

 <p>COUNTY OF SAN DIEGO EMERGENCY MEDICAL SERVICES</p>	SYSTEMS		S-019
	CARDIAC ADVISORY COMMITTEE		
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I. PURPOSE

To designate an advisory committee to provide consultation, medical protocol review, and recommendations on issues concerning prehospital treatment protocols and emergency medical care delivery for patients with acute coronary syndromes to the County of San Diego, Emergency Medical Services (CoSD EMS) Medical Director.

II. AUTHORITY: Health and Safety Code, Division 2.5, Section 1798; and Evidence Code, Section 1157; California Code of Regulations (CCR), Title 22, Division 9, Chapter 7.1, STEMI Critical Care System Regulations

III. POLICY

The CoSD EMS Medical Director may consult with the Cardiac Advisory Committee (CAC) on issues concerning prehospital treatment protocols and emergency medical care delivery for patients with acute coronary syndromes in San Diego County.

A. The Scope

May include, but not limited to:

1. Provision of input to CoSD EMS in the development, implementation, and evaluation of medical audit criteria
2. Designing and monitoring corrective action plans on cardiovascular care
3. Provision of medical care consultation at the request of the CoSD EMS
Recommendation of performance improvement strategies related to care of patients with acute coronary syndromes

B. Membership

CoSD EMS Medical Director's CAC will have the following members:

1. County staff (ex officio)
2. One Program Medical Director or designee from each designated STEMI Receiving Center
3. One Program Manager or designee from each designated STEMI Receiving Center
4. Base Hospital Nurse Coordinator Committee representative

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5. San Diego County Medical Society EMS Oversight Commission (EMOC) representative from a non-STEMI receiving center

C. Ad Hoc Members that may participate

1. County Paramedic Agencies Committee representative
2. Paramedic Training Agency representative
3. Base Hospital Physician representing the Prehospital Audit Committee (PAC)
4. Other individuals with a cardiac focus and expertise as invited by the CAC

D. Responsibilities

1. To meet as an advisory committee on a quarterly basis
2. To develop CAC goals in conjunction with the CoSD EMS Medical Director or designee
3. To consult on prehospital and hospital acute coronary syndrome issues
4. To convene small task forces/subcommittees of advisory committee members and others to work with the CoSD EMS Medical Director or designee on specific medical management issues
5. To consult with other medical specialties or other advisory bodies in the County as necessary
6. To promote Countywide standardization of the quality improvement process with emphasis on the educational aspect

E. Attendance

1. Participation by the appointed STEMI Receiving Center Medical Director and Program Manager in the County of San Diego CAC performance improvement process including attendance at quarterly meetings is encouraged.
2. Invitees may participate in the medical review of specified cases where their expertise is requested. CoSD EMS shall approve all invitees in advance of the scheduled meeting.

F. Election of Officers

The CAC will annually elect a chairperson at the last meeting of the calendar year who must be a STEMI Receiving Center Medical Director, STEMI Receiving Center Program Manager, or other member with current leadership responsibilities at a designated STEMI center. Chairperson shall serve a one-year term and may be re-elected.

G. Voting

Due to the advisory nature of the committee, voting is typically unnecessary. If desired to inform discussions, the CoSD EMS Medical Director/Designee or Chairperson may request a vote. A vote may only be initiated when a simple majority of voting members with no conflicts of interest are present.

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H. Committee Documentation

CoSD EMS Agency will store all meeting minutes and distribute them to members at each meeting.

I. Confidentiality

All proceedings, documents, and discussions of this committee are confidential and are covered under Section 1157 of the State of California Evidence Code. The prohibition relating to discovery of testimony provided to the committee shall be applicable to all proceedings and records of this committee, which is established by a local government agency to monitor, evaluate, and report on the necessity, quality, and level of specialty health services, including, but not limited to, cardiovascular services. Issues, which require prehospital medical/system input, may be sent to the confidential Prehospital Audit Committee.