

# SOUTH PORTLAND FIRE DEPARTMENT

## STANDARD OPERATING GUIDELINES

<b>SOG #:</b>	5.167	<b>Effective Date:</b>	2/11/2022
<b>Title:</b>	EMS Quality Improvement (QA/QI)	<b># of pages:</b>	4
<b>Category:</b>	Administration	<b>Classification:</b>	Green

1. **PURPOSE:** As part of the Maine EMS Statewide Quality Improvement (QI) program, the South Portland Fire Department will establish a service level QI committee for the purpose of facilitating communication between hospitals and the Department, disseminating QI program related education and training, and coordinating QI audits and studies.
2. **POLICY:**

The Quality Improvement Committee (QIC) will be comprised of, but not limited to, the following personnel:

  - EMS Medical Director
  - EMS Coordinator
  - Training/Special Operations Deputy Chief

### **Requirement**

All Maine EMS licensed providers of the City of South Portland Fire Department are required as a condition of employment and licensure with the State of Maine to participate as directed in the Quality Improvement process.

### **Role**

QIC activities will be to monitor and evaluate organizational efficiency. The QIC will review:

- Accuracy and completeness of the Patient Care Report (PCR)
- Time of call for help to patient contact
- Accuracy of patient assessment and documentation of the assessment
- Adherence to patient care protocols
- Patient outcome
- Appropriateness of care and skills proficiency
- Appropriateness of time spent on scene
- Appropriateness of destination hospital
- Patient sign offs
- All cardiac arrest calls, high acuity calls or other special circumstances.
- Maine Medical Center, Mercy Hospital, Region 1 EMS Council & Maine EMS QI studies

### **Meetings**

The committee will meet at least quarterly. The meetings will address the following:

- Review of QI Audits.
- Presentation of education programming that is developed as part of QI efforts.
- Updates on local, regional, and state QI committee activity.
- Communication between consumers, clients and the hospital about communication and operational issues with EMS.
- Local case reviews.

### **Plan/Process**

#### **Quality Improvement Officer(s) Roles & Responsibilities**

- Review patient care reports for the parameters outlined by the Quality Improvement Committee, and provide timely and meaningful feedback to all EMS providers regarding their documentation through the Maine EMS Run Reporting System (MEMSRR).
- Conduct interviews, training sessions and follow-up with EMS providers regarding patient care documentation.
- Ensure compliance with South Portland Fire Department, sub-regional (Maine Medical Center & Mercy Hospital), regional (Southern Maine EMS) and statewide QI reporting requirements (Maine EMS).
- Generate reports and QI audits as necessary.
- Report non-compliance with established documentation standards and violation of Maine EMS protocols as established by the EMS Medical Director & EMS Coordinator.

### **QI Training**

QI will be a driving force in the development of the South Portland Fire Department annual training program. The QIC will make recommendations about materials and topics that should be developed.

The QIC will also review individual training plans developed for individual providers that require specialized individual training or remediation.

### **HIPAA Considerations**

Since its enactment in 2003, the federal Health Insurance Portability and Accountability Act (HIPAA) has provided strict guidance on how protected health information (PHI) can be utilized with the health care industry, including emergency medical services.

In summary, the major thrusts of HIPAA are to:

- Establish a universal language for healthcare providers and payers of healthcare services;
- Modify pre-existing privacy standards;
- Give patients new rights to access their own health care records and to know who else has access to them;

- Restrict disclosure of health information to the minimum number of people needed to fulfill the intended purpose;
- Establish new criminal and civil sanctions for improper use and disclosure; and to
- Establish new requirements for access to records by researchers and others.

Our discussion of HIPAA requirements within the scope of this document is limited to the use of PHI in the quality improvement process. As stated in 45CFR 164.512:

*A covered entity may disclose PHI to a health oversight agency for said oversight activity authorized by law including audits; civil administrative or criminal investigations; inspections; licensure or disciplinary actions; civil, administrative or criminal proceedings or actions; or other activities necessary for appropriate oversight in the health care system"*

Notwithstanding any other provision of law, none of the records or documentation or QI committee actions or records required pursuant to Maine EMS Law and Rules, except as provided in any other provision of law, and no person in attendance on a Quality Improvement Committee shall be required to testify as to what transpired at a quality improvement review.

Any person in good faith and without malice provides information to further the purpose of this section or who, in good faith and without malice participates on an agency-level or regional-level Quality Improvement Committee, shall not be subject to any action, civil damages or other relief as a result of such activity.

Therefore, according to HIPAA and other applicable standard practices, PHI can be shared among and between covered entities including, but not limited to: service level QI committees; regional level QI committees; Hospital QI Committees; and the State of Maine QI Committee.

## **Confidentiality and Legal Protection**

### **1. Members' Responsibility of Confidentiality**

All members of the QIC will hold all information specific to individual calls and/or providers in the strictest confidence. Failure to comply with this rule will result in dismissal from the QIC and disciplinary action appropriate to the breach of confidentiality up to and including termination of employment.

### **2. Protection from Discovery**

The QIC will maintain protection from discovery as granted by the Maine EMS Board on October 6, 1999 according to 32 MRSA § 92-A "Records of Quality Assurance Activities."

### **3. Protected Activities and Records**

It is the intent of this plan that the activities and records that will be protected from discovery under 32MRSA § 92-A will include but are not limited to...

- a. Minutes of the proceedings of any QIC meeting, employee interview, or medical director conference.
- b. Documentation of Sentinel Events that are referred to the QIC including any Sentinel Event Forms, Incident Reports, or other documentation.
- c. Records of corrective actions taken to resolve incidents or mitigate further occurrences of similar events.

Proceedings and/or records of Critical Incident Stress Management (CISM) sessions that involve any case being reviewed by the QIC.

3. REFERENCES:

- CEFD QA/QI Policy 7.722

By Order Of:



James P. Wilson  
Fire Chief