I. PURPOSE

To provide guidance on a quality management program implemented by the facility nurse manager/health authority to evaluate defined data, which shall result in more effective access, improved quality of care, and better utilization of resources.

II. POLICY

(a) The nurse manager shall conduct monthly quality control monitoring.

(b) The collected data shall be trended and analyzed and reported to the Warden/designee at a monthly Multidisciplinary Committee meeting and to the Regional clinical chain of command.

(c) The nurse manager shall develop and document a corrective action plan that identifies measures implemented to address and resolve findings/problems/concerns that indicate performance goals, and/or policy and procedure were not met.

(d) The corrective action plan shall be shared with the facility nursing staff, the Warden/designee and with the multidisciplinary team.

III. PROCEDURE

(a) Health and Wellness Director of Nursing shall identify activities and processes to monitor annually and as needed.

(1) Performance improvement, risk management data, newly identified and changes in community standards may be used to identify quality control monitoring activities.

(2) The nursing leadership team shall review and establish quality control monitors
annually and as needed.

(b) The Nurse Manager shall involve staff on all shifts to assist in monitoring.

(c) The Nurse Manager/designee shall gather information from the quality control monitoring, complete the quality control monitoring checklist, and submit via the N Drive to the Regional Assistant Director of Nursing/designee or the facility Director of Nursing.

(d) Regional Assistant Directors of Nursing and Inpatient Directors of Nursing shall be responsible for reviewing and trending data for their facilities. Trends shall be reported to the Health and Wellness Director of Nursing.

(e) The nurse manager of the facility shall:

1. Implement a tracking system for monitoring nursing licenses and nurse assistant listings to ensure certifications and licenses are current.

2. Ensure patient’s health care records are quality checked in accordance with guidance provided by the Health and Wellness Director of Nursing.

3. Ensure emergency response equipment/supplies are located in patient care areas and are checked monthly and after each use.

4. Implement a tracking system to monitor staff compliance with Basic Life Support (BLS) and AED training.

5. Develop the facility standing operating procedures (SOPs), and review and revise them annually and as needed.

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Todd E. Ishee
Commissioner of Prisons