

Protocol Development and Review

According to MCL 333.20919, a local medical control authority shall establish written protocols. The following is a brief outline of how protocols will be developed and implemented in Genesee County:

1. Protocol Committee Membership:

- A. Appointments: Chairperson and members appointed by Medical Director.
- B. Term: 1 year.
- C. Meetings: Every other month with additional meetings as deemed necessary. Minimum of 6 meetings per year.
- D. Membership: Minimum requirements (9):
 - 3 - ED Physician from a 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.
- 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 individual appointed to the committee may designate an alternate as long as that individual is from the same organization and of the same level of licensure (if the member is a licensed provider).

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. If the member's alternate is in attendance, then that will count toward the member's 75% compliance.

2. Responsibilities:

- A. Protocol Development: On an ongoing basis the committee will assess the current Genesee County EMS system in an effort to identify system deficiencies or areas needing improvement. The committee will work to address identified

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deficiencies or weaknesses through changes to existing protocols or the development of new protocols to the extent that the law allows.

B. **Protocol Review:** Every three years the committee will review the entire set of GCMCA Protocols to ensure that existing protocols are up to date and meet the system's current needs and expected standards. The committee will also review protocols periodically when major changes or standards are developed or occur to ensure that protocols reflect current operational and clinical standards.

C. **Protocol Approval Process and Medical Director Involvement:** Once a protocol has been approved by the committee it will be forward to the GCMCA Advisory Committee and all EMS agencies for review. Following approval by the GCMCA Advisory Committee it will be forward to the GCMCA Board for review and approval. Upon approval of the GCMCA Board, the GCMCA Medical Director shall give final approval to the protocol and authorize its submission to the state.

D. **Protocol Implementation:** Once a protocol has been approved by the state, it will be disseminated to all EMS agencies, hospital emergency departments and any other individual or agency that has purchased a GCMCA Protocol Book. Included in the mailing will be a copy of the protocol in its final form, a copy of the protocol highlighting changes made and a memo that details the changes. The memo will also outline when the protocol will go into effect. Each protocol will have approval and implementation dates clearly listed on it. Each protocol will also have a facsimile of the Medical Director's signature to show that it has been reviewed and approved by the Medical Director.

3. **Reporting:** To GCMCA Advisory Committee and GCMCA Medical Director.

4. **Committee Actions:**

All protocols developed by the committee and approved with a majority vote of the members present at an official meeting will be forward to the GCMCA Advisory Committee and Board for final review and approval.