

HEALTH SERVICES POLICY & PROCEDURE MANUAL

North Carolina Department Of Correction
Division Of Prisons

SECTION: ADMINISTRATIVE

POLICY # AD II-9

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SUBJECT: Nursing Quality Control Monitoring

EFFECTIVE DATE: **April 2011**
SUPERCEDES DATE: **March 2011**

PURPOSE

To provide a system for verifying and maintaining a desired level of quality of identified high risk and/or problem-prone activities/processes.

POLICY

The nurse manager will insure that quality control monitoring will be conducted monthly.

PROCEDURE

1. The Director of Nursing for the Division of Prisons will identify activities and processes to monitor on a regular basis. Performance improvement and risk management data, issues that have arisen and community standards may be used to identify these activities and processes. These activities and processes will be evaluated at least annually to determine any needed changes.
2. The Nurse Manager should involve staff on all shifts to assist in monitoring.
3. The Nurse Manager/designee gathers information from the monitoring and completes the quality control monitoring checklist.
4. If any areas are answered some improvements needed to adhere to policy and/or procedure or below expected performance level the nurse manager takes action to correct or improve.
5. The Nurse Manager signs the form and submits the checklist to the Regional Assistant Director of Nursing or designee. In the case of in-patient facilities, the checklists are submitted to the Director of Nursing for the Division of Prisons or designee.
6. Regional points of contact and PI Coordinators at the In-patient facilities are responsible for reviewing and trending data. Trends are to be reported to the Standards Director and Director of Nursing.
7. **Specific Instructions: The nurse manager of the facility shall have**
 - a. A tracking system to monitor nurses' licenses and nurse assistants' listings to avoid any expiration of license/listing.
 - b. An inmate/patient medical record(s) quality checked in accordance to Health Services policy TX II-20.
 - c. An emergency response kit-which is to be checked monthly and after each code to insure all supplies are in date and present.
 - d. Will have a tracking system to monitor staff compliance with Basic Life Support (BLS) training.

Paula Y. Smith, M.D.

6/8/11

Paula Y. Smith, MD, Director of Health Services

Date

SOR: Director of Nursing