BASE HOSPITAL INCIDENT REVIEW PROCESS - INTERIM

I. AUTHORITY:

California Health and Safety Codes. Division 2.5 Section 1797.204 and 1798.102; California Code of Regulations, Title 22, Section 100168

II. APPLICATION:

This policy defines the process used by the Base Hospitals to identify and report variations in practice from Orange County EMS policies, protocols, treatment guidelines and documentation standards, and outlines the actions to be followed for problem resolution, performed as a part of the hospital's comprehensive quality improvement (CQI) plan.

III. GENERAL GUIDELINES:

A. ALS and BLS calls will be evaluated by the Base Hospital Coordinator (BHC), Program Coordinator or designated person for compliance with Orange County EMS (OCEMS) treatment / documentation guidelines.

B. Issues / concerns regarding prehospital care shall be investigated by the appropriate CQI designee. The hospital / agency receiving the initial issue / concern will notify the BHC of the incident.

C. The BHC will initiate an investigation within 5 days of the notification of the occurrence.

D. All significant issues will be documented on the *"Incident Investigation Review Report"* form and filed in a secured area by the BHC as part of the base hospital's CQI process, therefore protected under California State Evidence code 1157.7.

1. Quarterly summary reports (levels 2, 3, 4) will be analyzed by BHCs to identify system trends. Identified trends may indicate the need for future continuing educational opportunities or recommendations for system changes. Trends and recommendations will be forwarded to the Fire Paramedic Coordinator / agency representative, Orange County EMS and the Quality Assurance Board (QAB).

2. Recurrent issues may require additional education, counseling, monitoring, development of a performance improvement plan, and/or referral to the Orange County EMS.

3. Any incident that, upon the Base Hospital Medical Director/liaison review, requires OCEMS notification and could result in action against involved personnel's license should refer to policy # 450.00.

4. OCEMS Agency shall be notified of the following:

   a. Significant medication errors with a potential for bad outcome.
   b. Any omissions resulting in injury
   c. Significant patient care issues, level 4
   d. Trends - system, individual, or medic team
   e. Unrecognized endotracheal tube (ETT) dislodgements
   f. Issues pertaining to practice outside paramedic scope of practice
   g. Unusual occurrences

5. Fire Paramedic Coordinator/agency representative shall be notified of the following:

   a. Patient care issues, level 3 and 4
   b. Personnel/dispatch/ system issues
   c. Unrecognized ETT dislodgements
   d. Trends of behavior
   e. Unusual occurrences
   f. Scope of practice issues

E. Personnel / Dispatch / System Issues

1. Incident will be forwarded to the appropriate Fire Paramedic Coordinator or other agency representative, as appropriate.

2. Issues affecting patient care will be referred to the appropriate BHC.

3. Concern documented.

F. Level 0 – No Issue Identified

1. Based on BHC investigation, no issue identified.

2. Situation and investigation documented.

G. Level 1 – Communication and / or Documentation Concerns

1. Examples of communication concerns:

   a. Failure to make appropriate base contact
   b. Inaccurate / inappropriate radio package
   c. Unprofessional communication

2. Examples of documentation concerns:

   Inaccurate / inappropriate / incomplete documentation as outlined in the Orange County Prehospital Care Report Documentation Guidelines or OCEMS policy.

3. Action: All level 1 incidents will be documented and monitored for trends by the BHC.

H. Level 2 – Minor Patient Care Issues

1. Non-compliance with OCEMS treatment protocols or policies without a change in patient condition / outcome.

2. Failure to adequately assess patient without an effect on patient condition / outcome.

3. Recurrent level 1 issues.

4. Action: All level 2 incidents will be documented and monitored for trends by the BHC. If trend noted, the appropriate Fire Paramedic Coordinator / agency representative will be notified.

I. Level 3 – Potentially Significant Patient Care Issues

1. Non-compliance with OCEMS treatment protocols or policies without a serious effect on patient condition / outcome.

2. Failure to adequately assess or treat patient without a serious effect on patient condition / outcome.

3. Failure to recognize potential for injury / illness or determine appropriate patient destination without a serious effect on patient condition / outcome

4. Recurrent level 2 issues.

5. Action:

   a. All level 3 incidents will be documented and monitored for trends by the BHC. All level 3 incidents and trends are to be forwarded to the Fire Paramedic Coordinator / agency representative
   b. An educational action plan for performance improvement will be developed.

J. Level 4 – Significant Patient Care Issues

1. Non-compliance with OCEMS treatment protocols or policies with a potential for significant harm or an adverse effect on patient condition / outcome.

2. Failure to adequately assess or treat patient resulting in a potential for significant harm or an adverse effect on patient condition / outcome.

3. Recurrent level 3 issues.

4. Action:

   a. The Base Hospital Medical Director / liaison and OCEMS will be notified of all level 4 incidents.
   b. The appropriate Fire Paramedic Coordinator / designated agency representative will be notified.
   c. An educational action plan for performance improvement will be developed.
   d. All level 4 issues will be documented and forwarded to OCEMS.

5. Trend:

   The gathering and evaluation of data in order to determine a commonality, or lack of, practices or events. Data will be reviewed quarterly by the Orange County Base Hospital Care Coordinators to identify system trends.

K. Performance Improvement Plan

1. The decision to develop an educational performance improvement plan will be determined by the BHC, Fire Program Coordinator / agency representative and/or Base Hospital Medical Director as indicated.

2. Educational and performance expectations for specific improvements shall be confidential, clearly identified, measurable and include:

a. Identification of specific expectations including the expected time frame for completion.
b. Consequences for non-compliance.

3. The appropriate Fire Paramedic Coordinator / agency representative shall receive a copy of the performance improvement plan. A copy shall be available to involved personnel upon request.

L. Procedure

Upon notification of a concern, complaint or incident, the BHC, Fire Paramedic Coordinator / agency representative will:

1. Conduct an investigation, which may include:

   a. Review of the Base Hospital Report (BHR)
   b. Review of the Prehospital Care Report (PCR)
   c. Listen to the taped call
   d. Obtain patient outcome
   e. Interview receiving center personnel
   f. Base Hospital Medical Director / Prehospital Liaison review
   g. Interview all personnel involved, which may include, but is not limited to, paramedic, MICN, Base Physician, ambulance attendant, receiving center personnel.

2. Document findings pertinent to the issue / concern on the *Incident Investigation Review Report* form. Additional documentation may be necessary.

   a. Determine issue level and category.
   b. Determine if the issue / category is an isolated incident or a recurring problem with the individual, medic team or system.
   c. Document action plan, which may include: recommendation(s) and action(s) taken, specific expectations and expected time frame, as indicated. Examples include:
      1. Education plan developed: discussion, completion of an independent case review / module, didactic course, review article
      2. Clinical time
      3. Skills review
      4. If involved personnel do not comply with action plan, the BHC shall notify the appropriate Fire Paramedic Coordinator / agency representative.
      5. If involved personnel dispute the issue raised, a formal case review should be conducted with all parties involved; the paramedics, MICNs, BHC, Base Hospital Medical Director, Fire Paramedic Coordinator, or their designees.
   d. Notify and forward the *Incident Investigation Review Report* form to the appropriate individuals.

      1. Notify the Fire Paramedic Coordinator / agency representative of all level 2, 3, and 4 issues.
      2. Notify Orange County EMS of all level 4 issues and issues listed in D.4.

   e. Enter incident into the database

      1. Track and trend incidents
      2. Incidents and trends will be reported to the BHC meeting each quarterly.