

PERFORMANCE IMPROVMENT

PERFORMANCE IMPROVEMENT POLICY

21

INTENTIONALLY BLANK

PERFORMANCE IMPROVEMENT POLICY

1 of 2

The purpose of this policy is to state the position of Air Trek, Inc. with regards to the responsibilities of the Performance Improvement (PI) Committee.

The PI Committee is responsible for overseeing that the patient receives proper medical care as required by Chapter 64J-1 FAC and 12 VAC 531. The committee members shall consist of the following personnel:

<u>Title</u>	<u>Discipline</u>
Director of Maintenance	Maintenance
Chief Pilot	Aviation/Safety
Director of Operations	Daily Operations/PI
Medical Director	Medical
Office Personnel	Flight Coordinators
Flight Nurse	Nursing
Flight Paramedic	Paramedic

The purpose of the PI Committee is to ensure the medical care rendered by the Flight Physicians, Flight Nurses, Flight Paramedics, and Respiratory Therapists is of a quality commensurate with the generally accepted standards in aeromedical care. All personnel are encouraged to attend these meetings and to take an active role in improving the care we provide.

The PI Committee shall meet quarterly, or more often as deemed necessary by the Medical Director. It will be the responsibility of the Director of Operations to keep minutes of these meetings and to keep these records on file in accordance with state regulations.

The Medical Director, or his/her designee, shall be responsible for reviewing each Flight Record for completeness, legibility, conformity to medical protocols, and statistical information as required by state regulations.

Should it be determined the patient has not received the proper level of care, it will then be the responsibility of this committee to offer suggestions for the continuing educational training of the personnel involved, as outlined in local standards. Any action taken will be kept confidential and reported, in writing, to the individuals involved.

PERFORMANCE IMPROVEMENT POLICY

2 of 2

The following are indicators for mandatory medical flight record review:

- * In flight intubation
- * Change of destination airports
- * Change of destination facility
- * All patients requiring a Specialty Team response
- * Use of the **NOTIFICATION OF THE MEDICAL DIRECTOR**

PROTOCOL

- * All Narcotics/Controlled Substances administered
- * If an In Flight Emergency is declared
- * If an inappropriate medical team was utilized
- * All safety concerns
- * All complaints received from the Flight Evaluation Form
- * If the flight team does not provide bedside to bedside care
- * All protocol violations
- * Any patient discharged within 24 hours of admission
- * Any patient leaving a medical facility AMA
- * All patients transported without IV access
- * All flights requiring CPR
- * Any flight requiring emergency mode transport to/from the airport
- * Any additional indicators as determined by the Medical Director

The above medical flight records will be reviewed at the monthly PI meeting. Aspect of care issues identified by this review will be discussed in detail. The PI committee will identify concerns, offering a means to correct this, and then implementing a target time to re-evaluate this concern in the future. Any conclusion rendered by this committee shall be noted in the minutes of the monthly meeting and then reviewed with all flight personnel.

It is the goal of the PI Committee to have 100% accountability of the above listed indicators.

To remain current with industry changes, the Director of Operations (or designee) shall attend the local and state EMS provider meetings and any additional educational conferences as directed by this committee. Upcoming changes will be shared with this committee and a plan of action formulated to implement said changes.

The Medical Director shall be responsible for notifying the Department of Health of any actions that may constitute grounds for disciplinary action pursuant to local regulations.

RESERVED

RESERVED