

	State of Indiana Indiana Department of Correction Division of Youth Services	Effective Date 4/1/2022	Page 1 of 3	Number 2.25Y
HEALTH CARE SERVICES DIRECTIVE-YOUTH SERVICES Manual of Policies and Procedures				

Title CONTINUOUS QUALITY IMPROVEMENT PROGRAM (CQI)
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Legal References (includes but is not limited to) IC 11-8-2-5	Related Policies/Procedures (includes but is not limited to) 01-02-101	Other References (includes but is not limited to) National Correctional Healthcare Standards
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I. PURPOSE:

This Health Care Services Directive (HCSD) establishes guidelines for facility and Central Office Continuous Quality Improvement (CQI) Programs.

II. PROCEDURES:

A. CQI monitors and improves health care delivery internally by:

1. Examining the work and establishing appropriate thresholds;
2. Identifying successes and opportunities for improvement;
3. Plan improvements;
4. Implement improvements; and,
5. Reexamine the work to determine whether the changes have had the desired effects.

This process, repeated in an integrative fashion, constitutes the CQI cycle. The CQI program must include both a process and outcome quality improvement studies.

B. CQI activities are held strictly confidential. The CQI product may not be released outside the CQI process, including discovery during lawsuits, without review by legal counsel. CQI products may not be used in personnel actions, although it may be used to trigger additional reviews.

C. The Health Services Division in Central Office shall establish a CQI Committee chaired by a CQI Director. This Committee shall include representatives from all major disciplines operating at the State-wide level and shall meet monthly. The Committee shall guide and provide oversight

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to the facility level CQI programs, and shall conduct or coordinate CQI activities that span multiple facilities.

- D. The CQI Director shall maintain confidential minutes of CQI meetings.
- E. Each facility shall establish a CQI Committee that shall be responsible for site-specific CQI activities as summarized in “A” above and including:
 - 1. When there are multiple Health Services disciplines on site, the CQI program shall include a multidisciplinary CQI Committee;
 - 2. Collecting, trending, and analyzing of data combined with planning, intervening, and reassessing;
 - 3. Evaluating defined data, which will result in more effective access;
 - 4. On-site monitoring of Health Services outcomes on a regular basis through:
 - a. Chart reviews by the responsible physician or their designee;
 - b. Review of prescribing practices and administration of medication practices;
 - c. Systematic investigation of complaints and grievances; and,
 - d. Monitoring of corrective action plans.
 - 5. Reviewing all deaths in custody, suicides or suicide attempts, and illness outbreaks;
 - 6. Implementing measures to address and resolve important problems and concerns identified (corrective action plans);
 - 7. Re-evaluating problems or concerns to determine objectively whether the corrective measures have been effective and sustained the desired results;
 - 8. Incorporating findings of CQI/internal review activities into the facility’s educational and training activities;
 - 9. Maintaining appropriate records of CQI / internal review activities; and,

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10. Issuing a quarterly report to be provided to the Health Services Administrator (HSA) and the Warden of the findings of the CQI / internal review activities.

F. If an outside vendor participates in Health Services delivery at a facility and maintains a separate CQI process, the facility CQI Committee shall include review of pertinent portions of the Health Services vendor's CQI activities and must invite representation from the Health Services vendor to serve on its CQI Committee. If an outside vendor has a State-wide CQI process, representation may be invited to the Regional Office CQI Committee.

III. APPLICABILITY:

This HCSD is applicable to all facilities providing Health Services to youth.

signature on file

Kristen Dauss, MD
Chief Medical Officer

Date