ADMINISTRATIVE BULLETIN

No. 20-BUL-008

TO: Contra Costa County 911 Field Provider Agencies

FROM: Dr. David Goldstein, EMS Medical Director

DATE: April 13, 2020

SUBJECT: Documentation and Quality Assurance Standards for Treat and Refer Bulletin

This bulletin augments 20-BUL-007 Expanded Treat and Refer Administrative Bulletin, and provides guidance for documentation and quality assurance obligations for such patient encounters. Treat and Refer encompasses patients that would have previously fallen under our Released at Scene Policy. Treat and Refer during the COVID-19 emergency will likely capture more low acuity patients when compared to traditional application of Release at Scene.

For ease of training and continuity with minimal disruption to current documentation practices, the following dispositions shall be selected to track the Treat and Refer encounter:

- For MEDS:
  - Disposition Category: Treat No Transport
  - Disposition: Treated and Released No AMA

- For Zoll:
  - Disposition: Released at Scene

In addition to the aforementioned disposition selection, documentation of Treat and Refer cases should include:

- Vital signs and Physical exam
- Referral plan in the narrative:
  - Examples of documentation:
    - Warm handoff initiated with Kaiser Advice Line to further guide patient on where he can have his laceration repaired.
    - Patient instructed to follow-up with primary care physician by telephone or email.
    - Daughter will drive patient to the emergency department.
- Documentation of providing patient with printed resource material when applicable (see attached CoCo EMS “Treat and Refer” Resources).
Quality Assurance/ Quality Improvement of Treat and Refer cases shall be:

- 100% Audit of all Treat and Refer PCRs by agency CQI personnel for 90 days.
- After 90 days, Treat and Refer cases shall continue to be reviewed within each agency’s CQI process.
- Any Treat and Refer case that has a response back to the location for the same individual within 24 hrs shall have an EMS event submitted for tracking with review per agency’s established process. Development of this mechanism and submission of EMS event shall remain the responsibility of the agency.

Treat and Refer guidelines, while meant to lessen the burden on our EMS System, still require proper documentation and quality assurance review for the safety of our patients. More detailed training to field providers shall be determined and completed by individual agencies in order to provide the information in a format and manner that best meets their needs.