Orange County Emergency Medical Services has released the following draft new policy which is posted for a 50-day public comment review period (4/1/2015 to 5/20/2015 at 3:00 PM):

- #300.30 OCMEDS Prehospital care reporting

Please review the policies and submit comments on our webpage:

http://healthdisasteroc.org/ems/policies/
OC-MEDS – PREHOSPITAL CARE REPORTING

I. AUTHORITY:

Health and Safety Code, Division 2.5, Section 1797.204; California Code of Regulations, Title 22, Section § 100171(f).

II. APPLICATION

This policy describes the local system and establishes standards for prehospital care reporting by EMS personnel and provider agencies.

III. DEFINITIONS

National EMS Information System (NEMSIS): The national data standard for emergency medical services as defined by the National Highway Traffic and Safety Administration (NHTSA) and the NEMSIS Technical Assistance Center (TAC).

California EMS Information System (CEMSIS): The California data standard for emergency medical services as defined by the California Emergency Medical Services Authority (EMSA). The data standard includes the NEMSIS standards and California specific data lists.

Orange County Medical Emergency Data System (OC-MEDS): The Orange County data hub and local data standard for emergency medical services as managed and defined by Orange County Emergency Medical Services Authority (OCEMS). The data standard includes the NEMSIS and CEMSIS elements and Orange County specific data lists.

Prehospital Care Report System (PCRS): An electronic software platform that allows for real time collection of patient care information at the time of service.

Prehospital Care Report (PCR): An electronically generated form that is a component of a PCRS that is utilized by EMS Field Personnel to document and transmit patient care events at the time of service.

IV. SYSTEM DESIGN AND INTEROPERABILITY

A. The OC-MEDS is an interoperable PCRS that is provided by OCEMS. The system includes PCR capabilities that allow EMS providers to document and transmit patient care data in real time to the central OC-MEDS Hub.

B. EMS provider agencies may utilize the County funded OC-MEDS Hub as their PCRS to satisfy PCR requirements set forth in this policy.

C. Data that has been received by the Hub is immediately accessible to authorized users.

D. The OC-MEDS Hub is compliant with both NEMSIS and CEMSIS data standards and incorporates additional data points as defined by OCEMS to meet the patient care documentation needs of the Orange County EMS System.
   i. As of the effective date of this policy, the OC-MEDS Hub is compliant with NEMSIS v2.2.1 data standards.
   ii. By January 1, 2016, the OC-MEDS Hub will be compliant with NEMSIS v3 data standards.
iii. OCEMS will continue to accept NEMSIS v2.2.1 data through June 30, 2017.

E. The OC-MEDS Hub is capable of accepting data from a third party PCRS that is owned and managed by an EMS provider agency.

F. Unless an EMS provider agency is specifically required to utilize the OC-MEDS Hub as their organizational PCRS due to specialty care services defined in OCEMS policy (i.e. IFT-ALS, etc.) or by duly executed contract (i.e. 9-1-1 Ground Ambulance Transport), EMS provider agencies may implement their own PCRS.

   i. A provider agency owned and managed PCRS shall be compliant with both NEMSIS and CEMSIS data standards and must comply with additional OC-MEDS data elements and field values as defined by OCEMS.

   ii. Provider agencies who own and manage their own PCRS are responsible to ensure for the initial and ongoing interoperability of their PCRS with the OC-MEDS Hub. Such responsibilities include but are not limited to:

       1. All costs associated with establishing and maintaining interoperability.

       2. Initial and continued compliance with established data standards.

           a. Non-urgent / routine updates shall be completed within 30 calendar days upon written request from OCEMS.

           b. Urgent requests that are necessary to immediately assess patient care documentation for health and safety purposes shall be completed within 72 hours upon written request from OCEMS.

   iii. An EMS provider PCRS must transmit PCRs to the OC-MEDS Hub immediately upon completion by EMS personnel.

V. PCR COMPLETION REQUIREMENTS

A. EMS Personnel shall complete a PCR for all persons meeting the definition of a “Patient” (ref. OCEMS Policy 090.00). This includes a patient who refuses care / leaves against medical advice (AMA), meets criteria for field death, is an interfacility transport, or is involved in a multi-casualty incident (MCI).

B. EMS Personnel must comply with minimum documentation standards (Ref. OCEMS Policy 300.10) when completing a PCR.

VI. RESOURCES

A. NEMSIS Data Standards

B. CEMSIS Data Lists

C. OC-MEDS Data Lists
Approved:

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Effective Date: x/x/xxxx