I. AUTHORITY:


II. APPLICATION:

This policy, defines the informal Base Hospital (BH) performance review process for a Paramedic or a Mobile Intensive Care Nurse (MICN) alleged to be functioning outside or contrary to the established policy/procedures of Orange County Emergency Medical Services (OCEMS) and/or the laws of the State of California governing prehospital care.

III. PROCEDURE:

Performance review specific to the delivery of prehospital care may be instituted for Paramedic/MICN personnel thought to be in need of review or remediation by the Base Hospital (BH) Medical Director or upon request of the OCEMS Medical Director. Remediation sessions/performance review will be conducted by the assigned BH Coordinator or BH Medical Director in the following manner:

A. Incident Review Session: The BH Coordinator (BHC) shall:

1. Investigate and document the incident(s) in writing, including appropriate statements from witnesses and/or copies of complaint forms, if applicable;

2. Notify the Paramedic/MICN and his/her employing agency of the incident(s); with the option that the employing supervisor may attend the incident review session;

3. Request that the involved Paramedic/MICN prepare written statements concerning the incident(s) being reviewed, if necessary;

4. Schedule a meeting with the Paramedic/MICN;

5. Discuss specific issues with the Paramedic/MICN, presenting all documentation received;

6. Prepare a session summary. The BH Medical Director and the Paramedic/MICN shall sign the document to acknowledge the review/remediation session.

The Paramedic/MICN may rebut the conclusions of the BH review/remediation session and may request a performance review with the BH Medical Director.

A written record of the counseling session will become a part of the individual's BH file. A copy will be provided to the individual(s) involved, the employing agency, and OCEMS.

B. Performance Review: Incidents or situations in which the remediation/review session has failed to bring a satisfactory solution may be referred to the BH Medical Director for performance review.

1. The performance review will be conducted by the BH Medical Director or his physician designee;
2. The physician will review the documented complaints and may:
   - counsel the individual personally, or
   - convene a performance review board;

   NOTE: Nothing precludes the Paramedic/MICN from requesting a performance review if he/she is not satisfied with the results of review/remediation by the BHC or BH Medical Director.

C. Performance Review Board: The performance review board will include individuals with knowledge in prehospital care:
   - REAC physician chairman or his physician designee who shall act as the chair of the review board,
   - Base Hospital Coordinator,
   - Employing agency representative,
   - Paramedic/MICN peer - to be selected jointly by the individual being reviewed and by the REAC physician chairman.

   Additionally, the following may be asked to participate:
   - OCEMS representative,
   - Paramedic training representative;

1. The Paramedic/MICN shall be notified of the convening of a performance review board by registered U.S. mail and allowed fifteen (15) days to respond;

2. The performance review will include all submitted documentation and testimony from the individual(s) involved, witnesses to the incident, and persons with expertise in the area under consideration;

3. A complete record will be made of the performance review which will include the proceedings and all documentation presented;

4. The chair of the performance review board will advise the BH Medical Director of the findings and recommendations;

D. BH Medical Director Determination: The BH Medical Director may determine:

1. Insufficient evidence exists to proceed further and all allegations shall be dismissed.

2. Complete substantiation of the allegation(s) is not available, but evidence is available which indicates the allegations may be founded.

3. Sufficient evidence of minor violation of protocol, policy or regulations exists.

4. Sufficient evidence indicates the subject has committed a minor infraction which is unlikely to recur, is not representative of the subject’s usual behavior, and is not likely to jeopardize the public health and safety.
5. Sufficient evidence of serious violation of protocol, policy or regulation exists.

6. Sufficient evidence of substantial violation of protocol, policy or regulation exists.

**NOTE:** Nothing precludes the BH Medical Director or his physician designee from immediately requesting the OCEMS Medical Director suspend (in cooperation with the relevant employer and the authority) to initiate temporary licensure suspension of an individual whose actions are determined to be grossly negligent or who is determined to be incompetent in the care of a patient or patients.

E. Report: The BH Medical Director will prepare a written statement of his findings for submission to the OCEMS Medical Director including:

1. Specific problems and issues that resulted in the performance review being called.

2. Inadequacies, deficiencies, or infractions, if applicable.

3. Counseling sessions and tutoring attempted.

4. Warnings given and documented, if applicable.

5. Content and time span of remediation attempted, if applicable.

6. Specific list of charges leading to the recommendation for formal certification review and/or immediate suspension, if applicable.

7. Recommended action (e.g. monitoring performance for a specified period of time, letter of reprimand, probation, counseling, probation, suspension, and decertification).

8. Required evaluations and progress reports, if applicable.

F. The OCEMS Medical Director will review all documentation and determine the action to be taken.

**Approved:**

Sam J. Stratton, MD, MPH  
OCEMS Medical Director

Tammi McConnell, MSN, RN  
OCEMS Administrator

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