



SPECIALTY CARE TRANSPORT PARAMEDIC CREDENTIALING

PURPOSE

The Monroe-Livingston Region's Specialty Care Transport (SCT) Paramedic Program provides a credentialed paramedic with advanced training and scope of practice to safely manage complex critically ill patients undergoing interfacility transport.

AUTHORIZATION

The program is authorized by the Monroe-Livingston REMAC and overseen by the Regional EMS Medical Director. The Regional EMS Medical Director may designate additional physicians to supervise the credentialing and quality improvement aspects of the SCT Program.

Individuals and agencies providing SCT do so as an added service under the oversight of the MLREMS REMAC and the Regional EMS Medical Director in close coordination and partnership with the Agency Medical Director. Failure to follow this policy may result in revocation of SCT credentials for the paramedic and/or the agency.

MEDICAL CARE

This policy does not define the manner in which SCT care is provided. The NYS ALS Collaborative protocols and the MLREMS Advanced Practice and Specialty Care Paramedic Clinical Guidelines shall provide clinical guidance to the SCT Paramedic. The Advanced Practice and Specialty Care Paramedic Clinical Guidelines are to be used ONLY by individuals currently credentialed as an SCT-Paramedic while working for an SCT authorized agency.

CREDENTIALING REQUIREMENTS

SCT AGENCY

A SCT Agency is one that maintains the following:

1. Unrestricted authorization from the New York State Department of Health Bureau of EMS and the Monroe-Livingston County REMAC to provide Advanced Life Support care.



2. Unrestricted authorization from the New York State Department of Health and Bureau of Narcotics Enforcement to carry and administer controlled substances to patients.
3. Agrees to abide by this policy and the Advanced Practice and Specialty Care Paramedic Clinical Guidelines, including agreeing to provide the SCT Paramedic the proper medications and equipment to perform their duties and following all quality improvement requirements as detailed in this policy.

SCT PARAMEDIC

A SCT Paramedic is an individual who is credentialed to provide SCT services to patients in the Monroe-Livingston EMS Region. SCT Agencies can and are encouraged to create their own clearance process for SCT Paramedics. However, no paramedics can provide SCT services at any agency if they are not credentialed at the regional level. To act as a SCT Paramedic, the individual must practice with an agency that performs SCT care. Thus, a SCT Paramedic practicing with an agency that does not provide SCT services cannot perform SCT care on a patient.

The SCT Paramedic or SCT Agency is responsible for any costs required for maintaining their credentialing.

CREDENTIALING PROCESS

The following are required for credentialing as a SCT Paramedic:

1. Current NYS Paramedic Certification.
2. Current certification as Critical Care Paramedic – Certified (CCP-C) or Flight Paramedic – Certified (FP-C).

Providers meeting the above eligibility requirements may apply for SCT credentialing through the following steps:

1. A letter of recommendation from the Agency Clinical Care Coordinator or equivalent Agency ALS Chief AND the Agency Medical Director must be submitted to the Division of Prehospital Medicine.
2. A fee must be submitted prior to testing.



Initial credentialing is a competency-based process consisting of the successful completion of high fidelity, physician-evaluated SCT scenarios developed and administered by the Division of Prehospital Medicine. Successful completion of all aspects of the process is required to be granted SCT credentials in the MLREMS Region. Should a candidate not successfully complete the high fidelity, physician-evaluated SCT scenario, the candidate may re-schedule at their convenience following the agency Medical Director and Clinical Care Coordinator or equivalent Agency ALS Chief providing a letter of support for re-testing. SCT credentials will remain in effect so long as the Paramedic maintains their CCP-C or FP-C certification and has written support of the agency Medical Director and Clinical Care Manager at the time of their CCP-C or FP-C renewal.

MAINTENANCE OF CREDENTIALS

SCT Paramedics must meet all credentialing requirements at all times. It is the responsibility of the SCT Paramedic and the SCT Agency for whom they operate to report noncompliance with these criteria or clinical care concerns that could impact the provider's ability to provide SCT services. Failure to meet any of these criteria at any time immediately revokes the SCT Paramedic's credentials to provide SCT services to the community. This change must immediately (within one business day) be reported in writing to the SCT Agency Medical Director and the Regional EMS Medical Director.

SCT Paramedics will be continuously reviewed and may be suspended from the program at any time for not meeting the documentation, clinical, or procedural expectations of the Regional EMS Medical Director. Suspension of SCT privileges can be appealed to the Regional Patient Safety Committee. Reinstatement to the program will be considered on a case-by-case basis.

QUALITY ASSURANCE AND QUALITY IMPROVEMENT

Due to the critical nature of patients transported by Specialty Care Transport Paramedics, each agency must devise and implement a QA/QI program and upon request submit the program to the REMAC for review. The Regional Medical Director or designee may, at any time, request a review of clinical care provided by SCT Paramedics in accordance with the MLREMS Patient Safety Policy and Procedure.