
Professional Standards Review Organization

The Professional Standards Review Organization (PSRO) is responsible for the oversight of the quality of care provided to patients and appropriate protocol compliance within the EMS system.

1. **Membership:**

- A. Appointments: Chairperson and members appointed by Medical Director.
- B. Term: 1 year.
- C. Meetings: Monthly with additional meetings as deemed necessary. Minimum of 8 meetings per year.
- D. Membership: Minimum requirements (8):
 - 3 - ED Physician from each GCMCA approved facility
 - 1 - ALS public provider
 - 1 - ALS private provider
 - 1 - BLS provider
 - 1 - MFR provider
 - 1 - "911" representativesOther members may be appointed to the committee as deemed appropriate and/or necessary by the Medical Director.
Ex-Officio: Medical Director, GCMCA Executive Director, and GCMCA Coordinator
- E. Chairperson: ED Physician appointed by Medical Director.
- F. Attendance: 75% required attendance with semi-annual assessment.
- G. Quorum: One ED Physician and greater than 50% of voting members.

The appointed individual must attend 75% of the most recent eight meetings. If the member fails to meet the 75% requirement within the first eight meetings, a letter will be sent to the individual and their agency. Following that they must attend at least 75% of the next four meetings or the PSRO may take action to remove the member.

2. **Responsibilities:**

- A. Incident Review: To assess, investigate and when necessary, make recommendations to the GCMCA Advisory Committee and Board pertaining to

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- issues of concern regarding non-compliance with protocols posed by any person(s) regarding Genesee County EMS activities. Investigations will be processed according to the Incident Review Process (5).
- B. Audits: To regularly assess quality assurance processes performed by pre-hospital care agencies.
- C. PSRO Studies/Planning: To develop an annual plan and perform study evaluations for the purpose of EMS system assessment and improvement of processes, protocols, EMS personnel, equipment, medications, etc that may affect patient outcomes.
- D. Licensure/Relicensure: Assessment of agencies and facilities applications, reapplications, and compliances to GCMCA protocols, policies, and PSRO.
3. **Reporting:** To GCMCA Advisory Committee and EMS Medical Director.
4. **Committee Actions:**
- A. **Assessment:**
Will be reviewed for EMS system, individual provider and/or agency:
1. Accuracy of demographics, times, mileage, etc
 2. Accuracy of patient assessment
 3. Appropriateness of treatment
 4. Compliance with protocols
 5. Competency of procedures
 6. Communications
 7. Completeness of documentation
 8. Any information that may impact patient care
- B. **Recommendation:**
1. Absolution, complaint unfounded, unsubstantiated or not of consequence
 2. Education/protocol change
 3. Trending
 4. Written warning
 5. Written Reprimand
 6. Corrective action plan
 7. Probation
 8. Suspension
 9. Recommend revocation of license - through Michigan Department of Community Health (MDCH).

5. **Incident/Complaint/Potential Protocol Violation Review Process:**
- A. Allegations of potential protocol violations must be submitted to the GCMCA PSRO in writing by fully completing the GCMCA Incident Report or communicating information consistent with the Incident Report to a GCMCA staff member. An incident number will be assigned to each allegation filed for tracking purposes.
 - B. The EMS agency(s) and/or individual(s) involved with the alleged incident will receive written notice of the complaint. A written response from the EMS agency(s) and/or individual(s) will be required within 10 calendar days. However, more urgent matters may require a more urgent response and is at the discretion of the Medical Director.
 - C. Details of the allegation, and any responses received from the EMS agency(s) or individual(s), will be presented at the next regularly scheduled PSRO meeting or special PSRO meeting, if necessary.
 - D. PSRO members will review the alleged incident for any violation of items listed under Assessment (Section 4A) and by majority vote of the members present decide a course of action as outlined under Recommendation (Section 4B). Actions taken as listed in 4B 4-6 will be reported to the GCMCA Advisory Committee at the next regular meeting and will not be provider specific. Recommended actions as listed in 4B 7-9 will be forwarded to the GCMCA Advisory Committee for review and to the GCMCA Board for action and will be provider specific.
 - E. In the event that an EMS agency(s)' or individual(s)' medical control privileges are suspended, the EMS agency(s) or individual(s) shall not provide pre-hospital care until medical control privileges are reinstated. MDCH will be notified within 1 business day of suspension or revocation of medical oversight for an EMS agency(s) or individual(s).
 - F. In cases of gross negligence or complete disregard for GCMCA protocols, in which there is immediate threat to the public health, safety, or welfare, the Medical Director may order the immediate, temporary suspension of medical control privileges from an agency(s) or individual(s). A hearing of the GCMCA Board must be held within 3 business days to determine a permanent decision.
 - G. Appeals of actions may be requested as outlined in the Appeals Protocol.
 - H. If the GCMCA staff or medical director is contacted by an individual who has a suspicion of criminal activity by an EMS provider, the person making the contact will be encouraged to contact law enforcement.
 - I. If during the course of an incident review investigation the PSRO recommends that an individual be suspended and the PSRO identifies that that person potentially committed a crime, the matter will be reported to law enforcement.

6. **EMS Radio Communication:**
All radio communications between an emergency department and EMS personnel must be taped by the emergency department. These taped radio communications must then be stored for a minimum of 120 days. Any requested transmissions can be requested and reviewed by the Professional Standards Review Organization
7. **Peer Review Confidentiality:**
Information and data are confidential professional/peer review PSRO information of the GCMCA. They are protected from disclosure pursuant to the provisions of MCL 333.21513, MCL 333.20175, MCL 333.21515, MCL 331.531, MCL 331.533 and other State and Federal laws. Unauthorized disclosure or duplication of PSRO information is absolutely prohibited. All members will be required to sign the GCMCA-attorney approved confidentiality statement attesting that they will not disclose data, documents, discussion or any other information contained in the ongoing activities of the PSRO unless such a statement would conflict with existing laws or legal oaths.
8. **Conflict of Interest:**
In the event the PSRO is reviewing an issue that results in a conflict of interest with a member of the committee as a result of personal or agency relationships, then:
 - A. that member may recuse themselves from the decision-making process, or
 - B. if the member refuses to recuse themselves, and the committee believes the individual should not participate in the issue, a vote of the committee to remove that member from that specific discussion and decision-making process will be taken.
 - C. If a member of the PSRO either submits a complaint or an individual from that person's agency submits a complaint, then that member must abstain from voting on that issue. This is for members who are either employed by or have a contract with the affected agency.
 - D. If a complaint is filed against a member of the PSRO, the member's agency, or an individual that works for that person's agency, then that member must abstain from voting on that issue. This is for members who are either employed by or have a contract with the affected agency.