





# Development of BLS ALS Protocols and Policies

CHAPTER:	2000	Number:	2070	REVIEWED:	6/6/2023
REPLACES:	Development of Basic and Advanced Life Care Protocols and/or Policies 5/21/2014;7/19/2017			ENACTED:	5/21/2014
Revised/Reviewed:	9/10/2019		NEXT REVIEW:	7/1/2026	
APPROVED:			Joe Hoffman, Medical Program Director		
APPROVED:	 <a href="#">Jeff Faucett (Aug 17, 2023 09:34 PDT)</a>		Jeff Faucett, Chair		

## I. Policy:

This policy is to provide timely multi-disciplined input to the recommended revisions of the Northwest Regional Patient Care Protocols, Kitsap County Policies, or County Operating Procedures (COPs). This policy intends to provide protocol and policy development access to pre-hospital providers.

## II. Procedure:

Origination of Protocol and/or Policy

Any individual associated with the interests of improved emergency medical care may develop draft recommendations for Patient Care Protocols, Policies, or COP's. The Medical Program Director (MPD) has final authority in approving and instituting all Patient Care Protocols, Policies, or COP's pursuant to the current WAC.

All draft protocols, policies, or COP's shall exhibit a start and review date.

### A. Submittal Process

1. Stakeholders exist in the interest of developing patient care protocols, policies, and COPs.
  - a. Stakeholders for patient care protocols are the Medical Program Director, Medical Program Director Delegates, Medical Officer Group, and Kitsap County Board of Directors.
  - b. Stakeholders for policies and COPSs are the Medical Program Director, Medical Program Director Delegates, Medical Officer Group, and Kitsap County Board of Directors and Operations group.



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2. A change in an existing or development of a new protocol, policy, or COPS can originate within any stakeholder group. Each stakeholder should be involved in the review of any proposed change or draft document.
3. The Administrator/ Office agrees to submit a written draft of the proposed changes to the Kitsap County Emergency Medical Service & Trauma Care Council (KCEMS&TCC) no less than sixty (60) days prior to the proposed adoption. This allows time for the KCEMS&TC Council to provide official notification to interested providers that a proposal exists.
4. The ALS or BLS Quality Improvement Committee and interested delegate physicians may provide written draft proposals directly to the MPD.
5. New and or changes in existing care protocols may involve the collaboration of the Northwest EMS Region protocol committee.

### **B. Review Period**

1. There will be a 60-day period for interested parties to provide feedback on the proposed changes. The 60-day period begins on the date the proposal is submitted to the Stakeholders.
2. Emergency changes will be reviewed and distributed immediately to the Council Chairperson if the MPD declares an emergency. An emergency is based on newly discovered lifesaving treatments or previously unknown life-endangering therapies.
3. MPD will ensure the distribution of all changes to the county Medical Officers and review those changes at the next regularly scheduled ALS Base Station meeting.
4. Provider agency medical officers are responsible for informing their personnel of all changes.

### **C. Notification of Intended Action**

1. No formal agency notification is required for editorial policy and protocol updates until the next annual review date.
2. The MPD will sign the newly reviewed and approved protocols, policies, or COPS that have been properly submitted at the conclusion of the review period.



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### **D. Council member notification should occur:**

1. Upon submission of a draft to the Stakeholders.
2. At 60 days.
3. Upon signature of MPD.

### **E. Formal Disposition**

1. All Routine Patient Care Policy, Protocol, or COP's updates are intended to occur annually or as needed.
2. Except for emergency action, newly approved patient care policies, protocols, or COPs will be incorporated on an annual basis.
3. Emergency policy incorporation will be added to the existing Clinical Policy and Procedure manual.
4. Emergency protocol incorporation shall be added as an addendum to the Kitsap County Patient Care Protocols until the following annual update.
5. Prior to the field implementation of a new or revised protocol/policy/COP's training will be conducted at the earliest possible base station meeting. Field providers will be given access to a printed or electronic copy of the protocol/policy/COPs. Field providers not attending the base station training must view the base station video within the next month. Each agency must provide documentation that the field providers received the protocol/policy/COP's and training.
6. The KCEMS&TCC shall maintain a master set of pre-hospital Clinical Policies and Procedures as well as Patient Care Protocols to be available at the KCEMS&TCC Office.







# 2070 Development of BLS ALS Protocols.for approval 6.28.23

Final Audit Report

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