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PURPOSE:

The purpose of this Quality Program Policy (the "Policy") is to provide an overview of the Quality Program for Dallas County Hospital District, d/b/a Parkland Health & Hospital System and its controlled affiliates (collectively, "Parkland") and set expectations related to quality and safety, including performance improvement, infection prevention, patient safety and risk management and regulatory and accreditation responsibilities (collectively, "Quality").

SCOPE:

All Parkland Personnel, as defined herein. Officers, managers and other supervisors (collectively, "Supervisors") are expected to demonstrate and emphasize the importance of Quality, and develop in employees a sense of commitment to the spirit as well as the letter of this Policy. Supervisors are also expected to ensure that all other Parkland Personnel conform to the Policy when working for or on behalf of Parkland.

POLICY:

- Parkland is committed to ensuring safe, high quality care across the system, and to promoting a system-wide organizational culture focused on safety and just behavior, and individual and institutional acceptance of responsibility for operating in accordance with professionally recognized standards of care. In furtherance of this commitment, Parkland has established a Quality and Safety Program (the "Quality Program") and abides by the requirements of the Quality Program.
- 2. The Quality Program is a dynamic program that provides a flexible framework for adapting to the changing environment in which Parkland operates. It is continually evaluated by the Chief Quality and Safety Officer ("CQSO"), the Chief Medical Officer ("CMO"), the Executive Quality Committee ("EQC"), and the Board of Managers ("Board") to ensure that it functions as intended, serves the purpose for which it has been designed, and enables Parkland to meet its high standards and commitment to Quality.
- 3. The Quality Program encompasses the following elements:



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A. Program Oversight and Administration

- Parkland has appointed a CQSO who is charged with operating and monitoring the Quality Program. The CQSO has a direct reporting relationship to Parkland's Board and the CMO. The CQSO has the ability to engage outside resources as deemed necessary. The CQSO regularly informs the CMO, the EQC, the Board and applicable stakeholders on the Quality Program and any related risks, concerns, issues or adverse safety events that may come to the attention of the CQSO.
- 2) Parkland has established the EQC to advise and assist the CQSO in the effective operation of the Quality Program.
- 3) The Board has established the Quality of Care and Patient Safety Committee ("QBOM") as a standing committee of the Board to assist the Board in its oversight of the operations and efficacy of the Quality Program.
- B. Written Standards, Policies and Procedures
 - Parkland maintains and annually updates a Quality Assurance and Performance Improvement Plan (the "QAPI Plan") that articulates Parkland's commitment to continuous quality improvement and advancement of patient safety. The QAPI Plan is a cornerstone of the Quality Program and outlines the procedures through which the annual work plan is executed.
 - 2) Parkland has developed and will continue to develop policies and procedures that capture Parkland's commitment to Quality, effectively address Parkland's Quality obligations and account for specific areas of Quality-related requirements relevant to healthcare organizations. These policies and procedures will be periodically reviewed, revised as warranted and made available to Parkland Personnel.
 - 3) Adherence to Quality-related expectations is an element in evaluating the performance of all Parkland employees.
- C. Training and Education
 - 1) Parkland has developed and implemented regularly scheduled, comprehensive Quality-related training and education for all applicable



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Parkland Personnel. The Quality and Safety Operations ("QSO") Department will develop and oversee an annual Quality training plan, which may be executed by various Parkland departments, including Nursing and the Medical Staff Office.

- Quality-related training and education will incorporate learnings from safety events, auditing and monitoring activities and RCA/ACAs, and will be targeted, when necessary, by function and topic to maximize their effectiveness.
- Satisfactory participation in and completion of required training is a condition of continued employment. Failure to comply with training requirements will result in disciplinary action, up to and including termination.
- D. Risk Assessment, Auditing and Monitoring
 - As part of the development of the QAPI Plan, Parkland conducts periodic, but no less than annual, risk assessments to evaluate Quality-related risks that have the potential for clinical, legal, financial or regulatory impact, and implements appropriate mitigation strategies, as warranted.
 - 2) Parkland conducts regular auditing and monitoring program as part of Quality Program, including, but not limited to, safety event trends, regulatory tracers and infection prevention, and commissions external audits or mock surveys by independent third parties as needed, but no less than every three (3) years.
- E. Reporting Obligations
 - All Parkland Personnel are required to report adverse events and safety concerns, including suspected or potential violations of applicable laws and regulations, professionally recognized standards of care and Parkland policies and procedures. Reporting channels include the Safety Center as well as the Parkland Integrity Line, which allows for anonymous reporting.
 - 2) The obligation to report is routinely communicated, promotes a culture of safety and accountability, and emphasizes Parkland's strict non-retaliation



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policy. Parkland does not retaliate or take disciplinary action against any individual for reporting events or concerns in good faith.

- Upon receipt of adverse event reports or safety concerns, the QSO Department will promptly assess each report to determine what type of response and/or action is warranted, including further investigation, conduct of RCA/ACA or peer review.
- 4) Parkland shall maintain a list of reported adverse events. Summaries of significant adverse events are reported regularly to a committee of clinical and operational leaders and the QBOM.
- F. Enforcement and Corrective Actions
 - Parkland will take appropriate action based on findings related to peer review and/or conduct of RCA/ACAs, and will identify corrective actions to help prevent the recurrence of similar events. These may include, but are not limited to:
 - a) Addressing any gaps in policies, practices, training or infrastructure that may have contributed to an event; and
 - b) Reporting the violation to the appropriate regulatory authorities or accrediting bodies when warranted.
- 4. Responsibilities
 - A. The CEO, EQC and Board are responsible for:
 - (1) Exemplifying a culture of Quality and safety throughout Parkland.
 - (2) Setting the expectation for Quality as a core responsibility for all Parkland Personnel.
 - (3) Ensuring that the CQSO and QSO Department have sufficient staffing, resources and financial support to perform their responsibilities under this Policy.



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- (4) Advising the CQSO on Quality-related matters and supporting the effective operation of a robust, dynamic and flexible Quality Program.
- (5) In coordination with the CQSO and QSO Department, periodically evaluating the Quality Program to ensure that it functions as intended, serves the purposes for which it has been designed and enables Parkland to meet its high standards and commitment to Quality.
- (6) Promoting and maintaining a culture of safety and accountability where concerns can be raised, openly discussed and reported without fear of retaliation.
- (7) As Parkland Personnel, complying with all the requirements set forth in Section 4.C below.
- B. The CQSO is responsible for:
 - (1) Designing, implementing and overseeing an effective Quality Program that meets the expectations set forth by regulatory agencies and accrediting bodies.
 - (2) Staffing and leading a QSO Department responsible for ensuring performance of the Quality Program components enumerated in Section 3 above.
 - (3) Keeping informed of Quality-related developments and trends, and utilizing such information to enhance the Quality Program.
 - (4) Keeping the CEO, CMO, the members of the EQC, and the Board regularly informed of Quality Program developments, as well as industry best practices and regulatory expectations related to the Quality Program.
 - (5) Periodically assessing the effectiveness of the Quality Program to determine that it functions as intended, serves the purposes for which it has been designed, is reflective of current regulations, professionally recognized standards of care and industry best practices, and enables Parkland to meet its high standards and commitment to Quality.
- C. Parkland Personnel are responsible for:



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- (1) Maintaining vigilance with respect to Quality in performance of their Parkland duties and in their conduct, providing services that meet professionally recognized standards of care and otherwise supporting the Quality Program. Supervisors have a heightened responsibility to do so.
- (2) Reading, understanding and complying with Parkland's policies and procedures.
- (3) Completing all required Quality-related training in a timely manner.
- (4) Reporting adverse events, safety concerns and other potential issues through the Safety Center, to their Supervisor, to another member of the management team, to the QSO Department or through the Integrity Line.
- (5) Cooperating with the Quality Department in the performance of investigations, RCAs/ACAs and auditing and monitoring activities.
- (6) Supervisors have additional responsibilities to:
 - (a) Demonstrate and emphasize the importance of Quality at Parkland.
 - (b) Model behaviors in support of Quality.
 - (c) Assess Quality as part of performance measurement for all employees.
 - (d) Promote and maintain a culture of safety and accountability where individuals can comfortably ask questions or raise Quality-related concerns without fear of retaliation.
 - (e) Provide appropriate and timely responses to questions or concerns, in consultation with the QSO Department, as needed.
 - (f) Maintain communication with the QSO Department about adverse events and potential Quality-related concerns.



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DEFINITIONS:

When used in this Policy these terms have the following meanings:

<u>Parkland Personnel</u>: Board Members; officers; employees; residents and physicians who are members of Parkland's active medical staff; other non-physician practitioners; and contractors, subcontractors and agents who perform services or act on behalf of Parkland.

<u>Quality Program</u>: The program developed by Parkland to promote compliance with Parkland policies and procedures, including the QAPI Plan, all relevant state and federal regulations, expectations of accrediting bodies, and professionally recognized standards of care.

RCA/ACA: Root Cause Analysis/Apparent Cause Analysis.

<u>Safety Center</u>: A web-based electronic software system for tracking adverse patient safety events.

REFERENCES:

N/A