

Quality Assurance Surveillance Plan (QASP) - Mankato Location

Outpatient Site of Care Service

The contractor shall be evaluated in accordance with the following:

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 monitoring will take place.
- Who will conduct the monitoring?
- How monitoring efforts and results will 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 through contract modification. 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: Sandra McAnany

Organization or Agency: Department of Veterans Affairs

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

Assigned COR: Rick Pope

3. CONTRACTOR REPRESENTATIVES

The following employee(s) of the contractor serve as the contractor's program manager(s) for this contract.

Primary:

Alternate:

4. PERFORMANCE STANDARDS

The contractor is responsible for performance of ALL terms and conditions of the contract. CORs will provide contract progress reports quarterly to the CO reflecting performance on this plan and all other aspects of the resultant contract. The performance standards outlined in this QASP shall be used to determine the level of contractor performance in the elements defined.

Performance standards define desired services. The Government performs surveillance to determine the level of Contractor performance to these standards.

The Performance Requirements are listed below in Section 6. The Government shall use these standards to determine contractor performance and shall compare contractor performance to the standard and assign a rating. At the end of the performance period, these ratings will be used, in part, to establish the past performance of the contractor on the contract.

5. INCENTIVES/DEDUCTS

The Government shall use past performance as incentives. Incentives shall be based on exceeding, meeting, or not meeting performance standards (if you include any monetary incentives, this requires approval through the Department's SPE).

6. METHODS OF QA SURVEILLANCE

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

a. DIRECT OBSERVATION. 100% surveillance: "Method not applicable"

b. PERIODIC INSPECTION. Inspections scheduled and reported quarterly per COR delegation or as needed. Periodic Inspection audit of VHA Performance Measure Report and PACT Dashboard VA will monitor and report progress quarterly (non-cumulative) with a sampling of 10 patient records (4.7.2 & 4.7.3 & 4.7.4)

c. VALIDATED USER/CUSTOMER COMPLAINTS. "Method not applicable".

d. RANDOM SAMPLING. Random Sampling VA will monitor using Electronic report using data from VA VISTA/CPRS system. VA will monitor progress weekly thru automated verification and/or documentation provided by Contractor, with a sampling of 10 patient records. (4.7.1, 4.7.5, 4.7.6, 4.7.7, 4.7.8, 4.7.9, 4.7.10, 4.7.11, 4.7.12, 4.7.13, 4.7.14, 4.7.15, 4.7.16 and 4.7.17)

Measure	PWS Reference	Performance Requirement	Standard	Acceptable Quality Level	Surveillance Method	Frequency
CLINICAL REMINDERS	4.7.1.	VISTA/CPRS will automatically remind providers to complete the following clinical reminders during patients visits: -Alcohol Use Screen -Positive AUDIT-C Needs Evaluation -Depression Screening -Evaluation of positive PTSD -Tobacco Counseling by provider FY XX -Tobacco Counseling FY XX -Iraq and Afghanistan Post-	100% Proper documentation and completion of all clinical reminders as they appear during a patient's visit.	90% completion of clinical reminders each month.	VA will monitor progress weekly through automated reports (EPRP Reviews, Clinical Reminders Reports). Periodic Sampling VA will monitor using Electronic report using data from VA VISTA/CPRS system.	VA will send these weekly reports to the contractor to notify them to their current performance.

		Deployment Screening -TBI Screening -Influenza Immunization -Pneumovax -Colorectal Ca Screening -FOBT Positive F/U -Diabetes Eye Exam -Diabetes Foot Exam -Mammogram Screening -Pap Smear Screening				
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Measure	PWS Reference	Performance Requirement	Standard	Acceptable Quality Level	Surveillance Method	Frequency
NEW PC PATIENT WAIT TIME (PC 14)	4.7.2	All patients requesting an appointment for any clinic must receive an appointment in a timely manner.	The Contractor shall schedule routine new patient appointments within thirty (30) calendar days of Primary Care request.	99.7% monthly; New PC appointments completed no later than thirty (30) days.	Monthly; VHA SAIL Report http://reports2.vssc.med.va.gov/reportserver?%2fMgmtReports%2fVATR%2fSAIL_Prod%2fSAIL&rs:Command=Renderr , Periodic Sampling VA will monitor using Electronic report using data from VA VISTA/CPRS system.	Monthly; VA will monitor using VHA SAIL Report, electronic report using data from VISTA/CPRS. Contractor can check status of their performance by running reports in VISTA/CPRS as frequently as needed.
ESTABLISHED PC PATIENT WAIT TIME (PC12)	4.7.3.	Established PC patient Prospective Wait Times using desired date completed within thirty (30) days of requested date.	Established PC Patient primary care appointments completed within thirty (30) days of requested date.	94% monthly; established PC appointments completed no later than thirty (30) days.	VHA SAIL Report http://reports2.vssc.med.va.gov/reportserver?%2fMgmtReports%2fVATR%2fSAIL_Prod%2fSAIL&rs:Command=Renderr , Periodic	VA will monitor and report progress Quarterly (non-cumulative) Monthly; VA will monitor using VHA SAIL Report,

					Sampling VA will monitor using Electronic report using data from VA VISTA/CPRS system.	electronic report using data from VISTA/CPRS as frequently as needed.
SAME DAY APPOINTMENTS WITH PRIMARY CARE PROVIDER (PCP) [PACT 7]	4.7.4	Same day appointments provided with PCP.	70% completion of same day primary care appointments with PCP.	48% completion of same day primary care appointments with PCP.	Periodic Inspection audit of VHA Performance Measure Report and PACT Compass.	VA will monitor and report progress Quarterly (non-cumulative).

Measure	PWS Reference	Performance Requirement	Standard	Acceptable Quality Level	Surveillance Method	Frequency
CLINICAL ENCOUNTERS	4.7.5	Providers must complete proper documentation for each patient visit.	100% Documentation must be complete for all fields including whether or not the patient is service connected. The CPT and provider codes must match and codes must accurately reflect complexity of visit. Complete documentation must be completed before the 18th of each month.	99.9% completion of clinical encounters each month.	Random Sampling (auditing) VA will monitor using Electronic report using data from VA VISTA/CPRS system.	VA will monitor progress weekly through automated reports. VA will send these weekly reports to the contractor to notify them to their current performance.

PHARMACY	4.7.6.	Contractor shall submit a non-formulary and restricted drug request in CPRS using the PBM consult option. Contractor will be evaluated on acceptable quality level depicted below.	100% (zero disapproval ratings for non-formulary and restricted drug requests quarterly).	90% (no more than 10% disapproval ratings for non-formulary and restricted drug requests quarterly).	Periodic Sampling VA will monitor using Electronic report using data from VA VISTA/CPRS system.	VA will monitor progress monthly through automated reports. VA will send these monthly status reports to the contractor to notify them to their current performance.
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Measure	PWS Reference	Performance Requirement	Standard	Acceptable Quality Level	Surveillance Method	Frequency
PHARMACY NEW DRUG ORDER REQUESTS	4.7.7	Contractor shall submit new drug orders through CPRS to VA.	100% The contractor shall ensure that all new drug order requests follow all VA prescribing guidelines. This is including but not limited to ensuring all appropriate labs have been previously ordered and that the order is not a non-formulary drug.	95% of new drug order requests follow all VA prescribing guidelines. This is including but not limited to ensuring all appropriate labs have been previously ordered and that the order is not a non-formulary drug.	Periodic Sampling VA will monitor using Electronic report using data from VA VISTA/CPRS system.	VA will monitor progress quarterly through automated reports. VA will send monthly status reports to the contractor to notify them to their current performance.

Measure	PWS Reference	Performance Requirement	Standard	Acceptable Quality Level	Surveillance Method	Frequency
PACT PATIENTS ENROLLED IN HOME TELEHEALTH (HT) [PACT 13]	4.7.8	Contractor shall maintain a specific number of vested patients enrolled in HT.	Contractor to maintain 1.6% of required vested patients in HT.	1.2% of required vested patients enrolled in HT.	VA will monitor using Electronic report using data from Performance Measure Report: T21, Quality and PACT Dashboard.	VA will monitor progress quarterly (non-cumulative) through automated reports.
PRIMARY CARE PATIENTS IN MENTAL HEALTH INTEGRATION (PCMHI) [PACT 15]	4.7.9	Contractor reports PCMHI Penetration that uses patients assigned to a PACT team as the cohort (instead of core uniques with a primary care encounter).	Contractor to maintain 6% of required vested patients in PCMHI.	Contractor to maintain 4% of required vested patients in PCMHI.	VA will monitor using Electronic report using data from Performance Measure Report: T21, Quality and PACT Dashboard.	VA will monitor progress quarterly (non-cumulative) through automated reports.

Measure	PWS Reference	Performance Requirement	Standard	Acceptable Quality Level	Surveillance Method	Frequency
RATIO OF NON-TRADITIONAL ENCOUNTERS [PACT 16]	4.7.10	Contractor reports the sum of all PC Telephone encounters added to the sum of all PC Group Encounters added to the sum of all incoming and outgoing secure messages as the numerator.	Contractor shall maintain at least 20% in the appropriate ratio of non-traditional encounters.	Contractor shall maintain at least 12% in the appropriate ratio of non-traditional encounters.	VA will monitor using Electronic report using data from Performance Measure Report: T21, Quality and PACT Dashboard.	VA will monitor progress quarterly (non-cumulative) through automated reports.
POST DISCHARGE CONTACT BY PACT TEAM [PACT 17]	4.7.11	Number of discharges with follow-up contact by a member of the assigned PACT Team within two business days of discharge.	Contractor assigned PACT Team member shall contact at least 75% of patients within two business days of discharge.	Contractor assigned PACT Team member shall contact at least 40% of patients within two business days of discharge.	VA will monitor using Electronic report using data from Performance Measure Report: T21, Quality and PACT Dashboard.	VA will monitor progress quarterly (non-cumulative) through automated reports.

PACT STAFFING RATIO [PACT 18]	4.7.12	Percent of Divisions Meeting Staffing Ratio of 3:1 - (instead of the avg. ratio of staff per PC provider).	Contractor shall meet PACT Division Staffing Ratio of 3:1 - (instead of the avg. ratio of staff per PC provider) at least 75% of the time.	Contractor shall meet PACT Division Staffing Ratio of 3:1 - (instead of the avg. ratio of staff per PC provider) at least 50% of the time.	VA will monitor using Electronic report using data from Performance Measure Report: T21, Quality and PACT Dashboard.	VA will monitor progress quarterly (non-cumulative) through automated reports.
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Measure	PWS Reference	Performance Requirement	Standard	Acceptable Quality Level	Surveillance Method	Frequency
PATIENT SATISFACTION WITH ACCESS MEASURE COMPOSITE [PCMH 4; SHEP]	4.7.13	Composite % Based on 2 Questions: Get an urgent care appointment as soon as needed; Get a routine care appointment as soon as needed.	At least 55%	53.8%	VHA SAIL Report or Patient Experience Report.	VA will monitor progress quarterly (non-cumulative) through automated reports.
APPOINTMENT CANCELLATIONS	4.7.14	Contractor shall not unnecessarily cancel patient appointments and will reschedule cancelled appointments in a timely manner. Any appointment cancelled needs to be rescheduled within 2 weeks. This means the	100% of patients seen within 2 weeks of the original cancelled appointment date.	100% of patients seen within 2 weeks of the original cancelled appointment date.	Periodic Sampling VA will monitor using Electronic report using data from VA VISTA/CPRS system.	VA will monitor progress through quarterly audits using automated reports. Contractor can check the status of their performance by running reports in VISTA/CPRS system.

		patients must be seen within 2 weeks of the original cancelled appointment date.				
PRIMARY CARE PROVIDER CONTINUITY (PACT 8)	4.7.15	Patients see same PCP for appointments.	77% of appointments provided with assigned PCP.	65% of appointments provided with assigned PCP.	VA will monitor using Electronic report using data from Performance Measure Report: T21, Quality and PACT Dashboard.	VA will monitor progress quarterly (non-cumulative) through automated reports.
PCMH 4: SHEP PCMHQ38: DISCUSSED DIFFICULTIES IN CARING FOR SELF	4.7.16	Weighted number of outpatients responding "yes" to PCMH Q38	PACT Improvement Data on Compass & Dashboard	Reported monthly with quarterly and YTD rollup PACT Dashboard Target: Floor 42% Target 55%	VHA Performance Measure Report	VA will monitor progress quarterly (non-cumulative) through automated reports.

7. Ratings:

Metrics and methods are designed to determine rating for a given standard and acceptable quality level. The following ratings shall be used:

EXCEPTIONAL:	<p>Performance meets contractual requirements and exceeds many to the Government's benefit. The contractual performance of the element or sub-element being assessed was accomplished with few minor problems for which corrective actions taken by the contractor were highly effective.</p> <p>Note: To justify an Exceptional rating, you should identify <u>multiple</u> significant events in each category and state how it was a benefit to the GOVERNMENT. However a singular event could be of such magnitude that it alone constitutes an Exceptional rating. Also there should have been NO significant weaknesses identified.</p>
VERY GOOD:	<p>Performance meets contractual requirements and exceeds some to the Government's benefit. The contractual performance of the element or sub-element being assessed was accomplished with some minor problems for which corrective actions taken by the contractor were effective.</p> <p>Note: To justify a Very Good rating, you should identify a significant event in each category and state how it was a benefit to the GOVERNMENT. Also there should have been NO significant weaknesses identified.</p>
SATISFACTORY:	<p>Performance meets contractual requirements. The contractual performance of the element or sub-element contains some minor problems for which corrective actions taken by the contractor appear or were satisfactory.</p> <p>Note: To justify a Satisfactory rating, there should have been only minor problems, or major problems the contractor recovered from without impact to the contract. Also there should have been NO significant weaknesses identified.</p>
MARGINAL:	<p>Performance does not meet some contractual requirements. The contractual performance of the element or sub-element being assessed reflects a serious problem for which the contractor has not yet identified corrective actions. The contractor's proposed actions appear only marginally effective or were not fully implemented.</p> <p>Note: To justify Marginal performance, you should identify a significant event in each category that the contractor had trouble overcoming and state how it impacted the GOVERNMENT. A Marginal rating should be supported by referencing the management tool that notified the contractor of the contractual deficiency (e.g. Management, Quality, Safety or Environmental Deficiency Report or letter).</p>
UNSATISFACTORY:	<p>Performance does not meet most contractual requirements and recovery is not likely in a timely manner. The contractual performance of the element or sub-element being assessed contains serious problem(s) for which the contractor's corrective actions appear or were ineffective.</p> <p>Note: To justify an Unsatisfactory rating, you should identify multiple significant events in each category that the contractor had trouble overcoming and state how it impacted the GOVERNMENT. However, a singular problem could be of such serious magnitude that it alone constitutes an unsatisfactory rating. An Unsatisfactory rating should be supported by referencing the management tools used to notify the contractor of the contractual deficiencies (e.g. Management, Quality, Safety or Environmental Deficiency</p>

	<i>Reports, or letters).</i>
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8. DOCUMENTING PERFORMANCE

a. The Government shall document positive and/or negative performance. Any report may become a part of the supporting documentation for any contractual action and preparing annual past performance using CONTRACTOR PERFORMANCE ASSESSMENT REPORT (CPAR).

b. If contractor performance does not meet the Acceptable Quality level, the CO shall inform the contractor. This will normally be in writing unless circumstances necessitate verbal communication. In any case the CO shall document the discussion and place it in the contract file. When the COR and the CO determines formal written communication is required, the COR shall prepare a Contract Discrepancy Report (CDR), and present it to CO. The CO will in turn review and will present to the contractor's program manager for corrective action.

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 CO. The Government shall review the contractor's corrective action plan to determine acceptability. The CO shall also assure that the contractor receives impartial, fair, and equitable treatment. The CO is ultimately responsible for the final determination of the adequacy of the contractor's performance and the acceptability of the Contractor's corrective action plan.

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.

The frequency of measurement is defined in the contract or otherwise in this document. The government (COR or CO) will periodically analyze whether the frequency of surveillance is appropriate for the work being performed.

b. Frequency of Performance Reporting.

The COR shall communicate with the Contractor and will provide written reports to the Contracting Officer quarterly (or as outlined in the contract or COR delegation) to review Contractor performance.

10. COR AND CONTRACTOR ACKNOWLEDGEMENT OF QASP

SIGNED:

COR NAME/TITLE DATE

SIGNED:

CONTRACTOR NAME/TITLE DATE