



PENNSYLVANIA EMERGENCY HEALTH SERVICES COUNCIL

Your Voice In EMS

RECOMMENDATION FOR CONSIDERATION

Board Meeting Date: March 20, 2013

Subject: QRS Agency PCR Requirement for ALS care

VTR#: 0313-01

Committee/Task Force: EMS Information Task Force

Recommended Goal

Recommended Policy Change

Other: Visionary

Recommendation:

In anticipation of new EMS Agency levels provided for in the new EMS Act, the Department of Health will require that all EMS agencies providing care beyond the basic life support will complete a full electronic PCR.

Rationale [Background]:

Documentation requirements of QRS agencies have frequently been a topic of discussion for the EMS Information Task Force. The EMS Act provides for an ALS QRS and other licensed entities as deemed appropriate by the Department. The task force recognizes that documentation requirements for QRS agencies should not be overly burdensome; however, documentation is important for providing an account of assessment findings and medical care as well as the importance to the agency as means of protection in the event of litigation and as a quality improvement performance evaluator. Advanced life support procedures add an additional level of risk and invasiveness to care provided by an agency, therefore, they need to provide thorough documentation of the care administered. The Information Task Force recognizes that these reporting requirements will not be effective until the new regulations currently being promulgated. However, the committee believes it is better to mitigate these issues in advance and that care provided beyond a BLS level must be documented in full patient care report.

Medical Review [Concerns]:

Physician representation is present on the EMS Information Task Force and offered strong support of this recommendation.

Fiscal Concerns:

The proposed document carries no significant financial impact to the Department or Regional Councils except for the costs associated with processing additional PCR data via the electronic submission system. QRS agencies providing care at a level beyond BLS will be compelled to purchase electronic reporting software from a state approved vendor. In addition to the purchase of software, those QRS agencies affected will need to have the information technology (IT) available to run the software and electronically submit reports to the regional EMS council. It is anticipated that an agency seeking licensure as an ALS QRS will either already be licensed as an ambulance service or recognized as a QRS and thus be eligible for EMSOF funds to cover the cost of electronic PCR software.

Educational Concerns:

QRS agencies may not be familiar with electronic patient care reporting. A list of approved PCR vendors is available from the Bureau of EMS. Agencies will be able to receive guidance from the vendors as to the operation and IT requirements of the software. These agencies should also be provided the Data Element Manual for reference.

Plan of Implementation:

Upon acceptance of this recommendation, the Department of Health should publish an Information Bulletin specifying that QRS agencies providing care at a level beyond BLS must complete a full electronic PCR.

The PEHSC Committee/Task Force offers consultation to the Department in regard to the content of this Vote to Recommend (VTR) and its attached documents. The PEHSC Committee/Task Force specifically offers staff or member support to participate in Department deliberations regarding this recommendation in an effort to convey committee/task force discussions.

Board Meeting Comments/Concerns:

Discussion was held over the intent of the VTR. Concern was raised that those doing mass gathering EMS would be required to complete a PCR for every patient encountered. The EMS Information Task Force Chairperson explained this was not the intent of the VTR. The intent of the VTR is to ensure that any ALS skills performed are being documented in a full electronic PCR. Mass gathering EMS events providing BLS care would not be subject to the recommendation.

Director Schmider noted that this VTR addressed the new regulations that have not yet been promulgated; therefore the Bureau has no authority to enact the recommendation. The Task Force Chairperson acknowledged this and emphasized that the VTR is forward thinking in anticipation of the new regulations.

Signed: J. David James Date 4-5-13
President *JAS*

For PEHSC Use Only – PA Department of Health Response

Accept: _____ Table: _____ Modify: _____ Reject: _____

Comments:

Date of Department Response: _____