

**SIERRA-SACRAMENTO VALLEY  
EMERGENCY MEDICAL SERVICES AGENCY**

**REGIONAL STEMI CONTINUOUS QUALITY IMPROVEMENT (CQI)  
COMMITTEE BYLAWS (Reference No. 212)**

**A. NAME:**

The Committee shall be referred to as the Regional STEMI Continuous Quality Improvement Committee (COMMITTEE).

**B. AUTHORITY:**

1. The COMMITTEE is established by the Medical Director of the Sierra-Sacramento Valley Emergency Services Agency (AGENCY) as an advisory committee to the AGENCY. The AGENCY is a Multi-County Joint Powers Agency responsible to receive hospital and service provider input and direction specific to STEMI patient emergency medical care in the JPA region.
2. The COMMITTEE is created pursuant to the requirements of California Health and Safety Code Section 1157.7 and California Code of Regulations, Title 22, Division 9, Prehospital Emergency Medical Services, Chapter 12, EMS System Quality Improvement.

**C. PURPOSE:**

1. To promote region-wide standardization of STEMI patient continuous quality improvement.
2. To monitor, evaluate and report on quality of training, care and transportation, including compliance with laws, regulations, policies and procedures and recommend revisions and/or corrective action as necessary.
3. To make recommendations specific to EMS provider, hospital and AGENCY data collection and dissemination.

**D. DUTIES:**

1. Participate with AGENCY in monitoring, collecting data on, and evaluating STEMI patient identification, treatment and transport from the EMS providers and hospitals within the AGENCY's jurisdiction.
2. Re-evaluate, expand upon, and revise as needed, locally developed indicators used by the COMMITTEE for STEMI patient quality improvement.
3. AGENCY will provide a follow-up status report to the COMMITTEE on all cases presented until the case CQI loop is closed.

4. All patient care records and other confidential materials will be returned to the AGENCY at the end of the meeting.

#### E. MEMBERSHIP:

1. The COMMITTEE shall consist of the following voting members:
  - One (1) cardiac catheterization laboratory physician medical director from each AGENCY designated STEMI receiving center.
  - One (1) emergency department physician or RN representative from each AGENCY designated STEMI receiving center.
  - One (1) quality improvement representative (paramedic or RN) from each AGENCY contracted ALS 9-1-1 ground transport service provider within the catchment area of an AGENCY designated STEMI receiving center.
  - One (1) quality improvement representative (Paramedic or RN) from each AGENCY approved ALS public EMS provider within the catchment area of an AGENCY designated STEMI receiving center.
2. Each member shall have an alternate available to assume the member's responsibility in their absence. Cardiac catheterization laboratory alternates may be another physician, a Registered Nurse (RN), or a Registered Cardiovascular Invasive Specialist (RCIS).
3. Non-voting membership will include representatives of the AGENCY. In addition, any representative from the categories listed above may attend meetings if confidentiality requirements are met.
4. Members shall serve at the will of the COMMITTEE, or until removed, resigned or replaced.
5. Members who are unable to attend a regularly scheduled meeting should notify the AGENCY of their absence prior to the meeting and should send an alternate in their place.

#### F. OFFICERS/TERMS:

1. The COMMITTEE shall elect a Chairperson and a Vice-Chairperson utilizing the following procedures:
  - Nominations for officers are requested by the Chairperson. Any member may nominate any other member. The member nominated must accept the nomination in order for the nomination to be valid.
  - Officers shall be elected by the COMMITTEE for two (2) year terms commencing July 1<sup>st</sup> of the first year through June 30<sup>th</sup> of the second year.
2. Officer vacancies:
  - If the Chairperson should vacate the office during the term, the Vice-Chairperson shall become Chairperson and preside over the elections of a new Vice-Chairperson.

- If the Vice-Chairperson should vacate the office, the Chairperson shall preside over the election process of a new Vice-Chairperson.
3. Responsibilities of officers:
- The Chairperson shall preside over COMMITTEE meetings.
  - The Vice Chairperson shall assume the responsibilities of the Chairperson in their absence.

#### G. MEETINGS/VOTING/QUORUM:

1. Meetings shall be held on a regular basis, no less than two (2) times in a calendar year. Meeting dates and times to be set or modified as agreed to by COMMITTEE.
2. Special meetings may be called by the AGENCY Medical Director or the Chairperson as appropriate or upon written request of a majority of COMMITTEE members.
3. A quorum to conduct business shall consist of three (3) eligible voting members.
4. The Chairperson will preside over meetings and participate with the AGENCY in the preparation of the agenda.
5. Meetings will be conducted in a fair and professional manner.
6. The COMMITTEE shall operate under commonly accepted parliamentary procedures and Robert's Rules of Order shall govern the conduct of meetings when applicable.
7. Votes shall be recorded as:
  - In Favor
  - Opposed
  - Abstain
8. The AGENCY will be responsible for preparing the meeting agenda and taking/maintaining meeting minutes.

#### H. AMENDMENT OF BYLAWS:

Any rule or procedure of the COMMITTEE may be enacted, amended, repealed or suspended by a majority vote of the total voting membership.

#### I. CONFLICT OF INTEREST:

Members and officers shall disclose any direct personal or pecuniary (monetary) interest in any subject or conversation before the COMMITTEE and will abstain from voting on any motion relative to that subject.

J. CONFIDENTIALITY:

1. To the extent Evidence Code § 1157.7 is applicable, closed meetings will occur when business addressed by 1157.7 is being transacted. The COMMITTEE'S 1157.7 business, records and minutes shall be considered confidential and all members are prohibited from any unauthorized disclosures.
2. Members and attendees will sign a statement of confidentiality as a condition of participation.

K. EFFECTIVE DATE:

These Bylaws shall be effective upon approval by the COMMITTEE.

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| Effective Date:                                 | 09/08/2016        |
| Approval: Troy M. Falck, MD – Medical Director  | SIGNATURE ON FILE |
| Approval: Victoria Pinette – Executive Director | SIGNATURE ON FILE |