



McLean County Area EMS System

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Title of Policy: <i>EMS System Incident Report</i>	Policy Number: A-107
Effective Date: 10/2004	Review Date: 01/26/2017
Policy Area: Administration	Approvals: EMSSC, EMS MD

Background to Policy:

To properly communicate and address any violation of policy, procedure or protocol which may arise in the McLean County Area EMS System.

Policy Statement:

Pre-hospital care providers, emergency department physicians and nurses and any other person directly involved in pre-hospital care in the McLean County Area EMS System shall complete an "EMS Systems Incident Report Form" whenever a violation in policy, procedure or protocol has occurred. When completing the form, describe the specific violation, including a brief narrative summary and any additional documentation that would help describe the incident.

Policy:

- A. When a violation of policy, procedure or protocol has occurred, an "EMS System Incident Report Form" shall be completed within 24 hours of the occurrence and submitted to the EMS System Coordinator.
- B. The purpose of the "Incident Report Form" is to properly communicate and address violations. Any situation that may be corrected through education or presents itself as an opportunity to improve the local delivery of emergency medical services shall be documented on an "IOR Form". Refer to "Improvement Opportunity Report Form" policy.
- C. Once an Incident Report has been received, it shall be reviewed by the EMS System Coordinator. Those reported violations which may or did have an adverse effect on a patient or crewmember of the McLean County Area EMS System will be reported immediately to the EMS Medical Director and the McLean County Area EMS System. Situations that do not adversely affect others may be dealt with by the McLean County Area EMS System.
- D. All Incident Reports with documented violations adversely affecting others shall eventually be referred to the Quality Council. Refer to "EMS Quality Council" policy.
- E. The person originating the report shall be notified of the receipt of the Incident Report.

Resources:

1. [EMS System Incident Report Form](#)
2. [EMS System Improvement Opportunity Report Form](#)