

MEDICAL QUALITY MANAGEMENT

I. Purpose

This Directive establishes the policy on Medical Quality Management (MQM) for the Department of Homeland Security (DHS).

II. Scope

- A. With the exception of the United States Coast Guard (USCG), as further stated below, this Directive applies to policies and programs related to the provision of medical services by all DHS health care providers.
- B. This Directive does not apply to:
 - 1. Health services provided by, for, or on behalf of the United States Coast Guard (USCG) that are in alignment and compliant with Department of Defense, TRICARE, and USCG Commandant Directives and Instructions related to the provision of health services.
 - 2. Individual medical decisions made with respect to individual patients.

III. Authorities

- A. Title 6, United States Code, § 321e, "Chief Medical Officer"
- B. DHS Delegation 5001, "Delegation to the Assistant Secretary for Health Affairs and Chief Medical Officer"

IV. Definitions

- A. **Certification:** The external verification of the competencies that an individual has achieved; typically involves an external process such as the National Registry for Emergency Medical Technicians, National Commission on Certification of Physician Assistants, or a Board recognized by the American Board of Medical Specialties, the American Board of Nursing Specialties, or the American Dental Association.

B. **Credentialing:** The process by which an organization assesses the qualifications and background of professional or paraprofessional personnel prior to permitting the person to practice designated medical services/skills on behalf of the organization. Such assessment includes the primary verification of professionals' or para-professionals' education, licenses or certifications/registrations. It does not include the issuing of licenses, certifications or registrations to professionals and paraprofessionals for the practice of designated medical health services.

C. **Health Care Provider:** An organization or person who delivers authorized health care in a systematic way to individuals or groups in need of health care services, including any employees assigned to provide professional or para-professional healthcare services as a part of their DHS duties. This term also applies to detailees from other federal agencies and contractors whenever the purpose of the detail/contract includes performance of healthcare services.

D. **License:** The permission granted to an individual by a State or U.S. Territory or Possession to perform certain medical activities.

E. **MQM Program:** A program which provides for measurement of system performance and adjustments through training and/or policy to improve quality.

V. Responsibilities

A. The Assistant Secretary for Health Affairs and Chief Medical Officer (ASHA/CMO):

1. Provides oversight of medical professional activities within DHS, and ensures this Directive is appropriately implemented within Components providing health services.
2. Ensures consistent application of MQM Programs across the Department.
3. Performs credentialing on behalf of DHS for those personnel (or applicants) whose position descriptions explicitly require that the individual or applicant have the duties/qualifications to provide designated medical services. Specific duty assignments remain solely within the purview of the employing Component.
4. Develops a Centralized Credentials Management System.

B. The Component Heads:

1. Exercise oversight of the implementation of this Directive within

their Components and ensure consistent application.

2. Ensure detailees and contractors have the qualifications (licenses, certifications and/or registrations) necessary to perform designated medical services before they are permitted to deliver health care services for, or on behalf of, the Department.

VI. Policy and Requirements

A. All Components providing health services maintain an active and effective MQM Program. The ASHA/CMO oversees Component MQM Programs through the Office of Health Affairs.

B. Component MQM Programs include a quality assurance and improvement program that includes oversight, peer review, risk management, patient safety, and training; and documentation of organizational structures, standard of care, health care policies, and protocols.

C. Component MQM Programs seek ASHA/CMO credentialing of DHS medical services personnel and applicants for positions in the Component with position descriptions that include the requirement that the personnel or applicants have the duties/qualifications to provide designated medical services.

D. Detailees from other federal agencies. Components rely upon the detailing federal agency's credentialing of the detailee. Components request verification of the detailing federal agency's credentialing and provide copy to the ASHA/CMO.

E. Records created by, for, or on behalf of DHS as part of a MQM Program are maintained and protected in compliance with applicable Federal law including the Privacy Act of 1974 (5 U.S.C. §552a).

VII. Questions

Address any questions or issues related to this Directive to the Office of Health Affairs.



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Under Secretary for Management

10/02/2009
Date