

**Appendix A: Supporting Documents**

- I. Quality Assurance & Quality Improvement Plan
- II. School of Dental Medicine MOU
- III. Oral Health Presentation
- IV. Informed Consents
- V. Marketing/Outreach



# Sheridan Health Services

COLLEGE OF NURSING

UNIVERSITY OF COLORADO

**Quality  
Assurance/  
Quality  
Improvement  
Plan**

**2015**

## Introduction and Statement of Purpose

As part of its dedication to providing quality care in alignment with the University Of Colorado College Of Nursing and the mission of Sheridan Health Services (SHS), the CEO developed a Quality Assurance (QA) and Quality Improvement (QI) Plan in conjunction with the Clinical Directors (CD) and the Sheridan Health Services Board of Directors (BOD) Quality Subcommittee. The QA/QI program is designed to align with the Sheridan Health Services' strategic plan. Processes are designed to enhance clinical quality, ensure patient safety and improving patient care. The QA/QI Plan is designed to move Sheridan Health Services toward achieving improved health and wellness of the population served by providing culturally competent care that is safe, effective, affordable, timely, efficient and equitable. Sheridan Health Services works to integrate quality and promote accountability into all facets of clinical operations.

### I. Scope

The Sheridan Health Services (SHS) QA/QI Plan applies to clinical and applicable operational activities. The scope of the QA/QI Plan is comprehensive and meant to serve as a guide to all QA/QI work across the organization. The QA/QI Plan addresses each of the health center's clinical programs; constructs from National Committee for Quality Assurance (NCQA), Patient Centered Medical Home (PCMH) and Meaningful Use criteria. This document focuses on the following:

Setting guidelines for the quality structure within the organization through

- Streamlining processes for quality assurance and quality improvement activities
- Data reporting
- Delineating key initiatives

The scope of all quality improvement and assurance activities shall promote the mission and values of Sheridan Health Services.

### III. Administrative Responsibility

The primary responsibility for implementing, managing and monitoring Sheridan Health Services' Quality Assurance and Quality Improvement efforts is assigned to the CD with support from the CEO, the Dental Director and the Director of Behavioral Health. In addition, the Operations Manager and designated staff shall provide operational support to the quality program. These individuals are tasked with operationalizing quality improvement initiatives. The CD and/or designees will report all QA/QI efforts and identified issues directly to the Chief Executive Officer, The BOD QA Committee and the Office of Clinical and Community Affairs (OCCA).

The following is a summary of the primary decisions and tasks related to quality improvement and quality assurance, to include roles involved in approval, consultation, and disseminating information.

Decision or Task	Responsible	Approves	Consulted	Informed
QA/QI Plan	CDs, Operations Manager, & Dental Director	Board of Directors, CEO	CQI, QA Committee of Board	Providers, Staff
Medical/Nursing QA and QI Activities	CDs and designated providers	CEO	CQI, Operations Manager	Providers, Staff
Dental QA and QI Activities	Dental Director	CEO	CQI, Operations Manager	Providers, Staff
Behavioral Health QA and QI Activities	Director of Behavioral Health	CEO	CQI, Operations Manager	Providers, Staff

### IV. Agency-wide Committee Structure

Quality improvement and assurance activities are conducted at Sheridan Health Services by:

#### 1. Quality Assurance (QA) Committee of the Board of Directors

The QA Committee of the Board meets quarterly. This meeting is chaired by a Clinical Director. A member of the QA Committee of the board reports a summary of quality improvement, quality assurance and research activities to the full Board of Directors on a regular basis. The QA Committee of Sheridan Health Services' BOD is responsible for the following activities:

- updating the QA/QI Plan

- developing the organization's Health Care Plan
- reviewing summary reports of patient satisfaction and patient grievances
- analyzing QA/QI trend reports

## 2. **Continuous Quality Improvement (CQI) Steering Committee**

CQI is an organization-wide cross-functional committee that includes clinical and administrative departments representing behavioral health, medical, nursing, dental, operation systems. Other staff may be called upon as subject matter experts on an ad-hoc basis. CQI serves as the umbrella committee for quality across the organization's service lines. CQI compiles a list of topics and defines organizational priorities as agreed upon, and continually assesses the health center's needs for quality improvement activities. CQI develops the overall QA/QI Plan. CQI is chaired by the CDs and co-sponsored by the operations manager.

## 3. **Peer Review**

Each service line has a peer review process to ensure quality throughout their departments.

- **Medical and Nursing** peer review meetings occur on a regular basis. Topics should focus on high priority areas related to UDS performance measures. Peer review involves a chart audit and is ideally paired with an educational component addressing the same subject topic. Peer review is a collaborative and supportive process, and results are used to inform future quality improvement efforts. Aggregate peer review data, including trend reports are to be shared among the team for learning purposes.
- **Dental:** The Dental Director coordinates and conducts peer reviews on an annual basis. Dentists are provided with an assessment tool, specific to the topic of the chart review. Each reviews a number of charts and assesses the performance of their peers. The dentists then have an opportunity to share their findings with each one another for best practice.
- **Behavioral Health Integrated Care Committee:** This meeting addresses the challenges and opportunities related to integrating behavioral health counseling into primary care services. It is a joint meeting of primary care providers, case managers, and behavioral health providers at both sites. The Director of Behavioral Health facilitates these meetings. The meetings address clinical care and operations that enhance integrated care.
- **RN & Case Manager Team:** This RNs and case managers convene to discuss clinical and procedural protocols. This meeting is primarily clinical in nature, although operational and procedures that affect access to care and clinical quality are discussed.

## 4. **Risk Management**

Clinical Directors (CDs) have been tasked to lead risk management activities, but efforts are made in every service line. The CDs work with various clinicians to discuss actual, potential and alleged risk management cases and potential system improvements to improve care at all medical sites. The Sheridan Health Services Risk Management Plan provides a detailed description of all elements of the program. Sheridan Health Services' risk management process stresses timely, constructive educational dialogues between involved parties in a continuous effort to improve the quality of patient care. Sheridan

Health Services Risk Management Plan aligns itself with the Risk Management Policies and Procedures of the University of Colorado Anschutz Campus through the College of Nursing.

- **Internal Event or Incident Reporting**

Potential risk management issues will be identified through Sheridan Health Services' Internal Event reporting system. A copy of all incident reports is forwarded to Sheridan Health Services CDs, who maintain an incident log for

tracking and analyzes trends. The CDs and the CQI Steering Committee reviews these to identify trends on the incident log that require system-wide changes

and/or educational in-services. If the CDs believe an incident needs further review (or a trend is observed in more than one incident report), the CDs may review this with the Risk Management Department of the University of Colorado. The CDs will also give annual reports to the CQI Steering Committee on incident trends and complaint trends. CQI will also be responsible for identifying possible system improvements. Finally, the Clinical Directors will give periodic updates to the CEO and Board QA Committee on incident reports and complaints to determine if any providers are mentioned two or more times in the timeframe

5. **Patient Satisfaction**

Both of Sheridan Health Services' primary care medical sites participate in collection of the patient satisfaction survey. The survey measures satisfaction with access to care and staff/provider interactions. Patient satisfaction results are compiled and analyzed. Results are disseminated internally and to the BOD annually. The CQI Committee addresses areas for improvement based on response rates.

6. **Clinical Audits**

Audits from the paper charts and/or the practice management system are required. Audits are conducted annually in conjunction with annual performance reviews. The results of any clinical audit are shared with relevant employees through designated meetings.

## V. Quality Assurance Activities

Sheridan Health Services' has a comprehensive structure for executing quality improvement and quality assurance activities. The following describes the major medical and nursing quality improvement efforts:

- **(CQI) Committee**  
The CQI Committee is charged with the development, modification and approval of clinical protocols. Additional tasks of the CQI committee include the selection of peer review topics, review of clinical audits and recommendations for corrective measures as appropriate and approval of electronic health record templates. The Clinical Directors chair this meeting. Approved clinical protocols and forms are stored on the k-drive.
- **SHS Provider Meetings**  
This monthly meeting focuses on improving organization-wide clinical quality, enhancing panel management, and reducing practice variations across sites. The meetings are a platform to engage in discussions that guide the development of the organization's Health Care Plan designed to improve performance measures results. Process methodologies utilized are rooted in the Model for Improvement.
- **iCare QA activities:** Work on initiatives as needed
- **UDS Measures:** Leadership meets annually or as designated by HRSA with the project officer and discusses clinical and financial measures

In addition to the above stated activities, a number of quality assurance activities occur at Sheridan Health Services to create detailed improvements in each service line, to ensure quality care to all patients. These activities are listed briefly below:

- **Pharmacy & Therapeutics**  
Sheridan Health Services is currently undergoing the development of an on-site pharmacy. The School of Pharmacy faculty, CD, Operations Manager, and CEO are working together to develop the plan of implementation.
- **Laboratory**  
Sheridan Health Services compliance officer performs quality checks through regular audits and reviews. The designated laboratory staff and Clinical Directors are responsible for oversight of the laboratory. They ensure that all laboratory regulations are followed, that protocols are followed for testing lab equipment and complying with laboratory proficiency testing regulations for staff.
- **Utilization Review**  
With the expansion health plans served by Sheridan Health Services, the CDs and CEO will develop a plan for to review the utilization data, distribute as appropriate, and implement changes to improve outcomes.

The following describes quality activities conducted by Behavioral Health departments:

- **Integrated Behavioral Health**  
Monthly meetings focus on integrated care and include case management as needed. The meetings address the challenges and opportunities related to integrating behavioral health counseling into primary care services. It is a joint meeting of behavioral health team, primary care providers, pharmacy, nursing, and staff.

## VI. Policies & Procedures

Policies and procedures are developed in accordance with the administrative team and approved by the board of directors.

- **Clinical Standards of Care**

Policies and procedures are evidence based and aligned with best practice. Policies and procedures are posted on a shared, accessible platform (K-Drive), so that all staff can access them at any time.

- **Patient Grievance Procedures**

Sheridan Health Services has a Patient Grievance policy and procedure that describes how patients may file formal grievances. According to the policy, the patient is directed to Member Services staff person, who documents the complaint, then sends it to the Behavioral Health (BH) Team. The BH Team has thirty days in which to investigate and/or resolve the grievance, communicating with the patient if appropriate, and inform the CDs and CEO of the resolution. A grievance log shall be maintained by the administrative team and saved on k-drive. A summary of trends related to patient grievances should be reviewed by the Quality Assurance Committee of the Board of Directors on an annual basis or upon request.

- **Incident Management**

Sheridan Health Services has a specific policy and procedure related to Risk Management and Internal Event Reporting. An incident is defined as any occurrence at any site or department that has produced an actual, perceived or potential injury, or any practice or product that could potentially cause an injury. According to the policy, the Supervisor or Manager who knows about the incident must immediately fill out an Internal Event Report, documenting the nature of the incident, date, time, facts, summary, resolution, timeframe and any other applicable information. This form is then sent to the CDs, who compiles information in a tracking document that defines the nature of the incident as one related to safety, operations or clinical processes. The CDs present incident trends on a regular basis to the Continuous Quality Improvement Committee and the Quality Assurance

- **Confidentiality of Patient Records**

It is the policy of Sheridan Health Services to protect patient health information in accordance with Federal and State privacy and security regulations. All information shall be confidential and shall be disclosed as needed in accordance with Colorado and federal law. All charts must be kept in locked file cabinets or a locked medical records room. Patient's family and friends will not be informed of the medical visit or whether a medical chart exists unless the patient agrees in writing. Any patient requests to have the medical record transferred, copied or inspected must have a written request. A family member or friend may deliver the written request, but they should be informed that a 'contact' number for the patient or a call from the patient is needed to verify the request prior to releasing medical records. Only Sheridan Health Services staff involved in caring for the patient will have access to the medical record. Under HIPAA Privacy Rule, all possible measures within reason to protect against 'accidental disclosures' will be observed.

## VII. Annual Evaluation

The Clinical Directors and CQI committee will regularly report on current QI and QA activities. Data on performance measures will be assessed and presented to the Clinical Director(s) will prepare a brief report to the full Board of Directors annually, addressing achievements during the past year, initiatives for the coming year, and any updates to the QI/QA Plan.

## VIII. Revisions to the QA/QI Plan

This QI/QA Plan is intended to be flexible and readily adaptable to changes in current initiatives, regulatory requirements and in the healthcare system as a whole. The Plan will be regularly reviewed by the Clinical Directors, Operations Manager, Dental Director, and CQI Committee to assess the viability of the Plan and the inclusion of all appropriate Sheridan Health Services QA and QI activities. The Plan will be revised as experience demonstrates that a certain approach is not effective or suggests a better alternative. Sheridan Health Services' CQI Committee will have the authority to revise or amend the plan with the approval of the Chief Executive Officer.

Memorandum of Understanding:  
July 8, 2011

**INTEGRATED DENTISTRY AT SHERIDAN SCHOOL BASED HEALTH CENTERS**

Children and families within the Sheridan community need comprehensive dental services that are fully integrated into primary care practice. The College of Nursing and the School of Dental Medicine are dedicated to improving the oral health of the community through each of the stated goals:

**Goal 1:** Increase access to comprehensive oral health care for children and families who receive care at Sheridan Health Services

**Goal 2:** Increase number of children who receive oral screenings and sealants

**Goal 3:** Increase number of children who receive preventative and restorative dental treatment

**Goal 4:** Increase number of children and families who receive oral health education

**Goal 5:** Integrate dental services into Sheridan Health Services beginning in 9/1/2011

Sheridan Health Services intends to increase accessibility to dental services for the population served. The vision for dental services is to gradually increase the scope of services provided through the use of the School of Dental Medicine's (SDM) Mobile Dental Clinic, and referrals to the SDM Anschutz Campus based dental clinics.

In order to increase access to care, the bilingual Medicaid Benefits Counselors will conduct financial screenings and assist in financial enrollment activities. The case coordinator will track referrals and develop comprehensive care planning for primary care, mental health, oral health, and substance abuse treatment as needed. Both important entities will maintain activity logs and report pertinent information to the Executive Director.

The Executive Director will be responsible for strategic planning, marketing activities, fee service coordination, outreach oversight, outcome analysis, reporting requirements, and policy development for the Sheridan Health Services Advisory Board review. The Mobile Dental Clinical Director will be responsible for staffing, student supervision, dental services rendered, coordination of care, data collection; and equipment and facility maintenance. Program income will be used to support the needs of the partnership. The budget justification for the grant will be distributed accordingly. Both entities will uphold the Memorandum of Understanding throughout the grant period.

Collaboration is a key component of integrated care. Faculty and staff will meet monthly to discuss goals, analyze system processes, evaluate performance measures, and make necessary adjustments for goal attainment. The Mobile Dental Clinic Director and the Executive Director will report activities and outcomes to the Sheridan Health Services Advisory Board on a quarterly basis. The electronic medical record, Practice Partners, will house data related to the demographics of clinic users, diagnosis codes; and quantity and type of services rendered will be entered into the dental electronic record AxiUm. Any associated activity for oral health services will be logged for reporting requirements and overall effectiveness. The data mining and reporting will be transparent and communicated regularly to all stakeholders.

The MOU is predicated on successful grant funding from HRSA and it will terminate at the end of the project period. Unforeseen changes in business needs or availability of funds may require modification or cancellation of this agreement at any time, in which you would receive written notification.

Project Director, Schwartz, Erica

Signature: Patricia Moritz

Date: 7/12/2011

Patricia Moritz, PhD, RN, FAAN  
Dean and Professor  
Director, NCCFC  
University of Colorado  
Anschutz Medical Campus  
College of Nursing

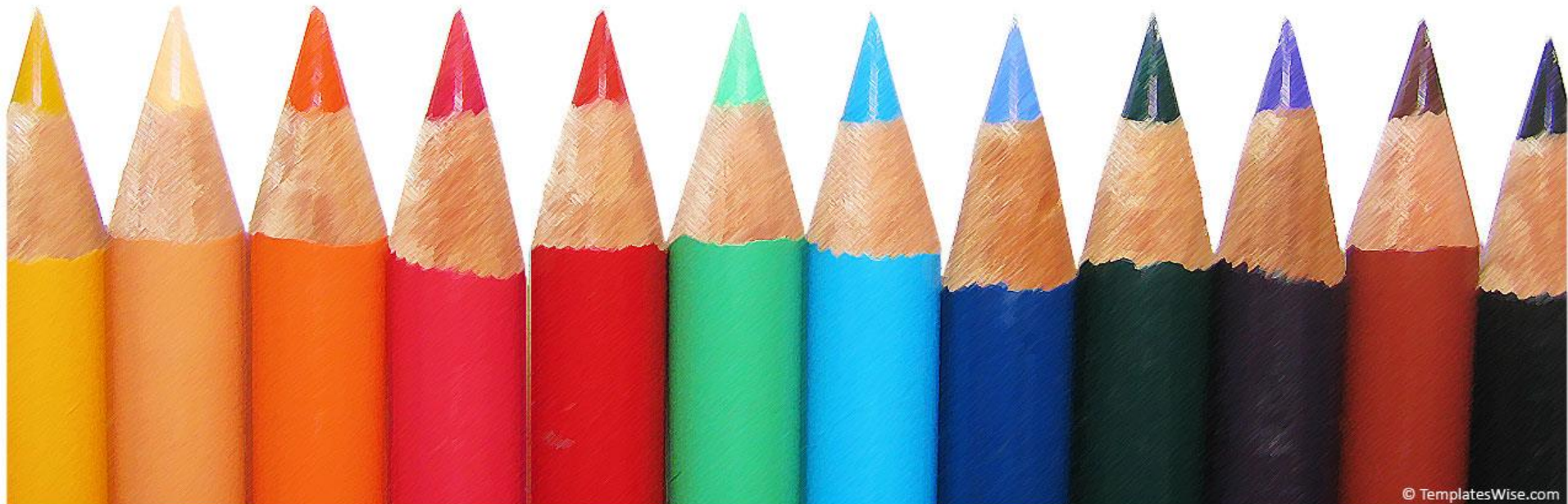
Signature: Denise Kassebaum

Date: 7/8/2011

Denise Kassebaum, DDS, MS  
Dean and Professor  
University of Colorado  
Anschutz Medical Campus  
School of Dental Medicine

**University of Colorado Denver  
College of Nursing  
Sheridan Health Services**

Jacqueline Ansel, COO



# Successful Integration Efforts

- Shared dental, medical, and behavioral health records in new electronic health record system
- Relocated dental clinic from mobile dental van to semi-permanent operatories within the clinic
- Improved internal referrals from varying disciplines

# Challenges to Integration

- Implementation of new EHR
- Disruption of services, i.e. frozen pipes on mobile dental van, inconsistent student rotations, etc.
- Training of primary care and behavioral health providers and support staff on oral health



# Strategies Used to Address Challenges

- Researched software that would allow integrated records
- Moved dental operations inside building
- Provided in-service during staff meetings to ensure staff and providers were adequately trained

## General Information and Consent for Treatment

Welcome and thank you for your interest in the University of Colorado School of Dental Medicine (UCSDM). The School of Dental Medicine is able to provide dental care to many patients while providing a clinical education for our dental, international, and post-graduate programs students

### General Information:

The University of Colorado School of Dental Medicine accepts patients for treatment regardless of race, color, religion, gender, age, national origin, or individual disability.

**Clinical Teaching Setting:** All treatment, with the exception of treatment provided in the Dental Faculty Practice (DFP), is provided by students/residents under the supervision of the clinical teaching staff. Because of the complex nature of some dental treatments, not all patients can be appropriately treated in a school setting. More time is required by students/residents to complete care than in a private dental setting.

**Patient/Provider Availability:** Student, resident, and faculty availability in the teaching clinics is limited due to academic requirements. Patients must have a flexible schedule and must keep their appointments. The student/resident must be notified at least 48 hours in advance to change or cancel an appointment. Treatment may be discontinued for patients who miss more than two appointments without prior notice, or for patients who are unable to keep an effective appointment schedule (excessive cancelled appointments, late to appointments, etc.).

**Patient Identification:** UCSDM is taking steps to help ensure the security of our patient's personal information. This process is done by verifying the identity of all patients during their visits to the School of Dental Medicine. All patients are required to present valid photo identification such as a Colorado driver's license, Colorado identification card, passport or other government-issued photo identification at each appointment. In addition, all patients at the initial appointment will be photographed.

**Interpreter Services:** UCSDM has a free Interpreter Service available upon request for patients during the course of treatment at the School of Dental Medicine. This includes interpreter services when patients do not speak or understand the language as well as for the hearing impaired.

**Fees and Payment of Services:** Services are provided on a pay as you go basis. Payment plans are not available. Patients are expected to pay for services at the time of the appointment. Cash, personal checks, Visa, MasterCard, Discover, and American Express are accepted. Insurance payments are accepted; those charges not covered by insurance remain the responsibility of the patient and are due at the time of service. Medicaid, which covers most dental care for qualified children under the age of 21 and very limited care for qualified adults, is accepted.

**Emergency Services:** UCSDM provides emergency care for patients of record in good standing in our programs. Emergency care for patients who are **NOT** currently enrolled in our programs may be provided on a fee-for-service basis in the walk-in Emergency and Urgent Care Clinic. It should be noted that all fees must be paid at the time treatment is provided, and service is limited to diagnosis (finding the cause) of the patient's emergency and if appropriate, and treatment to control pain or infection.

**Notice of privacy practices:** UCSDM may release information to other entities or health care providers, for treatment, for payment of services and for health care operations as described in the "Notice of Privacy Practices."

**Right to Discontinue Treatment:** I understand that UCSDM has the right to discontinue my care for any appropriate reason, such as excessive missed appointments. In such cases, the patient or patient's representative agrees to accept full responsibility for pursuing alternate professional dental care. A letter will be sent out informing the patient of the treatment that is discontinued. All records pertaining to treatment and diagnosis are a property of UCSDM. Records and x-rays may be duplicated upon written request with a reasonable charge.

**Risks of Dental treatment:** The faculty at UCSDM is available to answer any questions pertaining to risks of procedures. All dental procedures have certain risks; including possible side effects from some medicines used. The risks include, but are not limited to: allergic reactions, cuts/abrasions, tenderness/bruising, and tooth sensitivity.

### General Dentistry Informed Consent for Treatment

This consent for treatment includes but is not limited to:

- Local anesthesia and medicines
- Radiographs, photographs
- Extracting teeth
- Restoring teeth with fillings
- Root canals
- Other

I understand that specific informed consents may be required for any or all of the above procedures. I understand that because of the very nature of any proposed treatment and the uniqueness of myself as an individual; no one can predict the certainty of any outcome or success of any dental treatment. I understand that dental treatment contains no guarantees, warranty, or assurance of success. Each individual case is unpredictable making it impossible to surmise results. I further understand that the results may NOT be to my complete and full satisfaction after treatment is complete and my condition may be the same, better or worse.

I have had an opportunity to ask questions about any policies of UCSDM. These questions have been answered to my complete satisfaction.

I have received the UCSDM Patient Rights and Responsibilities.

I have given an accurate reporting of my medical, mental, and dental health issues.

I consent to the taking of photographs, slides, videotapes and x-rays of my oral and facial structures and the collection of my extracted teeth. I also consent to the use of these photographs, slides, videotapes and x-rays of my oral and facial structures and extracted teeth for publication, education and scientific purposes. I give permission for the School of Dental Medicine to contact me in the future to ask me to take part in research studies.

## General Information and Consent for Treatment

I understand that if a prescription is written for a controlled substance, state law requires that certain prescription information, including my name, be entered into a secure database (Colorado's prescription drug monitoring program) when I fill this prescription at my pharmacy. Authorized prescribers of controlled substances and law enforcement, in limited circumstances, may access the database for allowed uses.

I authorize the faculty, residents and students of the University of Colorado School of Dental Medicine to provide Emergency Care to me or the minor listed on this form.

I understand all of the above patient information contained on this document and agree to abide by all of the procedures and conditions specified. I hereby give permission for diagnosis and /or treatment at the University of Colorado School of Dental Medicine for myself or for the minor child named in this document.

*ELECTRONIC SIGNATURE TO BE ACQUIRED*



SHERIDAN HEALTH SERVICES (SHS), IS A COMMUNITY HEALTH CENTER OFFERING PRIMARY CARE, BEHAVIORAL HEALTH, PHARMACY AND DENTAL SERVICES FOR THE WHOLE FAMILY. IN PARTNERSHIP WITH THE UNIVERSITY OF COLORADO COLLEGE OF NURSING, OUR PROVIDERS WORK AS A TEAM. WE WANT TO PROVIDE YOU WITH COMPREHENSIVE, QUALITY HEALTHCARE THAT FOCUSES ON THE WHOLE-BODY.

### Services for Children (Newborn to 21)

- Sports/school physicals and well child exams
- Hearing and vision screenings
- Immunizations (including flu shots)
- Evaluation and treatment of chronic problems, including asthma
- Parental counseling with child development
- Referral to specialists as needed

### Services for Adults

- Annual physical exams including pre-insurance and pre-employment physicals
- Diagnosis and treatment of minor illness or injury
- Evaluation and treatment of chronic problems
- Diabetes self-management education
- Lab work
- Referral to specialists as needed

### Special Services for Women

- Prenatal and postnatal care
- Annual examinations, pap smears and contraceptive services
- Menopause/hormonal therapy
- Nutrition counseling
- Evaluation and treatment of chronic problems

### Behavioral Health Services

- Counseling for individuals and families provided or overseen by a licensed mental health professional
- Substance abuse assessment and diagnosis

### Dental Services

- Exam, X-rays and cleanings
- Preventive care, including fluoride varnishes, sealants
- Restorative care, including fillings, root canals, extractions

### Outreach and Enrollment Services

Patients without insurance may be eligible to enroll in Medicaid, CHP+, or the Health Insurance Marketplace (Connect4Health Colorado). The SHS Outreach and Enrollment Specialists help patients navigate and enroll in the insurance type most appropriate to each person's situation. Contact us today to set an appointment.

### Payment

We accept Medicaid (Eligibility screening available), Medicare, Colorado Access, CHP+, and CACP.

Are you uninsured? You may be eligible for our sliding-scale discount program. Call the clinic to set an appointment with our outreach and enrollment specialists.

We also accept payment in cash, check, Visa, or MasterCard. Please call us if you need additional information.

### Locations

#### Sheridan School-Based Health Center

4107B S. Federal Blvd. Englewood, CO 80110  
303-781-1636

Hours: Monday, Wednesday 10 AM – 6 PM;  
Tuesday, Thursday, Friday 8 AM – 5 PM

#### Sheridan Health Center

3525 W. Oxford Ave, Unit G3 Denver, CO 80236  
303-797-4260

Hours: Monday, Tuesday, Thursday, Friday 8 AM – 5 PM;  
Wednesday 10 AM – 6 PM

[WWW.SHERIDANHEALTHSERVICES.ORG](http://WWW.SHERIDANHEALTHSERVICES.ORG)



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