

TITLE: EMERGENCY MEDICAL SERVICE DISPATCH CENTER STANDARDS

APPROVED: SIGNATURE ON FILE IN EMS OFFICE
Executive Director

SIGNATURE ON FILE IN EMS OFFICE
Medical Director

EFFECTIVE DATE: 11/9/11

SUPERSEDES: _____

REVISED: 11/2011

REVIEW DATE: 11/2016

PAGE 1 OF 8

EMERGENCY MEDICAL SERVICE DISPATCH PROVIDER AGENCY STANDARDS

I. AUTHORITY

California Health and Safety Code, Division 2.5, Section 1797.220.

II. DEFINITIONS

- A. “Agency” means the Stanislaus County EMS Agency.
- B. “Continuing Dispatch Education (CDE)” means educational experiences in accordance with this policy.
- C. “Continuous Quality Improvement (CQI) Program” means a program administered by the EMD Provider Agency for the purpose of ensuring safe, efficient, and effective performance of emergency medical dispatch.
- D. “Disaster Control Facility (DCF)” means a facility approved by the Agency that, in the event of a multi-casualty incident (MCI), will assume the primary responsibility for patient dispersal decisions.
- E. “Dispatch CQI Program Coordinator” means a Physician, Registered Nurse, EMT-P, EMT-1 or Emergency Medical Dispatcher with at least two years of practical experience within the last five years, who has received training in the CQI process, and has been designated by the EMD Provider Agency to fulfill that role.
- F. “Emergency Medical Dispatcher (EMD)” means an individual trained to provide emergency medical dispatch services in accordance with this policy, and is employed by an emergency medical dispatch provider agency.
- G. “EMSA” means the State of California Emergency Medical Services Authority.
- H. “EMD Medical Director” means the Agency’s Medical Director or a person who is licensed as a physician in California, board certified or qualified in emergency medicine; who possesses knowledge of emergency medical systems in California and of the local jurisdiction; and who provides emergency medical dispatch medical direction to the EMD Provider Agency.
- I. “EMD Provider Agency” means a dispatch center that provides Emergency Medical Dispatch, including pre-arrival instructions, utilizing a card system approved by the EMS Agency.

- J. “Emergency Medical Dispatch Protocol Reference System (EMDPRS)” means an Agency-approved dispatch system that includes:
- The protocol used by an emergency medical dispatcher in an EMD Provider Agency to dispatch aid to medical emergencies.
 - Systematic caller interrogation questions.
 - Systematic dispatch life support instructions.
 - Systematic coding protocols that match the dispatcher’s evaluation of the injury or illness severity with the vehicle response mode and vehicle response configuration.
 - CQI program that measures compliance to protocol through ongoing random case review for each emergency medical dispatcher.
 - Training curriculum and testing process consistent with the specific emergency medical dispatch protocol reference system used by EMD Provider Agency.
- K. “EMD Training Program Manager” means a person who is qualified by education and experience in methods, materials, and evaluation of instruction, as well as adult education theory and practice. The EMD Training Program Manager shall be responsible for the administration of the training program and assure that all aspects of the EMD training program are in compliance with this policy.
- L. “Level II Dispatch” is a level of service in which a dispatcher is responsible for determining, through key medical questions, whether the call is a life-threatening or non-life-threatening emergency.

III. PURPOSE

To establish minimum standards for EMD Provider Agencies in the geographic area of Stanislaus County Emergency Medical Services system.

IV. POLICY

EMS Dispatch Provider Agencies shall be designated by the Agency.

- A. EMD Provider Agencies shall have a written agreement with the Agency, which at a minimum will address all of the requirements listed in this policy.
- B. Federal or state agencies, which substantially meet all of the requirements of this policy, may be designated as an EMS Dispatch Provider Agency by the Agency without a written agreement.
- C. Implementation of an EMD program shall be coordinated with the Agency Medical Director and shall include an EMDPRS selected by the EMD Provider Agency and approved by the Agency.
- D. EMD Provider Agencies shall assure their employees receive basic EMD training and shall have a continuing education program that meets the National Academies of Emergency Medical Dispatch (NAEMD) standards, designed to provide additional training to dispatchers who are already skilled and knowledgeable in dispatch and telecommunication procedures in order to provide medical assistance to callers.

E. The EMD Provider Agency shall establish a CQI program.

V. PROCEDURE

A. GENERAL DISPATCH REQUIREMENTS:

EMD Provider agencies shall submit a written request to the Agency to become an EMD Provider Agency and, after meeting all of the following requirements, a written agreement will be established.

1. Be licensed in accordance with the standards of the Federal Communications Commission.
2. Meet the minimum requirements to function as a Level II EMS Dispatch Center, as approved by the EMS Agency and per the State of California EMS Authority Guidelines, EMSA # 101, section C, standards 3.09 - 3.10.
3. Abide by the policies, regulations and standards of the EMS Agency, as well as obligations stipulated in agreements, memorandums of understanding with the Agency, local policy and procedure, State and Federal regulations, and any other procedures or regulations applicable to the operations of the EMD Provider Agency or dispatch center.
4. Provide staff to attend meetings pertaining to dispatch issues at the request of the Agency.
5. Ensure the development of written internal policies and procedures pertaining to all aspects of this policy.
6. Have at least one Emergency Medical Dispatcher working 24 hours a day, unless otherwise stipulated in a written agreement with the Agency.
7. Send the closest appropriate resource(s) to all life-threatening emergencies within 60 seconds of the initial emergency call. All calls not dispatched within 60 seconds shall be reviewed by the EMD Provider Agency CQI program.
8. Submit a written Unusual Occurrence Report per policy 620.20 to the Agency when an EMD Provider Agency experiences operational or information system failure; e.g., computer failure, 9-1-1 failure, etc. These reports shall include the time of the incident, the duration, the cause(s) or suspected cause(s), and any action(s) taken, if necessary, to prevent a reoccurrence of the event.
9. Have a current copy of, or access to the EMS Agency Policy and Procedure Manual available to the EMDs at all times.
10. Provide Emergency Medical Dispatch CAD data, that includes time and dates, to the Agency, when requested, in an electronic format approved by the Agency.
11. Allow announced and unannounced audits and on-site inspections by Agency staff.

12. Provide the Agency with EMD recordings and data upon request.
13. Have the capability to communicate and coordinate with the DCF.
14. Have an internal written policy and contingency plan to maintain uninterrupted EMS dispatch services for any event that would incapacitate the EMS Dispatch Center.

B. EMD PERSONNEL

1. EMD Provider Agencies shall designate appropriate personnel to ensure adequate operation and management of the EMD Provider Agency. The following is a minimum level of on-line personnel standards:
 - a. Dispatch Supervisor, Manager or Lead Dispatcher - A dispatcher assigned specific duties to assist in the management of the EMS Dispatch Center.
 - b. Dispatchers - The Dispatcher shall meet all requirements as an EMD and perform any or all of the following duties and responsibilities:
 - (1) Receive and process calls for emergency medical assistance.
 - (2) Determine the nature and severity of medical incidents.
 - (3) Prioritize the urgency of the response.
 - (4) Dispatch appropriate emergency medical services (EMS) resources.
 - (5) Give pre-arrival and post-dispatch instructions to callers at the scene of an emergency.
 - (6) Relay pertinent information to response personnel.
 - (7) Coordinate with public safety and EMS Providers as needed.
 - (8) Other activities as approved by the EMD Medical Director.
 - c. Dispatch CQI Program Coordinator that will ensure CQI per this policy.
 - d. EMD Training Program Manager that will be responsible for the administration of the training program.

C. SUPPLIES, EQUIPMENT AND COMMUNICATIONS

1. EMD Provider Agencies shall have supplies and equipment necessary to function as an EMD Provider Agency, and shall ensure that communications equipment is maintained and updated to reflect current industry standards as follows:
 - a. Computer hardware and software capable of meeting Level II dispatch center requirements.
 - b. Telephone systems.
 - (1) One speed dial or dedicated ring-down circuit to the primary Public Safety Answering Point, if applicable.

- (2) One speed dial or dedicated ring-down line to each Ambulance Service Provider, Ambulance Quarters, and any Fire and/or Police Agency within the service area not dispatched by the EMS Dispatch Center.
- c. Radio communications systems shall have:
 - (1) Necessary medical frequencies to conduct daily business.
 - (2) Necessary common frequencies for interagency activities, MCIs, and Disasters.
- d. Recording Equipment:
 - (1) Capable of continuously recording all elements of dispatching (phone calls, radio traffic, etc.).
 - (2) Retention of recordings shall be for 100 days unless an Unusual Occurrence report has been filed with the Agency. In this case, the recording should be held for an extended period designated by the Agency.
- e. Back-up power supply generator and fuel shall be available on site, and adequate to continue operations for 24 hours.

D. EDUCATION

1. Basic EMD Training, EMD Instructor, course curriculum, and CDE Standards shall comply with EMSA Emergency Medical Services Dispatch Programs Guidelines – EMSA #132, and the National Academies of Emergency Dispatch shall provide the approved EMD Course.
2. The EMD Provider Agency shall maintain the following course completion records:
 - The basic EMD training program course completion record in the individual EMD's training file.
 - "In-house" EMD CDE topics, methodologies, date, time, location, and the number of CDE hours completed for each session of CDE in the individual EMD's training file.
 - Copy of EMD CDE program course completion records from an approved EMD training program provider in the individual EMD's training file.
3. The EMD Provider Agency shall retain the following training records:
 - Records on each course including, but not limited to: course title, course objectives, course outlines, qualifications of instructors, dates of instruction, location, participant sign-in rosters, sample course tests or other methods of evaluation, and records of course completions issued.
 - Summaries of test results, course evaluations, or other methods of evaluation. The type of evaluation used may vary according to the instructor, content of the program, number

of participants, and method of presentation.

E. QUALITY IMPROVEMENT

1. The EMD Provider Agency shall ensure, through a CQI process, that their calls are being appropriately handled. The EMD Provider Agency CQI Coordinator will facilitate call reviews (including recordings and CQI reports). A CQI program shall address structural, resource, and/or protocol deficiencies, as well as measure compliance to minimum protocol compliance standards as established by the EMD Director through ongoing random case review for each EMD. The program includes at its core the following:
 - Random case review process.
 - Evaluating emergency medical dispatcher performance.
 - Providing feedback of emergency medical dispatch protocol reference system compliance levels to emergency medical dispatchers.
 - Submitting compliance data to the EMD medical director.
2. The CQI process shall:
 - a. Monitor the quality of medical instruction given to callers, including ongoing random case review for each EMD, and observing telephone care rendered by EMDs for compliance with defined standards.
 - b. Conduct random or incident-specific case reviews to identify calls/practices that demonstrate excellence in dispatch performance, and/or identify practices that do not conform to defined policy or procedures so that appropriate training can be initiated.
 - c. Review EMD reports, and/or other records of patient care to compare performance against medical standards of practice.
 - d. Recommend training, policies, and procedures for quality improvement.
 - e. Perform strategic planning and the development of broader policy and position statements.
 - f. Identify CDE needs.
3. EMD case review is the basis for all aspects of CQI in order to maintain a high level of service, and to provide a means for continuously checking the system. Consistency and accuracy are essential elements of EMD case reviews.
 - a. Each CQI program shall have a case reviewer(s) who meets the qualifications as in II.E.
 - b. The case reviewer shall measure individual EMD performance in an objective, consistent manner, adhering to a standardized scoring procedure.
 - c. The regular and timely review of a pre-determined number of EMD calls shall be utilized to ensure that the EMD is following protocols when providing medical instructions.

- d. Routine and timely feedback shall be provided to the EMD to allow for improvement in their performance.
 - e. The case reviewer shall provide a compliance-to-protocol report at least annually to the EMD Medical Director to ensure that the EMD Provider Agency is complying with their chosen EMDPRS minimum protocol compliance standards, and Agency policies and procedures.
 - f. Each EMD Provider Agency shall retain compliance-to-protocol reports.
4. The following information will be used by the EMS Agency in the evaluation process of the EMS Dispatch Center and the associated EMS response system.

a. Data Collection

EMD Provider agency shall submit CAD data to the Agency in an electronic format acceptable to the Agency on a daily basis, or as otherwise approved by the Agency. CAD data shall include records for all emergency and non-emergency ambulance requests received at the EMD Provider agency. Each computer dispatch record submitted to the Agency shall contain the following fields, as a minimum:

1. Call Date
2. Incident Number
3. Location
4. EMS Map Grid/Zone
5. Call Type (e.g. scene, inter-facility transfer)
6. Emergency Medical Dispatch (EMD) Determinate Code
7. Ambulance Provider
8. Vehicle ID Number
9. Time Call Received
10. Time Call Entered
11. Time Call in Dispatcher Queue
12. Time Dispatched
13. Time En Route
14. Time Arrived Scene
15. Time Patient Contact, if applicable
16. Time Departed Scene.
17. Time Arrived Destination.
18. Time canceled (if applicable)
19. Code of Response
20. Updated Code of Response, if applicable
21. Code of Transport
22. Updated Code of Transport, if applicable
23. Call Disposition, final result of the call for this vehicle or transport status

b. Site Surveys

- (1). Periodic site surveys and/or self surveys will be utilized as a method of determination of compliance by EMS Dispatch Centers. Compliance will be based on Dispatch Standards, obligations stipulated in agreements, memorandums of understanding with the EMS Agency, local policy and procedure, State and Federal regulations, and any other procedure or regulations applicable to the operations of Dispatch.
- (2). EMD Provider Agencies shall be provided with criteria for site surveys and passing requirements prior to survey(s).
- (3). If the EMD Provider Agency fails to pass a site survey, the Agency shall notify the EMD Provider Agency in writing of deficiencies and shall resurvey the EMD Provider Agency in no less than 90 days from the date of notification. The 90 days may be shortened if the EMS Medical Director or EMD Medical Director determines that the protection of the public health and safety requires immediate correction of the deficiency. The Agency shall notify the EMD Provider Agency of this determination and the time within which the Agency will resurvey the EMD Provider Agency.

F. FAILURE TO CORRECT DEFICIENCIES

EMD Provider Agencies which have been found in violation of this policy will be notified in writing. EMD Provider Agencies will be given a period of time to correct the violation(s). If after that time the EMD Provider Agency is still in violation, measures specified in the agreement between the EMD Provider Agency and the Agency will be taken.