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Document Scope: (applies to Policy & Procedure only)

- The requirements herein apply only to the GCBH Central Office and its functions.
- X - The requirements herein apply, verbatim, to GCBH and its network providers².
- The requirements herein apply both to GCBH and its network providers². Additionally, network providers must have internal documents outlining their processes for implementing the requirements, insofar as they relate to actions for which network providers are responsible.

PURPOSE: To define requirements for quality management processes conducted by GCBH network providers.

DEFINITIONS

- I. Quality Management – A broad term for the various, integrated processes by which the GCBH Network Providers assure the delivery of care that is efficient, effective and in compliance with regulatory and contractual requirements. These processes include the assessment of both clinical and general operational aspects of a Network Provider’s care-delivery system via the collection, analysis and trending of data concerning key performance indicators, and the implementation of structured change projects in response to findings indicating opportunities for improvement. (See the GCBH Quality Management Program Plan—QM501—for a comprehensive description of GCBH’s conceptualization of Quality Management and the structure and processes by which GCBH evaluates and improves services provided throughout the RSN.)
- II. Performance Improvement Projects (PIP’s) – Improvement initiatives conducted via processes reflecting the requirements of CMS Protocols for such projects. PIP’s are initiated by GCBH in response to issues determined by the Quality Management Oversight Committee (QMOC) to merit RSN-wide attention and may be carried out in collaboration with the Mental Health Division and/or other RSN’s.
- III. Quality Improvement Processes (QIP’s) – Improvement processes and projects initiated by GCBH or its Network Providers which (1) focus on opportunities for improvement that can be addressed without the commitment of resources required by PIP’s, and (2) are conducted via a data-driven, structured and cyclical process—e.g., the PDSA (Plan, Do, Study, Act) Cycle—designed to improve a specific aspect of performance and demonstrate that improvement is sustained.

POLICY

- A. GCBH requires Network Providers to implement processes by which they assess the quality of their service delivery, evaluate their performance relative to contractually defined quality indicators, identify opportunities to improve system performance, and carry out QIP’s in response to identified opportunities.
- B. In addition to carrying out internally-initiated QIP’s, Network Providers are required to participate in PIP’s and/or QIP’s approved by the QMOC. For such projects, GCBH

¹See definitions of document types in AD100, “Development, Approval & Review of Formal RSN Documents”

²“Network Provider” – An organization with which GCBH is contracted for the provision of direct services.

assures that Network Providers receive the training and information necessary for successful participation, and that they are kept informed as to the status, findings and outcomes of the improvement projects.

- C. Network Providers are required to keep written documentation (e.g., meeting minutes, QIP reports, etc.) of their quality management processes. Documentation should demonstrate regular attention to data concerning contractually required performance indicators, evaluation of and responsiveness to findings of performance audits conducted by GCBH and other entities, identification of meaningful opportunities for improvement of the Provider's care-delivery system, effective follow-through in regards to identified opportunities for improvement, active participation by both leaders and staff in improvement activities, and the assessment of identified issues relative to their implications for management activities such as risk management, fiscal management, and disaster planning.
- D. At their request, in support of Network Providers' quality management processes, GCBH supplies consultation, technical support and training regarding improvement methodologies (e.g., PDSA), and/or Provider-specific performance data available through the GCBH data system.

APPROVAL

/S/ William Wilson

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Director

04/03/08