

Kitsap County

Continuous Quality Improvement Committee (CQI)

Operational Guide

The Continuous Quality Improvement (CQI) Committee acts under the direction of the Kitsap County Medical Program Director (MPD), providing leadership for the clinical oversight and quality management of pre-hospital patient care in Kitsap County. At the core of the Kitsap County CQI process is the Continuous Quality Improvement (CQI) Committee, a multidisciplinary group represented by all Kitsap County Emergency Medical Services and Trauma Care Council (EMS&TCC) provider agencies as well as Harrison and Naval Hospitals, and Central Communications (CENCOM).

The purpose of the Kitsap County CQI Committee is to:

- Advise and assist the Kitsap County MPD in monitoring and trending quality improvement issues that are reported by EMS system participants.
- Discuss current trends and research in EMS that impact pre-hospital care.
- Review information developed through the use of clinical indicators.
- Use a multidisciplinary approach for issue resolution.
- Standardize the countywide quality improvement process with an emphasis on education.
- Provide timely feedback to all pre-hospital caregivers on issues and trends discussed by the committee.

Membership of the CQI Committee

The make-up of this committee is designed to ensure that all stakeholders in the continuum of patient care are represented and have input into CQI efforts. All member agencies should appoint an ALS and a BLS CQI delegate to ensure representation at each meeting. The names of the CQI representatives will be kept at the Kitsap County EMS&TCC Office, who in turn should be notified of any changes. Alternate delegates for each position may also be identified. The MPD shall be the Chair and administrate the needs of the CQI committee.

Meeting Frequency and Attendance

The CQI Committee will meet on a quarterly basis, or more frequently as necessary. The MPD, or his designee, will report quarterly to the Kitsap County EMS&TCC at their next regularly scheduled meeting. CQI committee members shall notify the KCEMS&TCC Office if they, and their alternate, are unable to attend a meeting.

Guests

At the discretion of the MPD, guests may participate in the medical review of cases when their expertise is essential to the review process. Guests may include, but are not limited to, the following:

- Law Enforcement
- Kitsap County EMT's
- Kitsap County Paramedics
- Nurses
- Physicians
- CENCOM Representative
- Cardiac System Representative
- Stroke System Representative
- Trauma System Representative
- Medical Examiner

Confidentiality

All proceedings, documents and discussions of the CQI Committee are confidential and are protected from discovery in accordance with the Revised Code of Washington.

Guests invited to attend a CQI Committee meeting to discuss specific cases and issues may only be present for the portion of the meeting that pertains to the subject for which they have been requested to review or discuss.

All CQI Committee members and guests will be asked to sign a confidentiality agreement that prohibits divulging or discussing information obtained during a CQI Committee meeting. No information will be disclosed to parties outside of the Committee except, as agreed by attendees, for the purpose of follow-up or resolution of system design change. The MPD, or his designee, is responsible for obtaining a signed confidentiality agreement from guests prior to their participation in a meeting.

Scope of Information Reviewed

The CQI Committee may review records or information from any patient involved in the pre-hospital system of Kitsap County. Information accessed by the CQI Committee may include individual medical incident reports and other supporting documentation, local and/or State registry data, and meeting minutes from CQI Committee discussions. The review may include but is not limited to the following:

- Any clinical care issue or public complaint
- Variations from protocol/standard of care
- Deviation from Scope of Practice as outlined in WAC 246-976
- Medication administration or omission errors
- Complications of airway management
- Incidents with valuable continuing education potential

The CQI Committee shall use current medical standards and actual field performance documented on Medical Incident Reports (MIR's) as a basis for CQI evaluation. Current standards consist of, but are not limited to:

- Washington State approved curriculum
- State and Kitsap County MPD Patient Care Protocols
- NW Regional Patient Care Procedures
- Kitsap County Operating Procedures
- Washington State Cardiac, Stroke and Trauma Triage Tool
- Current American Heart Association National Standards for CPR, Obstructed Airway and External Defibrillation

The CQI Committee and the MPD will establish and define clinical criteria to be used when evaluating specific incident types (chest, ALOC, SOB). Information may be gathered in order to evaluate the EMS system as a whole. The clinical indicator information will be presented at each CQI Committee meeting to generate discussion, evaluation, response, and to identify any recognizable trends. The CQI Committee is expected to provide leadership on systemic issues and trends, to develop a system-wide approach to quality improvement, and to develop information on identified issues for distribution to all personnel in the EMS system.

CQI Operational Procedure

Kitsap County CQI Review Procedure is defined as follows:

There are three areas of review within the CQI process.

1. Internal Review Process

Every month each provider agency will conduct an internal review of their calls. The internal CQI review team will categorize calls within three categories and process accordingly. The three categories are:

A. No Issue

After review, no issue found/ no problem; MIR's marked as "No Issue" will be disposed of appropriately.

B. EMS System Issue

After review, these MIR's are identified as having an issue pertaining to either system-wide training or protocols. Once a specific issue has been identified, the CQI Improvement Review Form (CQI Form) shall be completed and action taken. Once the training or protocol changes have been made, the form will be kept on file at the EMS office.

C. Provider Issue

When a patient care or training issue pertaining to a specific provider is identified, the CQI Form will be completed and one of the following actions will be taken:

- a. Peer to Provider Review: Department CQI Peer member will discuss the identified concern and methods for improvement with the provider. The CQI Form shall be completed and maintained by the agency.
- b. MSO to Provider Review: CQI committee or Peer CQI member has identified an issue in which the MSO will discuss the identified concern and methods for improvement with the provider. The CQI Form shall be completed and maintained by the agency as official documentation.
- c. MPD to Provider / Agency Review: CQI committee has identified an issue in which the MPD and the MSO will discuss the identified concern and methods for improvement with the provider. The CQI Form shall be completed and maintained by the EMS Office and copies sent to the Agency.

Once the review has been conducted and appropriate actions taken, all MIR's will be disposed of appropriately (shredded). CQI forms may be maintained depending on the severity of the issue. EMS System Issue and Provider issue forms shall be forwarded to the KCEMS&TCC Office for CQI Committee review.

2. Specific Data Review

The Kitsap County MPD and the CQI committee will identify criteria for data collection and statistical review. Agencies will provide the requested data to the KCEMS&TCC Office at the monthly BSM. Trends identified from statistical review will be used to enhance the EMS system within Kitsap County.

3. External Review Process

The external review process will be used to evaluate:

- a. Report formatting (standardized documentation)
- b. Identify trends
- c. Catch inconsistencies

This process will be accomplished by taking one months' worth of calls from one agency each quarter (with NKFR, PFD and BIFD being combined as one agency and Olympic joining with BFD) and reviewing all of those calls.

The identified agency will provide the EMS Office one months' worth of calls at the BSM the month prior to the scheduled QI Committee's meeting.

The calls will be distributed to all other agencies in Kitsap County. The representatives from the secondary agencies will review the reports and categorize the reports in the same manner as done in the Internal Call Review process.

At the quarterly CQI Committee meeting these reports will be reviewed and action will be taken as necessary using the Peer to Provider, MSO to provider or MPD to provider format as in the Internal Review Process.

Incidents identified through this process may be brought to the BSM for case review and training purposes.

Once a review has been conducted and appropriate actions taken, the MIR will be disposed of appropriately. If any action is taken, the CQI forms may be maintained depending on the severity of the issue.

CQI Meeting Times and Responsibilities

CQI Committee meetings will be held following the base station meetings in March, June, September and December, or as requested by the MPD. The agenda for these meetings will include:

1. Review of incidents forwarded from the Internal Call Review process.
2. Review trends from the Specific Data Review process to establish criteria for future Specific Data Review processes.
3. Review incidents identified in the Random Call Review process.

The timeline for the review process is as follows:

- November, December and January incidents will be reviewed in March.
- February, March and April incidents will be reviewed in June.

- May, June and July incidents will be reviewed in September.
- August, September and October incidents will be reviewed in December.

CQI Committee Meeting Minutes

Minutes will be recorded at all meetings and will be reviewed and approved by the members present at the following meeting. One copy of the minutes will be kept in a locked cabinet in the Kitsap County EMS&TCC Office. All remaining copies will subsequently be collected and destroyed following the meeting. Any incident-specific information presented during the meeting will be held in strict confidence among those attending the meeting. All references to identifying information will be omitted from the meeting minutes (see confidential section).

The CQI Committee will submit a quarterly report to the Kitsap County EMS Operations Committee and the Kitsap County EMS&TC Council.