

Chapter: Quality Improvement	Effective Date: 4/15/17
Title: Quality-of-Care Indicator	Page: 1 of 1
	NEW

(a) **Standard.**

Medication administration by halfway house staff is monitored on an ongoing basis to promote quality improvement.

(b) **General Requirements.**

- (1) As a quality-of-care indicator, compliance with medication administration is measured and tracked monthly by the Texas Juvenile Justice Department (TJJD) Medical Services Division.
- (2) Tracking includes a review of the Scanned Medication Administration Recording Technology (SMART) system, Medication Error Reports, [Refusal Forms, HLS-520](#), and [Medication Administration Records \(MARs\), HLS-510](#).
- (3) A report of quality-of-care indicators is presented monthly to the TJJD/University of Texas Medical Branch Correctional Managed Care (UTMB-CMC) Continuous Quality Improvement (CQI) Committee.

(c) **Procedures.**

- (1) The **TJJD regional nurse manager**:
 - (A) selects from each halfway house a random sample of active youth (50%) who have been prescribed medication by a medical, dental, or psychiatric provider (as listed in SMART) for the prior month;
 - (B) reviews all medications prescribed for each selected youth, omitting protocol orders;
 - (C) divides the number of medication doses administered and documented correctly by the total doses of medication prescribed for youth within the sample;
 - (D) provides a score that reflects the percentage of medication administered and documented correctly (percent compliant); and
 - (E) requests a corrective action plan from the respective halfway house superintendent for scores below 95% compliance.
 - (2) The **superintendent** submits corrective action plans to the TJJD regional nurse manager as required.
 - (3) The **TJJD director of nursing** presents and discusses SMART compliance scores and trends monthly in TJJD/UTMB-CMC CQI meetings.
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