

# **Correctional Health Services**

# Quality Assurance/Performance Improvement Plan Overview

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### Introduction

- NYC Health + Hospitals is the nation's largest municipal healthcare delivery system in the United States, which CHS became part of ten years ago.
- As the public safety-net health care system of New York City, NYC Health + Hospitals is an integrated health care system of hospitals, federally qualified health centers, long-term care facilities, correctional health services, and a community care division.
- The NYC Health + Hospitals Quality Assurance/Performance Improvement (QAPI) plan includes measurable goals, evaluates the effectiveness of the prior year's quality goals, and describes quality and performance improvement.

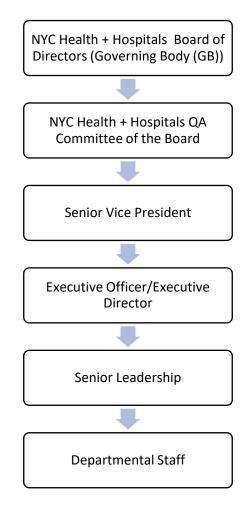


# Mission, Values and Strategic Pillars

- The QAPI Plan aligns with the NYC Health + Hospitals' Mission, Vision, Strategic Pillars, and Values, which as a part of NYC H+H, CHS embraces.
- NYC Health + Hospitals' *Mission* is to deliver high quality health services with compassion, dignity, and respect to all, without exception.
- NYC Health + Hospitals' Vision is to be a fully integrated health system that takes care of all New Yorkers, no exceptions.
- NYC Health + Hospitals' Values include the ICARE standards for all staff.
  - These values are: Integrity, Compassion, Accountability, Respect, and Excellence.
- NYC Health + Hospitals has developed five Strategic Pillars for all facilities and services to persevere toward common goals and efforts that align with the organizational strategy.
  - The five Strategic Pillars are: Quality & Outcomes, Care Experience, Financial Sustainability, Access to Care, and Culture
    of Safety

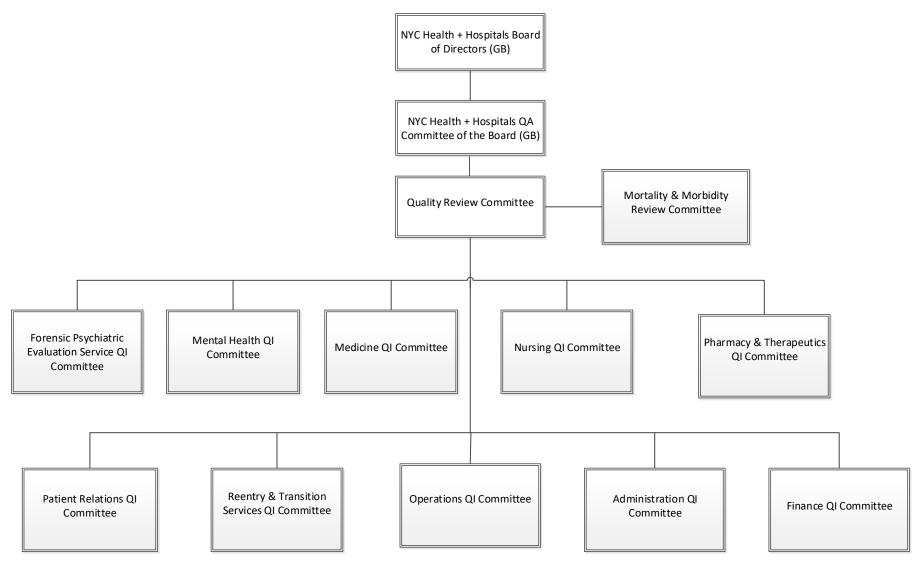


### **H+H QAPI Structure**





### **CHS QAPI Structure**





# **CHS QAPI and Scope of Services**

The CHS QAPI is a division-wide, data-driven, interdisciplinary quality assessment and performance improvement plan that involves all departments and services.

The program consists of three core components:

- Quality Improvement Committees
- Quality Assurance/Performance Improvement Indicators (metrics)
- Performance Improvement Projects (PIPs).

The integration of these three systems of quality serves as the foundation for comprehensive patient-centered quality management.



# CHS Quality Improvement Committees

The service-specific Quality Improvement Committees (QICs) serve as the foundation of CHS's QAPI structure. Each QIC is responsible for monitoring its core performance indicators and reports to the CHS Quality Review Committee.

#### Each QIC determines and maintains:

- Committee responsibilities and quality improvement goals
- Membership and participation
- · Frequency of meetings and agenda items
- Performance indicators and performance improvement projects
- · Record keeping responsibilities



# CHS Quality Improvement Committees

#### **Quality Review Committee – Chaired by SVP of CHS**

Meets monthly to review major findings, recommendations, and concerns related to quality of medical and mental health care, pharmacy services, nursing, patient relations, reentry and transition services, human resources/IT, forensic psychiatry evaluation, finance and shared services and operations, for the continuous enhancement and optimization of the individual Quality Improvement Committees (QIC).

#### **CHS QICs:**

- Administration QIC Chaired by CHS Chief Administrative and Compliance Officer
- Forensic Psychiatry Evaluation Service (FPES) QIC Chaired by CHS Director of FPES
- Medicine QIC Chaired by CHS Chief of Service, Medicine
- Mental Health QIC Chaired by CHS Chief of Service, Mental Health
- Nursing QIC Chaired by CHS Chief Nursing Officer
- Operations QIC Chaired by CHS Chief Operations Officer
- Patient Relations QIC Chaired by CHS Senior Assistant Vice President of Communications & External Affairs
- Pharmacy & Therapeutics QIC Chaired by CHS Assistant Vice President of Pharmacy
- Reentry and Transitional Services QIC Chaired by CHS Senior Assistant Vice President of Reentry and Transition Services
- Finance and Shared Services Chaired by CHS Chief Financial Officer, Senior Assistant Vice President



# CHS Quality Assurance/ Performance Indicators and Performance Improvement Projects

The Quality Assurance/Performance Improvement Indicator (metrics) focuses on the monitoring of major clinical areas of patient care delivery. Facility-specific performance indicator data is communicated consistently to line staff, depending on the type of indicator and service. Department/service leadership and their QICs report quality indicator performance to the Quality Review Committee (QRC), chaired by the CHS Senior Vice President (SVP) and attended by CHS service leaders.

• CHS leadership reviews system-wide performance improvement data and interventions to address areas in need of improvement and new and ongoing concerns, and to coordinate quality efforts with other NYC Health + Hospitals facilities or outside partners.

The Performance Improvement Project (PIP) system focuses on promoting performance improvement projects (PIPs). A PIP is a team process to develop and implement system-wide interventions to improve patient care. Our PIPs support CHS strategic improvement goals and align with the NYC Health + Hospitals model for system-wide performance improvement.