

Rural EMS Quality Improvement Basics

Level 2: Improvement Implementation

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Welcome to Rural EMS Quality Improvement Basics Level 2: Improvement Implementation.

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Now that you have a better understanding of why we engage in quality improvement, Level 2: Improvement Implementation will provide more details and training on the concepts and tools you would use to engage in quality improvement projects led by others. As you learn more about these QI concepts and tools, we want to provide a couple of EMS specific quality initiative examples for you to consider.

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As we well know, both lights and sirens are standard components of EMS vehicles to decrease the time it takes to respond to the location of an accident, illness, or injury and the time it takes to transport the patient to a definitive care center. However, we also know that the use of lights and sirens is associated with a significantly higher risk of crashes, resulting in injuries and death. As a result, there is a national effort underway to reduce the use of lights and sirens. This is a non-clinical example of a quality improvement project that most people can appreciate.

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Another example is documenting a complete set of vital signs in a patient's record. Obtaining a patient's vital signs is essential to providing clinically appropriate care! Taking the next step and recording them accurately in the patient's medical history is also critically important. This makes an excellent example of a clinical performance measure.

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Through the next series of modules, we will discuss the concept of processes and systems, how to build your QI team, some key communication techniques, the model for improvement and the Plan Do Study Act Cycle, and data basics and collection. As these topics are discussed, you can think about the two EMS performance measurement examples we just provided to see how they apply to EMS organizations.

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