

Quality Assurance Surveillance Plan (QASP)

DES MOINES VAMC Gastroenterology Services

The contractor will 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.

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: Shea Colby
Contracting Officer
Network Contracting Office 23
316 Robert Street N Suite 506
Saint Paul, MN 22101
Phone: 651-293-3017
Fax: 651-293-3060
e-mail: shea.colby@va.com

Organization or Agency: Department of Veterans Affairs

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: Joel Meredith
Respiratory Supervisor
VA Central Iowa Health Care Systems
3600 30th Street
Des Moines IA 50310

Phone: 515-699-4420
Fax: 515-699-4763
e-mail: joel.meredith@va.gov

Alternate COR: Bruce Hancock
Contract Liaison
VA Central Iowa Health Care Systems
3600 30th Street
Des Moines IA 50310
Phone: 515-323-1441
Fax: 515-699-5862
e-mail: bruce.hancock@va.gov

Alternate COR: Enrique Pérez
Contract Liaison
VA Central Iowa Health Care Systems
3600 30th Street
Des Moines IA 50310
Phone: 515-323-1448
Fax: 515-699-5862
e-mail: Enrique.perez2@va.gov

Organization or Agency: Department of Veterans Affairs

3. CONTRACTOR REPRESENTATIVES

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

Primary POC:

Name:

Title:

Address:

Phone:

Fax:

e-mail:

Alternate POC:

Name:

Title:

Address:

Phone:

Fax:

e-mail:

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. 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. Inspections scheduled and reported quarterly per COR delegation or as needed. Ten (10) randomly selected patient files will be reviewed per inspection period. All inspections and reports will be conducted in compliance with VA Privacy and Information security standards.)
- b) RANDOM SAMPLING. Ten (10) randomly selected patient files will be reviewed per quarter. All reviews and reports will be conducted in compliance with VA Privacy and Information security standards.)
- c) Evaluation in an ongoing basis by direct observation, peer review and chart audit: Focused Professional Practice Evaluation (FPPE), Moderate Sedation PPE, Specialty Med Outpatient PPE, and GI Hepatology Chart Review data.
- d) DIRECT OBSERVATION. Verification and/or documentation provided by Contractor. Contractor shall provide verification of licensing upon initiating contract to COR for contract physician(s). Contractor shall provide verification and documents on licensing, registration(s) and certification(s) for contract physician(s) shall be provided as they are renewed. Licensing and registration information is to be kept current. Contractor shall provide proof of training completion to VA.

6. QASP PERFORMANCE REPORT DATE: _____

Tailor to specific procurement consider the performance measures the VA may have for the service the procurement involves.

Measures	PWS Reference	Performance Requirement	Standard	Acceptable Quality Level	Surveillance Method	Met AQL/Did Not Meet AQL CPAR Rating/Add Comments
1 - Provider Quality Performance	4.5.4.1	All Contract Staff shall perform in accordance with clinical standards.	FPPE, Moderate Sedation PPE, Specialty Med Outpatient PPE, and GI Hepatology Chart Review Documentation for all (100%) staff providing services under the contract. All staff (100%) must meet documentation Standards.	100% Compliance, No Acceptable Deviation	Evaluation in an ongoing basis by direct observation, peer review and chart audit	Quarterly
2 - Qualifications of Key Personnel	4.5.4.2	Contractor's physician(s) and Nurse Practitioner(s) shall be Board Certified in accordance with American Board of Internal Medicine's Gastroenterology Standards.	All (100%) Contractor's physician(s) and Nurse Practitioner(s) are Board Certified.	100% Compliance, No Acceptable Deviation	Random Inspection of qualification documents	Quarterly
3 - Scope of Practice/Privileging	4.5.4.3.	All Contractor's Staff perform within their individual scopes of practice/privileging.	All Contractor's Staff (100%) perform within their scope of practice/privileges 100% of the time.	100% Compliance, No Acceptable Deviation	Random Inspection of records.	Quarterly
4 - Patient Access	4.5.4.4	The Contractor shall provide Contractor's Staff in accordance with the operating hours and VA clinical schedule in the PWS.	All (100%) Contractor's Staff are on-time and available to perform service.	Contractor's physician(s) is on-time and available to perform services 98% of the time.	Periodic Sampling of Time and Attendance Sheets	Quarterly
5 - Patient Safety	4.5.4.5.	Patient safety incidents shall to be reported using Patient Safety Report. All incidents reported immediately (within 24 hours).	All (100%) of patient safety incidents are reported using Patient Safety Report within 24 hours of incident.	100% Compliance, No Acceptable Deviation	Direct Observation	Quarterly

Measures	PWS Reference	Performance Requirement	Standard	Acceptable Quality Level	Surveillance Method	Met AQL/Did Not Meet AQL - CPAR Rating/Add Comments
6 - Maintains licensing, registration, and certification	4.5.4.6.	Updated Licensing, registration and certification shall be provided as they are renewed. Licensing and registration information kept current.	(100%) licensing, registration(s) and certification(s) for Contractor's physician(s) shall be provided as they are renewed. Licensing and registration information kept current.	100% licensing, registration(s), and certifications(s) for Contractor's physicians(s) shall be provided as they are renewed. Licensing and registration information must be kept current. No Acceptable Deviation	Periodic Sampling and Random Sampling	Quarterly
7 - Mandatory Training	4.5.4.7	Contractor shall complete all required training per VAMC policy.	All (100%) of required training is complete on time by Contractor's Staff.	100% Completion	Periodic Sampling	TMS Alerts as they must be renewed
8 - Privacy, Confidentiality and HIPAA	4.5.4.8	Contractor is aware of all laws, regulations, policies and procedures relating to Privacy, Confidentiality and HIPAA and complies with all standards Zero breaches of privacy or confidentiality.	All (100%) Contractor's Staff comply with all laws, regulations, policies and procedures relating to Privacy, Confidentiality and HIPAA.	100% Completion, No Acceptable Deviation	Periodic Sampling, Contractor shall provide evidence of annual training required by VAMC, reports violations per VA Directive 6500.6.	Quarterly
9 - Colonoscopy Specific Quality Measures	4.5.4.9	Contractor shall comply with VHA Directive 1015 relating to Colorectal Cancer Screening (CCS).	All (100%) Contractor's Staff comply with VHA Directive 1015. GI and Hepatology chart review documentation for all (100%) staff providing services under the contract. All staff (100%) must meet documentation standards.	100% Compliance, No Acceptable Deviation	Periodic inspection of records	Quarterly

The table below is a sample that can be tailored – note that the table must identify where in the PWS the standards are found for monitoring performance. Check the MSO Customer Resource Center for approved mandatory QASPs.

7. CPAR RATINGS ASSIGNED TO QASP ITEMS:

Metrics and methods are designed to determine rating for a given standard and acceptable quality level. The following ratings shall be used (Reference: CPARS User Manual <https://www.cpars.gov/pdfs/CPARS-Guidance.pdf> p. A2-1):

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 Reports, or letters).</p>

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 Report (CR), 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 CR in writing. The CR 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 CR will also state how long after receipt the contractor must 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 CRs may become a part of the supporting documentation for any contractual action deemed necessary by the CO. See Sample CR on the following page.

9. COR AND CONTRACTOR ACKNOWLEDGEMENT OF QASP

SIGNED:

COR NAME: Joel Meredith
TITLE: Respiratory Therapy Supervisor

DATE

SIGNED:

CONTRACTOR NAME:
TITLE:

DATE

CONTRACT REPORT				
1. CONTRACT NUMBER		2. REPORT NUMBER FOR THIS ISSUE		
3. TO: <i>(Contracting Officer)</i>		4. FROM: <i>(Name of COR)</i>		
5. DATES				
a. CR PREPARED	b. RETURNED BY CONTRACTOR:	c. ACTION COMPLETE		
6. Issue Identified <i>(Describe in detail. Include reference to PWS Directive; attach continuation sheet if necessary.)</i>				
7. SIGNATURE OF COR				Date:
8. SIGNATURE OF CONTRACTING OFFICER				Date:
9a. TO <i>(Contracting Officer)</i>		9a. FROM <i>(Contractor)</i>		
10. CONTRACTOR RESPONSE AS TO CAUSE AND ACTIONS TO PREVENT RECURRENCE. <i>(Cite applicable quality control program procedures or new procedures. Attach continuation sheet(s) if necessary.)</i>				
11. SIGNATURE OF CONTRACTOR REPRESENTATIVE				Date:
12. GOVERNMENT EVALUATION.				
13. GOVERNMENT ACTIONS				
14. CLOSE OUT				
	NAME	TITLE	SIGNATURE	DATE
CONTRACTOR NOTIFIED				
COR				
CONTRACTING OFFICER				