
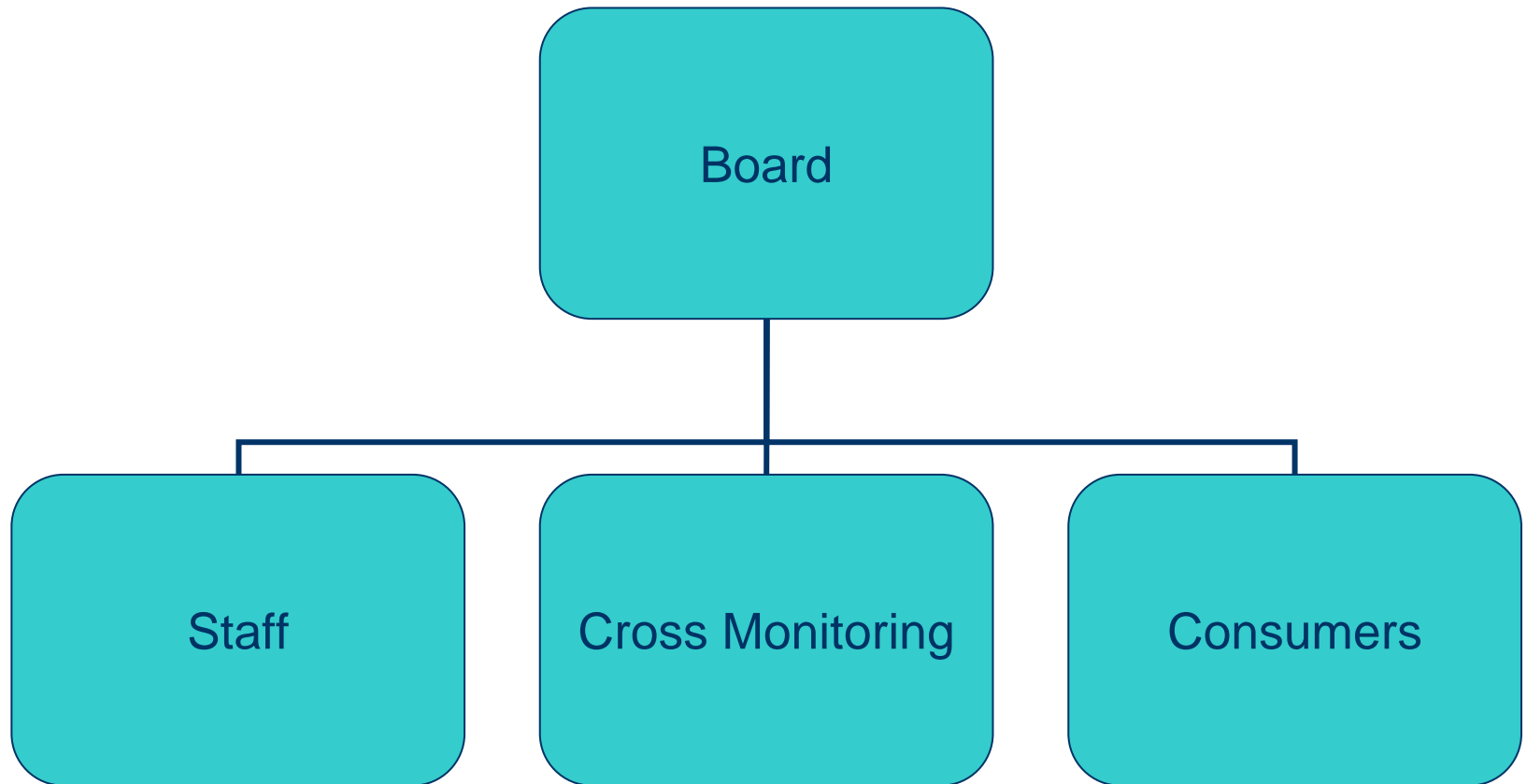


# **Internal Quality Assurance**

Greater Bridgeport Area Continuum of Care  
Standards and Evaluation Committee  
January 31, 2007



# What is Internal Quality Assurance?



# What is Internal Quality Assurance?

- **Internal QA is conducted by an organization to identify areas for improvement and to prepare for external evaluators.**
- **A good QA system measures program efficiency and effectiveness as well as client satisfaction.**
- **It should involve both top down and peer review.**
- **It should include client input through focus groups or satisfaction surveys.**

# Internal Review: Program Services Management

- Eligibility and Admissions
- Case Management
- Discharge Planning
- Treatment Planning
- Collaboration and Referral Sources

# Internal Review: Operations

- Health and Safety
- Facilities
- Management Practices
  - Human Resources
  - Staff Development

# Internal Review: Administration

- Legal Entity
- Fiscal Responsibility
  - Purchasing
  - Budgeting
  - Audit
- Insured
- Personnel Policies and Procedures

# Internal Quality Assurance Do's and Don'ts

- Do: Involve Your Board
- Do: Include Your Residents
- Do: Include Your Staff
- Do: Provide Unbiased Reviews
- Do: Have an annual review of all Program Policies and Procedures by your Board and Executive Director.
- Do: Hold your agency to a higher standard than your funding sources.

# Internal Quality Assurance Do's and Don'ts

- Don't: Think of QA as a chore, it will make your job easier over time.
- Don't: Wait until the last minute, good QA is ongoing.
- Don't: Be satisfied with only one level of review.
- Don't: Do it alone.

# Program Services

- The agency provides case management services. In reviewing files, length of stay of resident should be considered when determining feasibility of compliance.

# Program Services

- The program intake/assessment process addresses the following categories: personal information; indication of homelessness or risk thereof; activities of daily living; psychosocial history; medical history; legal issues; financial issues; family information; and employment information.

# Program Services

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- The resident is re-assessed at least every six months using an Intake/Assessment form or agency equivalent.

# Program Services

- The resident is informed of resources in the community which can help them meet goals identified in the service plan and is assisted by the case manager in gaining access to services. The agency utilizes a defined process for documenting and tracking referrals.

# Program Services

- The case manager maintains communication where possible with the resident's care providers and service providers (e.g. physician, therapist/clinician, substance abuse counselor, clergy, DCF case worker etc).

# Program Services

- An exit interview is conducted when possible with residents leaving the program and a formal policy is adhered to regarding closing resident files.

# Program Services

- The program has clearly stated eligibility criteria for admission that are in compliance with its funding requirements. The program adheres to a written policy describing the admission process. Applicants should be informed in writing of grievance procedure should application be denied.

# Program Services

- The program adheres to a written policy defining the terms and procedures for discharging a resident with a report that outlines the reason(s) for discharge and other relevant information.

# Program Services

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The agency adheres to a policy identifying resident's rights while in the program and specifying grievance procedures for addressing reported violation of such rights.

# Program Services

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- The program has a communications system in place to facilitate information exchange between staff across shifts and/or days.

# Program Services

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- The agency has a comprehensive client manual and means of non-punitive client communications with staff.

# Health and Safety

- The program complies with the federal Department of Labor Occupational Safety and Health Administration (OSHA) "Enforcement Procedures for the Occupational Exposure to Blood-Borne Pathogen Standards", as set forth in 29 CFR 1910.1030

# Health and Safety

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- The program facilities, including offices, are in compliance with all state and local health, fire and building codes (HUD requirement)

# Health and Safety

- Program adheres to a policy and procedure for filing and follow-up of incident reports for residents, staff and visitors.
- The program adheres to a written policy and procedure regarding medical emergencies that arise with residents, staff or visitors.

# Health and Safety

- The program (a) adheres to a policy and procedure of annual testing for Tuberculosis of all program staff; (b) offers immunizations of Hepatitis B to all program staff; and (c) has protocols for educating residents about health issues including but not limited to Tuberculosis, Hepatitis B and C. OSHA regulation:- CDC recommends testing employees who are at risk of exposure in workplace.

# Administration

- The agency is a legal entity, has non-profit status, has a governing authority that meets regularly and keeps a record of meetings and has by-laws.
- The agency is a fiscally responsible entity.

# Administration

- The program has the following insurance coverage: workers' compensation; vehicle liability; bodily injury liability; employee disability coverage and any other coverage required by funding sources or pertaining to the type of program.

# Administration

- The agency provides a comprehensive orientation for new employees that covers special skills needed for successful interaction, review of policies and procedures, information and available community resources, and OSHA recommendations

# Administration

- The agency has a personnel/employee handbook.
- The program adheres to a policy and procedure addressing volunteer training and orientation that includes all pertinent information related to the program's operations as well as the roles, responsibilities and parameters of volunteerism.

# RENEWAL Updates

- **SuperNofa will be released in February.**
- **All renewal applications and critical reviews will be due March 31<sup>st</sup> to the Standards and Evaluation Committee.**
- **Internal Quality Assurance is a required standard of your agency's critical review submission.**

# Internal Quality Assurance

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# QUESTIONS?