

Detroit East Medical Control Authority

Professional Standards Review Organization

Quality Assurance Project

January 2017

Select 10 “random” run sheets per week for 4 weeks (need not be consecutive weeks). Select the sheets from the time period between July and December 2016. At least one run from every shift should be included, although there may not be one run from every provider.

EXAMPLE: Your crews are splint into 4 shifts during the week. You select 10 runs from the second week of July, 10 runs from the first week of September, 10 runs from the third week of October and 10 runs from the last week of December. You ensure that every shift was included as you selected otherwise “random” runs from each week

For EACH run sheet, **review**:

- CHIEF COMPLAINT (document)
- Protocol applicable to the patient’s complaint (document)
- Care that was given, including exam, medications/treatments and disposition (document any issues)

For EACH run sheet, review and document:

- Were the appropriate protocols followed?
- Were there deviations from protocol?
- If indicated, was medical control contacted?
- Did you identify any other concerns?

Once the data table is complete (electronic, or feel free to write out by hand and scan to submit), if there are any protocol deviations or trends that have been identified, please submit your plan to improve the quality of care across your agency regarding these concerns.

For each of the run reports, enter the information into the spreadsheet provided. Submit the spreadsheet and any plans for needed improvements to the PSRO chair.

If you have any concerns or questions, please ask.

Project Due Date:

May 1, 2017

Submit to Dr. Stefanie Wise

swise@med.wayne.edu

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<u>#</u>	<u>CC</u>	<u>Protocol(s):</u>	<u>Findings:</u>
Ex.1	Chest pain	2-5, 5-1	Medications appropriate, EKG done but hospital not notified on priority 2 transport
Ex.2	Vomiting	1-1, 1-11	No issues were identified, protocols appropriate