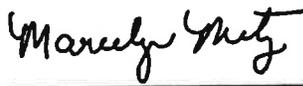
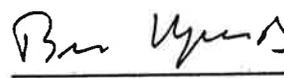


- I. **Authority:** Division 2.5, Health and Safety Code, Sections 1797.204 and 1798; evidence Code, Sections 1040 and 1157.7.
- II. **Purpose:**
- A. To establish an advisory committee to the local Emergency Medical Services (EMS) Agency to monitor, evaluate and report on the quality of prehospital medical care.
 - B. To promote Countywide standardization of the quality improvement process with emphasis on the educational aspect.
 - C. To review issues and matters of a system wide nature. It shall not be the function of this committee to become directly involved in the disciplinary action of any specific individual. The authority for actual disciplinary action rests with the County EMS Medical Director and/or the State EMS Authority in accordance with Health and Safety Code, Division 2.5, Section 1798.200.
- III. **Policy:**
- A. **Scope of Review:**
- The scope of review to be conducted by the committee may include any patient encountered in the prehospital system in the County of San Diego. The review will include, but not be limited to:
- 1. Issues reported to the County (refer to P-409 of County San Diego Emergency Medical Services Policy and Protocol Manual).
 - 2. Variations from Protocols.
 - 3. Deviations from Scope of Practice.
 - 4. Medication errors.
 - 5. Intubation complications.

Approved:


Administration


EMS Medical Director

6. Variations from standards of care.
7. Unusual cases or cases with education potential.

B. Membership:

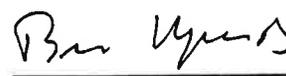
Members will be designated according to the following format and changes in elected/appointed members will take place at the end of the odd calendar year.

Voting members:

1. The Base Hospital Medical Director of each of the County's Base Hospitals.
2. The Base Hospital Nurse Coordinator of each of the County's Base Hospitals.
3. The Medical Director of the Emergency Department at Rady Children's Hospital and Health Center.
4. The prehospital nurse liaison of the Emergency Department at Rady Children's Hospital and Health Center.
5. The Medical Director of each of the County's approved advanced life support (ALS) agencies.
6. One medical EMS liaison military representative.
7. One current paramedic provider agency representative appointed by County Prehospital Agencies Committee (CPAC).
8. One San Diego County Fire Chiefs' Association, EMS Section representative.
9. Two paramedics (one public and one private provider) appointed by San Diego County Paramedic Association.
10. One EMT appointed by San Diego County Ambulance Association.
11. One first responder representative.
12. County staff (*ex officio*).

Approved:


Administration


EMS Medical Director

13. One Trauma Hospital Medical Director representing the Medical Audit Committee (MAC) on Trauma.

Associate members (non-voting):

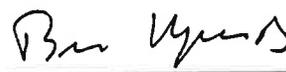
1. One designated representative responsible for QI/QA/Education from each ALS transporting agency. The ALS transporting agency will send a letter of notification to County of San Diego Emergency Medical Services designating their representative, updating as needed.
2. The Program Director of each of the County's approved EMT-Paramedic training programs.
3. One emergency medicine resident or fellow from each training program.

C. Attendance:

1. Members will notify the Chairperson of the committee in advance of any scheduled meeting they will be unable to attend.
2. Resignation from the committee may be submitted, in writing, to the EMS Medical Director, and is effective upon receipt, unless otherwise specified.
3. At the discretion of the PAC Chairperson and/or County EMS, other invitees may participate in the medical audit review of cases where their expertise is essential to make appropriate determinations. These invitees may include, but are not limited to the following:
 - Paramedic agencies representatives
 - Law enforcement
 - EMT provider
 - Paramedics

Approved:


Administration


EMS Medical Director

- MICNs
- Physicians
- Communication/dispatch representatives

D. Election of Officers:

Committee officers shall consist of two co-chairpersons, one of which is a physician. Elections will take place during the last meeting of each calendar year and appointees shall assume office at the first meeting of the new calendar year. Officers elected shall serve a one year term, and may be re-elected for one additional term.

E. Voting:

Due to the "advisory" nature of the committee, many issues will require input rather than a vote process. Vote process issues will be identified as such by the Chairperson. When voting is required, a "simple" majority of the voting members of the committee need to be present to constitute a quorum.

F. Meetings:

The committee shall meet on a monthly basis or at a frequency as determined to be appropriate by the Chairperson, but never less frequently than bimonthly.

G. Minutes:

Minutes will be kept by the EMS Secretary or designee and made available to the members of the committee. Due to the confidentiality of the committee, any distributed confidential documents will be collected by the EMS staff at the close of each meeting and no copies may be made or processed by members of the committee.

H. Confidentiality:

Approved:


Administration


EMS Medical Director

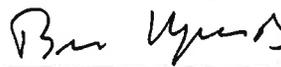
SUBJECT: PREHOSPITAL AUDIT COMMITTEE

Date: 7/01/2010

1. All proceedings, documents and discussions of the Prehospital Audit Committee are confidential and pursuant to Sections 1040, 1157.5 and 1157.7 of the Evidence Code of the State of California. The prohibition relating to the discovery of testimony provided to the committee shall be applicable to all 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 which makes available professional competence to monitor, evaluate and report on the necessity, quality and level of specialty health services, including but not limited to prehospital care services. Guests may be invited to discuss specific cases and issues in order to assist the committee in making 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 testify.
2. All members shall sign a confidentiality agreement not to divulge or discuss information that would have been obtained solely through Prehospital Audit Committee membership. Prior to the invited guests participating in the meeting, the Chairperson is responsible for explaining, and obtaining, a signed confidentiality agreement for invited guest(s).

Approved:


Administration


EMS Medical Director