



CONTINUOUS QUALITY IMPROVEMENT PROGRAM **DRAFT**

POLICY NO: **6002**

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EFFECTIVE DATE:

REVISED DATE:

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Regional EMS Administrator

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Regional EMS Medical Direct

AUTHORITY: Health and Safety Code, Division 2.5, Section 1797.220; California Code of Regulations, Title 22, Division 9, Chapter 12

6002.00 PURPOSE

- a. To identify primary responsibilities of all participants in the Coastal Valleys EMS Agency (LEMSA) Quality Improvement Program (EQIP) and to ensure optimal quality of care for all patients who access the EMS system. By the continuous study and improvement of a process, system or by an organization's participation in, the EQIP will promote, enhance and ensure the quality of pre-hospital emergency medical care and the system.
- b. This will be done by:
 - 1) Establish an advisory committee to evaluate, monitor and improve on a continual basis the quality of patient care given by all EMS personnel and the effectiveness of local policies and treatment protocols.
 - 2) Provide a mechanism whereby EMS personnel or other interested parties can have quality improvement issues and questions related to out of hospital care addressed.
 - 3) Evaluate and improve system performance by constant and consistent data review.

6002.01 DEFINITIONS

- a. EMS Quality Improvement Plan: An integrated, multidisciplinary program that focuses on system improvement. Methods of evaluation are composed of structure, process and outcome measurements.
- b. Quality Assurance (QA): Looks backwards at either individual events or the system and evaluates compliance against a standard.

6002.02 EMS SYSTEM EQIP

- a. The LEMSA will establish and facilitate a system-wide EQIP to monitor, review, evaluate and improve the delivery of pre-hospital care services. The program will involve all permitted system participants providing any level or type of pre-hospital care and will include, but not be limited to the following activities:
 - 1) Prospective: designated to prevent prospective problems.
 - 2) Concurrent: designated to identify problems or potential problems during patient care.

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- 3) Retrospective: designed to identify potential or known problems and prevent their recurrence.
 - 4) Reporting/Feedback: all EQIP activities will be reported to the LEMSA.
 - b. The LEMSA shall collect and analyze data from the EMS System Providers to evaluate quality of prehospital care in the Coastal Valleys EMS System. Development of EQIP indicators will be consistent with Title 22 Division 9 chapter 12 and modeled after the State of California EMS Authority (EMSA) publication #164 EMS-QIP Model Guidelines. Collection and data requirement will be consistent with *Administrative Policy 6000 Provider Data Requirements*.
 - c. The oversight for the EQIP will be the responsibility of the EMS Medical Director with advice from stakeholders participating on the Pre-hospital Quality Improvement Committee.
 - d. Appropriate QI indicators shall be requested of providers and participants, reviewed at the agency level on a monthly basis and a report of findings shall be made to the LEMSA at agreed upon intervals. Aggregate data for the EMS System will be maintained by the LEMSA.
 - e. The LEMSA shall provide an annual report of quality improvement activities to the California EMS Authority. This information may be incorporated as part of the Coastal Valleys Emergency Medical Services Agency Annual Report.
 - f. All proceedings, documents and discussions of the Pre-hospital Quality Improvement System are confidential pursuant to section 1157.7 of the Evidence Code of the State of California.

6002.03 LEMSA RESPONSIBILITIES FOR EQIP

- a. Prospective
 - 1) Comply with all pertinent of Federal, State and County rules, regulations, laws and codes that are applicable to an EMS agency.
 - 2) Certify, accredit or authorize first responders, EMT and Paramedic's to practice.
 - 3) Coordinate pre-hospital quality improvement committees.
 - 4) Develop and assist EQIP program participants in the development of performance standards and indicators.
 - 5) Implement basic and advanced life support systems.
 - 6) Approve and monitor pre-hospital training programs.
 - 7) Establish policies and procedures to assure medical control, which may include dispatch, basic life support, advanced life support, patient destination, patient care guidelines and quality improvement requirements.
 - 8) Facilitate system wide compliance and implementation of required quality improvement plans.
- b. Concurrent
 - 1) Serve as a resource for EQIP program participants.
 - 2) Conduct analysis of data received from system participants
 - 3) Conduct site visits to monitor and evaluate system components.
 - 4) Participate in direct medical oversight activities.

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- 5) Communicate EQIP activities and findings to system participants.
- c. Retrospective
- 1) Evaluate the process developed by system participants for retrospective analysis of pre-hospital care.
 - 2) Evaluate identified trends in the quality of pre-hospital care delivered in the system.
 - 3) Monitor and evaluate the unusual occurrence review process.
 - 4) Take appropriate action with first responder, BLS providers, ALS providers, receiving hospitals, base hospitals and medical dispatch centers that do not meet established thresholds for service quality.
- d. Reporting/Feedback
- 1) Evaluate submitted reports from system participants and make changes in system design as necessary.
 - 2) Provide feedback to system participants when applicable or when requested on Quality Improvement issues.
 - 3) Design pre-hospital research and efficacy studies regarding pre-hospital care including but not limited to medication administration, treatment and interventions, equipment, pre-hospital personnel skill performance, and patient care outcomes.
 - 4) Update policies and procedures to reflect best practices in pre-hospital care based upon reliable, current research based evidence.
 - 5) Recognize and reinforce exemplary performance by pre-hospital care providers.

6002. 04 EMS SYSTEM PROVIDER QUALITY ASSURANCE PROGRAMS

- a. The EMS Provider Quality Assurance Program (EQAP) shall be in accordance with the Emergency Medical Services System Quality Improvement Program Model Guidelines (Rev. 3/04), incorporated herein by reference, and shall be approved by the LEMSA, which at a minimum addresses:
- 1) Prospective
 - a) Participate on EMS advisory committees
 - b) Evaluation
 - A. Develop criteria for evaluation of personnel to include, but not limited to:
 - i. Patient record report form (or ePCR).
 - ii. Field/Workplace observation.
 - iii. Routine call/dispatch audit/review.
 - iv. Problem-oriented cases as identified by the EQAP process.
 - v. Action plans for individual provider and provider agency deficiencies.

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2) Concurrent Activities

- a) Field observation: Establish a procedure for evaluation of field/workplace providers utilizing performance standards through direct observation.
- b) Review specific audit topics established through the CQI Committee.
- c) Comply with reporting and other CQI requirements, as specified by the LEMSA
- d) Participate in prehospital research and efficacy studies requested by the LEMSA

3) Retrospective Analysis

- a) Develop a process for retrospective analysis of field care, utilizing available documentation and data sources, to include, but not limited to:
 - A. High-risk.
 - B. High-volume.
 - C. Problem-oriented calls as identified by the EQAP process and those calls requested to be reviewed by the LEMSA

4) Reporting / Feedback

- a) Develop a process for identifying trends in the quality of field or responsible agency care.
 - b) Reports as specified by the LEMSA
 - c) Design, offer and participate in educational offerings based on problem identification and trend analysis.
 - d) Make changes in internal policies and procedures based on trend analysis.
 - e) Establish procedure for informing all field/agency personnel of system changes.
- b. All permitted providers shall participate in the activities of the LEMSA via provider quality assurance programs.

6002.05 QUALITY IMPROVEMENT (CQI) COMMITTEE AND COMPLIANCE

- a. CQI Committee -Scheduled meetings will be held Quarterly. This committee is comprised of EMS staff, EMS Medical Director, EMS representatives from all provider agencies and the Base Hospital. The committee is chaired by the EMS Quality Improvement Coordinator or designee.
- b. Purpose:
 - 1) The committee coordinates and monitors the quality of pre-hospital care and overall Pre-hospital quality improvement activities of the LEMSA
 - 2) Provide a forum to develop a consistent approach to gathering and analyzing data, and other quality improvement activities
 - 3) Provide guidance and support to EQIP and EQAP activities
 - 4) Identifies EQIP and EQAP educational needs
 - 5) Facilitates/provides education

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c. Quality Improvement Standards Compliance

- 1) The process(s) contained herein will be followed to ensure active participation of all system participants in the EQIP program.
- 2) When a provider agency continues to fail to meet participation requirements as outlined in this policy, the LEMSA may revoke provider status. At this point, the provider agency will be required to comply with LEMSA requests for committee participation and re-apply to regain provider status.

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