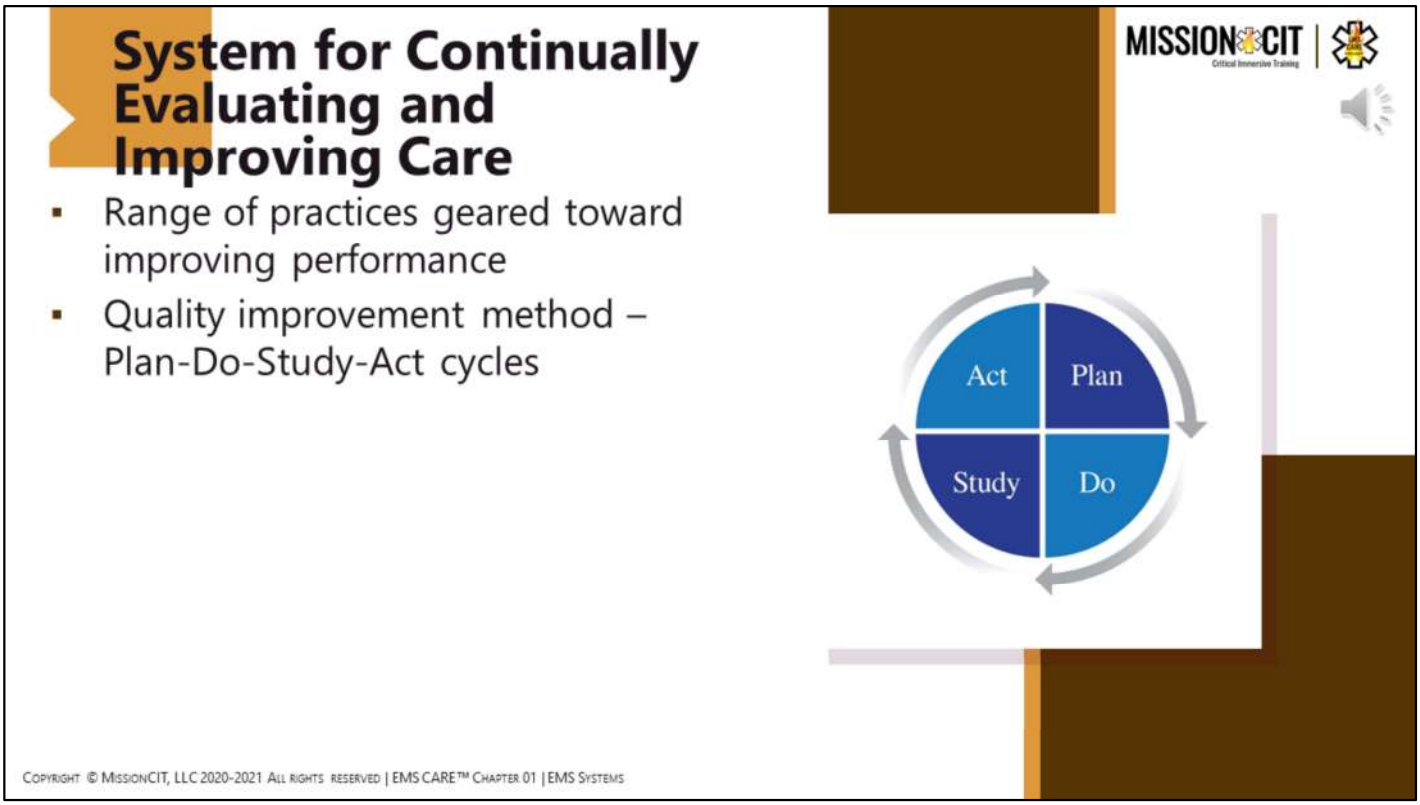
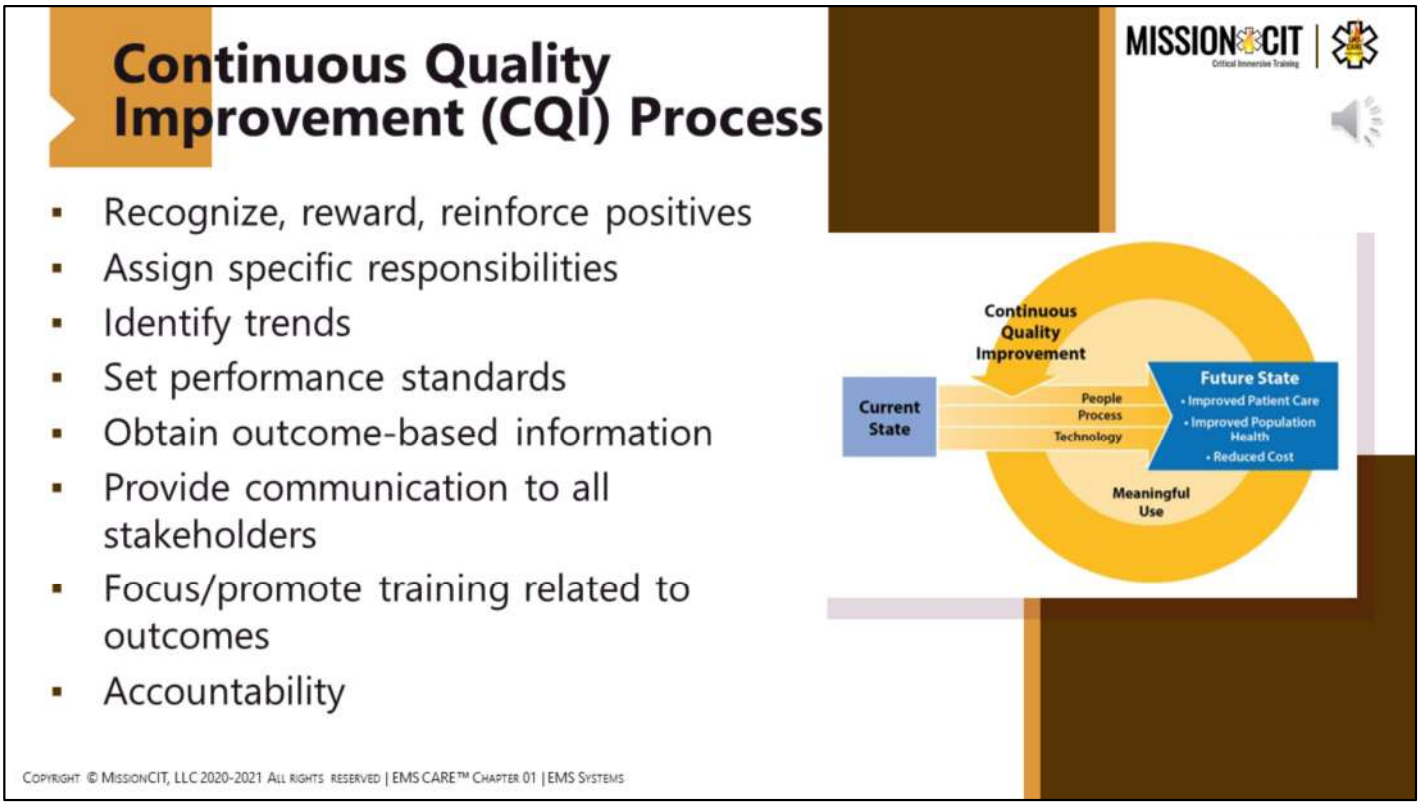


Thank you, Justin!

Quality Improvement, an important concept of EMS, consists of continuous self-review with the purpose of identifying aspects of the system that require improvement. Once a problem is identified, a plan is developed and implemented to prevent further occurrences of the same problem. As implied by the name, quality improvement is designed and performed to ensure that the public receives the highest-quality prehospital care.



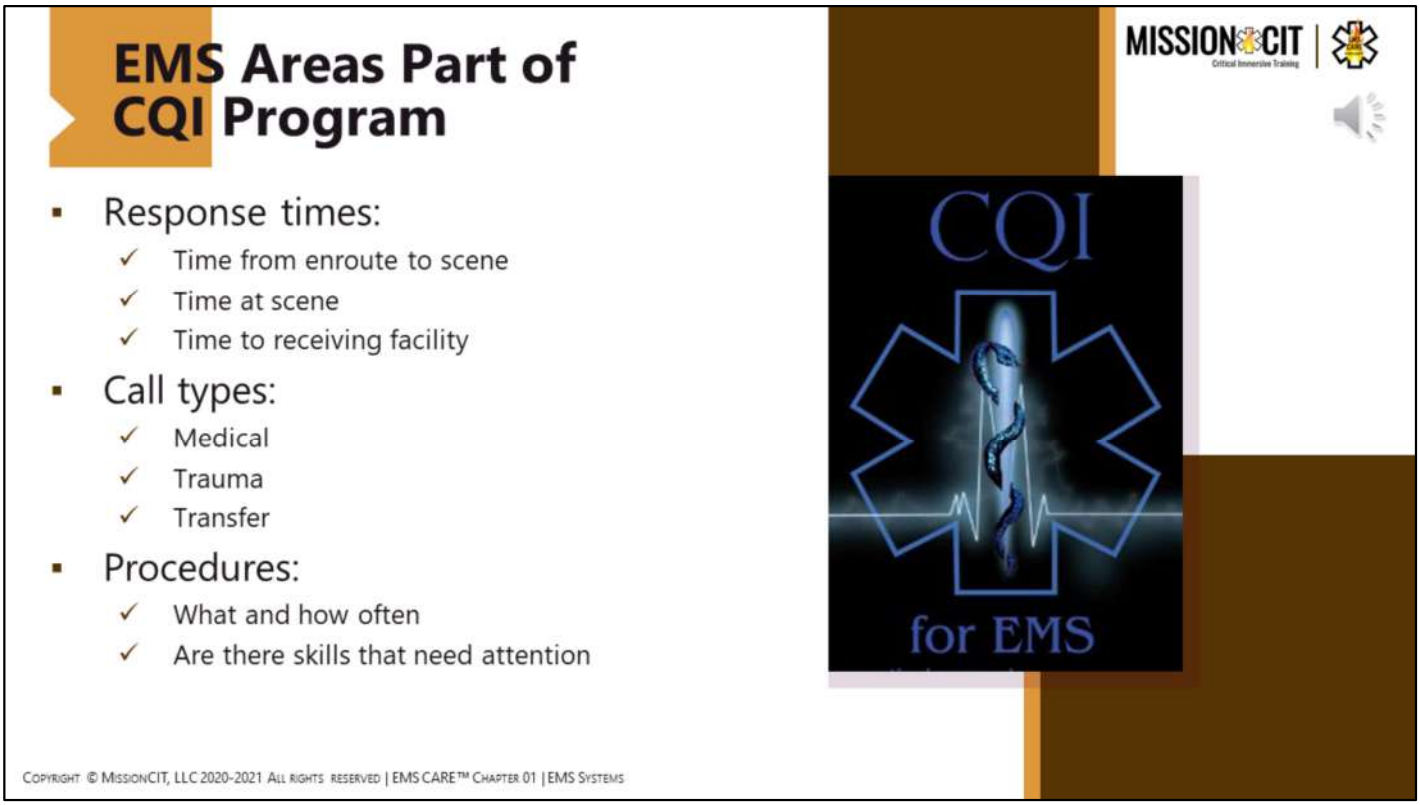
Quality is anything that enhances the product or services from the viewpoint of the customer. In EMS, our customer is not only the individual patient we serve , but the entire community. We need to align our values with community needs. Quality improvement (QI) refers to a range of practices geared toward improving performance in meeting these needs. Delivering improvements in the quality and safety of healthcare remains an international challenge. In recent years, quality improvement (QI) methods such as Plan–Do–Study–Act (PDSA) cycles have been used in an attempt to drive such improvements.



Based on EMS community collaboration and a shared commitment to excellence, the continuous quality improvement (CQI) process identifies areas for improvement within the EMS System. The CQI process identifies training opportunities, highlights outstanding clinical performance, audits compliance with treatment protocols, and reviews specific illnesses or injuries along with their associated treatments.

Each EMS system should employ a CQI program – to allow EMS leaders the ability to determine how care is being delivered, if that care is making a difference, and if processes are being followed. Here are some reasons as to why we need CQI:

- Recognize, reward, and reinforce positives
- Assign specific responsibilities
- Identify trends
- Set performance standards
- Obtain outcome-based information
- Provide communication to all stakeholders
- Focus/promote training related to outcomes
- Accountability



And here are some of the areas in EMS that should be part of a CQI program.

Response times:

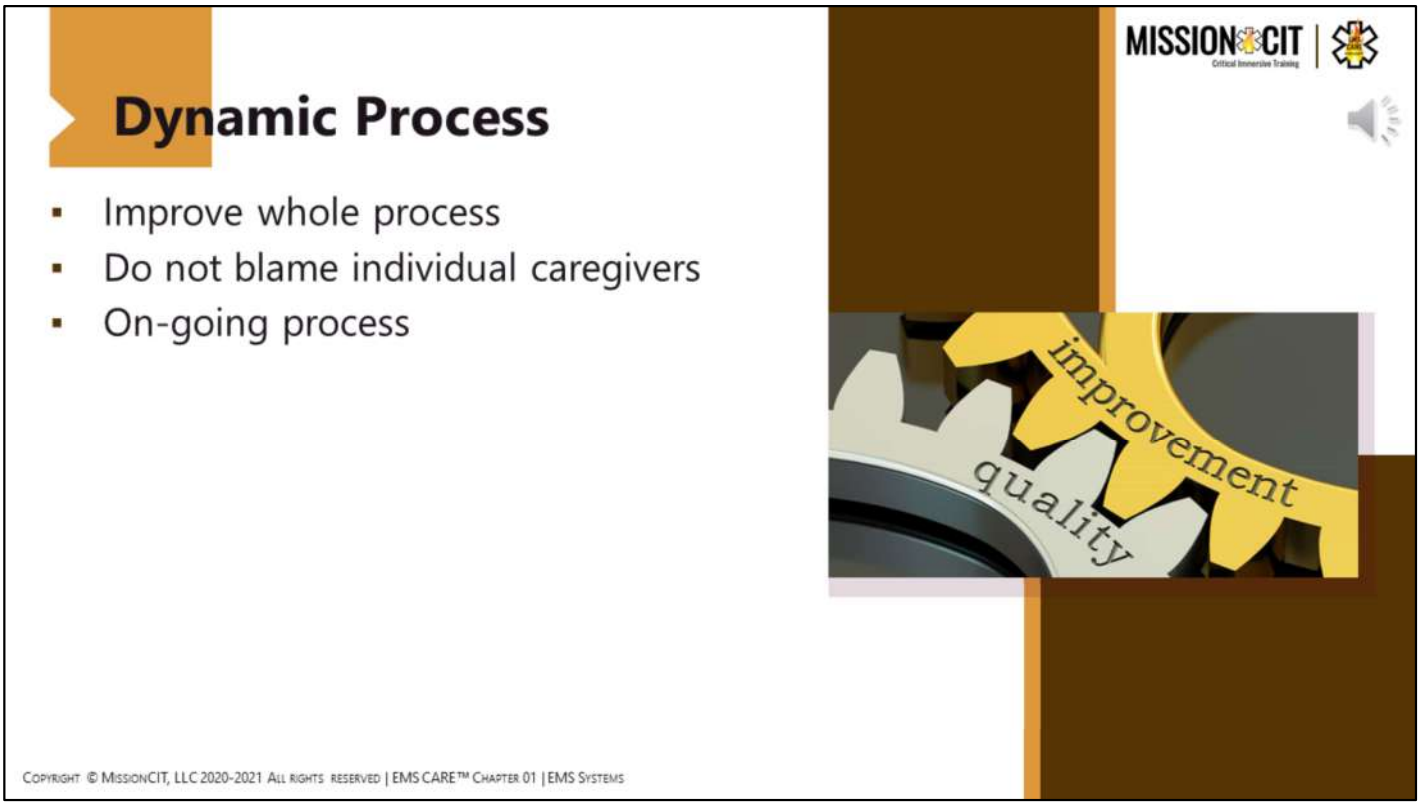
- Time from dispatch to enroute
- Time from enroute to scene
- Time at scene, and
- Time to receiving facility

Call types:

- Medical
- Trauma, and
- Transfer

Procedures:

- What and how often
- Are there skills that need attention



Every EMS Agency needs to be committed to continuous quality improvement and recognize that greater results can be gained by improving the whole process rather than blaming individual caregivers when something goes awry. It should also be understood that a CQI Program is an on-going, dynamic process that takes time to develop. Traditional components of a CQI process include:

- Define a problem
- Measure data to validate and quantify the problem
- Analyze the data and symptoms of the problem to determine the root cause
- Develop and implement a plan of action through education or policy/process revision
- Measure and monitor the results providing feedback, and
- Continuous monitoring of control system to assure compliance

The primary purpose of any CQI model should be to reduce barriers to good patient care, facilitate competency and recognize excellence.

This brings us to the end of the fourth lesson. In the next lesson, Justin will talk about patient safety.