

# SIERRA-SACRAMENTO VALLEY EMS AGENCY PROGRAM POLICY

REFERENCE NO. 620

**SUBJECT: CONTINUOUS QUALITY IMPROVEMENT PROGRAM (CQIP)**

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## **PURPOSE:**

The purpose of the EMS Continuous Quality Improvement Program (CQIP) 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 S-SV EMS 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 QI Program, as identified in Title 22, Chapter 12, 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

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**Effective Date: 06/01/2011**  
**Next Review Date: 01/2014**  
**Approved:**

**Date last Reviewed / Revised: 01/11**  
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**SIGNATURE ON FILE**  
**S-SV EMS Medical Director**

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**SIGNATURE ON FILE**  
**S-SV EMS Regional Executive Director**

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2. Review the provider-specific EMS QI Program annually for appropriateness to the system and revise as needed.
3. Participate in the Local EMS Agency's EMS QI 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 QI 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 Local EMS Agency medical director or his/her designee if the provider does not have a medical director.
5. Provide the Local EMS Agency with an annual update, from date of approval and annually thereafter, on the provider EMS QI Program. The update shall include, but not limited to a summary of how the EMS provider's EMS QI Program addressed the program indicators.
6. The EMS Provider QI 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 Local EMS Agency. This is to be tailored to the individual organization's quality improvement needs and is to be based on available resources for the EMS QI Program.
7. The Provider EMS QI Program shall be reviewed by the Local EMS Agency 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 QI Program, as defined in Title 22, Chapter 12, 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

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2. Review the hospital-specific EMS QI Program annually for appropriateness to the operation of the base hospital or modified base hospital and revise as needed.
3. Participate in the Local EMS Agency's EMS QI 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 QI 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 Local EMS Agency with an annual update, from date of approval and annually thereafter, on the provider EMS QI Program. The update shall include, but not limited to, a summary of how the base / modified base hospital's EMS QI Program addressed the program indicators.
6. The EMS Base / Modified Base hospital QI 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 Local EMS Agency. This is to be tailored to the individual organization's quality improvement needs and is to be based on available resources for the EMS QI Program.
7. The Base / Modified Base Hospital EMS QI Program shall be reviewed by the Local EMS Agency at least every five years.

**C. S-SV EMS Agency Responsibilities:**

1. Develop and implement, in cooperation with other EMS system participants, a system-wide written EMS QI program as defined in Title 22, Chapter 12, 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

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2. Review the system-wide EMS QI 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 QI Program identifies a need for improvement. If the area identified as needing improvement includes system clinical issues, collaboration is required with the Local EMS Agency medical director.
4. Provide the EMS Authority with an annual update, from date of approval and annually thereafter, on the Local EMS Agency's EMS QI Program. The update shall include, but not be limited to, how the Local EMS Agency's EMS QI Program addressed the program indicators.
5. The Local EMS Agency QI 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 QI Program.
6. The Local EMS Agency EMS QI 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/>

S-SV EMS Prehospital Care Policy Manual

Statewide CQI Plan Template