



Annual Medical Director's Report
(AMDR)

Mission Statement

“The Pre-Hospital Emergency Care Council protects the public by independently specifying, reviewing, maintaining and monitoring standards of excellence for the safe provision of quality pre-hospital emergency care”

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Version History

(Please visit the [PHECC website](#) to confirm current version.)

Name: LIS021_Annual Medical Directors Report (AMDR)		
Version	Date	Details
1	August 2018	New document approved by Council as part of application and renewal process for CPG Licensed Providers
2	Oct 2019	Council approved version 2

Annual Medical Directors Report (AMDR)

Scope

This document's purpose is to support the Council Rules for pre-hospital emergency care service providers who apply for recognition to implement Clinical Practice Guidelines (POL003) by informing CPG Licensed Providers of the standard required for the Annual Medical Director's Report (LIS021)

Purpose & Rationale

Standardising the mechanism for Licensed CPG Providers to return important information to PHECC in an Annual Medical Director's Report (AMDR) supports a structured approach and use of a template approach. Having a standard allows for responsive update of required content should additional requirements be identified in the future through the GVF process.

Content of Annual Medical Directors Report (LIS021)

The report should be retrospective and cover the previous 12 months; content may be jointly developed by the Provider and their Medical Director. The completed report must be co-signed by the Medical Director and the Provider's nominated responsible person.

	Requirement	Inclusion Checklist
	Organisational Overview - descriptive summary of the nature and type of service provided in the previous 12 months to include:	
1.	Organisational description.	Y / N
2.	Confirmation of Insurance levels. (Clinical Indemnity/ Medical Malpractice).	Y / N
3.	Clinical Levels operated by the Provider.	Y / N
4.	Overview of clinical activities operational activity.	Y / N
5.	Number of patients cared for by the service. i.e. transported, refused care, referred to other service.	Y / N
6.	Report on staff training conducted and details of any student placement activities.	Y / N
7.	Any changes within organisational information within the previous 12 months to include changes in locations/contact details, key personnel*, etc. <i>*Key personnel are directors, trustees, business owners and/or employees who have the authority to directly or indirectly plan and control business operation.</i>	Y / N
	Council Requirements/standards	
8.	Report on implementation of and Council requirements/standards issued within the period i.e. policies, procedures updated, etc	Y / N
9.	Report on implementation of PHECC Key Performer Indicators	

	Registered Employees, Contractors and/or Volunteers	
10.	A list of all Employees, Contractors and/or Volunteers, to include their PHECC PIN, CPG privileged status and date of garda vetting.	Y / N
	Safe Care & Support	
11.	A report on adverse incidents, including near-misses and no-harm events identified. This report should include the number and types of adverse incidents and actions completed and/or changes in policies/procedures as a result.	Y / N
12.	Report on recent efforts to capture patient and/or staff satisfaction rates.	Y / N
	Effective Care & Support	
13.	Submit one clinical audit completed within the previous twelve months, to include the full audit cycle. i.e. outcome action plan.	Y / N
	Workforce	
14.	Report on any employees, contractors and/or volunteers of staff that were subject to review by a professional body including actions undertaken to protect the public.	Y / N
	Supplementary information	
15.	Other information as determined by Council within the licensing cycle.	Y / N



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