



Policy 110: Policy Development and Implementation

Revision 5/22/18
Effective 8/1/18

I. Purpose

- A. The practice of pre-hospital emergency medicine is constantly changing and new methods of providing care frequently need to be incorporated into EMS policies and procedures. This policy is intended to provide a framework for reviewing, updating and creating EMS policies and procedures.

II. Urgent vs. Non-Urgent Updates

- A. Changes to EMS Policies and Protocols can require significant time and financial burdens on provider agencies and hospitals and therefore frequent changes should be avoided whenever possible. The need for new and updated policies and protocols generally fall into one of two categories: (1) urgent, such as medication shortages, safety stops, emerging infectious disease etc., and (2) non-urgent, such as minor ACLS updates. Whenever possible non-urgent updates should be performed on an annual basis. Urgent revisions will generally need to be completed immediately.

III. Prehospital Advisory Committee

- A. The best pre-hospital policies and protocols are written with the input from the people who are tasked with using them in the field or in the hospital. The EMS agency will provide the opportunity for all interested EMS stakeholders to review, revise and create non-urgent EMS policies and procedures through the Pre-Hospital Advisory Committee (PAC). This committee will also be responsible for investigating new equipment and techniques applicable to pre-hospital care. The committee meets monthly and will implement changes according to the schedule as described in Paragraph IV.

IV. Update Schedule

- A. Policy and protocol additions and/or revisions require lead time for provider agencies to implement and disseminate to their respective personnel. When new medications or equipment are required then this lead time is essential for budgetary purposes. The deadline for upcoming revisions or additions to clinical policy and protocol is May 1st with implementation by January 31st of the following year.
- B. In general, all policies and protocols should be reviewed, and if needed, updated annually.

V. Comment Period

- A. Policies and procedures will be introduced at Pre-Hospital Advisory Committee (PAC) Meetings, held monthly. Public comment period will be open for 20 days following introduction.