

## **QUALITY ASSURANCE SURVEILLANCE PLAN**

**For:** Medical Services

**Contract Number:** VA255-11-RP-0460

**Contract Description:** Offsite Breast Care for Veteran Patients for the Kansas City MO VA Medical Center.

**Contractor's name:**

### **1. PURPOSE**

This Quality Assurance Surveillance Plan (QASP) provides a systematic method to evaluate performance for the stated contract. This QASP explains the following:

- What will be monitored?
- How will monitoring take place?
- Who will conduct the monitoring?
- How will monitoring efforts and results be documented?

This QASP does not detail how the contractor accomplishes the work. Rather, the QASP is created with the premise that the contractor is responsible for management and quality control actions to meet the terms of the contract. It is the Government's responsibility to be objective, fair, and consistent in evaluating performance.

This QASP is a "living document" and the Government may review and revise it on a regular basis. However, the Government shall coordinate changes with the contractor. Copies of the original QASP and revisions shall be provided to the contractor and Government officials implementing surveillance activities.

## **2. GOVERNMENT ROLES AND RESPONSIBILITIES**

The following personnel shall oversee and coordinate surveillance activities.

a. Contracting Officer (CO) - The CO shall ensure performance of all necessary actions for effective contracting, ensure compliance with the contract terms, and shall safeguard the interests of the United States in the contractual relationship. The CO shall also assure that the contractor receives impartial, fair, and equitable treatment under this contract. The CO is ultimately responsible for the final determination of the adequacy of the contractor's performance.

Assigned CO: William Webb

Organization or Agency: VA Heartland Network VISN 15

b. Contracting Officer's Technical Representative (COTR) - The COTR is responsible for technical administration of the contract and shall assure proper Government surveillance of the contractor's performance. The COTR shall keep a quality assurance file. The COTR is not empowered to make any contractual commitments or to authorize any contractual changes on the Government's behalf.

Assigned COTR: Renee Lindset

## **3. CONTRACTOR REPRESENTATIVES**

The following employees of the contractor serve as the contractor's program manager for this contract.

a. Program Manager –

b. Other Contractor Personnel –

## **4. PERFORMANCE STANDARDS**

Performance standards define desired services. The Government performs surveillance to determine if the contractor exceeds, meets or does not meet these standards.

The Quality Assurance requirements (Section A through P of the Performance Work Statement) include performance standards. The Government shall use these standards to determine contractor performance and shall compare contractor performance to the Acceptable Quality Level (AQL).

### PERFORMANCE STANDARDS MATRIX

<b>TASK</b>	<b>Performance Indicator</b>	<b>Performance Standard-Acceptable Quality Level (AQL)</b>	<b>Method of Surveillance</b>	<b>Incentive</b>
1. Clinical Information Return  PWS Location: A.5.h	Routine care and routine diagnostic testing: clinical information provided back to the authorizing VA medical center.	Within 3 days of the episode of care for normal results and 24 hours for abnormal results.  AQL = 100%	Chart audit as required by KCVA policy. Responsibility: Women Veterans Program Manager or designee	Positive Performance Appraisal
2. Contractor pathologist to notify VA.  PWS Location: N, O	New diagnosis of malignancy and requests for slides and tissue samples.	Within 1 day for malignancy and 5 days for slides and tissue blocks.  AQL = 100%	Chart audit as required by KCVA policy. Responsibility: Women Veterans Program Manager or designee	Positive Performance Appraisal

<b>TASK</b>	<b>Performance Indicator</b>	<b>Performance Standard- Acceptable Quality Level (AQL)</b>	<b>Method of Surveillance</b>	<b>Incentive</b>
3. patient Information notification  PWS Location: F.4.	Routine care and routine diagnostic testing: lay report to patients within stated guidelines.	Within 30 days for normal and 5 days for abnormal results.  AQL = 100%	Patient survey Responsibility: Women Veterans Program Manager or designee	Positive Performance Appraisal
4.Certification and Credentials  PWS Location: A.1-3	Documentation of appropriate certification credentials	FDA, MQSA, and ACR certifications required.  AQL = 100%	Facility-specific verification via <a href="http://www.fda.gov/DDR/MAMMOGRAPHY/certified.html">http://www.fda.gov/DDR/MAMMOGRAPHY/certified.html</a>	Positive Performance Appraisal
5. Regulatory Documentation  PWS Location: A.5.a. – d.	Interpreting physician (s) appropriately certified and credentials	MQSA, and ACR certifications required.  AQL = 100%	Physician-specific verification via: <a href="http://www.fda.gov/DDR/MAMMOGRAPHY/certified.html">http://www.fda.gov/DDR/MAMMOGRAPHY/certified.html</a>	Positive Performance Appraisal

## 5. INCENTIVES

The Government shall use past performance ratings as an incentive. Incentives shall be based on meeting, or failing to meet performance standards. Failure to meet required standards may result in a negative past performance rating or termination of the contract.

## **6. METHODS OF QA SURVEILLANCE**

Various methods exist to monitor performance. The COTR shall use the surveillance methods listed below in the administration of this QASP.

Review of and inspection of reports provided. Review of Progress Notes; Review of Patient Appointments; Review of patient complaints
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a. RANDOM SAMPLING. (Designed to evaluate performance by randomly selecting and inspecting a sample of cases.

b. 100% INSPECTION. (Evaluates all reports provided.)

Tasks: 1 – 4.

## **7. RATINGS**

Metrics and methods are designed to determine if performance exceeds, meets, or does not meet a given standard and acceptable quality level. A rating scale shall be used to determine a positive, neutral, or negative outcome. The following ratings shall be used:

Exceeds Standards/Meets Standards/Below Standards
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## **8. DOCUMENTING PERFORMANCE**

a. ACCEPTABLE PERFORMANCE

The Government shall document positive performance. Any report may become a part of the supporting documentation for any contractual action.

#### **b. UNACCEPTABLE PERFORMANCE**

When unacceptable performance occurs, the COTR shall inform the contractor and the responsible Contracting Officer. This will normally be in writing unless circumstances necessitate verbal communication. In any case the COTR shall document the discussion and place it in the COTR file.

When the COTR determines formal written communication is required, the COTR shall prepare a Contract Discrepancy Report (CDR), and present it to the contractor's program manager as well as the responsible Contracting Officer.

The contractor shall acknowledge receipt of the CDR in writing. The CDR will specify if the contractor is required to prepare a corrective action plan to document how the contractor shall correct the unacceptable performance and avoid a recurrence. The CDR will also state how long after receipt the contractor has to present this corrective action plan to the COTR and the responsible Contracting Officer. The Government shall review the contractor's corrective action plan to determine acceptability.

Any CDRs may become a part of the supporting documentation for any contractual action deemed necessary by the CO.

### **9. FREQUENCY OF MEASUREMENT**

#### **a. Frequency of Measurement.**

During contract performance, the COTR will periodically analyze whether the negotiated frequency of surveillance is appropriate for the work being performed.

#### **b. Frequency of Performance Assessment Meetings.**

The COTR shall meet with the contractor when necessary to assess performance and shall provide a written assessment.

After award of the contract, both the contractor's Program Manager and the COTR shall sign this document.

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Signature – Contractor Program Manager

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Signature – Contracting Officer's Technical Representative