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Title 22@ Social Security

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Division 9@ Prehospital Emergency Medical Services

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Chapter 10@ Data and Quality Assurance

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Article 2@ EMS Service Provider

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Section 100251@ EMS Service Provider Responsibilities

100251 EMS Service Provider Responsibilities

(a)

An EMS service provider shall: (1) Develop and implement, in cooperation with other EMS system participants, a provider-specific written EMS QI program, as defined in Section 100250.01 of this Chapter. 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 (2) Review the provider-specific EMS QI Program annually for appropriateness to the operation of the EMS provider 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 be limited to, a summary of how the EMS provider's EMS QI Program addressed the program indicators.

(1)

Develop and implement, in cooperation with other EMS system participants, a provider-specific written EMS QI program, as defined in Section 100250.01 of this Chapter. 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

(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

(2)

Review the provider-specific EMS QI Program annually for appropriateness to the operation of the EMS provider 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 be limited to, a summary of how the EMS provider's EMS QI Program addressed the program indicators.

(b)

The EMS provider EMS QI Program shall be in accordance with the Emergency Medical Services Quality Improvement Program Model Guidelines (Rev. 3/04), incorporated herein by reference, and shall be approved by the local EMS agency. This is a model program which will develop over time and 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.

(c)

The provider EMS QI Program shall be reviewed by the local EMS agency at least every five years.