



QUALITY ASSURANCE POLICY



Table of Contents

I. PURPOSE	1
II. AUTHORITY	1
III. GOALS.....	1
IV. PROCEDURAL DIRECTIVES.....	1
A. QUALITY ASSURANCE REVIEW	1
B. ONGOING QUALITY ASSURANCE ACTIVITY.....	2



I. PURPOSE

The purpose of the Quality Assurance Policy is to identify a coordinated set of activities that will assure quality services are provided to all participants.

II. AUTHORITY

The Board of Directors will establish a QA/QI Committee to be responsible for the development and implementation of ABLED, Inc.'s Quality Assurance Process.

III. GOALS

The goals of the Quality Assurance Process are:

- A. Providing ongoing proactive internal review of the quality and individualization of services including determining whether adequate staff is always maintained to meet the needs of each participant.
- B. Identifying and correcting problems in a timely manner and on a provider-wide basis.
- C. Continuous quality review of the services provided.
- D. To assure that documentation of quality assurance activities will be provided which includes findings, recommendations, plans of action and follow-up if needed.
- E. To provide an annual review of quality assurance activities, with subsequent revision of the Quality Assurance Process as needed.
- F. Use of information from reviews, results, and recommendations to correct problems, improve services to participants supported and revise policies and procedures, if necessary.

IV. PROCEDURAL DIRECTIVES

A. QUALITY ASSURANCE REVIEW

- 1. The QA/QI Committee team will meet at least quarterly.
- 2. Consumer and family input will be gathered via surveys, contacts/interviews, memberships in ABLED, Inc. committees, etc.
- 3. Surveys will be reviewed as received and summarized quarterly for the Board of Directors.
- 4. Other items may be reviewed, such as attendance/time sheets, provision of service sheets, med forms, meeting minutes, etc.
- 5. Any concerns which need immediate attention will be made available at the time of the review.



6. The Committee will report quarterly findings to the Board of Directors.
7. The QA/QI Committees will develop a Plan of Action for the Quality Assurance Review items as directed by the Board of Directors.
8. The QA/QI Committee will conduct an onsite review of each participant's services at least annually.
9. Any member of the Board of Directors may request the Committee to evaluate the success and accuracy of the action plans or to have a participant's services reviewed.
10. When citations are identified in 2 or more area program State Certification Reviews within a 2-year time span, (one full certification cycle), the QA component will review and address needed action, such as, specific training, policy and procedure reviews or revisions, obtain additional information or assistance, etc.
11. The QA/QI Committee will review General Event Reports to identify any areas of concern.
12. The QA/QI Committee will prepare the Quarterly Provider Incident Report sent to DHHS DD Services.

B. ONGOING QUALITY ASSURANCE ACTIVITY

1. All staff are responsible for protecting and promoting the health, safety and well-being of the participants supported by ABLED, Inc. All issues (health, nutrition, abuse, neglect, participants' rights, etc.), must be constantly monitored. Any concerns noted by a staff member must be reported. The EVP Operations and the QA/QI Committee are responsible for on-going monitoring of services.
2. Staff will complete a monthly review of the progress of each participant.
3. Staff will complete and document Safety Procedures in Therap.
4. The staff nurse will review medication changes, medication incidents/errors, staff competencies, medication administration records (MARs), and consultation forms. The nurse will provide training and be available to address health-related issues.
5. The Rights Review Committee will review items as listed in the Right Review Committee Policy.
6. The Rights Review Committee will review General Event Reports concerning each participant on a quarterly basis and will identify possible concerns, patterns, and trends.
7. All ABLED, Inc. staff will be given the opportunity to provide input regarding their work with ABLED, Inc.
8. ABLED, Inc. will offer training on a variety of topics reflecting the needs of staff. ABLED, Inc. pays for CPR/First Aid and Med Administration training for staff currently working with participants.
9. ABLED, Inc. is monitored by the Nebraska Department of Health and Human Services, Nebraska State Fire Marshal, U.S. Department of Labor, and an independent auditing firm.



10. The Board of Directors will review policy changes at each quarterly meeting. The policies will be reviewed and/or updated at least annually.
11. ABLED, Inc. sends a quarterly newsletter to all interested parties which includes the opportunity to provide feedback and complete an anonymous survey. ABLED, Inc. will analyze the survey regarding satisfaction with services and to identify strengths and concerns.
12. ABLED, Inc. will solicit input from and provide information to participants supported by ABLED, Inc., in a variety of ways, including:
 - Participation in ABLED, Inc. committees.
 - Participation in conferences/training.
 - Individual and joint meetings with formal or informal conversations.
 - Group activities (e.g., picnics, bowling, exercise classes, etc.).
 - Posting of ABLED, Inc. or community events.
 - Periodic surveys.
 - Newsletters.
 - ABLED, Inc. website at www.abledinc.com.
13. Staff are encouraged to investigate, implement, and share information about best practices and emerging trends in the field of intellectual disabilities.