STROKE CARE SYSTEM QUALITY IMPROVEMENT COMMITTEE

Effective Date: October 4, 2013
Replaces: New
Review Date: November 2016

I. Purpose

The Stroke Care System Quality Improvement Committee (SCSQIC) is a multi-disciplinary, peer-review committee, comprised of representatives from the Stroke Centers and other professionals designated by the EMS Agency, who:

A. Advise and assist the Santa Clara County EMS Medical Director to monitor and trend issues that occur in the Stroke system.

B. Provide recommendations to the SCC EMS Medical Director for quality improvement in the Stroke System.

C. Discuss current trends and research in Stroke Care that may have impact on the patient care in Santa Clara County.

D. Provide ongoing and standardized review of the medical care in the Stroke System.

E. Provide opportunities for analysis of data and information of scientific value for clinical studies and strategic planning/review of the Stroke System.

F. Collaborate with each other and share experiences and best practices for optimal stroke care.

G. Disseminate quality data (aggregate) to the prehospital care providers at the Prehospital Care System Quality Improvement Committee.

II. Principles

A. Internal Stroke Center Quality Improvement

1. Each Primary Stroke Center shall have a formal and fully functional internal stroke service quality improvement program.
The Stroke Care within the certified PSC is the responsibility of the Stroke Medical Director.

2. In addition to managing the Stroke Program to meet the Joint Commission requirements, the Stroke Medical Director and Stroke Program Manager are responsible for maintaining compliance with the Santa Clara County Emergency Medical Services Stroke Center Standards.

B. System-wide Quality Improvement

1. Stroke system QI process will be based on a review of cases, which meet criteria as defined by members of the SSCQIC.

2. Cases for review shall be selected by the Stroke Executive Committee, consisting of a representative from the Stroke Medical Directors, and the Stroke Program Managers group, the LEMSA Specialty Programs Nurse Manager and the Santa Clara County EMS Medical Director.

3. The review may include any Prehospital patient who is identified as a Stroke Patient.

4. At the discretion of the SCSQIC chairperson and the EMS Medical Director, other health care professionals may be invited to participate in the specific medical audit review of cases where their expertise is essential to make appropriate determinations.

5. Anyone who participates in case discussion will sign a confidentiality form prior to the case discussion.

III. Membership of the Committee

A. Stroke Medical Directors from each PSC; or physician designee

B. Stroke Program Managers* from each PSC

C. Interventional Radiologists

D. EMS Agency Medical Director

E. EMS Agency Specialty Programs Nurse Manager

F. Other EMS Agency personnel as needed
IV. **Meetings**

A. Meetings shall be quarterly

V. **Attendance**

A. All listed members are required to attend 75% of the quarterly meetings. An attendance log will be maintained and an annual report of attendance percentage will be made available to the PSC Hospital administration annually.

B. Members shall notify the Specialty Programs Nurse Manager in advance of the meeting if unable to attend.

C. Resignation from the committee shall be submitted to the EMS Medical Director in writing, and shall be effective on receipt.

VI. **Election of Officers**

A. Committee officers shall consist of a chairperson and a vice chair who will each serve two (2) year terms. The elected chairperson shall be a current Stroke Medical Director, ED physician or other Neurologist.

B. Elections shall be held on the last meeting date of the end of the two year period

1. The chair and vice chair will work in collaboration with the EMS Medical Director, and the Agency staff assigned to the meeting, to review the meeting minutes, determine the next meeting’s agenda, and facilitate the meeting.

VII. **Voting**

Occasionally the committee may identify an issue that may require a voting process. These issues shall be identified as voting issues by the Chairperson. Each PSC shall have one vote, and a simple majority will constitute a decision.

VIII. **Minutes**

Minutes of all meetings will be maintained in a confidential manner by the EMS Agency, and distributed by email to the members 30 days prior to each meeting. All copies of minutes or materials will be provided by the EMS Agency Due to the confidential nature of the Committee, all minutes and materials will be collected at the end of each meeting.
X. Confidentiality

A. All proceedings, documents and discussions of the SSCQIC are confidential, and thus protected from discovery under sections, 1157.5 and 1157.7 and of the Evidence Code of the State of California. This prohibition relating to the testimony provided to the committee shall be applicable to all of the proceedings and records of this committee, which is one established by a local government agency as a professional standards review organization which is organized in a manner that makes available professional competence to monitor, evaluate and report on the necessity, quality and level of specialty health services, including but not limited to Stroke care services.

B. Guests may be invited to the SSCQIC to discuss specific cases and issues in order to assist the committee to make final case or issue determinations. Guests may only be present for the portions of the meeting about which they have been requested to review or discuss. All guest invitations must have prior approval from the chairperson and EMS Agency staff.

C. All members will be asked to sign a confidentiality agreement not to divulge or discuss information that would have been obtained solely through the SSCQIC membership. Prior to the invited guests participating in the meeting, the Chairperson is responsible for explaining, and obtaining, a signed confidentiality agreement from the guest.

D. The header of the sign in sheet contains the statement related to confidentiality. By signing in on the log the attendee additionally agrees to the confidentiality of the committee proceedings.