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COMMISSIONER

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ADMINISTRATIVE REGULATION  
NUMBER 606

OPR: HEALTH SERVICES

## MENTAL HEALTH CONTINUOUS QUALITY IMPROVEMENT PROGRAM

### I. GENERAL

This Alabama Department of Corrections (ADOC) Administrative Regulation (AR) establishes the policies, procedures, and responsibilities for implementing a Mental Health Continuous Quality Improvement Program covering all areas of mental health services.

### II. POLICY

It is the policy of the ADOC to ensure that the Vendor establishes a Mental Health Continuous Quality Improvement Program that both evaluates the quality of mental health services provided system-wide and provides recommendations and plans for improvement.

### III. DEFINITIONS

- A. **Annual Quality Improvement Plan (AQIP)**: A specifically targeted yearly review of medical / mental health records for quality assurance purposes.
- B. **Mental Health Continuous Quality Improvement Program**: A structured program designed to systematically monitor current practices and documentation of mental health services to ensure compliance with policies and procedures. The program also reviews individual incidents and service delivery problems to identify areas for improvement, promote necessary change, and assess the outcome of such change.

#### **IV. RESPONSIBILITIES**

- A. The ADOC Director of Mental Health Services is responsible for oversight of the development of this AR.
- B. The ADOC Director of Psychiatry is responsible for ensuring that mental health quality goals are consistent with relevant standards of care.
- C. The ADOC Regional Psychologists are responsible for oversight and monitoring the implementation of this AR.
- D. The Vendor Mental Health Program Director is responsible for ensuring that all Vendor staff receives training on the implementation of this AR.
- E. The Vendor Health Services Administrator and the Vendor Mental Health Site Administrator at each facility are jointly responsible for ensuring that all Vendor staff at that facility receive training on the implementation of this AR.
- F. The Vendor Quality Improvement Director will maintain a process within its Mental Health Continuous Quality Improvement Program for ensuring the accuracy and reliability of medication administration, and for responding to and minimizing medication errors and non-adherence.

#### **V. PROCEDURES**

- A. The Vendor Mental Health Program Director (or designee) will:
  - 1. Provide a management information system capable of providing statistical data necessary for the evaluation and monitoring of mental health services.
  - 2. Develop and use comprehensive audit tools that include the Vendor's mental health quality measures.
  - 3. Ensure that the quality improvement program reviews at least 10% of the caseload records at each facility each year, including at least 10% of the caseload in each specialized program (i.e., Stabilization Unit (SU), Residential Treatment Unit (RTU), and Structured Living Unit (SLU)).
  - 4. Indicate that a threshold of 85% is the minimum acceptable overall target for each performance monitoring standard.
  - 5. Utilize information gathered for the preparation of monthly reports of services and semi-annual and annual reports for the analysis of services provided.

6. Monitor data collection by the Vendor Health Services Administrator and the Vendor Mental Health Site Administrator at each facility with monthly reports generated and presented for discussion at each facility's monthly Mental Health Continuous Quality Improvement Program Committee meeting.
7. Generate CQI Committee meeting minutes and maintain on site.
8. Provide a copy of each CQI report and Corrective Action Plan (CAP) to OHS within thirty (30) calendar days from the identification of a measure that falls below the 85% threshold.
9. Meet quarterly with OHS to review CQI results, corrective action plans, and opportunities for further quality improvement.
10. Complete at least one (1) process and/or outcome quality improvement study each year.
11. Update CQI plans at least annually.
12. Document a written annual review of the effectiveness of the CQI by reviewing quality improvement studies and CQI Committee meeting minutes.
13. The Vendor Quality Improvement Program Director will develop and distribute an annual report on the Mental Health Continuous Quality Improvement Program, which will include the AQIP for the upcoming year, by February 1st of each year.
14. Ensure that the Mental Health Continuous Quality Improvement Program also includes:
  - a. A Peer-Review Process.
  - b. A Mortality Review Process.
  - c. A review of Sentinel Events and Near Misses.
  - d. A review of all aspects of Suicide Prevention.

B. The Vendor Psychiatric Director (or designee) will:

1. Ensure the Peer Review process provides accurate and timely feedback to Vendor psychiatrists and mental health nurse practitioners regarding their management of psychotropic medications.

2. Ensure that a Quality Assurance process is in place for identifying and responding to systemic challenges such as Polypharmacy and Non-Adherence.
3. Monitor system-wide patterns of non-adherence and review the relevant findings and corrective actions with the ADOC Director of Psychiatry on a quarterly basis.

C. The ADOC Office of Health Services Division will:

1. Conduct independent audits of the Vendor's Mental Health Continuous Quality Improvement Program focused on the quality of mental health services provided system-wide and share the results with the Vendor in a timely manner.
2. Provide a verbal exit report at the conclusion of its facility monitoring visit.
3. Submit a written monitoring report to the Vendor within sixty (60) working days from the date the exit audit summary is concluded.
4. Include the completed contract monitoring tool.
5. Identify each monitoring performance indicator in which the Vendor falls below the 85% threshold.
6. Provide the Vendor the opportunity to develop and submit a Corrective Action Plan for the performance measures below the 85% threshold.

## **VI. DISPOSITION**

Any forms used will be disposed of and retained according to the Departmental Records Disposition Authority (RDA).

## **VII. FORMS**

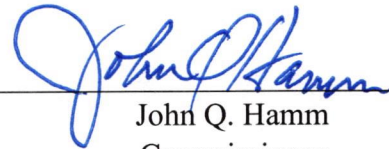
There are no forms prescribed in this AR.

## **VIII. SUPERSEDES**

This Administrative Regulation supersedes AR 606, *Mental Health Quality Improvement Program*, dated March 30, 2006, and any related changes.

IX. **PERFORMANCE**

- A. Code of Alabama 1975 § 14-1-1.1 *et seq.*
- B. Braggs v. Hamm, No. 2:14-cv-00601-MHT-JTA (M.D. Ala. filed June 17, 2014).
- C. NATIONAL COMMISSION ON CORRECTIONAL HEALTH CARE, STANDARDS FOR MENTAL HEALTH SERVICES IN CORRECTIONAL FACILITIES (2015).
- D. NATIONAL COMMISSION ON CORRECTIONAL HEALTH CARE, STANDARDS FOR HEALTH SERVICES IN PRISONS (2018).



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John Q. Hamm  
Commissioner