





# Continuous Quality Improvement

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APPROVED:			Joe Hoffman, Medical Program Director		
APPROVED:			Jeff Faucett, Chair		

## I. Purpose

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 CQ I 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 St. Michael's Medical Center and Kitsap County 911.

### The purpose of the Kitsap County CQI Committee is to:

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



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## II. Policy

The goal of this Committee is to effectively evaluate and measure the performance of the Kitsap County EMS System, make recommendations, and use those recommendations to continuously improve pre-hospital care in our community.

## III. Procedure

### A. Membership of the CQI Committee

1. The makeup of this Committee is designed to ensure that all stakeholders in the continuum of patient care are represented and have input into CQI efforts.
2. All member agencies should appoint an ALS and a BLS CQI delegate to ensure representation at each meeting.
3. St. Michael's Medical Center shall appoint delegates to the Committee.
4. The names of the CQI representatives will be kept at the Kitsap County EMS&TCC Office, which should be notified of any changes.
5. MPD Delegates will be members. Primary and alternate delegates for each position may also be identified.
6. The MPD shall be the Chair and administrate the needs of the CQI committee.

### B. Meeting Frequency and Attendance

1. The CQI Committee will meet quarterly or more frequently as necessary.
2. The MPD, or his designee, will report quarterly to the Kitsap County EMS&TCC at their next regularly scheduled meeting.
3. CQI committee members shall notify the KCEMS&TCC Office if they and their alternate cannot attend a meeting.

### C. Guests

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



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Law Enforcement  
Kitsap County EMTs  
Kitsap County Paramedics  
Nurses  
Physicians  
Cardiac System  
Representative Stroke  
System Representative  
Trauma System Representative  
Medical Examiner  
Air Ambulance

## **D. Confidentiality**

1. All proceedings, documents, and discussions of the CQI Committee are confidential and protected from discovery per the Revised Code of Washington.
2. Guests invited to attend a CQI Committee meeting to discuss specific cases and issues may only be present for the portion of the meeting pertaining to the subject they have been requested to review or discuss.
3. All CQI Committee members and guests must sign a confidentiality agreement prohibiting divulging or discussing information obtained during a CQI Committee meeting.
4. 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.
5. The MPD, or his designee, is responsible for obtaining a signed confidentiality agreement from guests before they participate in a meeting.

## **E. Scope of Information Reviewed**

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



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- a. Any clinical care issue or public complaint
  - b. Variations from protocol/standard of care
  - c. Deviation from Scope of Practice as outlined in WAC 246-976
  - d. Medication administration or omission errors
  - e. Complications of airway management
  - f. Incidents with valuable continuing education potential
4. The CQI Committee shall use current medical standards and actual field performance documented on electronic healthcare reports (EHRs) as a basis for CQI evaluation. Current standards consist of but are not limited to:
    - a. Washington State approved curriculum
    - b. NW Regional Patient Care Procedures
    - c. Kitsap County Operating Procedures
    - d. Washington State Cardiac, Stoke, and Trauma Triage Tool
    - e. Current American Heart Association National Standards for CPR, Obstructed Airway, and External Defibrillation
    - f. Washington State Key Performance Indicators (KPI's)
  5. The CQI Committee and the MPD will establish and define clinical criteria to be used when evaluating specific incident types (including but not limited to chest pain, ALOC, and SOB).
  6. 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.
  7. The CQI Committee is expected to provide leadership on systemic issues and trends, to develop a system-wide approach to quality improvement, and develop information on identified issues for distribution to all personnel in the EMS system.

## IV. CQI Operational Procedure

### **Kitsap County CQI Review Procedure is defined as follows:**

There are three areas of review within the CQI process.



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## A. Internal Review Process

Every member agency will conduct an internal review of their calls. The agency will determine the percentage of calls to review or as directed by the MPD or County CQI Committee. The internal CQI process will identify issues using the following criteria.

### 1. EMS System Issue

After review, these EHR'S are identified as having an issue pertaining to either system-wide training or protocols. Once a specific issue has been identified, the issue and or data will be forwarded to the agency Medical Officer and CQI Committee for review if appropriate.

### 2. Provider Issue

When a patient care or training issue pertaining to a specific provider is identified, the member agency will categorize and track the incident, and one of the following actions will be taken:

- a. **Peer-to-Provider Review:** Agency CQI Peer member or their designee will discuss the identified concern and methods for improvement with the provider.
- b. **MO to Provider Review:** Agency CQI committee or designee has identified an issue where the member has a recognized pattern of behavior or clinical issue, and the provider has not responded positively to the peer review, the agency MO will be informed. The MO will then conduct a MO-to-provider review. The member agency will determine if the occurrence needs to be documented.
- c. **Physician Delegate/ MO to Provider Review:** The agency MO will determine if the Physician Delegate needs to be included in the review process for a specific incident. If the physician delegate has identified a specific issue, the physician delegate and the MO will review the specific incident with the provider.
- d. **MPD / MO to Provider/ Agency Review:** CQI committee has identified an issue in which the MPD and the MO will discuss the identified concern and methods for improvement with the provider.

3. 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.



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## **B. Specific Data Review**

The Kitsap County MPD and the CQI committee will identify criteria for data collection and statistical review. Trends identified from the statistical review will be used to enhance the EMS system within Kitsap County.

## **C. External Review Process**

1. The external review process will be used to evaluate the following:
  - a. Documentation formatting (standardized documentation)
  - b. Identify trends
  - c. Identify inconsistencies
  - d. Identify protocol issues
  - e. Identify opportunities to improve our county EMS system
2. At the quarterly CQI Committee meeting, these reports will be reviewed, and action will be taken as necessary using the Peer to Provider, MO-to-provider, Physician Delegate / MO to Peer, or MPD / MO-to-provider format as in the Internal Review Process.
3. Incidents identified through this process may be brought to the BSM for case review and training purposes.
4. Once a review has been conducted and appropriate actions taken, if a printed copy of the EHR exists, it will be disposed of appropriately. If any action is taken, it may be documented accordingly by the member agency.

## **V. CQI Meeting Times and Responsibilities**

### **A. CQI Committee Meeting**

1. CQI Committee meetings will be held at the direction of the MPD or as requested by the CQI Committee.
2. Kitsap County CQI Committee will review EMS calls and measure performance as an EMS system based on Washington Core Measures and KPI or as determined by the MPD or Committee criteria.
3. The agenda for these meetings will include:
  - a. Review of incidents forwarded from the Internal Call Review process.
  - b. Review data and identify trends on specific EMS criteria.



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## **B. CQI Committee Meeting Minutes**

1. Minutes will be recorded at all meetings and will be reviewed and approved by the members present at the meeting.
2. One copy of the minutes will be kept in a locked cabinet in the Kitsap County EMS&TCC Office.
3. All remaining copies will subsequently be collected and destroyed following the meeting.
4. 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).
5. The CQI Committee will submit a quarterly report to the Kitsap County Board of Directors and the Kitsap County EMS&TC Council.