



Health Services Department

Public Health Division

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EMERGENCY MEDICAL SERVICES

POLICY MEMORANDUM #2205

EFFECTIVE DATE: 07/01/92

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AUTHORITY:

HEALTH AND SAFETY CODE 1797.204, 1797.220;
ADMINISTRATIVE CODE, TITLE 22, DIVISION 9,
CHAPTER 4, SECTION 100141.2, 100166.

SUBJECT: **QUALITY ASSURANCE PLAN - PUBLIC SAFETY AND/OR EMT-1
FIRST RESPONDERS WITHIN SOLANO COUNTY**

PURPOSE/POLICY:

To establish specific Q.A. Requirements for the Public Safety and/or EMT-1 First Responders within Solano County.

I. WRITTEN AGREEMENT

- A. On or before December 31, 1992 each First Responder Agency shall have a written agreement to participate in the County's ALS program and to comply with all applicable State Regulations and local Policies and Procedures including participation in the Local EMS Agency's Q.A. System.
- B. By July 1, 1993 each First Responder Agency shall have a quality assurance program approved by the Local EMS Agency.

II. MAINTENANCE REQUIREMENTS

First Responder Agencies shall maintain a comprehensive Quality Assurance Program designed to interface with the Local EMS Agency's Quality Assurance Program.

III. MEDICAL QUALITY ASSURANCE PERSONNEL

The Basic Life Support First Responder Service Providers shall have one physician, registered nurse, EMT-P, EMT-I, or other appropriately credentialed medical professional employed to implement and supervise their on-going internal Quality Assurance Program. This individual shall be approved by the Local EMS Agency to perform, at a minimum, the following functions:

- A. Retrospective audit of all BLS calls where patients are assessed according to Solano County EMS BLS Audit Criteria.
- B. Investigation of all unusual occurrences as identified by the EMS Agency. Investigations shall take no longer than 5 days and/or a mutually agreed time interval; the results shall be reported directly back to the EMS Agency.
- C. Assure attendance of appropriate personnel at PCC meetings as required by the EMS Agency.
- D. Infection Control – First Responder Agencies shall develop and strictly enforce policies for infection control and contaminated materials disposal to decrease the chance of communicable disease exposure.
- E. Audit submission – EMT-D First Responder Agencies shall submit all audit review information governing EMT-D service as outlined in Policy #3300.
- F. BLS Audit – First Responder Service Providers shall perform a medical retrospective BLS audit of EMS cases using audit standards prescribed by the EMS Medical Director and the Solano County Fire Chief's Association.
- G. MCI Evaluation – First Responder Agencies who institute Incident Command at the scene of an MCI shall submit to Solano County EMS an MCI Evaluation Form.
- H. Assure EMT compliance with Solano County Haz-Mat Training Requirements and any other special educational programs required by the Solano County Health Officer.
- I. Other Q. A. requirements established by the Solano County Health Officer.

IV. TRAINING/EDUCATION/CERTIFICATION

- A. Field Training Officer – First Responder Service Provider shall designate a minimum of one (1) Field Training Officer for 25 FTE employees who shall function as trainers and perform other duties on behalf of First Responder Service Provider.
- B. Continuing Education Records – The EMT Service Provider shall maintain records of continuing education and mandatory training programs for its EMT employees, as mandated by California Code, Title 22 and/or Public Safety First Responders.
- C. Field Care Audits – The EMT Service Provider shall work cooperatively with the Base Hospitals and the EMS Agency in identifying and assisting with field care audits.

- D. EMT Investigation by EMS Agency – First Responder Service Provider will cooperate fully with the Solano County EMS Agency in the coordination of any investigation of an employee of the Service Provider with the Solano County EMS Agency or any Solano Base Hospital.
- E. Certification – All EMTs and/or Public Safety First Responders employed by EMT Service Provider shall maintain Basic Life Support (BLS) Certification. The Service Provider shall retain on file at all times, copies of the current and valid certifications of all Responders performing services.
- F. Company Orientation and On-Going Preparedness – First Responder Service Provider shall properly orient all field personnel before assigning them to respond to emergency medical requests. Such orientation shall include, at a minimum, Service Provider Agency Policies and Procedures; EMS System overview; EMS Policies and Procedures; receiving hospitals, and County Communications Centers; map reading skills including key landmarks, routes to difficult access facilities (e.g., jails, military bases, etc.) within the County and in surrounding areas.
- G. Preparation for Multi-Casualty and Haz-Mat Response – First Responder Service Provider shall train all personnel and supervisory staff in their respective roles and responsibilities under the County Multi-Casualty Incident Plan (MCI Plan) which is on file at the County EMS Agency, and prepare them to function as the medical portion of the Incident Command System, if needed.
- H. Assultive Behavior Management Training – First Responder Service Provider shall provide personnel with the training, knowledge, understanding and skills to effectively manage patients with psychiatric, drug/alcohol or other behavioral or stress related problems, as well as difficult or potentially difficult scenes on an on-going basis. Emphasis shall be on techniques for establishing a climate conducive to effective field management, and for preventing the escalation of potentially volatile situations.

V. PRODUCTIVITY REPORTS

First Responder Service Providers servicing Solano County shall submit the following Q. A. products and necessary statistical data on a monthly basis (unless otherwise indicated) to the EMS Office or appropriate hospital.

- A. Quarterly audits of BLS activities (submitted quarterly, 15 days after the end of each calendar quarter; i.e., March, June, September, December).
- B. EMT-D Audit and medical record (electronic transfer of MIS and audit summary data is an acceptable equivalent).
- C. Receiving hospital copy of the PCR for any EMT-D case (immediately, or within 72 hours).
- D. MCI/Medical Disaster Summary Report (within 72 hours of any declared MCI in which First Responder service participated).
- E. Any Level III Q. A. concern (immediately, or within 72 hours of incident).

- F. Unusual occurrence submitted to service provider by the EMS Agency (within 7 days of receipt of said notification).
 - G. Bi-annual plan for EMT continuing educational programs for approval with appropriate EMT-1 attendance records and documentation of acceptable skill performance of EMTs electing to be recertified by the EMS Office
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