



San Benito County Emergency Medical Services Agency

TRAUMA QUALITY IMPROVEMENT AND SYSTEM EVALUATION

Policy: 6040
Effective: July 1, 2015
Reviewed: May 1, 2015

Authority for this policy are found in Division 2.5, California Health and Safety Code, Sections 1798.162, 1798.163 California Code of Regulations Section 100255, 100258, 100265 and California Evidence Code, Section 1157.7

I. Purpose

A. To establish a system-wide Quality Improvement (QI) program for evaluating the San Benito EMS Trauma System in order to foster continuous improvement in performance and patient care. In addition, it will assist San Benito EMS in defining standards, evaluating methodologies and utilizing the evaluation results for continued system improvement.

II. Definition

A. "Quality Improvement" (or Quality Assurance) means a method of evaluation of services provided, which includes defined standards, evaluation methodologies and utilization of evaluation results for continued system improvement. Such methods may include, but are not limited to, a written plan describing the program objectives, organizations, scope and mechanisms for overseeing the effectiveness of the program.

III. Policy:

A. Trauma system participants within the San Benito System will maintain a comprehensive quality program.

B. Quality Improvement Plan:

1. The San Benito EMS Trauma QI Plan consists of the following elements:

- a) An internal comprehensive quality improvement process.
- b) A periodic local audit of the trauma care provided by receiving hospitals in San Benito County.

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EMS Medical Director

- c) An ongoing external medical audit of case reviews by the Trauma Audit Committees both in-county and out-of-county.

- 2. Trauma Systems Review
 - a) San Benito EMS will be responsible for an annual review of the trauma system, which will be conducted at least every two (2) years. The template for this review will be developed and approved by the Trauma Audit Committee.

- 3. Local Trauma Audit Committee (TAC)
 - a) TAC is a multidisciplinary medical advisory committee to the EMS Medical Director, comprised of representatives from surgical and non-surgical specialties. This is a closed committee.