

TRAUMA SYSTEM**Date: 07/01/2023*****Trauma System Quality Improvement*****Policy #8500****I. Purpose:**

A. To monitor and evaluate the medical care of patients with traumatic injuries.

II. Authority:

A. Health and Safety Code, Division 2.5, Chapter 5, Article 2.5.

B. California Code of Regulations, Title 22, Division 9, Chapter 6.1.

III. Policy:

A. Each designated trauma center shall implement an internal trauma quality improvement process.

B. The EMS Agency shall review each designated trauma center periodically, at minimum every five years.

C. The EMS Agency shall establish and maintain the quality assurance review committee to evaluate the medical care of patients with traumatic injuries in accordance with the Imperial County EMS Quality Improvement Plan.

D. The EMS Agency shall review each EMS and Fire agency trauma quality improvement plans and data of traumatic injury.

1. The quality assurance review committee will include:

a. Representatives from both hospitals (versus EDs), all transporting agencies, all air ambulance providers, base station, EMS agency, BLM, fire departments, and state parks.

E. The quality assurance review committee shall develop bylaws and review on a periodic basis.

F. The quality assurance review committee confidentiality requirements:

1. All members shall sign a confidentiality agreement not to divulge or discuss information that has been obtained solely through the quality assurance review committee membership. Prior to any participation in the meeting, the Chairperson shall explain the confidentiality requirements and obtain a signed confidentiality agreement from all guests present.

2. All proceedings, documents and discussions of the quality assurance review committee are confidential and protected under Section 1040 and 1157.7 of the California State Evidence Code. The prohibition relating to discovery of testimony is provided to the quality assurance review committee, which is established by a local government agency to monitor, evaluate, and report on the necessity, quality and level of specialty health services, including but not limited to, trauma care services.

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APPROVED:

SIGNATURE ON FILE – DATE

Katherine Staats, MD, FACEP

EMS Medical Director

Draft