I. POLICY
The California Department of Corrections and Rehabilitation (CDCR) shall establish an Emergency Medical Response Review Committee (EMRRC) to review emergency medical response in the institutions.

II. PURPOSE
To ensure institutions review medical emergency responses on a regular basis, and develop a plan of action to correct deficiencies related to coordination of emergency response activities.

REFERENCES
Chapter #: 13  
Effective Date:  
Last Review Date:  
Revised Date:  
Approval Date:  

GENERAL INSTRUCTIONS: The institution’s Emergency Medical Response Review Committee (EMRRC) shall meet at least once a month and be comprised of the following members:

- Warden or designee (Associate Warden or higher)
- HCM /CMO or physician designee
- Director of Nursing or designee
- Correctional Captain
- Chief Psychiatrist/Psychologist, as appropriate
- Physician and Surgeon, when physician issues are on the agenda
- Nurse Instructor
- EMRRC Coordinator
- Other personnel (e.g., EMS responders) as deemed necessary

PROCEDURE:

A. Institution Emergency Medical Response Review Process

1. The institution’s EMRRC shall review each incident in the following categories:
   - Deaths (e.g., homicides, suicides, accidental or unexpected)
   - Suicide attempts (witnessed)
   - Inappropriate use of Code 2 calls
   - Use Code 3 ambulance
   - Other cases as deemed appropriate

2. The initial review shall be completed no later than 30 days from the date of the incident. The institution’s EMRRC shall review and evaluate the incident relevant to coordination of activity, timeliness of responders, and clinical outcome. To determine adequacy of response the institution’s EMRRC shall evaluate the following:
   - Compliance with existing policies and procedures
   - Response time
   - Medical and custody response
   - Appropriateness of medical care and documentation
3. When reviewing each incident the HCM/CMO or designee shall utilize the following documents, as appropriate:
   - Emergency Medical Response Evaluation (EMRE)
   - CDCR Form 7403, Emergency Care Flow Sheet
   - CDCR Form 7219, Report of Injury or Unusual Occurrence
   - Inmate-patient’s Unit Health Record (UHR) relevant to the inmate-patient’s health condition and treatment prior to the incident under review (It may be necessary to review up to 3-6 months of medical history prior to the incident.)
   - CDCR Form 837, Incident Reports (including each applicable supplemental report and attachments)
   - CDCR Form 7229-B, Inmate Suicide Report, when available
   - Coroner’s report of autopsy, when available
   - CDCR Form 7229-A, Initial Inmate Death Report
   - Community EMS Field Report

   Confidential documents relevant to the review shall be available to committee members if needed for reference during the meeting.

4. Minutes shall be recorded at each EMRRC meeting using the approved template. The minutes shall be reviewed and signed by the Warden or designee, HCM/CMO or designee, and Director of Nursing or designee.

5. The institution’s EMRRC shall identify any deficiencies and prepare a summary of findings along with a written plan of action. The summary of findings and written plan of action shall be forwarded to the Regional Medical Director, Regional Director of Nursing and the appropriate Associate Director on a monthly basis.

B. Headquarters Review of Institution Emergency Response
1. The Regional Medical Directors and Regional Directors of Nursing shall review the monthly reports and written plans of action to ensure that institutions take appropriate action to correct deficiencies.

2. The Regional Director of Nursing or designee shall prepare a quarterly report for his/her region and submit the report the Headquarters Executive Emergency Medical Response Review Committee (EEMRRC).

3. The Headquarters EEMRRC shall review quarterly reports, identify trends, and compile a statewide report for distribution to executive management staff.