

## **D.3 QUALITY ASSURANCE SURVEILLANCE PLAN**

### Home Oxygen Bay Pines VA Healthcare System

#### **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 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 Administrative CO: Mark Cline

Assigned CO: Brett Cook

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: Stacey Hubbard, Prosthetic Representative

#### **3. CONTRACTOR REPRESENTATIVES**

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

a. Program Manager – Undetermined

#### 4. PERFORMANCE REQUIREMENT STANDARDS

Description	PSW Reference	Numerator and Denominator	Quantity of Surveillance	AQL	Method of Surveillance
Emergency Calls deliver by 6hrs of call place	9.1.1	Number (N)=# of VA patients (pts) delivered	Randomly pull 5% of files	100%	Random Sampling
Patient Travel memos	9.1.2	N=# of memos that will hold the veterans financially responsible for GFP non-returned	Randomly pull 10% of files	100%	Random Sampling
Audit of VA patient (pts) satisfaction to be issue specific, including comments and complaints	9.1.3	N=# of VA pts satisfied with contractor's home oxygen. Satisfaction survey developed by vendor, but approved by VA. N=# of VA patients audited for pt satisfaction	Random survey results quarterly	90%	100% Review
Audit of VA pt records for proof of receipt of equipment installation within 6hrs of notification	9.1.4	N=# of VA pt files with documentation of pt and/or caregiver signing for receipt of DME equipment. N=# of VA pts receiving DME equipment.	Randomly pull 10% of files	95%	Random Sampling
Audit of all accidents, malfunctions, injuries, deaths and sentinel events associated with the provisions, delivery and use of home oxygen equipment.	9.1.5	N=# of VA pts who had an incident related to DME equipment to include fires, accidents, malfunctions, injuries, deaths, and sentinel events. N=# of VA pts receiving DME equipment	Randomly pull 10% of files	100%	100% Review
Home Oxygen Welcome Packet and Initial Care plan	9.1.6	N=# of patients who received the packet the first visit. Initial Care plan assessment completed within 7 days. Assessment of veterans' home in patient's folder.	Randomly pull 10% of files	95%	Random Sampling
Home Oxygen Therapy Program checklist	9.1.7	N=# of patients who received the Initial and Reassessments checklist should be in file	Randomly pull 10% of files	95%	Random Sampling
Audit of VA patient treatment files for proper documentation of pt education	9.1.8	N=# of VA pt files with doc of pt and caregiver education to include return demonstration of equipment use equip. N=# of VA pt files	Randomly pull 10% of files	90%	Random Sampling
Audit of warehouse and delivery vehicles, employees for compliance with infection control protocols	9.1.9	N=# of deficiencies observed in infection control protocol in warehouse and delivery vehicles, employees. N=# observed infection control protocols. N=# Employee vaccination files	Randomly pull 10% of files	100%	Periodic Inspection
Delivery and Set-ups	9.1.10	N=# of patients discharge and delivery done within 5hrs. New delivery within 24hrs of order and contractor notify the veteran within 2hrs.	Randomly pull 5% of files	100%	Random Sampling

## **5. 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. PERIODIC INSPECTION. (Evaluates outcomes on a periodic basis. Inspections may be scheduled monthly or unscheduled, as required.)
- b. USER SURVEY. (Combines elements of validated user complaints and random sampling. Random survey is conducted to solicit user satisfaction. May also generate inspections and sampling.)
- c. VALIDATED USER/CUSTOMER COMPLAINTS. (Relies on the patient to identify deficiencies. Complaints are then investigated and validated.)
- d. 100% INSPECTION. (Evaluates all outcomes.)
- e. RANDOM SAMPLING. (Designed to evaluate performance by randomly selecting and inspecting a sample of cases.)
- f. Progress or status meetings. Quarterly meetings with Contractor as needed.
- g. Analysis of contractor's progress reports. (Evaluate cost, schedule, etc.)

## **6. 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:

## **7. DOCUMENTING PERFORMANCE**

### **a. ACCEPTABLE PERFORMANCE**

The Government shall document positive performance.

### **b. UNACCEPTABLE PERFORMANCE**

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

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

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 COR. 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.

## **8. FREQUENCY OF MEASUREMENT**

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

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

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

The COR shall meet with the contractor quarterly to assess performance and shall provide a written assessment.

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Signature – Contracting Officer

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Signature – Contracting Officer's Representative

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Signature – Contractor Representative