



CENTRAL DUPAGE HOSPITAL
EMERGENCY MEDICAL SERVICES SYSTEM
POLICY & PROCEDURES

TITLE: QA REQUIREMENTS

SECTION: QA / CASE REVIEWS

POLICY NUMBER: M-2

APPROVED BY: DR. STEVE GRAHAM EMS MEDICAL DIRECTOR

EFFECTIVE DATE: 01 JULY 2018

NUMBER OF PAGES: 2

PURPOSE:

To define the Central DuPage Hospital Emergency Medical Services System's (CDHEMSS) and EMS agencies QA process and requirements.

POLICY:

The following, at a minimum, will be reviewed by CDHEMSS for providers within the CDHEMSS:

1. Random QA
 - a. Cases will be pulled at random from each agency throughout the year. Patient Care Reports will be reviewed for compliance with System, Region and State regulations regarding documentation and patient care.
2. Public Request
 - a. Cases will be reviewed when the public reports a concern to the CDHEMS System. Patient Care Reports will be reviewed for compliance with System, Region and State regulations regarding documentation and patient care. A follow up will be sent to the reporting member of the public in compliance with HIPPA regulations
3. Agency Request
 - a. Cases will be reviewed when an agency reports a concern to the CDHEMS System. Patient Care Reports will be reviewed for compliance with System, Region and State regulations regarding documentation and patient care. A follow up will be sent to the reporting member of the public in compliance with HIPPA regulations
4. RN / MD Request
 - a. Cases will be reviewed when a RN / MD reports a concern to the CDHEMS System. Patient Care Reports will be reviewed for compliance with System, Region and State regulations regarding documentation and patient care. A follow up will be sent to the reporting member of the public in compliance with HIPPA regulations

5. High Risk

- a. The following cases will be reviewed by the CDHEMS System as they occur:
 - i. Cardiac Arrest
 - ii. Intubation
 - iii. Surgical Cric
 - iv. Defibrillation
 - v. Cardioversion
 - vi. Trauma bypass
 - vii. Patients transported by a higher level of care (helicopter, ground critical care)
 - viii. Termination of resuscitation in the field
 - ix. Cases in which a DNR / POLT / POA influence patient care

6. CDHEMSS QA / Region 8 QA

- a. Cases will be reviewed as part of system or regional data collection. Data pulled from the QA process will be made available to each agency specifically. No agency shall be given another agency's data.

The following cases shall be reviewed at the agency level for each occurrence:

- 1. Cardiac Arrest
- 2. Intubation
- 3. Surgical Cric
- 4. Defibrillation
- 5. Cardioversion
- 6. Trauma bypass
- 7. Patients transported by a higher level of care (helicopter, ground critical care)
- 8. Termination of resuscitation in the field
- 9. Cases in which a DNR / POLT / POA influence patient care

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