

# QA IN THE HUMAN RESOURCE DEPARTMENT

Bridging the Healthcare Performance Gap

## BUILDING YOUR DEPARTMENT'S QUALITY CONTINUUM

A healthy quality program has three critical components. These include quality assurance, quality improvement and performance improvement. Together, they are collectively known as the quality continuum.

Just as every healthcare organization needs to have a healthy quality continuum if it is to be operationally and financially successful in meeting the needs of its patients and communities, every department needs to have an effective continuum if it is to be what it needs to be for the organization. A strong quality continuum helps an organization in living up to the expectations of the people who count on it to meet their needs for access to great patient care.

In addition to the clinical members of the healthcare team, there are important support members of the team that can have a profound impact on the final impact of patient care activities. Human resources is probably one of the most influential support members of the team as this department influences the skills and competency of the healthcare team through the staff recruitment and retention practices that it controls.

The human resource department is one of the support departments that plays a very important role in assuring high quality patient care, patient

safety and a strong reputation for the hospital. It commonly functions as the hub of staff recruitment, retention and development activities. This department has a significant impact on patient perceptions of caring and safety through the people it brings to the team.

The human resource department controls a series of structures and processes that can impact the patient experience in today's market. This very important department controls the activities that help to recruit and retain the right people. It controls for the timely identification of skill set and behavioral deficits that could negatively impact patient care. It plays an important role in conveying a sense of accessibility to and accountability for the delivery of safe care for the community. (See the on-line module titled *Building the Patient Experience*.)

Employee satisfaction and being viewed as an employer of choice is an important consideration in today's market. The workforce shortage and fast paced environment found in today's market makes strong quality assurance activities extremely important

if human resources is going to help a provider to succeed in both of these areas. Some of the important impressions that this department impacts are:

1. How competent is the organization in meeting patient needs?
2. How committed is the organization to the delivery of high quality patient care?
3. How committed is the organization to ensuring patient safety?
4. How much does the organization care about the members of its community?
5. How committed is the organization to making people feel well cared for and deeply cared about?

The human resource department plays a very important role in the delivery of high quality patient care.. As you review the enclosed list of quality assurance activities for which the human resource department has primary responsibility, one can appreciate just how important this department's role is as a member of the healthcare team.

*A healthy quality continuum allows our people to know that:*

1. *they are in control of their futures;*
2. *their efforts make a difference, and*
3. *that they are part of creating something better for tomorrow than what already exists today.*

*They come to appreciate the contributions they make in meeting the mission and creating the vision of the organization.*



## SO WHAT IS QUALITY!

Quality in healthcare encompasses the ability of an organization or provider to make patients feel very well cared for at the same time they are making them feel deeply cared about. When patients define quality, these are the two things that they repeatedly say they are looking for. For health care's customers, these seem like pretty easy requests and they are becoming less and less tolerant when providers don't get them right.

In today's healthcare environment, quality is about making people feel safe in an environment where they can also feel that they are receiving state-of-the-art care from people who are on top of those variables that could place them in harm's way. Safety is a pretty broad term for patients as it ranges from a sense of feeling physically safe in the environment to feeling that they are receiving the very best care that can be delivered by people who genuinely care about the outcomes that their actions lead to. They also want to feel informed and in control of their patient experience.

For the people in the human resource

department, quality means the hiring and retaining of skilled and motivated people whose behaviors are consistent with current standards of practice. The patient care delivery system is a complex one and subject to change almost daily as technology continues to modify the standards of practice. For the average patient, human resources is a primary player in making sure that an organization has the right mix of personalities and skills. It is not enough for an organization to have people who can make patients feel well cared for in the delivery of appropriate and safe care. A provider needs people who also have the right level of compassion to make a patient feel deeply cared about.

The average patient can not actually judge the quality of the patient care they receive to a level that creates a genuine level of comfort. They can not determine if the battery of tests being ordered by the physician are truly the best tests or if the treatment and drugs are truly the best interventions. Because they need some measures that help them to feel good

about their choices, patients tend to rely heavily on pseudo-measures of healthcare quality.

Pseudo-measures are measures that patients and family members can judge more easily because they are familiar with what they are and what they should look like if quality exists. The most common pseudo-measures in healthcare have traditionally been cleanliness, friendliness, physical appearance, and quality of the food. Physical safety and the perception of teamwork are becoming increasingly important measures and they are both very important to the health care setting. If these pseudo-measures convey a sense of quality, people assume that there is a pretty good chance that the quality of the clinical care is good also.

The measure of quality for people looking to health care is found in the attention to details that they observe. The more attention to details that they witness in pseudo-measures, the more comfortable they are that the same attention is given to the details of direct patient care. Great reputations are not built on being average. They are built on reaching well beyond average and paying close attention to the details that convey a message that providers take their roles in the delivery of great care seriously.

## WORKING WITH YOUR QA CALENDAR

The quality assurance calendar is a tool that helps a department to organize and manage its quality assurance and compliance-related activities in a way that reduces resource consumption and the risk of falling behind (see the PACE Workbook on *Working with Your Quality Calendar*). Historically, healthcare organizations have not utilized highly structured systems to collectively organize and manage their quality assurance or compliance-related activities. The lack of such a system has been one of the major contributing factors in prompting healthcare organizations to find themselves in trouble on surveys and having to put an inordinately large number of resources into ongoing efforts to maintain the basics.

Quality and compliance inside health care does not just happen. They are activities that need to be managed. As one looks at the list of compliance and quality assurance-related activities on the following pages, it is obvious how easy it would be to overlook something or get behind if you do not have a system that allows you to manage them.

As most of these activities are time sensitive, once they don't happen it is impossi-

ble to make them up. For example, if a clinical professional with falsified credentials is hired and a patient is harmed, negligent care can not be taken back and there is little room for excuses about such a serious oversight. If the poor performance of a healthcare team member is not properly addressed, it becomes increasingly difficult to compensate for the negative impact it can have on team morale and patient care. If a warm body, beating heart rule is the foundation for hiring practices, the potential of the overall organization is seriously limited.

As the healthcare industry continues to become more complex and more and more is asked of our people, systems like the quality calendar can help to better manage activities as it becomes increasingly necessary to find ways of doing more with fewer resources. The answer is not in working harder. It is in working smarter and the quality assurance calendar is a tool that can help department managers to do that.

Some important points in using your calendar are:

1. Only schedule activities that must be done on a Monday for that day.

Mondays tend to be bad days in healthcare organizations because of the many issues that spill over from the weekend. As most legal holidays fall on Mondays, it is the one day of the week that prompts people to more easily get behind because things from the holiday must be pushed to Tuesday.

2. Similarly, it is best if you minimize the number of flexible activities that need to be done on a Friday because that is generally the day that people are pushing to get things done for the weekend. It is also the most common day that people request off to have a long weekend.
3. Try to always set the schedule up so that compliance related activities never consume more than two hours in a given day for any one person. This is one of the reasons that a calendar is so helpful. It allows you to plan and balance things out. Most people can plan to commit up to two hours of the day to designated activities. They can also tend to find time to make those activities happen even on a day when there seems to be one crisis after another.
4. Try to always set the schedule so that



# CREATING YOUR QA CALENDAR!

The topics in the tables on the next pages list out the common quality assurance or compliance type activities that could be found on a QA calendar for the Human Resource Department. Some may not apply to all organizations and others may need to be added as compliance standards are dependent on the services offered. Please review these tables to determine which topics are important to your calendar and then follow the instructions in the PACE training workbook titled *Working with Your Quality Calendars* to build your calendar. Please note that health care is a very dynamic industry and constantly subject to change. The completeness of the list and frequency recommendations in these tables should be regularly checked against those established by federal, state and local regulatory agencies.

	QA Accountability	Frequency
1	Skill and licensing requirements for all new hires	On all new hires and contract staff
2	Job description review and signing with each new hire	On all new hires and contract staff
3	Annual review of job description with all employees	Annually
4	Licensure, certification and registration verification on all new hires	On all new hires and contract staff
5	Licensure, certification and registration verification on all renewals	On every employee renewal
6	Background and reference verification	On all new hires and contract staff
7	Pre-employment physical examination	On all new hires and contract staff
8	Employee Measles, Rubella, and Varicella disease screening	On all new hires and contract staff
9	Baseline testing for Tuberculosis	On all new hires and contract staff
10	Follow-up screening for tuberculosis	On schedule based on employee risk factors
11	Citizenship verification	On all new hires and contract staff
12	Hepatitis B vaccination screening	On all new hires and contract staff
13	Hepatitis B vaccination form	On all new hires and contract staff
14	Statement of declination—Hepatitis B vaccine form	On all new hires and contract staff
15	Competency verification of agency personnel	On all new contract staff
16	Student health screening	On all new students
17	Volunteer health screening	On all new volunteers
18	Annual health screening	On all people with potential patient contact
19	New employee orientation	On all new hires and contract staff
20	Completion of new employee orientation form	On all new hires and contract staff
21	Skill inventory for staff competence	On all new hires and contract staff
22	New student/volunteer orientation	On all new students and volunteers
23	Restraint and seclusion training	On all new hires and contract staff
24	Safety training	On all new hires and contract staff
25	Infection control training (including hand hygiene and sharps management)	On all new hires and contract staff
26	Hazardous material and waste training (including how to read an MSDS)	On all new hires and contract staff
27	PPE training	On all new hires and contract staff
28	Standard precautions training	On all new hires and contract staff
29	Security training	On all new hires and contract staff
30	Elder abuse training	On all new hires and contract staff
31	Safe medication practices training for applicable clinical personnel	On all new hires and contract staff
32	Infant/child safety training	On all new hires and contract staff
33	Fire safety training	On all new hires and contract staff
34	Emergency response plan training	On all new hires and contract staff

# CREATING YOUR QA CALENDAR!

	QA Accountability	Frequency
35	Electric safety training	On all new hires and contract staff
36	Workplace violence education	On all new hires and contract staff
37	Education of federal False Claim Act and Whistleblower Protections	On all new hires and contract staff
38	Annual restraint and seclusion training	For all applicable staff
39	Annual safety training	For all applicable staff
40	Annual infection control training (including hand hygiene and sharps management)	For all applicable staff
41	Annual hazardous material and waste training ( including how to read an MSDS)	For all applicable staff
42	Annual PPE training	For all applicable staff
43	Annual standard precautions training	For all applicable staff
44	Annual security training	For all applicable staff
45	Annual elder/child abuse training	For all applicable staff
46	Annual safe medication practices training for applicable clinical personnel	For all applicable staff
47	Annual infant/child safety training	For all applicable staff
48	Annual fire safety training	For all applicable staff
49	Annual electric safety training	For all applicable staff
50	Annual emergency response plan training	For all applicable staff
51	Probationary period evaluation	At least 15 days before the end of probationary period
52	Annual performance appraisal	At least 15 days before the end of employment year
53	Annual position description review	Annually for all descriptions
54	Age-related competencies	For all applicable staff
55	Employee complaint resolution	Per policy and procedure
56	Employee signature and initial log	Continuous
57	Electric safety in department	Continuous
58	Annual policy and procedure review for department	Annually
59	ACLS certification for applicable staff	Continuous
60	ATLS certification for applicable staff	Continuous
61	PALS certification for applicable staff	Continuous
62	Service contract review for department	Annually
63	Service contract renewal for department	Annually or on term
64	New chemical training for department	Before use
65	Secure MSDS and assure appropriate precautions for department	Before new chemical use
66	Employee right-to-know MSDS training for department	On orientation before chemical use and annually
67	Flooring integrity for department	Continuous
68	Baseboard integrity for department	Continuous
69	Ceiling tile integrity for department	Continuous
70	Storage 4 inches off the floor for department	Continuous
71	Surface washability for department	Continuous
72	Annual fire safety training for department	Annually
73	Annual general safety training for department	Annually
74	Annual infection control training for department	Annually

# CREATING YOUR QA CALENDAR!

	QA Accountability	Frequency
75	General trash management and disposal	Daily or when receptacles are 3/4 full
76	Management of employee exposures	Per policy and procedure

1. *The Patient is the most important person in our healthcare organization.*
2. *The Patient is not dependent on us—we are dependent on the Patient.*
3. *The Patient is not an interruption of our work, but the purpose of it.*
4. *The Patient should not feel honored that we choose to serve. The Patient honors us by choosing us as his or her preferred provider.*
5. *The Patient is the core purpose and the most important reason for our healthcare organization to exist. The Patient is not an outsider, but is our most important guest.*
6. *The Patient is not a cold volume statistic, but flesh and blood: a human with feelings and emotions like our own. The Patient is deserving of our caring, compassion and concern.*
7. *The Patient is not someone to argue with, belittle, or match wits with. The Patient is deserving of diligence in our efforts to meet his or her healthcare needs and to feel good about their healthcare experience.*
8. *The Patient is the one who brings us his wants and needs. Our responsibility is to meet them. Our responsibility is to make our patient feel well cared for at the same time he or she feels deeply cared about.*
9. *The Patient is deserving of the most courteous and attentive care we can provide.*
10. *The Patient has the right to expect a healthcare provider to present with a professional, competent and caring behavior. At the heart of a great patient/provider relationship is the Patient's decision to trust and believe.*

# KEEPING PACE WITH TODAY'S STANDARDS

Quality assurance or compliance-related activities are extremely important in a healthcare organization because they are generally related to safety and can have a significant impact on patient satisfaction. They frequently involve precautionary steps taken by an organization to prevent an untoward event and to be prepared in the event of a disaster or break in the routine that could place people or the organization in harm's way.

For example, while providers hope they will never need them, there are many precautionary activities that healthcare organizations need to be skilled at in the event there is a fire. They need to know that the generator will run in the event of a power outage. They need to know that we have a strong plan to protect people in the event of a natural disaster. The human resource department plays a very important role in any form of disaster preparedness for its own organization and others in the community. This means that this department must always know that it is ready for whatever might come through its doors.

Healthcare organizations also need to know that the day-to-day risk is reduced for people who come into their buildings and the organization. They need to know that the organization is in compliance with current standards of patient care. They need to know that the members of the healthcare team are the best they can be and their practices are consistent with nationally recognized standards.

Too often healthcare organizations find themselves at risk because they become complacent about quality assurance related activities. As so many of the activities are precautionary in nature and many organizations may never actually have to enact them, it is very easy for an organization to elect to take short cuts or overlook striving for 100% compliance. The danger is in the fact that an organization can't make it up to a patient or a community member or employee when its failure to stay current negatively effects any one of them. If its reputation in the community is damaged, it may never recover.

Proactive compliance is significantly less resource intensive than running to catch up. Developing a corrective action plan in respond to a Medicare Condition of Participation survey is never the best way to achieve compliance. Working to overcome the damage created by a negative outcome is definitely more expensive and resource intensive than ensuring the negative outcome

could not happen. As the saying goes, "an ounce of prevention is more valuable than a pound of cure." This is particularly true in health care where the cost of a negative outcome can be particularly steep. A well structured quality assurance program inside the quality continuum can provide for that ounce of prevention to protect an organization.

The majority of the compliance standards for the human resource department relate to the recruiting and retaining the right people. These are two very big areas of responsibility where compliance is critical. When any of these areas of responsibility fall out of compliance it is for a healthcare organization to find itself with serious regulatory and reputational issues.

Because of the magnitude of some of the responsibilities, retrospectively trying to fix them can be a nightmare in addition to placing the organization at risk because of non-compliance. For example, an employee is found to be working with false credentials and the patient dies, you can't go back and fix it. If an inappropriate treatment is administered to a patient by an unskilled person, it creates unnecessary complication for everyone. Proactively dealing with issues through prevention can reduce resource consumption by as much as 25 -33%. Every minute appropriately spent on planning (such as the creation of a balanced QA calendar) can save 10 minutes in execution time.

Historically, healthcare organizations have had poor systems for managing and documenting quality assurance related activities. Too often those systems for managing these activities have existed in the minds of our managers. While the mind is a very powerful place, the stresses of today's healthcare environment make it a poor stand-alone tool in creating the kind of efficiency and effectiveness we need. As a result, too many things end up being retrospectively repaired rather than proactively managed. The quality calendar system is an approach to proactive activity management. If the average human resource department is able to reduce time and/or resource consumption by an aver-

age of 33% because it uses tools to improve its efficiency and effectiveness, it can find itself capable of managing more with less in a less stressful environment. This is an important goal in today's healthcare environment. It also reduces the amount of time spent on crisis management which is one of the industry's greatest threats to resources.

When a quality assurance or compliance

activity goes out of compliance, it is a department's responsibility to bring that activity back into compliance as quickly as possible in a way that will hold the compliance. The department needs to document the step it took to achieve that compliance and the ongoing activities to monitor it.

The first step is to set up the quality assurance calendar with all of the compliance-oriented activities that are important to the organization. Once the list is complete, the manager, with the assistance of his or her departmental team, defines when each activity is to be completed along with who will be responsible for it. (Remember the stronger the team approach, the greater the potential for success and the more that can be achieved with fewer resources.) As long as activities remain in compliance the only documentation that is necessary is to complete the required log for the activity and to indicate an OK on the calendar. When an activity moves out of compliance, a department should be able to demonstrate that it has quickly moved through the steps of the PACE cycle. Documentation should demonstrate that it quickly identified the issue (moving the issue to its quality improvement calendar), PLANNED to re-establish compliance, ACTED to initiate the plan, CHECKED to make sure that the plan achieved the designed results and ENHANCED the plan to achieve the best outcomes possible. Once compliance is re-established and a short period of more intensive monitoring demonstrates compliance, the department can return to its normal schedule of monitoring as defined by the calendar.

The calendar should be evaluated each year as part of the annual review of services to determine needed additions and revisions that would increase departmental efficiency in achieving continuous compliance.

		QA Calendar							
	Frequency	Responsible Party	Jan	Feb	March	April	May	June	
Licensure verification	Every new employee	Susan	SK OK	SK OK	SK OI	SK OK	SK OK	SK OK	



**D.D. BAINBRIDGE &  
ASSOCIATES, INC.**

Phone: 716/676-3635  
Fax: 716/676-2404  
E-mail: darlene@ddbainbridgeassoc.com

*Success has a price tag on it, and it reads  
COURAGE, DETERMINATION,  
DISCIPLINE, RISK TAKING,  
PERSEVERENCE, and  
CONSISTENCY—doing the right  
THING for the RIGHT REASONS and  
not just when we feel like it.*

*James B. Menton*

*The Future Starts with a Strong Today!*

Building a strong reputation and future for a healthcare organization starts with building a strong today. In many ways it is like building a new building. If you don't start out with a sound foundation it becomes increasingly difficult to build a structure that can be as tall as you would like or that can withstand the various elements that place stress on it. When the foundation isn't strong, you frequently find yourself having to put additional resources into shoring it up and to apply patches where necessary. You also tend to find yourself having to monitor it more closely every time the structure is placed under stress to make sure it will hold up. A healthy quality assurance program is about making sure a healthcare organization has a strong foundation on which to build tomorrow and the future. If an organization is constantly struggling to maintain compliance with today's standards, the activities steal valuable time and resources away from efforts that could be used to build a healthier tomorrow. Given the strain on today's healthcare resources, providers need to ensure that they are getting the most they can from what they have. They need to make sure that quality lives today so it is easier to build a better tomorrow.

## BRINGING IT ALL TOGETHER

A healthy quality program is about making sure that our organizations are being true to the business of health care. That business is the delivery of high quality patient care in an environment that makes our patients and communities feel well cared for and deeply cared about. It is about making sure that our organizations are healthy and strong for today, tomorrow and into the future.

The quality program creates the structure to support the creation and implementation of the many systems that (1) ensure that our organizations and patient care services are what they need to be to make our organizations strong for today, (2) continuously work to improve and meet the changing needs of tomorrow as technological advancements continue to reshape the delivery of patient care, and (3) bring the strategic plan and vision of an organization to life while holding true to the mission and values of the organiza-

tion. A healthy quality program is about much more than making sure that our organizations are meeting the expectations of outside regulators and the many external customers that enter our doors every day.

The mission defines why our healthcare organizations exist. The vision defines where we picture our organizations to be at some point in the future if the organization is to remain strategically positioned for success while it remains true to its mission and values. Our values define those behaviors we hold to be important to every day life if we are to remain true to our missions (who we are).

It can be very easy for these important messages to become fluff and pie-in-the-sky words that only raise more doubt and questions if people can not see the path that brings them to life. A healthy quality program provides that path by creating

the structures and systems that make proactive change possible.

The mission, vision and values of an organization come to life when they are successfully married together through the organization's quality program and strategic planning activities. These two activities create the environment for the creation of a culture for quality where patients feel well cared for and deeply cared about while healthcare providers have the potential to feel good about their contributions in improving the quality of life for the public that entrusts them with their care.

