



## EL PASO COUNTY EMERGENCY SERVICES AUTHORITY MEDICAL CONTROL COMMITTEE POLICY AND PROCEDURE

### 1.0 Introduction

The Emergency Medical and Trauma Services Act, Section 25-3.5-101, *et seq.*, Colorado Revised Statutes, and the State Board of Health Rules Pertaining to Emergency Medical Services, 6 CCR 1015-3 (the State EMS Rules), requires each county to have a written complaint and investigation policy and procedure to address complaints against licensed ambulance service providers operating in the county (6 CCR 1015-3 § 12.4). The ESA, through its Medical Control Committee (MCC), provides this complaint policy and procedure for medical-related complaints arising out of ambulance services provided by the ambulance services contractor contracting with the ESA.

The MCC makes recommendations to the ESA regarding uniform system-wide medical protocols, quality assurance, and assessment of the ESA Contractor's level of training. Subject to patient confidentiality and privacy issues, the MCC will follow the policies and procedures outlined below to review medical complaints and complaint resolution that arise within the scope of the Contract.

### 2.0 Definitions

- 2.1 Business Administrator - The ESA staff person who provides business administration services to and on behalf of the ESA.
- 2.2 Confidential Information - Information that is confidential and protected from public disclosure under federal and/or state confidentiality or privacy laws.
- 2.3 Contract – the contract for provision of ambulance services entered into by the ESA and the Contractor.
- 2.4 Contractor – the ambulance services provider that provides ambulance services to the ESA pursuant to the Contract.
- 2.5 Medical Control Committee (MCC) - a committee formed by the ESA to review medical-related complaints involving the Contractor and to make recommendations to the ESA board concerning uniform system-wide medical protocols, quality assurance, and assessment of the ESA Contractor's level of training.
- 2.6 State – the State of Colorado, through its Department of Regulatory Agencies (Board of Medical Examiners) and /or the Department of Public Health and Environment.

### 3.0 Composition

The MCC shall be composed of the following voting members who shall be appointed by the ESA board:

- Physician/ESA board member appointed from Memorial Health Systems;

- Physician/ESA board member appointed from the Penrose-St. Francis Health Services;
- El Paso County Coroner;
- City of Fountain Fire Department Medical Officer;
- Memorial Health Systems EMS Officer/Representative;
- Penrose-St. Francis Health Services EMS Officer/Representative; and
- At-Large Paramedic not employed by the Contractor

The MCC shall also have the following non-voting members:

- Contractor's medical director; and
- Contractor's clinical specialist.

#### **4.0 Purpose**

The purpose of this policy is to provide a mechanism by which the ESA, through the MCC, will:

- 1) monitor the Contractor's compliance with the medical protocols approved by the Emergency Care Committee of the El Paso County Medical Society, which have been adopted by the ESA Board as the medical protocols to be used by the Contractor in the performance of its duties under the Contract;
- 2) oversee all medical-related quality assurance issues reported through the Contractor, the ESA and the State; and
- 3) ensure, by review and oversight of medical-related complaints and trends, that the Contractor's personnel meet adequate training requirements.

#### **5.0 Policy**

- 5.1 Medical complaints related to the Contractor's provision of ambulance services can be made to or received from: 1) the ESA, 2) the Contractor, or 3) the State of Colorado, either through the Department of Public Health and Environment (CDPHE) for complaints against or involving the Contractor's paramedics or EMTs, or through the Board of Medical Examiners (BME) for complaints against or involving the Contractor's medical director.
- 5.2 In addition to the oversight responsibilities for individual complaints as set forth below, the MCC will also review all medical complaints and their resolutions to track possible trends. The MCC will report the results of its review and may make recommendations to the ESA Board for modification of the Contractor's services, protocol, or training.
- 5.3 The MCC (and the ESA) will not disclose Confidential Information and will adhere to all applicable federal and state confidentiality and privacy laws when receiving, reviewing, and discussing medical complaints and their resolution.
- 5.4 The ESA reserves the right, at any time and in its sole discretion, to retain an independent physician to investigate any medical-related complaint on behalf of the ESA. The MCC may request the ESA Board to approve the hiring of an independent physician to investigate a medical-related complaint.

#### **6.0 Procedure**

- 6.1 Upon the ESA's direct receipt of a medical-related complaint through the ESA website or by any other manner, the Business Administrator will forward the complaint to the Contractor for investigation and resolution, and will also provide a copy of the

complaint with Confidential Information redacted to the two ESA physician/board members and the Contractor's medical director.

- 6.2 Copies of medical-related complaints directly received by the Contractor will be sent to the Business Administrator monthly. If the Contractor has not yet redacted Confidential Information from the complaints, the Business Administrator will redact all Confidential Information before promptly forwarding the redacted complaints to the two ESA physician/board members and the Contractor's medical director.
- 6.3 The Contractor will promptly investigate all complaints and will submit to the Business Administrator a written summary of each complaint, the results of its investigation, and the Contractor's resolution of the complaint. The Business Administrator will then provide a copy of each complaint and the Contractor's resolution to the two ESA physician/board members and the Contractor's medical director.
- 6.4 The two ESA physician/board members will independently review each complaint and resolution within thirty days of receipt. If the two ESA physician/board members agree with the Contractor's resolution, the matter will be considered closed. Upon resolution of the complaint, the Business Administrator will communicate with the complainant, if the complaint was received directly by the ESA, or will communicate with the Contractor to ensure that the complainant has been contacted in writing about the resolution of the complaint.
- 6.5 If the two ESA physician/board members disagree on or with the Contractor's resolution of the complaint, then additional information will be sought from the Contractor. If consensus between the two ESA physician/board members on the Contractor's resolution of the complaint still cannot be reached, then the MCC will review the complaint and resolution. Recommendations from the MCC regarding complaint resolution will then be forwarded to the Contractor to consider for adoption.
- 6.6 For medical-related complaints filed directly with the State, the Contractor will promptly notify the Business Administrator and the two ESA physician/board members of the filing of the complaint and, as soon as available, the results of the State's investigation. The ESA or MCC may obtain complaint investigation information directly from the investigating State agency.
- 6.7 The MCC chair will provide the ESA Board at its regular meetings with a report that will advise the Board of the number of medical complaints reviewed by the two ESA physician/board members, the number of complaints where the resolution was deemed appropriate, and the number of cases where resolution required involvement of the MCC.
- 6.8 The ESA Board has the discretion to alter, on a case-by-case basis, the procedure set forth herein for the review and disposition of medical complaints.

## **7.0 Assessment of High Risk, Low Volume Procedures**

- 7.1 The MCC shall review the contractor's protocols upon initiation of the contract, and with each revision of the protocols, to identify any procedures that may be determined to be high risk, low volume. The MCC shall evaluate each high risk, low volume procedure to determine if the need exists to monitor it for safety and efficacy.
- 7.2 The MCC shall develop a policy and procedure that will be used to monitor each high risk, low volume procedure. The MCC shall report these findings, along any resultant recommendations to the ESA.

7.3 All Contractor usages of high risk, low volume procedures performed under the Contract shall be reviewed by the Contractor's QA/QI process, including a review by the Contractor's medical director.

#### **8.0 Review of Medical Complaint Trends**

The MCC will monitor trends in medical complaint type, frequency, and pattern of involvement of Contractor personnel. If the MCC notes a trend in the data provided by the Contractor, the MCC will discuss with the Contractor possible solutions to the trend.