

	UNIFIED FIRE AUTHORITY ORGANIZATIONAL POLICY MANUAL	
	Affiliation: EMS Division	
	Title: UFA EMS Quality Management	
	Number: 500 – 020	
	Approved: 12/4/2025	By: Fire Chief Dominic Burchett
Last Reviewed: 11/20/2025	By: Div. Chief Rob Ayres	

REFERENCES:

- [Utah Emergency Medical Services Act](#)
- [Utah Administrative Rule 911-2](#)
- [Utah Administrative Rule 911-3](#)
- [Utah Administrative Rule 911-5](#)
- [UFA Policy 900-430 Professional Standards Investigations and Complaints](#)
- [UFA Policy 900-440 Discipline](#)
- [UFA Policy 500-030 EMS Skills Evaluation and Remediation](#)
- UFA Compliance & Records Policies
- [EMS Field Provider Evaluation Form](#)
- [Performance Improvement Plan \(PIP\) Template](#)
- [Utah Code § 26B-1-229](#)
- [Utah Code § 78B-3-454](#)
- [Utah Rules of Civil Procedure 26\(b\)\(2\)](#)

DEFINITIONS:

Performance Improvement Plan (PIP) – A formal plan identifying performance deficiencies, relevant policies, procedures, or skills and defined improvement objectives. A PIP will be developed in collaboration with UFA’s EMS Division Chief, Medical Director, Staff Captain, Quality Improvement Manager and appropriate Operations Supervisor(s).

Provider Feedback - Based on available information, no evidence of risk or harm has occurred. Feedback is warranted to promote learning, but no further action is required. Trends will be analyzed to identify system-wide improvement needs.

Human Error - An inevitable, unpredictable, or unintentional mistake.

At Risk Behavior - A behavioral choice made when an individual or individuals have lost the perception of risk associated with the choice or mistakenly believe the risk to be insignificant or justified. Repetitive errors that do not resolve with coaching and/or counseling. An at-risk behavior could be failure to complete documentation in accordance with UFA policies and procedures.

Improper Behavior - An intentionally malicious act or a conscious disregard of policies, procedures or accepted practices causing substantial and unjustified risk. Failure to comply with a formal improvement plan. Improper behavior could be patient abandonment or failure to provide care. EMS events identified as improper behavior may be referred to the Administrative Professional Standards Group.

LEADERS INTENT:

The Emergency Medical Services (EMS) Division is required by Utah State Administrative Rule [R911-2-300](#) to “develop and implement an effective quality improvement program, including medical audit, review, and critique of patient care;” and by UFA Policy 900-430 Professional Standards and Ethics to fulfil a role in investigating “concerns” or “procedural inquiries” that relate to EMS care.

EMS quality management is a process to identify system and individual clinical or quality issues to mitigate and minimize clinical errors and to meet goals and initiatives identified by EMS Division. The quality management process is intended to serve as a learning environment and platform to improve UFA’s system of care. Clinical feedback, coaching, and performance improvement plans do not constitute formal discipline.

It is not the intent of EMS Division to incorporate formal discipline into the quality review process, however some events may be referred to an Operations supervisor the Administrative Professional Standards Group for consideration.

POLICY:

- 1.0 EMS Division staff will review UFA EMS response data documentation and clinical performance for the following reasons at a minimum:
 - 1.1 Complaints or inquiries from the public or other agencies
 - 1.2 Referral or inquiry from the State Bureau of EMS
 - 1.3 Specific clinical categories identified by EMS Division or UFA’s Chief Medical Officer
 - 1.4 Internal inquiries or referrals
 - 1.5 Legal requests
- 2.0 EMS Division will establish a Quality Management (QM) Committee for the purpose of ensuring high quality EMS care and reviewing documentation and clinical performance.
 - 2.1 The QM Committee will consist of the EMS Division Chief, Chief Medical Officer, and any identified associate medical director(s), Quality Improvement Program Manager, EMS Training Captain, EMS Training specialists and other participants as agreed upon by the committee.
 - 2.2 The QM Committee will establish a process and set priorities for reviewing care, documentation, and clinical performance.
 - 2.3 All case reviews and discussions during QM Committee meetings will be treated as confidential and privileged as part of a larger effort at ensuring ongoing system quality and performance improvement.
 - 2.3.1 Case notes will be maintained electronically.

- 3.0 Any cases with identified issues will be placed into one of the following categories:
 - 3.1 Provider Feedback.
 - 3.2 Human Error – Calls identified as human error will be addressed either through an in-person case review or a formal performance improvement plan (PIP).
 - 3.3 At-Risk Behavior – Calls identified as at-risk behavior will be addressed with a formal performance improvement plan (PIP).
 - 3.4 Improper Behavior – Calls identified as improper behavior will be referred to UFA Administration for professional review.
- 4.0 Repeated Human Error or At-Risk events that are not corrected or resolved through coaching or meeting the expectations described in a formal PIP may be escalated to the next higher review category.
- 5.0 The QM Committee will identify an improvement or corrective course based on UFA policies for each reviewed case.
- 6.0 All Discussions, documents, and records reviewed by the Quality Management Committee (QMC) are strictly confidential and must follow all privacy and HIPAA laws, rules, and agency policies.
 - 6.1 Information shared within the committee will not be disclosed outside of the committee, except as required by law, regulation, or organizational policy.
 - 6.2 All QM Committee proceedings are governed by privacy and security requirements outlined in UFA Policies and Procedures.
 - 6.3 Only authorized members and invited guests may attend QMC meetings. Authorized guests may be required to sign a confidentiality agreement prior to participation.
 - 6.4 Any questions about confidentiality will be referred to the EMS Division Chief, UFA Compliance Office, or Chief Legal Officer.

Replaces former policy UFA EMS Quality Improvement and Clinical Review Policy
dated: June 22, 2023