



DIVISION OF INSPECTOR GENERAL
Ken Burke, CPA
Clerk of the Circuit Court and Comptroller
Pinellas County, Florida



AUDIT OF THE QUALITY ASSURANCE REVIEW PROCESS WITHIN THE OFFICE OF THE MEDICAL DIRECTOR



Pinellas County EMS
Office of the Medical Director



**Pinellas
County**
SAFETY AND
EMERGENCY SERVICES

QUALITY ASSURANCE

IMAGETREND®

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May 23, 2024



Ken Burke, CPA

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May 23, 2024

Jim Fogarty, Bureau Director, Department of Safety and Emergency Services

We have conducted an audit of the Quality Assurance Review Process within the Office of the Medical Director as documented in our 2024 Annual Plan.

Opportunities for Improvement are presented in this report.

We appreciate the cooperation shown by the staff of the Safety and Emergency Services Department and the Office of the Medical Director during the course of this review.

Respectfully Submitted,

Melissa Dondero
Inspector General/Chief Audit Executive

Approved:

Ken Burke, CPA*
Clerk of the Circuit Court and Comptroller
Ex Officio County Auditor

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INTRODUCTION

Abbreviations

County	Pinellas County
Division	Division of Emergency Medical Services and Fire Administration
EMS	Emergency Medical Services
MCR	Medical Case Review
MOM	Medical Operations Manual
OMD	Office of the Medical Director
QAC	Quality Assurance Coordinator
QAR	Quality Assurance Review
SES	Department of Safety and Emergency Services

Executive Summary

As part of our annual audit plan, we conducted an audit of the Quality Assurance Review (QAR) Process within the Office of the Medical Director and the monitoring operations conducted by the Department of Safety and Emergency Services (SES) from January 1, 2023, through December 31, 2023.

The objectives of the audit were to:

1. Determine whether complaints against medical staff are documented and maintained.
2. Determine whether complaints are reported, investigated, and resolved in a timely manner as required by the Pinellas County Medical Operations Manual (MOM).

Through discussions with the SES Division of Emergency and Medical Services management, we obtained an understanding of the QAR process, which includes the following phases:

- QAR Notification
- Fact-Finding/Information Gathering
- Medical Director Disposition
- Medical Case Review (MCR)/Remedial Training

Overall, we noted two issues in which the QAR process did not satisfy SES objectives and regulations outlined in the MOM. We identified issues regarding inadequate monitoring of the QAR database and timeliness compliance in QAR phases.

As of October 1, 2023, SES implemented the ImageTrend database to document and maintain QAR case information and documentation. In the review of ImageTrend capabilities and controls, we determined that ImageTrend does not:

- Capture the timelines for each phase in the QAR process, as required by MOM.
- Limit users from changing QAR case data and status after the case is closed.
- Allow users to upload and maintain video and audio files necessary for case disposition.

Due to the incorrect and/or inadequate dates and QAR status' listed within the database, we determined these compromised the data integrity and minimized the precision of QAR phase timelines within the database. The data integrity issue prevented us from conducting a data analysis on the entire QAR population.

Therefore, we sampled 30 QAR cases and reviewed supporting documentation to determine the timeliness of QAR phases, and identified the following number of late cases that extended beyond the number of days required by the MOM for each phase within the QAR process:

Late QAR Cases by Phase		
QAR Phase	MOM Requirement (Number of Days)	Number of Cases Late
<i>QAR Notification</i>	3 Business Days	5
<i>Fact-Finding</i>	14 Calendar Days	22
<i>Medical Director Disposition</i>	7 Calendar Days	9
<i>MCR/Remedial Training</i>	14 Calendar Days	12

Of the four QAR phases, on average, we determined three of the four phases (fact-finding, Medical Director disposition, MCR/remedial training) required a higher number of days to complete the applicable phase than the number of days mandated by MOM. The following illustrates the phase timeliness of our 30 samples between the MOM requirement and the average number of days to complete the QAR phases.

QAR Phase	MOM Requirement (Number of Days)	Actual Number of Days To Complete Phase (Average)
<i>QAR Notification</i>	3 Business Days	2.3 Business Days
<i>Fact-Finding</i>	14 Calendar Days	55.2 Calendar Days
<i>Medical Director Disposition</i>	7 Calendar Days	8.9 Calendar Days
<i>MCR/Remedial Training</i>	14 Calendar Days	47.7 Calendar Days

Furthermore, we reviewed, tested, and determined the controls regarding the accuracy of documentation supporting the timelines stated within each QAR case sampled to be adequate.

Background

Office of the Medical Director

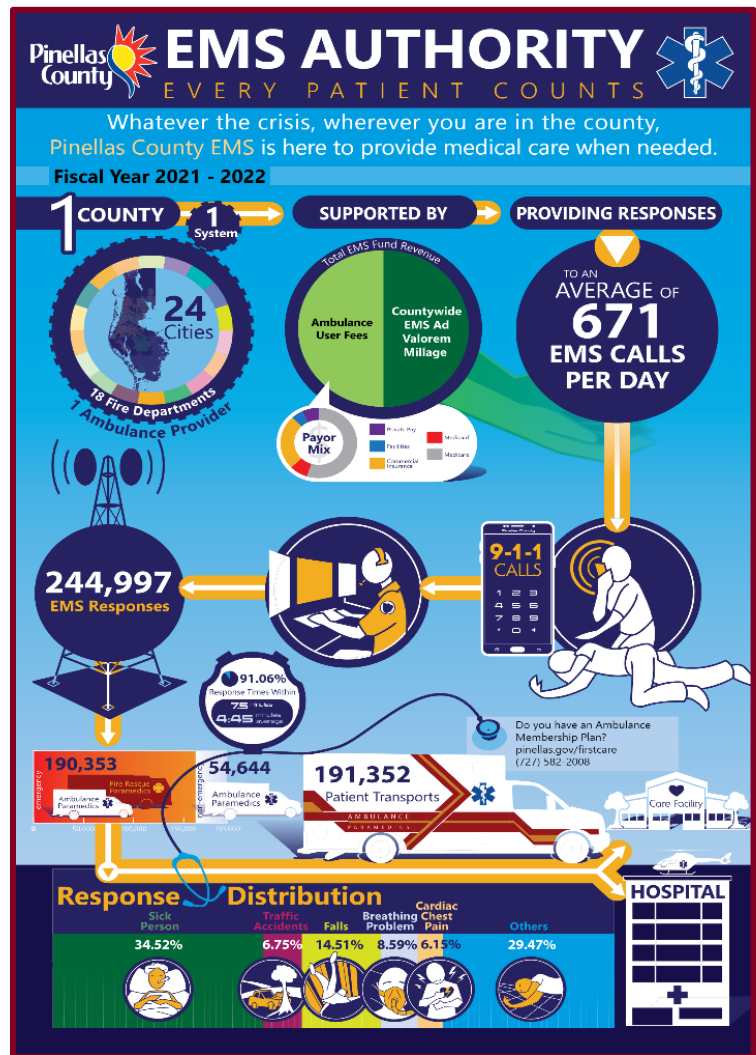
The Pinellas County (County) Emergency Medical Services (EMS) Office of the Medical Director (OMD) provides medical oversight to nearly 2,000 prehospital clinicians across 20 agencies and cares for more than 200,000 patients each year.

OMD provides fully trained and credentialed physicians on call to the County who are capable of responding to individual incidents, such as requests for field amputation or other physician-level interventions. In addition, OMD has the expertise to provide onsite medical care and medical control at mass gatherings such as concerts, sporting events, and other special security events. OMD also deploys as fully integrated team members to significant incidents such as Mass Casualty Incidents, Technical Rescue Incidents, and Urban Search and Rescue events.

Chapter 401.265(2), Florida Statutes, requires each Medical Director to establish a quality assurance committee to provide for quality assurance review of all emergency medical technicians and paramedics operating under his or her supervision.

For each Quality Assurance Review (QAR) case, the Medical Director is responsible for reviewing correspondence, medical documentation, and applicable audio and video files to determine whether individuals are appropriately conducting medical techniques and practices, as required by the State of Florida and County regulations, such as the Medical Operations Manual (MOM).

MOM was developed to facilitate on-going improvements in the quality of emergency and non-emergency prehospital and inter-facility medical care for the citizens and visitors of Pinellas

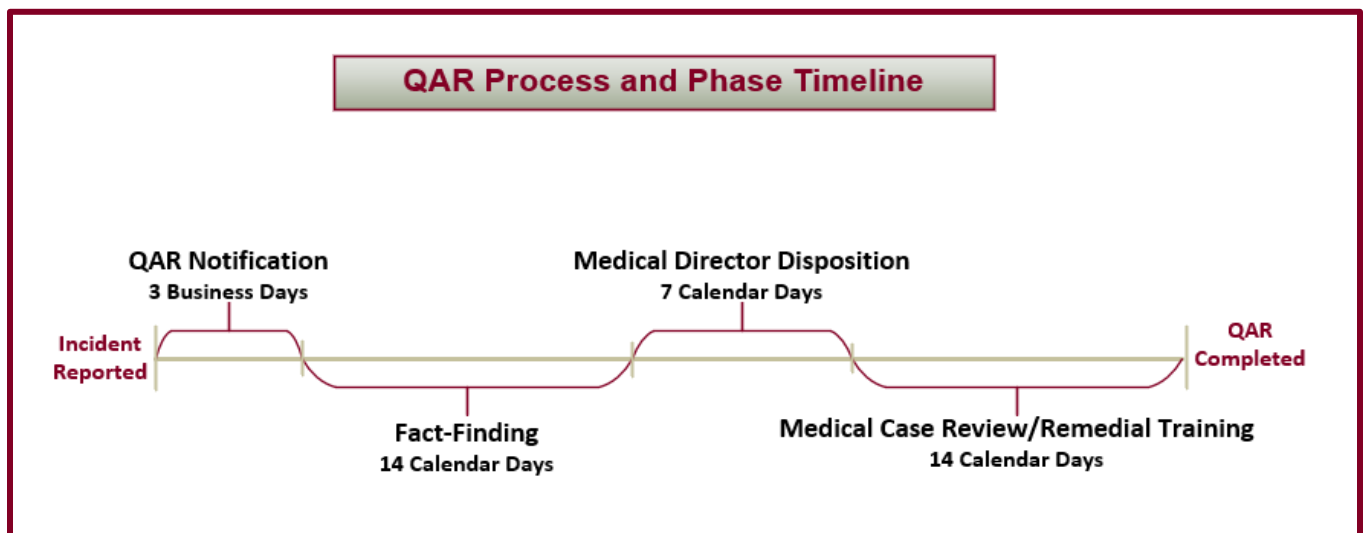


County. MOM delineates the standard of Patient care and Client services for the EMS System and describes the scope of practice for Certified Professionals working in the EMS System. The MOM contains Administrative Policies, Clinical Standards, Treatment Protocols, Clinical Procedures, Medication Formularies, and Clinical Tools in an online and printed Manual.

Department of Safety and Emergency Services



The Department of Safety and Emergency Services (SES) Division of EMS and Fire Administration (Division) coordinates the emergency medical and fire needs of more than one million residents and visitors in the County. The Division is also responsible for the coordination and maintenance of QAR cases, which is led by the Quality Assurance Coordinator (QAC). The QAC consistently monitors each QAR case to ensure applicable documentation is requested and obtained, information is communicated to relevant parties, and QAR phase timelines, required by MOM, are documented within the QAR database. Below is an illustration of the required number of days to complete each phase in the QAR process.



In 2023, the Division received and conducted 402 QAR cases regarding individuals requiring a review of their applicable conduct, medical technique, or other actions while performing their daily responsibilities.

[Access/Excel Database](#)

Prior to October 1, 2023, SES utilized a Microsoft Access database to maintain QAR case information and documentation. However, the database became unstable after a Microsoft update. Due to this update, SES converted the database to Microsoft Excel and implemented a new web-based database to increase QAR case data efficiency and longevity.

[ImageTrend](#)

ImageTrend is a web-based specialized software solution utilized by EMS, fire departments, hospitals, and other healthcare-related organizations nationwide. On October 1, 2023, the Division replaced the previous QAR database and implemented ImageTrend. This database possesses capabilities that can be tailored to maintain required documentation, monitor ongoing activities, and document QAR phase timelines to ensure applicable state and local laws, rules, and regulations are followed.

SCOPE AND METHODOLOGY

We have conducted an audit of the internal controls over the Quality Assurance Review Process conducted by the Office of the Medical Director.

The audit period was January 1, 2023, through December 31, 2023. However, we did not limit the review of cases and processes by the audit period and scope.

During the audit, we performed the following:

1. Verified complaints and supporting documentation of investigative materials are documented and maintained within a comprehensive database.
2. Verified complaints are reported, investigated, and concluded within a timely manner as required by the Pinellas County Medical Operations Manual.

OBJECTIVES AND OUTCOMES

The objectives of the audit were to:

1. Determine whether complaints against medical staff are documented and maintained.
2. Determine whether complaints are reported, investigated, and resolved in a timely manner as required by the Pinellas County Medical Operations Manual.

As a result of the audit, we determined:

1. Supporting documentation of investigative materials were not completely documented and maintained within a comprehensive database.
2. QAR cases were not consistently reported, investigated, and resolved in a timely manner as required by the Pinellas County Medical Operations Manual.

Our audit was conducted in accordance with the *International Standards for the Professional Practice of Internal Auditing* and the *Principles and Standards for Offices of Inspector General* and accordingly, included such tests of records and other auditing procedures, as we considered necessary in the circumstances.

OPPORTUNITIES FOR IMPROVEMENT

Our audit disclosed certain policies, procedures, and practices that could be improved. Our audit was neither designed nor intended to be a detailed study of every relevant system, procedure, or transaction. Accordingly, the Opportunities for Improvement presented in this report may not be all-inclusive of areas where improvement may be needed.

1. Inadequate Configuration Of ImageTrend Impacts Monitoring And Documenting Of QAR Cases.

Access/Excel Database

In review of the Access/Excel database utilized by OMD and SES management prior to October 1, 2023, we identified accuracy errors which led to incorrect and/or inadequate dates and QAR status' listed within the database. These inefficiencies compromised the data integrity and minimized the precision of QAR phase timelines within the database.

ImageTrend

In the review of the controls within the new web-based database implemented on October 1, 2023, ImageTrend, we determined that ImageTrend does not:

- Capture the timelines for each phase in the QAR process, as required by MOM.
- Limit users from changing QAR case data and status after the case is closed.
- Allow users to upload and maintain video and audio files necessary for case disposition.

Section 5.12, Quality Assurance Review Timeline within MOM, requires the following number of days to complete each phase in the QAR process:

Component	MOM Section	Time Limit
<i>Notification of Quality Assurance Review</i>	5.4 & 5.9	3 Business Days
<i>Fact Finding and Statements Submitted</i>	5.5	14 Calendar Days
<i>Disposition by EMS Medical Director</i>	5.6	7 Calendar Days
<i>Remedial Training or Medical Case Review Completed</i>	5.7 & 5.8	14 Calendar Days

The inadequate configuration of ImageTrend contributed to the following adverse outcomes, which could impact the QAR function:

- QAR phase timelines may be inaccurate within the ImageTrend database which could lead to compliance issues with QAR phase timelines, as required within MOM.
- Users may inaccurately modify QAR case data and status, which could impact the integrity of applicable QAR case files.
- OMD and SES officials require access to a shared drive which acts as a secondary storage for QAR case documentation. Maintaining two separate electronic storage

locations could potentially lead to errors in preserving documentation and/or review of information during the disposition of QAR cases.

We Recommend Management:

Modify the configuration of the ImageTrend database, with the assistance of ImageTrend support staff, if necessary, to increase case efficiency and accuracy in the database to include the following functions:

- A. Document dates to appropriately state timelines regarding QAR notification, fact-finding, Medical Director disposition, and applicable Medical Case Review (MCR) and/or remedial training.
- B. Incorporate an administrative user access role and limit the number of users who can modify QAR cases after the case is formally closed.
- C. The ability to upload video and audio files in ImageTrend to ensure all case documentation is maintained in a singular location.

Management Response:

- A. **Management Concurs.** ImageTrend Software captures accurately all relevant timelines and steps/phases of the QAR process. The previous software used did not automatically accomplish this, and with this new software, this is not an issue. An application specialist has been assigned to keep this current.
- B. **Management Concurs.** Administrative User roles have been defined for the software and include the program manager for the quality assurance (QA) program, the applications analyst, and the Department Administrative Manager, the office of the medical director QA person. These roles are the only roles with update permissions. The software limitations regarding individualized permissions are limited to administrator positions with full edit rights or users with limited editing rights. The approach is to limit the number of system administrators to only those necessary to accomplish the operational roles.
- C. **Management Concurs.** The Department has moved the QAR database over to the ImageTrend platform which currently has limited ability to store large files. Not all QAR cases require the same level of file attachments and many of the cases do not have relevant audio or video files associated with them.

Management plans to work with the software provider to expand the ability to store files. This has been requested and remains on their upgrade lists. In the interim a secure and dedicated location on Pinellas County's network shared drive serves this function of storing QAR large video files with appropriate indexing. Both the temporary and final

solution will provide a clear understanding and comprehensive view of the location of all associated files for QARs.

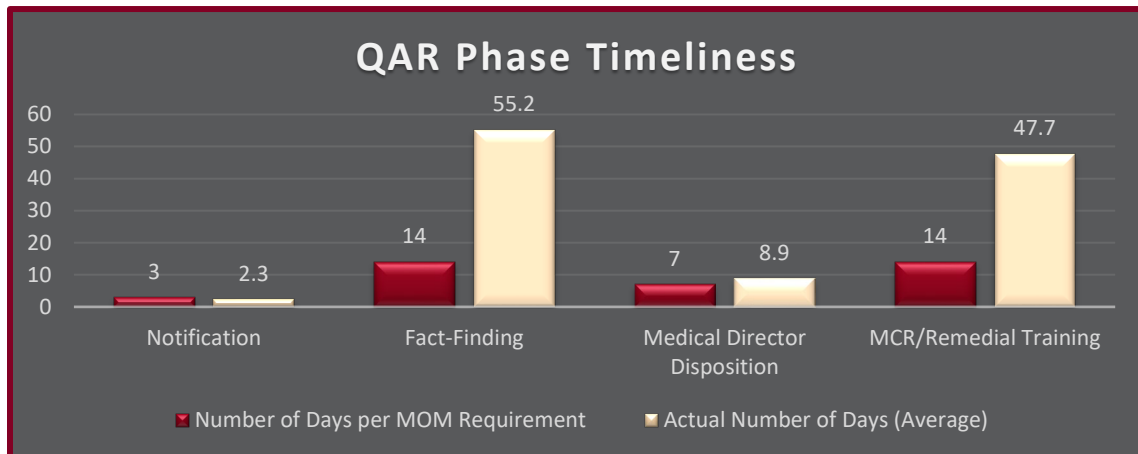
2. QAR Phases Extended Beyond The MOM Requirement.

We identified 48 instances in which QAR phases extended beyond the MOM requirement. During the preliminary review, we identified incorrect and/or inadequate dates and QAR statuses listed within the ImageTrend database. We determined the data integrity was compromised and minimized the precision of QAR phase timelines within the database. The data integrity issue prevented us from conducting a data analysis on the entire QAR population.

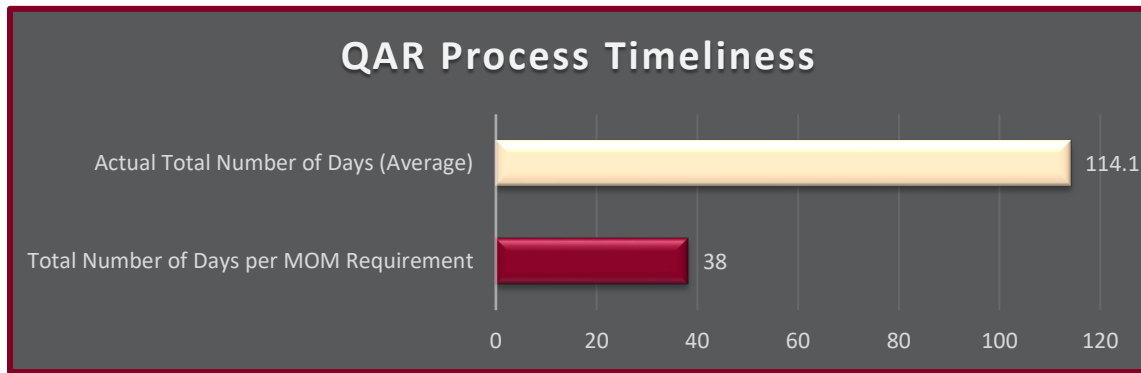
Therefore, we sampled 30 QAR cases and reviewed supporting documentation to determine the timeliness of completing the QAR phases. In review of the 30 QAR sample cases, which was 7.4% of the population (402 total cases), we identified the following number of late cases which extended beyond the number of days required by Section 5.12, Quality Assurance Review Timeline within the MOM, for each phase within the QAR process:

Late QAR Cases by Phase		
QAR Phase	MOM Requirement (Number of Days)	Number of Cases Late
<i>QAR Notification</i>	3 Business Days	5
<i>Fact-Finding</i>	14 Calendar Days	22
<i>Medical Director Disposition</i>	7 Calendar Days	9
<i>MCR/Remedial Training</i>	14 Calendar Days	12
Total Number of Instances		48

Of the four QAR phases, on average, we determined three of the four phases (fact-finding, Medical Director disposition, MCR/remedial training) required a higher number of days to complete the applicable phase than the number of days mandated by the MOM. The following illustrates the phase timeliness of our 30 samples between the MOM requirement and the average number of days to complete the QAR phases.



Furthermore, we determined that the 30 sampled QAR cases took, on average, approximately 76 additional days, extending beyond the 38 days required by the MOM to complete the four QAR phases. The following illustrates the timeliness between the MOM requirement and the total actual average to complete all four QAR phases in our sample.



QAR phases have required additional time beyond the MOM requirements to obtain fact-finding data. The Medical Director requires complete fact-finding documentation to determine a case disposition. In some instances, the full documentation may include internal investigation reports prepared by the medical provider, such as individual Fire Departments. If such internal investigations are not completed and submitted timely, the fact-finding phase requirements may not be fulfilled timely, and therefore, the Medical Director's review may be delayed.

In addition, scheduling in-person interviews, MCRs, and remedial training increases the timelines within the QAR phases. For example, according to management, in some instances where in-person interviews or remedial training is required, scheduling limitations for staff under review and the Medical Director can cause phases to exceed the allotted time for the corresponding phase required within MOM. The MOM does not address circumstances outside the control of the Medical Director. Therefore, the MOM does not reflect attainable timelines based on the actual duration of responsibilities or actions required to complete each QAR phase.

Although we did not identify any instances that resulted in extended suspension or probation in our sample, inefficient timelines could result in a prolonged suspension or probation, which could affect the individual's livelihood and the corresponding medical provider's capability to complete daily job duties.

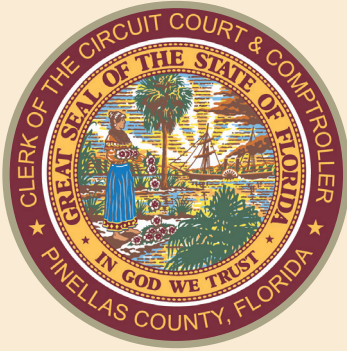
We Recommend Management:

- A. Analyze prior QAR cases to identify an average number of days required to complete each phase of the QAR process in a timely manner.
- B. Utilize the QAR analysis to modify, as applicable, the timelines for each QAR phase within Section 5 of the MOM to ensure timelines appropriately reflect the duration of responsibilities required to complete each phase.

- C. Update internal policies and procedures to document daily responsibilities essential to efficiently complete QAR cases accurately and timely as required within Section 5 of the MOM. These procedures should include step-by-step actions to conduct, document, and maintain QAR cases to ensure the QAR process is completed consistently, efficiently, and accurately.

Management Response:

- A. **Management Concurs.** Safety and Emergency Services has completed this analysis using the previous six months of data. We have confirmed that most existing deadlines within MOMs and rules and regulations are achievable, but not all. To mitigate this finding, we have proposed adopting extensions to some of those deadlines to accommodate identified agency barriers. The proposed changes to Rules and Regulations, as well as MOMs will provide for achievable timeline compliance.
- B. **Management Concurs.** Safety and Emergency Services will adjust the few needed criteria within MOMs to account for the prolonged timeline challenges associated with clinical providers that have prolonged absences and employer-related disciplinary processes that interfere with timelines. We estimate a limited number of these types of situations and will adjust the rules and regulations and MOMs to reflect these timeline exceptions.
- C. **Management Concurs.** Safety and Emergency Services is aligning all aspects of quality assurance within each of its four divisions, including Fire and EMS administration and this QAR process. Detailed descriptions of workflows, deliverables, and deadlines for the QAR process are being created by position/classification as part of the essential functions and metrics of the employee performance evaluation process. This will be completed within the fiscal year.



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