



Emergency Medical Services Agency Prehospital Care Manual **Policy 109**

POLICY DEVELOPMENT AND IMPLEMENTATION

Effective Date January 22, 2007
Replaces August 1, 2004

Resources
None

I. Purpose

To establish standardized procedure for the creation, revision, and implementation of Santa Clara County Prehospital Care Policy (includes plans, protocols, procedures, etc.).

II. Format

The EMS Agency shall develop and maintain a standard policy format.

III. Policy Generation

The Santa Clara County EMS Agency is responsible for the creation and implementation of policy related to the provision of emergency medical care and services within the County of Santa Clara. Whenever possible, various advisory groups may be provided with the opportunity to make suggestions or comments to the Agency for consideration prior to implementation.

IV. New Policy Process

- A. Agency staff is responsible for the creation of proposed EMS policy. Any system stakeholder may request the creation of a policy through an existing advisory committee or in writing to the Agency.
- B. EMS Agency staff will make policy drafts available for an open comment period of a minimum of thirty (30) days before adoption whenever possible.

- C. During open comment periods, all suggestions must be submitted electronically, in writing to the Agency. Each suggestion/comment will be posted to a master list and made available to all system participants for review.
- D. Based on the nature of a proposed policy, the Agency may elect to hold a policy hearing. Such hearings will be open to the public.
- E. Based on the nature of a proposed policy, the Agency may also elect to hold an administrative review. Such review will include department/company senior managers and Agency staff and may be held at any time.
- F. Whenever possible, significant system-wide changes will be adopted on an annual basis to ensure there is sufficient time for advance planning and the training of all personnel. This may include clinical protocols and orders, master plans, etc.
- G. The Administrator will review all comments and suggestions with Agency staff and determine final policy content. The Medical Director will work in cooperation with the Administrator to review all items of clinical nature to ensure appropriateness as necessary. Once the Administrator has approved the policy, an effective date will be issued.
- H. In general, policies will become effective no less than sixty (60) days after approval. Effective dates may vary based on the financial, regulatory, and operational impacts of the policy. .

V. Revision Process

- A. Policy revisions will be made in accordance with the procedure identified in Section IV.
- B. A review date is identified on each policy, in the event that the policy is not revised or reissued, the policy shall remain in effect until amended by the Administrator.

VI. Emergency Changes & Administrative Orders

- A. Administrative Orders will be issued when emergency changes or immediate implementation of practices is necessary in order to ensure the protection of the public's health and safety. Issuance of Administrative Orders shall bypass the normal review process.

- B. Administrative Orders will be executed by the Administrator, and the Medical Director in matters of medical control, if of a clinical nature) or their designee, and such orders may be made effective immediately.
- C. Administrative Orders will either be formalized into Policy or expire one year after issuance, unless terminated earlier by the Agency.
- D. The Administrator and Medical Director may make policy changes at any time, as appropriate, bypassing all processes identified herein to ensure the protection of the public's health and safety.

VII. Production and Distribution

- A. The Agency will provide any System Stakeholder with electronic notification of proposed or final policy changes, upon written request for such notice by the System Stakeholder. An electronic copy of all documents will be sent to each Paramedic and Basic Life Support Coordinator, made available on the Agency website, or distributed via other electronic media.
- B. All hardcopy materials will be available for purchase in accordance with approved County fee schedules.
- C. All documents produced by the County (manuals, orders, protocols, etc.) may not be modified without the prior approval of the County.
- D. All approved prehospital care provider organizations are responsible for disseminating new policies to individual employees, providing required training, and ensuring compliance by the implementation date identified.

V. Process for Requesting Policy Modifications

- A. Any person may submit a request for a modification to any policy. This request shall be provided in writing to the Administrator. The request must identify the following:
 - Name of requestor
 - Contact information (phone, email, etc.)
 - Representing (organization, self, association)
 - The explanation of the problem.
 - The reason the requestor believes a problem exists.
 - Recommended resolution options.

- B. The Administrator shall review the request with appropriate parties and/or organizations, including the clinical review by the Medical Director.
- C. The Administrator or his or her designee will provide a written response to the request as soon as practicable.
- D. The decision of the Administrator (or their designee), in cooperation with the Medical Director, will be final.