

LEON COUNTY E.M.S.

Standard Operating Guideline

Title: Interactive Quality Management

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I. PURPOSE:

The IQM program exists to provide optimal care for all pre-hospital patients through a process which provides a mechanism for review and evaluation of procedures, documentation, and overall system operations. This review and evaluation is primarily the function of the Medical Director and the IQM Manager; however it also includes supervisors, Field Training Officers, management, and field personnel. All processes and care are compared to performance standards to assure optimal operational levels and a high level of patient care. Continuous quality improvement is the goal of LCEMS.

It is the policy of LCEMS that every patient will receive a high level of consistent care.

II. GUIDELINE:

It is the guideline of LCEMS that every patient will receive a high level of consistent care.

III. PROCEDURE:

1. Responsibilities
 - a. It is the responsibility of the IQM Manager to design and implement the IQM policy as agreed upon in consensus with the Medical Director and EMS management.
 - b. It is the responsibility of the Medical Director to oversee and be the ultimate medical authority in the IQM process.
2. Medical Care Standards
 - a. Medical care standards will be established by the Medical Director and the IQM Manager using state and national standards in conjunction with local medical protocols.
 - b. Medical protocols and procedures including standing orders will be reviewed as necessary to keep all protocols and procedures up to date and to make recommendations to management regarding innovative or essential system updates.
 - c. Recommendations will be made by the Medical Director and the IQM Manager to management as necessary to maintain state and national system requirements.

Medical Feedback

- a. Lines of communication are always open for medical critique and suggestions from supervisory, management, emergency center staff, and physicians.

Run Report Review

- a. Run reports and other documentation are reviewed in a systematic fashion to address specific medical issues on a monthly rotational basis. A statistically significantly cross section of reports are reviewed by the Medical Director and the IQM Manager. Peer review will also be accomplished by supervisory staff, management, Field Training Officers, and field personnel.

Direct Observation

- a. The Medical Director and the IQM Manager will either ride with EMS on duty units or follow them to scenes to evaluate actual on scene care and adherence to protocols. They will also evaluate EMS on duty units at the emergency centers for complete patient care, documentation, and interface with emergency center staff.
- b. The IQM Manager will document ride along activities with evaluation outcomes and feedback for field personnel.

IQM Surveys

- a. The IQM Manager will survey various participants in the EMS process to ascertain perceived problems and to request proposed solutions for improvement.

IQM Reporting

- a. IQM progress reports will be prepared by the IQM Manager or his/her designee as specified by the Deputy Chief of Administration.

Ongoing IQM Process

- a. IQM is a dynamic process and quality management activities can be added or deleted at the discretion of the Medical Director and the IQM Manager. IQM processes should always reflect ongoing changes and upgrades in medical direction.