

**KERN HEALTH SYSTEMS
2018 QUALITY IMPROVEMENT WORK PLAN**

| ACTIVITY | DETAIL/TASK | TARGET DATE | ACCOUNT ABILITY | STATUS |
|---|--|--------------|---|---------------------------|
| I. QUALITY MANAGEMENT AND IMPROVEMENTS | | | | |
| A. Annual Review/Approval of QI Program Documents | | | | |
| 1. Approval QI Evaluation | Approval of 2018 QI Program Evaluation | 5/24/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | QI/UMC Agenda May 2018 |
| 2. Review/Update and Approval of QI Program Description | Approval of 2018 QI Program Description | 5/24/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | QI/UMC Agenda May 2018 |
| 3. Review/Update and Approval of QI Work Plan | Approval of 2018 QI Work Plan | 5/24/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | QI/UMC Agenda May 2018 |
| B. Analysis of Member Demographics and Morbidities Data | Previous year end data and ongoing risk stratification for CM and DM targetted interventions | ongoing | Chief Information Officer, Administrative Director Health Services, Director Health Education, Cultural and Linguistic Services | Ongoing 2018 |
| C. Clinical - Focused Studies | | | | |
| 1. State Required | | | | |
| a. IP - LBP | regulatory requirement due to HEDIS scores below MPL - see PIP below | 6/30/2019 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing through July 2019 |
| b. IP - CCS | regulatory requirement due to HEDIS scores above MPL but below state average - see PIP below | 6/30/2019 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing through July 2019 |
| c. Disparities CIS PIP | 18 month quality improvement project led by HSAG | 6/30/2019 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing through July 2019 |
| d. LBP PIP | 18 month quality improvement project led by HSAG | 6/30/2019 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing through July 2019 |
| 2. Health Plan Required | TBD based on opportunities for improvement | Ongoing 2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing 2018 |
| D. 2018 HEDIS Monitoring (Medi-cal) / Quality Measurements | | | | |
| 1. The Roadmap | Report to State EQRO Auditor - HSAG | 1/29/2018 | QI/Claims/PR/IT | Submitted |
| 2. Childhood Immunization Status | Report annually to QI/UM Committee/Board of Directors (BOD)/DHCS | 8/27/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | In Progress |
| 3. Well Child Visits 3rd, 4th, 5th, and 6th years of life | Report annually to QI/UM Committee/BOD/DHCS | 8/27/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | In Progress |
| 4. Prenatal and Postpartum Care | Report annually to QI/UM Committee/BOD/DHCS | 8/27/2018 | Director of QI, Health Education and Disease Management / IT | In Progress |
| 5. Comprehensive Diabetes Care | Report annually to QI/UM Committee/BOD/DHCS | 8/27/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | In Progress |
| 6. Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis | Report annually to QI/UM Committee/BOD/DHCS | 8/27/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | In Progress |
| 7. Annual Monitoring for Patients on Persistent Medications | Report annually to QI/UM Committee/BOD/DHCS | 8/27/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | In Progress |
| 8. Cervical Cancer Screening | Report annually to QI/UM Committee/BOD/DHCS | 8/27/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | In Progress |
| 9. Children's and Adolescent's Access to PCPs | Report annually to QI/UM Committee/BOD/DHCS | 8/27/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | In Progress |
| 10. Ambulatory Care | Report annually to QI/UM Committee/BOD/DHCS | 8/27/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | In Progress |
| 11. Immunizations in Adolescents | Report annually to QI/UM Committee/BOD/DHCS | 8/27/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | In Progress |
| 12. Use of Imaging Studies for Low Back Pain | Report annually to QI/UM Committee/BOD/DHCS | 8/27/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | In Progress |
| 13. Controlling High Blood Pressure | Report annually to QI/UM Committee/BOD/DHCS | 8/27/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | In Progress |
| 14. Asthma Medication Ratio | Report annually to QI/UM Committee/BOD/DHCS | 8/27/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | In Progress |
| 15. Weight Assessment & Counseling for Nutrition & Physical Activity for Children and Adolescents | Report annually to QI/UM Committee/BOD/DHCS | 8/27/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | In Progress |
| 16. All Cause Readmissions | Report annually to QI/UM Committee/BOD/DHCS | 8/27/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | In Progress |

**KERN HEALTH SYSTEMS
2018 QUALITY IMPROVEMENT WORK PLAN**

| ACTIVITY | DETAIL/TASK | TARGET DATE | ACCOUNT ABILITY | STATUS |
|--|---|--------------------------------|--|--------------------------------|
| 17. Breast Cancer Screening | Report annually to QI/UM Committee/BOD/DHCS | 8/27/2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | In Progress |
| F. Other On-going Monitoring | | | | |
| 1. 30 day re-admissions | In annual report 2018 QI Plan Evaluation to QI/UMC & BOD | Annually | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing 2018 |
| 2. Unanticipated Deaths | In annual report in 2018 QI Plan Evaluation to QI/UMC & BOD | Annually | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | 2018 |
| 3. Untoward Events/PPC | In annual report in 2018 QI Plan Evaluation to QI/UMC & BOD | Annually | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | 2018 |
| 3. Focused Reviews | | | | |
| a. Referral Process | Physician Site Monitoring / Quarterly reporting | Quarterly | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing 2018 |
| b. IHEBA - Staying Healthy Assessment | Physician Site Monitoring / Quarterly reporting | Quarterly | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing 2018 |
| c. Initial Health Assessment (IHA) | Physician Site Monitoring / Quarterly reporting | Quarterly | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing 2018 |
| d. Kern Regional Center/Early Start Program | Physician Site Monitoring / Quarterly reporting | Quarterly | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing 2018 |
| e. California Children's Service (CCS) | Physician Site Monitoring / Quarterly reporting | Quarterly | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing 2018 |
| f. Critical elements | Physician Site Monitoring / Quarterly reporting | Quarterly | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing 2018 |
| g. Diabetes Care Monitoring | Physician Site Monitoring / Quarterly reporting | Quarterly | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ending 12/31/2018 |
| h. Asthma Care Monitoring | Physician Site Monitoring / Quarterly reporting | Quarterly | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ending 12/31/2018 |
| i. Maternity Care Monitoring | Physician Site Monitoring / Quarterly reporting | Quarterly | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing 2018 |
| G. Safety of Clinical Care | | | | |
| 1. Autoclave | Credentialing/Recredentialing/As necessary | Facility Site Rev/Focus Review | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing 2018 |
| 2. Bio-hazardous waste | Credentialing/Recredentialing/As necessary | Facility Site Rev/Focus Review | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing 2018 |
| 3. Infection Control | Credentialing/Recredentialing/As necessary | Facility Site Rev/Focus Review | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing 2018 |
| 4. Facility Site Review (FSR) DHS Database | FSR database of completed site reviews | Jan / July 2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing 2018 |
| 5. Focused Reviews - Critical Elements | Physician Site Monitoring / Quarterly Reporting | Quarterly | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing 2018 |
| I. Availability | | | | |
| 1. Primary Care Practitioners | | | | |
| a. Numeric Standard - <i>Network Capacity Report</i> | Measure and Report to DHS | Annually | Director of Provider Relations, Director AIS | In Progress |
| b. Geographic Standard - <i>Health Education Cultural and Linguistics Needs Assessment</i> | Measure and Report to DHS every three years | 2021 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Director Health Education, Cultural and Linguistic Services | Next Needs Assessment due 2021 |
| 2. Speciality Practitioners | | | | |
| a. Numeric Standard - <i>Network Capacity Report</i> | Measure and Report to DHS | Annually | Director of Provider Relations, Director AIS | Ongoing 2018 |
| b. Geographic Standard | Measure and Report | Annually | Director of Provider Relations, Director AIS | N/A |
| J. Access | | | | |
| 1. Primary Care Appointments | | | | |
| a. Preventive Care Appointments Standard | Measure/Report to QI/UM Committee Quarterly | Annually | Director of Provider Relations, Director AIS | Ongoing 2018 |
| b. Routine Primary Care Appointments Standard | Measure/Report to QI/UM Committee Quarterly | Annually | Director of Provider Relations, Director AIS | Ongoing 2018 |
| c. Urgent Care Appointments Standard | Measure/Report to QI/UM Committee Quarterly | Annually | Director of Provider Relations, Director AIS | Ongoing 2018 |
| e. After-hours Care Standard | Measure/Report to QI/UM Committee Quarterly | Annually | Director of Provider Relations, Director AIS | Ongoing 2018 |
| 2. Telephone access to Member Services | | | | |

**KERN HEALTH SYSTEMS
2018 QUALITY IMPROVEMENT WORK PLAN**

| ACTIVITY | DETAIL/TASK | TARGET DATE | ACCOUNT ABILITY | STATUS |
|--|--|------------------|--|--------------------|
| a. Abandonment rate | Measure/Report to QI/UM Committee Quarterly | Annually | Director of Provider Relations, Director AIS | Ongoing 2018 |
| b. Speed of answer | Measure/Report to QI/UM Committee Quarterly | Annually | Director of Provider Relations, Director AIS | Ongoing 2018 |
| 3. Mental Health Appointment | Annual MOU Meetings/Grievances | As necessary | Utilization Management/Grievance Review Team | Ongoing 207 |
| a. Life-threatening Emergency Standard (immediate care) | Report as necessary to QI/UM Committee | As necessary | Director of Provider Relations, Director AIS | Ongoing 2018 |
| b. Non-life-threatening Emergency Standard | Report as necessary to QI/UM Committee | As necessary | Director of Provider Relations, Director AIS | Ongoing 2018 |
| c. Urgent needs Standard | Report as necessary to QI/UM Committee | As necessary | Director of Provider Relations, Director AIS | Ongoing 2018 |
| d. Routine office visit Standard (visit within 10 working days) | Report as necessary to QI/UM Committee | As necessary | Director of Provider Relations, Director AIS | Ongoing 2018 |
| e. Telephone access to screening and triage Standard | Report as necessary to QI/UM Committee | As necessary | Director of Provider Relations, Director AIS | Ongoing 2018 |
| 1) Caller reaches non-recorded voice | | | Director of Provider Relations, Director AIS | |
| 2) Abandonment rate | | | Director of Provider Relations, Director AIS | |
| K. Encounters, Complaints, Grievances and Appeals Data Analysis | Report aggregate data quarterly to QI/UM Committee | Quarterly | Director of Member Services | Ongoing 2018 |
| L. CAHPS Survey | State administered N/A | TBD | State Administered/CIO/Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | TBD |
| 1. Results reported to QI/UMC | Report to QI/UMC when applicable | TBD | State Administered/CIO/Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | TBD |
| 2. Results reported to practitioners and providers | Report in Provider Newsletter/Bulletin when applicable | TBD | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI, Director of Provider Relations | TBD |
| M. Disease Management System | | | | |
| 1. Asthma | Measure and Report to QI/UM Committee | Quarterly | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ending 12/31/2018 |
| 2. Diabetes with Hypertension comorbidity | Measure and Report to QI/UM Committee | Quarterly | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ending 12/31/2018 |
| 3. Staying Healthy Assessments (IHEBA) | Measure and Report to QI/UM Committee | Quarterly | Chief Medical Officer (CMO), Administrative Director Health Services, Director Health Education, Cultural and Linguistic Services, Supervisor QI | Beginning 1/1/2018 |
| N. Clinical Practice Guidelines | Report to QI/UM Committee | Annually | CMO | As appropriate |
| 1. Annual Measurement of Performance of at least two (2) aspects of three (3) Clinical Practice Guidelines | To be determined | Annually | Chief Medical Officer (CMO) / Administrative Director Health Services/ Manager UM | As appropriate |
| a. To be determined | Measure, analyze and report | Annually | Chief Medical Officer (CMO) / Administrative Director Health Services/ Manager UM | As appropriate |
| b. To be determined | Measure, analyze and report | Annually | Chief Medical Officer (CMO) / Administrative Director Health Services/ Manager UM | As appropriate |
| c. Mental Health Guidelines | Annual MOU Meetings | Annually | Chief Medical Officer (CMO) / Administrative Director Health Services/ Manager UM | As appropriate |
| 2. Develop New Guidelines | Develop, approve and implement | Ongoing | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | 2018 Guidelines: |
| a. To be determined | Reported to QI/UM Committee from PAC | To be determined | Medical Director or designee | As appropriate |
| O. Continuity of Care Monitoring | Monitored through Grievances, FSR/Peer Review, HEDIS | Ongoing | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | As appropriate |
| 1. Primary Care Practitioner (PCP) | Monitored through Grievances, FSR/Peer Review, HEDIS | Ongoing | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing |
| 2. PCP & Mental Health | Monitored through Grievances, Peer Review, HEDIS | Ongoing | Chief Medical Officer (CMO) / Administrative Director Health Services | Ongoing |
| 3. Specialist | Monitored through Grievances, Peer Review, HEDIS | Ongoing | Chief Medical Officer (CMO) / Administrative Director Health Services | Ongoing |
| P. Cultural and Linguistic Services Report (HFP) | To meet needs of limited English proficient applicants and subscribers - to address types of services | Annually | Director Disease Management, Cultural and Linguistic Services | 4Q 2018 |
| R. Delegation of QI Activities | QI/UM delegation to Kaiser and VSP includes ongoing reporting of Grievances, QI Program, Evaluation and Workplan | 2Q 2018 | Director of Provider Relations | 2Q 2018 |

**KERN HEALTH SYSTEMS
2018 QUALITY IMPROVEMENT WORK PLAN**

| ACTIVITY | DETAIL/TASK | TARGET DATE | ACCOUNT ABILITY | STATUS |
|--|--|--------------------------------|--|--|
| S. Annual Review of QI Policies and Procedures | Submit to QI/UMC and DHCS | Annually and as necessary | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI/Director AIS | Ongoing |
| T. QI/UM Committee | | | | |
| 1. Reports and agenda items | Gathered from pertinent departments | Quarterly or more often if nec | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing |
| 2. Minutes | Attached to next meetings agenda and sent to BoD | Quarterly or more often if nec | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing |
| 3. Form 700 | Send to all committee members yearly | Initial / Yearly December | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing |
| 4. PO's and Check Requests | Fill out for each member attending meeting | Feb /May Aug/Nov | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI / Accounting | Ongoing |
| II. UTILIZATION MANAGEMENT - See UM WorkPlan | | | | |
| A. Annual Review/Approval of UM Program Documents | Program Description 2018 | 5/24/2018 | Administrative Director of Health Services | QI/UMC May 2018 Agenda |
| III. CREDENTIALING AND RECREDENTIALING | | | | |
| A. Initial Credentialing Site Visit & Medical Record | Upon Credentialing/Quarterly FSR Summary | Ongoing | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing |
| B. Organization Providers Quality Assessment | Data Reviews are received from QI/UM/AIS/MS for any opportunities form improvement identified. QI Department quality reviews of readmissions within 30 days, member deaths and notifications. See 1F | At least quarterly | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing |
| 1. Hospitals | Tracking Grievances, Notifications, Deaths and QI issues | Ongoing | Director of Provider Relations | Ongoing |
| 2. SNF's | Tracking Grievances, Notifications, Deaths and QI issues | Ongoing | Director of Provider Relations | Ongoing |
| 3. Home Health Agencies | Tracking Grievances, Notifications, Deaths and QI issues | Ongoing | Director of Provider Relations | Ongoing |
| 4. Free-Standing Surgery Centers | Tracking Grievances, Notifications, Deaths and QI issues | Ongoing | Director of Provider Relations | Ongoing |
| 5. Inpatient MH/SA Facilities | Tracking Grievances, Notifications, Deaths and QI issues | Ongoing | Director of Provider Relations | Ongoing |
| 6. Residential MH/SA Facilities | Tracking Grievances, Notifications, Deaths and QI issues | Ongoing | Director of Provider Relations | Ongoing |
| 7. Ambulatory MH/SA Facilities | Tracking Grievances, Notifications, Deaths and QI issues | Ongoing | Director of Provider Relations | Ongoing |
| C. Ongoing Monitoring of Sanctions and Complaints | Ongoing; time sensitive; sanctions; grievance process | Ongoing | Director of Provider Relations/AIS | Ongoing |
| D. Credentialing / Recredentialing File Audit | Ongoing KHS/AIS random audits | Ongoing | Director of Provider Relations | Ongoing |
| E. Delegated Credentialing | Delegation will be for hospital based practitioners if hospital is JCI accredited | Annually / as necessary | Director of Provider Relations | Ongoing |
| F. Annual Review of Credentialing/Recredentialing Policies and Procedures | Ongoing | Annually / as necessary | Director of Provider Relations | Ongoing |
| IV. MEMBER RIGHTS AND RESPONSIBILITIES | | | | |
| A. Statement of Members' Rights and Responsibilities | Review, annually / revise as necessary | Annually / as necessary | Director of Member Services | Ongoing |
| B. Distribution of Rights Statement to Members & Practitioners | As necessary | Annually / as necessary | Director of Member Services | 2018 |
| C. Complaints and Appeals | Aggregate/analyze/report to QI/UM Committee Quarterly | Quarterly | Director of Member Services | In progress |
| D. Grievance Report (HFP) | Report number and types of benefit grievances for previous calendar year - geographic region, ethnicity, gender and primary language | Quarterly | Director of Member Services | Ongoing |
| E. Annual Analysis of Privacy and Confidentiality Policies | Review annually / Revise as needed | Ongoing | Director AIS | Ongoing |
| F. Marketing Information | Focus Groups, Public Policy/Community Advisory Committee | Ongoing | Director of Marketing | Focus groups will be continued in 2018 |
| G. Delegation of Members' Rights and Responsibilities Activities | Non-delegated. Grievance committee | N/A | Grievance Committee | Ongoing |
| H. Annual Review of Member Rights Policies and Procedures | Non-delegated | N/A | Grievance Committee | Ongoing |
| V. PREVENTIVE HEALTH SERVICES | | | | |
| A. Adoption of Preventive Health Guidelines | As necessary | 2018 | CMO and PAC | Ongoing |
| B. Annual Distribution of Preventive Health Guidelines to Practitioners | As necessary | 2018 | Director Provider Relations | Ongoing |
| C. Annual Analysis of Member Demographics to Identify High Risk Population | Annually and as needed | Ongoing | Chief Medical Officer (CMO) / Administrative Director Health Services/ Director Health Education, Cultural and Linguistic Services | In progress |

**KERN HEALTH SYSTEMS
2018 QUALITY IMPROVEMENT WORK PLAN**

| ACTIVITY | DETAIL/TASK | TARGET DATE | ACCOUNT ABILITY | STATUS |
|---|---|--------------------|--|---------------|
| D. Health Promotion for Members and Wellness Program | Ongoing through PSA, traditional and social media including FaceBook, twitter, Text Messaging program, Healthy Eating and Active Lifestyle Class, You-tube cooking classes, Member newsletters, | Ongoing | Chief Medical Officer (CMO) / Administrative Director Health Services/ Director Health Education, Cultural and Linguistic Services | Ongoing |
| V. PREVENTIVE HEALTH SERVICES | | | | |
| E. Delegation of Preventive Health Activities | Non-delegated | N/A | QI/UM Committee | N/A |
| F. Annual Review of Preventive Health Policies and Procedures | Annually / revise as necessary | 2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Director Health Education, Cultural and Linguistic Services | Ongoing |
| VI. MEDICAL RECORDS | | | | |
| A. Review of Medical Record Documentation Standards | Annually / revise as necessary | 2018 | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI | Ongoing |
| B. Distribution of Standards to New Providers | Ongoing / as necessary | Ongoing | Director of Provider Relations | Ongoing |
| C. Audit of Medical Records Documentation | Refer to Credentialing/Recredentialing | Ongoing | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI / Director of Provider Relations | Ongoing |
| D. Annual Review of Policies and Procedures | Annually / revise as necessary | Ongoing | Chief Medical Officer (CMO) / Administrative Director Health Services/ Supervisor QI / Director of AIS | Ongoing |