

- I. **Authority:** Division 2.5, Health and Safety Code, Sections 1797.204 and 1798; and Evidence Code, Sections 1040 and 1157.7.
- II. **Purpose:** To establish the scope, membership and functions of an advisory committee to the local Emergency Medical Services (EMS) agency. This committee shall meet to monitor and evaluate the medical care of identified patients with traumatic injury.
- III. **Policy**
- A. The scope of the committee shall include, but not be limited to:
1. Review of trauma deaths in the County
 2. Evaluation of trauma care
 3. Provision of input to the local EMS agency in the development, implementation and evaluation of medical audit criteria
 4. Design and monitoring of corrective action plans for trauma medical care
 5. Assistance and participation in research projects
 6. Provision of medical care consultation at the request of the County of San Diego Division of EMS (County EMS), including on-site facilities evaluation by committee members
 7. Establishment of subcommittees of outside consultants at the request of County EMS
 8. Recommendation of process improvement strategies related to trauma care
- B. **Membership:**
- The committee shall be comprised of the following:
1. Members:
 - a. Trauma Center Medical Directors from all designated centers

Approved:



Administrator



Medical Director

**SAN DIEGO COUNTY DIVISION OF EMERGENCY MEDICAL SERVICES
POLICY/PROCEDURE/PROTOCOL
SUBJECT: MEDICAL AUDIT COMMITTEE ON TRAUMA**

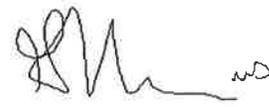
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- b. Trauma Nurse Coordinators from all designated Trauma Centers
 - c. County EMS Trauma System Coordinator/Trauma Quality Assurance Specialist
 - d. County Trauma System Surgical Consultant
 - e. Base Hospital Physician representing the Prehospital Audit Committee (PAC)
 - f. Neurosurgeon appointed by the Academy of Neurosurgeons
 - g. Anesthesiologist appointed by the Anesthesia Association
 - h. Orthopedic Surgeon
 - i. Emergency Physician not affiliated with a trauma center, appointed by San Diego Emergency Physicians Society
 - j. County EMS Medical Director
2. Ad Hoc Members that may participate:
- a. Trauma Base Hospital Medical Directors
 - b. Medical Director Air Medical Services
 - c. Designated Assistant Trauma Medical Directors or Trauma Surgeon staff of trauma centers
 - d. Approved physicians enrolled in Trauma fellowships
 - e. Trauma Center Intensivists
 - f. Assistant Trauma Coordinators
 - g. Physicians from non-trauma facilities who are presenting cases
 - h. President of the Medical Society

Approved:



Administrator



Medical Director

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- i. General surgeon appointed by the Society of General Surgeons
 - j. County EMS Administrator/appropriate Division staff
 - k. Managed care physician representative appointed by County EMS.

C. Attendance:

1. Members should notify County EMS staff (285-6429) in advance of any scheduled meeting they would be unable to attend. Attendance at these meetings for the Trauma Medical Directors and Trauma Nurse Coordinators or their designees is mandatory. The Trauma Medical Directors and the Trauma Nurse Coordinators should use their best efforts to attend 90% of the scheduled MAC meetings annually. After three (3) consecutive absences in a calendar year, an appointed member may be replaced on the Committee.
2. Resignations from the committee shall be submitted, in writing to County EMS.
3. Invitees may participate in the medical review of specified cases where their expertise is requested. All requests for invitees must be approved by County EMS in advance of the scheduled meeting.
4. Invitees not participating in the medical review of specified cases must be approved by County EMS and all Trauma Medical Directors.

D. Voting:

Due to the "advisory" nature of the committee, many issues require consensus rather than a vote process. Vote process issues will be identified

Approved:



Administrator



Medical Director

as such by the Chairperson. When voting is required, the majority of the voting members of the committee need to be present. Voting members may include Trauma Medical Directors, Trauma Nurse Coordinators and the appropriate physician specialist. Members may not participate in voting when a conflict of interest exists.

E. Meetings:

The committee shall meet at least six (6) times per year at times arranged by County EMS/MAC.

F. Committee Documentation:

Minutes will be kept by County EMS staff and distributed to the members at each meeting. Due to the confidentiality of the committee, confidential committee documents will be collected by County EMS staff at the close of each meeting and no copies may be made or possessed by members of the Committee. All official correspondence and communication generated by the Medical Audit Committee will be approved by County EMS staff and sent on San Diego County letterhead.

Approved:



Administrator



Medical Director

G. Confidentiality:

All proceedings, documents and discussions of the Medical Audit Committee are confidential and are covered under Sections 1040 of the Government Code and 1157.7 of the Evidence Code of the State of California. The prohibition relating to 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 to monitor, evaluate and report on the necessity, quality and level of specialty health services, including, but not limited to, trauma care services. Issues which require prehospital medical/system input may be sent to the confidential Prehospital Audit Committee.

Approved:



Administrator



Medical Director