

<b>Guideline Name:</b>  <b>Medical Disciplinary Procedure</b>		<b>Department:</b>  Orange County Emergency Services
<b>Effective Date:</b>  March 1 <sup>st</sup> 2020	<b>Revised:</b>  August 10 <sup>th</sup> , 2020	<b>Approval(s):</b> Kim Woodward, EMS Operations Manager  

### Medical Disciplinary Procedure

- I. **Objective**
  - To define the process and procedure for medical disciplinary actions of Orange County Emergency Medical Services System personnel in an effort to improve individual and EMS System performance.
  
- II. **Scope**
  - This guideline is applicable to all clinical care providers of the Orange County EMS System.
  
- III. **Policy Requirements**
  - To review medical practice related items, not job performance
  - In Orange County, a provider’s right to practice medicine is supervised under the Medical Director’s license to practice medicine. For the purposes of this policy, a “provider” is any individual practicing in the Orange County EMS system at the level of Medical Responder or higher.
  
- IV. **Purpose**
- V. To establish guidelines for conducting a Medical Review Board and a Medical Disciplinary Review of all potential violations of Orange County Emergency Medical Services Protocols, Procedures, Policies, and / or Standard Operating Guidelines.
- VI. To ensure that any person or entity who is the subject of the Medical Disciplinary Process is afforded a fair, thorough and impartial procedure.
  
- VII. **Just Culture**
  - **Orange County EMS employs a “Just Culture” approach to medical errors. Incidents involving human error are expected to occur as part of the practice of medicine. When such incidents are identified, the goal is to provide a fair and consistent approach towards investigation of adverse events. These incidents may also provide opportunity to identify system-wide improvements to ensure safer and appropriate patient care. Self reporting of incidents is encouraged and expected.**

## VIII. Medical Disciplinary Process Procedure

If, in the opinion of the Medical Director, an action (or failure to act) on the part of a provider is of such a nature that the action or failure to act is inconsistent with, or a violation of, the protocols, or the practice standard generally accepted in the medical community, the actions described below shall occur.

1. Upon completion of a Medical Inquiry Review, once an event has come to the attention of the Medical Director and the decision to convene a Medical Review Board is indicated, the provider will be notified in writing of the issue/concern that merits attention, and a Medical Review Board process will be initiated.
  - a. Notice to the provider will include a written description of the case involved, the level of concern, the policies/protocols that were involved, and the date of the Medical Review Board. A minimum of 2 days notice will be provided between notice to provider and the date of the Medical Review Board. **See Appendix 1 the standard notification memo they will receive.**
  - b. Notwithstanding this written-notice provision, based on the severity and nature of the act (or failure to act), the Medical Director may suspend a providers credential to practice in Orange County upon receipt of information sufficient in the judgment of the Medical Director to support immediate suspension in the interests of patient safety. If the Medical Director invokes an immediate suspension, this shall be followed by written notice within three (3) working days of such immediate suspension.
  
2. A written explanation by the individual explaining the incident shall be presented to the Medical Director within five (5) working days of receipt of the Medical Director's issues/concerns, prior to the meeting of the Medical Review Board. If no written explanation of the incident is sent to the Medical Director by that deadline, the Medical Director may base his decision upon such preexisting documentation and what is discussed at the Medical Review Board.
  
3. The Medical Review Board

The purpose of the Medical Review Board is to review significant events as recommended through the Medical Review process; however, the Medical Director has ultimate authority for the medical care provided by OCEMS personnel.

  - a. Activation:
    - i. Once the decision has been made to activate a Medical Review Board, it will be convened within 10 business days after completion of initial inquiry (barring extenuating circumstances).
  - b. Composition of the Review Board:
    - i. A minimum of three (3) Orange County EMS System Personnel (who may be):
      1. \*The Medical Director or designee (Chair)
      2. \*A Paramedic, EMT, or Medical Responder Peer (from appropriate agency)
      3. \*Orange County Emergency Services EMS Administrator as designated by the Orange County EMS System Administrator
      4. Agency Quality Assurance or Training Coordinator

\* indicates it is a mandatory position that must be filled

- ii. A panel member may request to the Chair to be recused from a specific review for extenuating circumstances.
- c. Leveling:
- i. Level 1
    - 1. This level typically indicates an outcome of no additional action required by the provider.
      - a. Recommendations may include protocol revision and/or system wide training.
    - 2. An example of Level 1 review board would be:
      - a. Protocol noncompliance where there is determination that system protocol “drift” may be the root cause.
  - ii. Level 2
    - 1. This level typically indicates an outcome of remediation plan with a possibility of medical director action.
    - 2. An example of Level 2 review board would be:
      - a. Treating a patient’s condition in the scope of a protocol, however misidentifying the proper differential. I.e. giving a calcium channel blocker to a septic patient with narrow complex tachycardia.
  - iii. Level 3
    - 1. This level is for the most serious actions and may necessitate investigatory suspension recommendation upon EMS Operations Manager (or designee) consultation with the Emergency Services Director and Medical Director.
    - 2. An example of Level 3 review board would be:
      - a. Engaging in any deliberate act of commission or omission that could have an adverse effect on a patient. I.e. giving a patient versed for a behavioral emergency and then allowing the patient to refuse transport.
- d. Duties of the Review Board:
- i. Review all material gathered during the inquiry
  - ii. Request any additional material as needed
  - iii. Meet as a panel with the Orange County System person involved
  - iv.
  - v. The Medical Review Board will have the opportunity to ask any relevant questions to assist them in determining the appropriateness of the provider’s actions.
  - vi. The role of the peer is to provide insight into whether the actions of the provider represent the standard prehospital medical practice of the system at that provider level, and whether there are systemic errors that may have contributed to the case.
  - vii. Once all case information is presented, the MRB will discuss the case privately. A consensus decision will be made based on a majority vote. Recommendations on disciplinary action and or remediation will be included in the summary, along with a timeframe for completion of remediation.
  - viii. The Medical Review Board will issue a disposition on the matter including:

1. No action required
  2. System Improvement Plan
  3. Individual Remediation Plan
    - a. The QA Coordinator, Training Coordinator, and Provider's direct Supervisor (or appropriate Officer) will work together to enact the plan
    - b. The definition of a Remediation Plan is included in the Medical Inquiry Process Policy
  4. Referral to EMS Operations Manager (or appropriate Officer) regarding Work Performance Concerns
  5. Medical Director Action
    - a. Medical Practice Warning
    - b. Require re-precepting at the approved level
    - c. Temporary suspension of all practice privileges or suspension of specific practice privileges with an associated remediation to return privileges
    - d. Permanent suspension of practice privileges
- ix. All final decisions for medical issues will be made by the Medical Director
- e. A formal written summary of the findings of the panel shall be provided within 5 business days after the Medical Review Panel meeting.
- i. An additional three (3) business days can be utilized for edits or amendments by the EMS System Administrator or Medical Director for final written report.
  - ii. Within five (5) business days of finalized written report, the OCEMS Operations Manager shall provide a report to the OCES Director with a recommended outcome
  - iii. All finalized documentation will be signed by the Medical Review Board Panel and then reviewed by the EMS System Administrator, Medical Director, OCES Director, and appropriate officer of affiliated organization.
4. If the findings are exceptionally concerning, the NC Office of EMS may be notified in writing of the circumstances and decision within seven (7) business days of the final determination.
5. After the individual is notified of the Medical Review Board decision, he/she may appeal to the Orange County Peer Review Committee's Appeal Committee (PRAC) any decision **related to suspension or revocation of the providers' credential.** The purpose of this committee is to review any action taken against a provider's credential- it is not of the purpose of the committee to discuss remediation plans. This appeal request must be presented within five (5) business days of the decision by the Medical Director, to the Medical Director for referral to the Peer Review Committee.
- a. The Peer Review Appeal Committee will meet within five (5) business days after the receipt of the written appeal request.
    - i. Composition of the Peer Review Appeal Committee (PRAC): A minimum of five (5) people will sit on the appeal committee.

1. A Senior Assistant Medical Director who was not present in the original Medical Review Board, who will be designated as the chair of the Appeal Committee.
  2. Two Orange County EMS Peers at the same training level as the provider in question
  3. Two other member of the Peer Review Committee, who were not part of the original Medical Review Board
6. Discussion of the Findings of the Medical Review Board
- a. Medical Review Boards are considered part of the Peer Review Process
  - b. As part of the Peer Review, the investigation, findings, discussion, is considered confidential and protected by North Carolina General Statute 90-21.22A.
  - c. Discussion of any Medical Review Board outside of the processes described here is prohibited.
7. Suspension of Credentials
- a. The Medical Director may suspend the provider's credentials if it is determined that continued practice by the provider would pose a threat or danger to the public.
  - b. Suspension of local credentials is **NOT** a revocation of the North Carolina Office of EMS certification.
  - c. Suspension of credentials may be temporary or permanent.
  - d. Any suspension of credentials may be appealed via the process described herein.
  - e. In any case of the suspension of local credentials, the EMS System Administrator and the Agency Director/Chief will be notified.
  - f. The Medical Director is not involved with Human Resource processes, such as hiring or dismissal.
8. Peer Review Appeal Committee Process:
- a. Once the PRAC session begins, the provider will have a maximum of 30 minutes to present their case.
    - i. Presentation may include documentation, witnesses, exhibits, etc.
    - ii. Legal counsel may be present but may not participate in the hearing.
  - b. Once the provider concludes, or after 30 minutes, whichever comes first, the PRAC may ask questions of the provider.
  - c. After the provider has discussed their case and been asked questions by the PRAC, the Medical Director will have a maximum of 30 minutes to present their case.
    - i. Presentation may include documentation, witnesses, exhibits, etc.
  - d. Once the Medical Director concludes, or after 30 minutes, whichever comes first, the PRAC members may ask questions of the Medical Director.
  - e. Once both the provider and Medical Director are heard, the PRAC will discuss the case in a closed session.
  - f. After discussion of the case, the PRAC will discuss and vote one of the following options. A simple majority vote will make the recommendation to the medical director to:
    - i. Overturn the penalty on the EMS provider
    - ii. Accept the MRB decision as indicated

- iii. Accept the findings of the MRB, but consider a lesser penalty
  - iv. Accept the findings of the MRB, but consider a greater penalty
- g. The final recommendation of the PRAC will be provided in a written format with the justifications for their decision to the medical director.
- h. The ultimate decision over credentialing will be made by the EMS System Medical Director.
- i. Failure to attend the scheduled meeting will result in affirmation of the original decision and terminate any right to further appeal.

Definitions:

1. **Medical Inquiry Review**- review performed by the Quality Assurance Officer related to any issue brought to his attention that raises concerns about the quality of care provided.
2. **Medical Review Board**- Panel made up of a minimum of 3 individuals (Provider Peer, Medical Director, and OCES Administrator) who will review significant events as recommended through the Medical Review process to determine best actions to be taken.
3. **Self-Reporting**- the reporting of any incident/error by the provider(s) involved. This report must be made to the employee's chain of command, QA officer, Medical Director, or any combination thereof immediately following the incident in question. Incidents discovered in any other manner will not be considered as "self-reported".
4. **Credential**- the right for a provider to practice in any medical capacity involving patient care in Orange County.
5. **Standard prehospital medical practice**- the care a reasonable and prudent EMS practitioner of like experience and credentialing would provide in a similar situation.
6. **Peer**- any other field EMS provider in the OCEMS System. Peers may not be supervisory to the provider(s) subject to the investigation.
7. **Peer Review Appeal Committee**- A committee that is made up of a senior Assistant Medical Director not present in the original Medical Review Board, two Orange County EMS peers, and two other members of the Peer Review Committee, whose responsibility is to review any action taken against a provider's credential should the provider request an appeal.

APPENDIX 1: Notice of Medical Review Board Memorandum

*CONFIDENTIAL MEMORANDUM*

TO:  
FROM:  
Date:  
SUBJECT: Notice of Medical Review Board

This is to confirm \_\_\_\_\_ oral notice to you on (Date), that a Medical Review Board (MRB) will be held on (Date at Location at Time), in accordance with Orange County EMS Medical Disciplinary Procedure. The reason for this MRB is to complete an investigation of the following allegation(s):

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A medical inquiry was conducted for the following run number(s):

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It has been determined that after review of the incident If, there may be an action (or failure to act) on your part is of such a nature that the action or failure to act is inconsistent with, or a violation of, the protocols, or the practice standard generally accepted in the medical community.

The following Protocols, Policies or Procedures applying to this inquiry.

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You will need to provide a written explanation describing the incident to the quality assurance coordinator who will present your statement to the Medical Director within five (5) working days of receipt of this notice or prior to the meeting of the Medical Review Board. If no written explanation of the incident is sent to the quality assurance coordinator prior to the MRB, the Medical Director may base their decision upon such preexisting documentation and what is discussed at the MRB.

Based upon review of the medical inquiry findings the Level of this MRB has been determined to be:

(Choose one of these)

- Level 1
- Level 2
- Level 3

Thank you for your cooperation in this matter. If you have any questions regarding your status, please feel free to talk with Kim Woodward, EMS Operations Manager at 919-245-6133, or me.

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By my signature here, I am acknowledging that I have received the foregoing Notice of Medical Review Board, dated \_\_\_\_\_.

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Signature

Date

cc: Dr. Joseph Grover  
Kim Woodward, EMS Operations Manager  
Chris Pope, Deputy EMS Operations Manager