

CONTINUOUS QUALITY IMPROVEMENT PROGRAM

PURPOSE

The purpose of the EMS Continuous Quality Improvement Program is to improve the quality and effectiveness of emergency medical services through standardization, coordination and evaluation.

AUTHORITY

California Health and Safety Code, Division 2.5, Sections 1797.204, 1797.220 and 1798

California Code of Regulations, Title 22, Chapter 12, Article 1-4

POLICY

The YEMSA system shall develop methods of evaluation that are composed of structure, process and outcome evaluations which focus on improvement efforts to identify root causes of problems, intervene to reduce or eliminate these causes and take steps to correct the process and recognize excellence in performance and delivery of care.

PROCEDURE

A. EMS Service Provider Responsibilities

1. Develop and implement, in cooperation with other EMS system participants, a provider-specific written EMS CQI Program, as identified in Title 22, Chapter 12, and Article 2. Such programs shall include indicators, as defined in Section III and Appendix E of the Emergency Medical Services Quality Improvement Program Model Guidelines, which address, but are not limited to the following:
 - a. Personnel
 - b. Equipment and Supplies
 - c. Documentation
 - d. Clinical Care and Patient Outcome
 - e. Skills Maintenance / Competency
 - f. Transportation / Facilities
 - g. Public Education and Prevention
 - h. Risk Management
 - i. Other
2. Review the provider-specific EMS CQI Program annually for appropriateness to the system and revise as needed.
3. Participate in the YEMSA CQI Program that may include making available mutually agreed upon relevant records for program monitoring and evaluation.
4. Develop, in cooperation with appropriate personnel/agencies, a performance improvement action plan when the EMS CQI Program identifies a need for improvement. If the area identified as needing improvement includes system clinical issues, collaboration is required with the provider medical director and the YEMSA medical director or his/her designee if the provider does not have a medical director.

5. Provide the YEMSA with an annual update, from date of approval and annually thereafter, on the provider EMS CQI Program. The update shall include, but not limited to a summary of how the EMS provider's EMS CQI Program addressed the program indicators.
6. The EMS Provider CQI Program 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 YEMSA. This is to be tailored to the individual organization's quality improvement needs and is to be based on available resources for the EMS CQI Program.
7. The Provider EMS CQI Program shall be reviewed by the YEMSA every five years.

B. Base Hospital and Modified Base Hospital Responsibilities

1. Develop and implement, in cooperation with other EMS system participants, a hospital-specific written EMS CQI Program, as defined in Title 22, Chapter 12, and Article 3. Such programs shall include indicators, as defined in Section III and Appendix E of the Emergency Medical Services Quality Improvement Program Guidelines, which address, but are not limited to the following:
 - a. Personnel
 - b. Equipment and Supplies
 - c. Documentation
 - d. Clinical Care and Patient Outcome
 - e. Skills Maintenance / Competency
 - f. Transportation / Facilities
 - g. Public Education and Prevention
 - h. Risk Management
 - i. Other
2. Review the hospital-specific EMS CQI Program annually for appropriateness to the operation of the base hospital or modified base hospital and revise as needed.
3. Participate in the YEMSA's EMS CQI Program that may include making available mutually agreed upon relevant records for program monitoring and evaluation.
4. Develop, in cooperation with appropriate personnel/agencies, a performance improvement action plan when the base hospital or modified base hospital EMS CQI Program identifies a need for improvement. If the area identified as needing improvement includes system clinical issues, collaboration with the base hospital medical director or his/her designee or modified base hospital medical director or his/her designee is required.
5. Provide the YEMSA with an annual update, from date of approval and annually thereafter, on the provider EMS CQI Program. The update shall include, but not limited to, a summary of how the base / modified base hospital's EMS CQI Program addressed the program indicators.
6. The EMS Base / Modified Base hospital CQI Program 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 YEMSA. This is to be tailored to the individual organization's quality improvement needs and is to be based on available resources for the EMS CQI Program.
7. The Base / Modified Base Hospital EMS CQI Program shall be reviewed by the YEMSA at least every five years.

C. YEMSA Responsibilities

1. Develop and implement, in cooperation with other EMS system participants, a system-wide written EMS CQI program as defined in Title 22, Chapter 12, and Article 4. Such programs shall include indicators, as defined in Section III and Appendix E of the Emergency Medical Services System Quality Improvement Program Model Guidelines, which address, but are not limited to the following:
 - a. Personnel
 - b. Equipment and Supplies
 - c. Documentation
 - d. Clinical Care and Patient Outcome
 - e. Skills Maintenance/Competency
 - f. Transportation/Facilities
 - g. Public Education and Prevention
 - h. Risk Management
 - i. Other
2. Review the system-wide EMS CQI Program annually for appropriateness to the system and revise as needed.
3. Develop, in cooperation with appropriate personnel/agencies, a performance improvement action plan when the EMS CQI Program identifies a need for improvement. If the area identified as needing improvement includes system clinical issues, collaboration is required with the YEMSA medical director.
4. Provide the EMS Authority with an annual update, from date of approval and annually thereafter, on the YEMSA's EMS CQI Program. The update shall include, but not be limited to, how the YEMSA's EMS CQI Program addressed the program indicators.
5. The YEMSA CQI Program 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 EMS Authority. This is to be tailored to the individual organization's quality improvement needs and is to be based on available resources for the EMS CQI Program.
6. The YEMSA EMS CQI Program shall be reviewed by the EMS Authority at least every five years.

CROSS REFERENCES

Emergency Medical Services System Quality Improvement Program Model Guidelines, EMS Document #166: <http://www.emsa.ca.gov/pubs/pdf/emsa166.pdf> or <http://www.emsa.ca.gov/>

Prehospital Care Policy Manual

Statewide CCQI Plan Template