QM) System is to facilitate continuous quality improvement in the delivery of health care services. Care is to be consistent with adopted standards of quality and scope of services within the custodial environment, as well as meeting constitutional requirements. The Health Care Services Division (HCSD) strives to be a leader in the promotion of effective, timely, competent care and in the promotion of patient responsibility to participate in their health care.

The United States did not enter into the Quality Management arena until after W. Edwards Deming published his book, "Out of Crisis" in 1986. The following year the Malcolm Baldrige National Quality Award was established to:

- Promote quality awareness
- Recognize quality achievements of U.S. companies
- Publicize successful quality strategies

The key points of evaluation for the Malcolm Baldrige Award include:

- Leadership
- Information analysis
- Strategic quality planning
- Human resource utilization
- Quality assurance
- Quality results
- Customer satisfaction

The Hospital Corporation of America initiated their Continuous Quality Improvement Process (CQI) in 1988. In 1994, the Malcolm Baldrige National Award was launched to recognize quality management in health care field.

There are many definitions of quality, one that sums it all is: "the measure of the degree to which delivered health services meet established professional standards and judgments of value to the customer".

Perfection is often times impossible. However, what is possible is continually addressing the quality of care and making subsequent improvements when necessary. Quality Management is an ongoing process of 1) objectively and systematically monitoring and evaluating the access to and the appropriateness of patient care, 2) pursuing opportunities to improve care and clinical performance, and 3) resolving identified problems in care and clinical performance. Continuous quality improvement is the responsibility of every person in the organization.

The gurus of quality management include W. Edwards Deming, Joseph Juran, Phillip Crosby, Donald Berwick and others. They all agree on the major concepts:

- Commit to quality improvement throughout the entire organization

- Attack the system rather than the employee
- Identify the processes to find and eliminate the problems to improve quality
- Identify your customers, both the internal and external
- Eliminate waste and rework
- Promote teamwork
- Create an atmosphere of innovation
- Quality is a never ending process

Contained in this QM manual is a detailed system for the implementation of the quality management mission. At each institution the Local Governing Body or Health Care Manager, as applicable, is the ultimate authority for all health care matters. The Quality Management Committee (QMC) is the medical oversight committee. Other committees (e.g., Quality Review, Death Review, Patient Care Policy, Infection Control, and Pharmacy) submit monthly reports to the QMC. Using the information provided, the QMC maintains an overview of all activities in the health care services program and the potential areas in need of improvement. The QMC is empowered to evaluate all areas within the institution as they relate to the delivery of health care services. The QMC is particularly interested in evaluating and making recommendations for improvement of systems.

Because health care professionals are motivated, committed to ethical standards, and possess a strong work ethic, most issues do not require corrective actions through punitive measures. A principal in QM is change through training, education and revision of policies. The basic work in improvement takes place at the level of the individual worker. For the system to work, management must be committed to QM. The Governing Body is responsible for clinical quality review of staff by reviewing individual performance through the quality review process.

The QMC prepares quarterly reports and advises the Health Care Manager on trends, compliance with health care and other applicable standards and potential medical quality problems. To generate sound advice, the committee collates and aggregates evaluation data provided and provides direction for additional studies. A critical responsibility is an annual review of the effectiveness of the QM system.

The effectiveness of the QM system rests on the ability to change. When an opportunity to improve medical services is identified, a quality improvement team (QIT) may be formed (chartered) by the QMC. The QIT utilizes the FOCUS*PDCA process improvement model: **F**ind an opportunity for improvement, **O**rganize a team, **C**larify and **U**nderstand the process, **S**elect a process improvement, **P**lan the improvement, **D**o a pilot of the improvement, **C**heck the results of the pilot, and **A**ct on the results. (Refer to Chapter 3 and 4 for more information.) Generally the QIT holds one or two sessions of brainstorming, looking at quality performance measures and the parts of the process that may be improved. The QIT will recommend a plan for improvement to the QMC.

Another component of the Quality Management System is the Quality Management Assessment Team (QMAT). The QMAT will provide an independent assessment of the quality of medical care delivered. Individual institution results and identified system-wide trends will be reported

directly to the Deputy Director, HCSD. The QMAT is made up of physician and nurse consultants. It is based at HCSD headquarters and will conduct regular quality reviews of health care programs at all institutions. The role of the QMAT is to provide direct guidance to institutional medical and nursing staff, based upon on-site assessment and evaluation. At each institution, the QMAT will assess access to care, quality of care, continuity of care, and follow-up care, with emphasis on the quality of care delivery. The QMAT will coordinate and communicate quality of care issues with the Quality Management Committee at the institutions. The QMAT will provide written findings to the institution Health Care Manager and CDC management, and will provide technical assistance to the institution in developing and implementing a corrective action plan. The QMAT will act as the catalyst and the facilitator for Quality Management. (See Chapter 4.)

Patient satisfaction can be monitored both through verbal and/or written complaints to the Health Care Manager, Warden, or others (e.g., Inmate Appeals) and through random interviewing of patients. It is important for the evaluation of all written patient complaints to include discussion with appropriate health care staff, evaluation of the record and an interview with the patient. In addition, inmate appeals often are the first indicator of problems with access, quality, or continuity of medical care at an institution. The Inmate Appeals Tracking Program (IMATP) has been implemented into all institutions to insure health care related appeals (CDC Form 602) are responded to in a timely and appropriate manner.

Frequently in correctional institutions, patients with injuries present themselves to Health Care providers who diagnose and treat the problem while never attempting to determine whether there is a pattern of injuries which might be prevented. By looking at occurrence of injuries over a period of time, looking at the type of injury, the location where the injury took place, time of day and the nature of the injury, one should be able to determine whether such a pattern exists and address health and safety (risk management) issues. Once a pattern has been identified, strategies should be developed to correct problems so that injuries can be eliminated or minimized.

Success is a journey, not a destination. There may be a desire to look for quick solutions and to fix things without doing studies. The success of the QM system is measured by the degree of improvement of the quality of care delivered. When people come to work for the HCSD, their top priority must be the delivery of quality healthcare. By providing systematic and ongoing monitoring and evaluation of the quality of medical, dental and mental health care services through the QM system, services provided are continually improved in a timely, effective and efficient manner.