

Tuolumne County
Emergency Medical Services Agency

**Title: Continuous Quality Improvement
Responsibilities Base Hospital**

Medical Director Signature: on file

EMS Coordinator Signature: on file

EMS Policy No. **640.60**
Creation Date: 3/30/2000
Revision Date: 8/2021
Review Date: 8/2026

I) PURPOSE

The purpose of this policy is to establish the Continuous Quality Improvement (CQI) responsibilities of Tuolumne County Base Hospitals.

II) AUTHORITY

Division 2.5, California Health and Safety Code, Sections 1797.220, and 1797.221; California Code of Regulations, Division 9, Sections 100172, 100173, 100174, and 100175.

III) POLICY

A) Prospective:

- 1) Comply with all pertinent rules, regulations, laws, and codes for Federal, State or County government applicable to emergency medical services.
- 2) Comply with all pertinent Tuolumne County EMS policies and procedures.
- 3) Participation on committees as requested by the EMS Agency.
- 4) Education activities:
 - (a) Orientation of base hospital personnel to the Tuolumne County EMS system, including optional and expanded scope of practice.
 - (b) Provide field care audits (i.e., tape reviews).
 - (c) Offer and participate in continuing education courses and the training of prehospital care personnel.
 - (d) Offer educational opportunities based on problem identification, job scope and trend analysis.
 - (e) Establish procedure for informing base hospital personnel of changes in EMS policies and procedures and other system changes.
- 5) Evaluation – develop criteria for evaluation of base hospital personnel to include, but not be limited to:
 - (a) Base hospital report forms/tape review.
 - (b) Standardized evaluation of new employees.
 - (c) Routine evaluations.
 - (d) Problem-oriented and incident evaluation.
 - (e) Development of corrective action plans for individuals or Base Hospital Physician personnel.

B) Concurrent:

- 1) Provide online medical control to paramedics in accordance with the Tuolumne County's scope of practice, ALS treatment protocols and pertinent policies and procedures.
- 2) Develop a procedure for identifying problems or calls requiring review.
- 3) Develop performance standards for evaluating the quality of on-line medical control delivered by the Base Hospital Physicians through direct observation by the Base Hospital Nurse Liaison and Base Hospital Medical Director.

- C) Retrospective:
- 1) Develop a process for retrospective analysis of field care and base hospital direction utilizing the Base Hospital Report, Patient Care Report, audio tape and ED/hospital patient care and outcome, to include but not be limited to:
 - (a) High risk;
 - (b) High volume;
 - (c) Problem oriented;
 - (d) Calls involving ALS without base hospital contact as defined in the ALS treatment protocols;
 - (e) Specific audit topics and specific calls requested for review by the EMS agency or CQI committee.
 - 2) Develop performance standards for evaluating the quality of medical control delivered by Base Hospital Physicians through retrospective analysis.
 - 3) Evaluate medical care delivered by prehospital personnel based on performance standards through retrospective analysis.
 - 4) Participate in the incident review process as requested.
 - 5) Participate in prehospital research and efficacy studies requested by the EMS agency or CQI committee.
- D) Reporting/Feedback:
- 1) Develop a process for identifying trends in the quality of medical control delivered by Base Hospital Physicians.
 - 2) Submit reports to the EMS agency and CQI committee.
 - 3) Develop and provide education classes based on problem identification and trend analysis.
 - 4) Ensure that all new employees are instructed in completing and submitting an Incident Report-Request for Review Form No. 652.10.