

DEPARTMENT OF HEALTH SERVICES
COUNTY OF LOS ANGELES

SUBJECT: **DISPATCHING OF EMERGENCY
MEDICAL SERVICES**

REFERENCE NO. 227

PURPOSE: To establish minimum requirements for the dispatching of emergency medical services.

AUTHORITY: California Health and Safety Code, Division 2.5, Section 1797.220
State of California Health and Human Services Agency, Emergency Medical Services Authority, Dispatch Program Guidelines, March 2003

DEFINITIONS:

Continuing Dispatch Education: Development and implementation of educational experiences designed to enhance knowledge and skill in the application of dispatch.

Dispatch Center Medical Director: A physician licensed in California, board certified or eligible in emergency medicine, who possesses knowledge of emergency medical services (EMS) systems in California and the local jurisdiction and who is familiar with dispatching systems and methodologies; or a physician responsible for the dispatch medical direction of the nationally-recognized EMD program.

Emergency Medical Dispatch (EMD): A system of telecommunications established to enable the general public to request emergency assistance, which provides medically approved pre-arrival instructions, and dispatches a level of response according to pre-established provider guidelines through caller interrogation by a specially trained dispatcher.

Emergency Medical Dispatcher/ Call taker: An employee of an agency providing emergency medical dispatch services who has completed a nationally recognized dispatch program or Provider Agency specific program approved by the EMS Agency, and who is currently certified as an Emergency Medical Dispatcher (EMD), or Emergency Medical Technician (EMT) with current local scope of practice training. An Emergency Medical Dispatcher/Call taker is specially trained to provide post-dispatch/pre-arrival instructions.

Post-dispatch/Pre-arrival instructions: Telephone rendered protocols reflecting current evidence based medical practice and standards, including instructions intended to encourage callers to provide simple lifesaving maneuvers to be used after EMS units have been dispatched and prior to their arrival.


Quality Improvement: A program designed to evaluate, monitor, and improve performance and compliance with policies and procedures to ensure safe, efficient, and effective delivery of emergency medical dispatching.


PRINCIPLE:

1. All callers requesting emergency medical care should have direct access to qualified dispatch personnel for the provision of EMS.

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REVISED: 01-01-22
SUPERSEDES: 10-01-17

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APPROVED: 
Director, EMS Agency


Medical Director, EMS Agency

2. EMS Provider Agencies that implement Emergency Medical Dispatch (EMD) should comply with the State of California Health and Human Services Agency, Emergency Services Authority, Dispatch Program Guidelines of March 2003 and Los Angeles County EMS policies.
3. EMS Provider Agencies that do not currently utilize EMD are required to incorporate post-dispatch/pre-arrival instructions in their practice of dispatching EMS. These providers should comply with the minimum requirements established in Ref. No. 227, Dispatching of Emergency Medical Services or send the highest level of care available.
4. The emergency medical dispatching protocols developed by the dispatch center shall be approved by the Dispatch Center Medical Director.

POLICY

I. Program Requirements

- A. Each dispatch center shall have a Dispatch Center Medical Director to oversee protocol development, quality improvement and shall have a Dispatch Coordinator to oversee daily operations.
- B. If the dispatch center utilizes a nationally-recognized EMD program, the following shall be submitted to the EMS Agency:
 1. Name of EMD program
 2. Name of Dispatch Center Medical Director
 3. Post-dispatch/Pre-arrival instructions that are clearly defined in compliance with EMS Agency guidelines
 4. Quality Improvement Program
- C. If the dispatch center develops its own emergency medical dispatching protocols, the following shall be submitted to the EMS Agency:
 1. Education standards and qualifications for call-takers and dispatchers
 2. Pre-determined interrogation questions
 3. Guidelines and procedures that assist with decision-making
 4. Post-dispatch/Pre-arrival instructions that are clearly defined in compliance with EMS agency guidelines
 5. Quality Improvement Program
 6. Name, contact information, and credentials of the Dispatch Center Medical Director

II. Dispatch Center Medical Director

Provides medical direction and oversight of the emergency medical dispatch program by review and approval of:

- A. Policies and procedures related to Emergency Medical Dispatch and patient care
- B. Standards for qualifying education and continuing education
- C. Dispatch guidelines including pre-arrival instructions
- D. Oversees quality improvement (QI) and compliance standards
- E. Provides ongoing periodic review of dispatch records for identification of potential patient care issues
- F. Provides oversight and participates in dispatch quality improvement, risk management and compliance activities
- G. Attends, participates by phone conference call, or sends a representative to the Dispatch Center Advisory meetings scheduled by the Los Angeles County EMS Agency

III. Emergency Dispatch Coordinator

- A. Oversees daily operations of the center and ensures staffing on a continuous 24-hour basis of qualified Emergency Medical Dispatchers/Call-Takers that meets the EMS provider agency's needs
- B. Ensures that a dispatch supervisor or designee is readily accessible 24 hours daily
- C. Ensures for availability of a 24-hour contact phone number to be utilized to coordinate or disseminate information in case of critical incident or disease outbreak
- D. Coordinates QI activities with the Medical Director.
 - 1. Provides ongoing periodic review of dispatch records for identification of potential patient care issues
 - 2. Participates in dispatch quality improvement, risk management and compliance activities
 - 3. Attends or participates by phone conference call in the Dispatch Center Advisory meetings scheduled by the Los Angeles County EMS Agency

IV. Emergency Medical Dispatcher / Call-Taker Qualifications

- A. Initial Qualifications
 - 1. A Valid current BLS certification at the healthcare provider level. Must include hands on skills validation (e.g., American Heart Association,

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- American Red Cross, National Safety Council, or American Safety Health Institute)
2. EMD Certification, or a minimum initial training of twenty-four (24) hours that meets the requirements of the California EMS Authority's Emergency Medical Services Dispatch Program Guidelines
- B. Recertification
1. Recertification as an EMD, if applicable
 2. A minimum of (twenty-four) 24 hours of continuing dispatch education (CDE) every two years.
- V. Quality Improvement:
- A. The Emergency Medical Dispatch Center shall have a Quality Improvement Program that will evaluate indicators specific to the dispatch of emergency medical services in order to foster continuous improvement in performance and quality patient care.
- B. Each QI Program shall have a written plan that includes, at minimum, the following components:
1. Mission statement, objectives, and goals for process improvement
 2. Organizational chart or narrative description of how the QI program is integrated within the dispatch center, process(s) for data collection and reporting. Include templates utilized in standardize reports
 3. Key performance measures or indicators related to delivery of emergency medical dispatching. Methods or activities designed to address deficiencies and measure compliance to protocol standards as established by the EMD Medical Director through ongoing random case review for each emergency medical dispatcher
 4. Activities designed to acknowledge excellence in the delivery of emergency medical dispatch performance
 5. The QI process shall:
 - a. Monitor the quality of medical instruction given to callers, including ongoing random case review for each emergency medical dispatcher and observing telephone care rendered by emergency medical dispatchers 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.

CROSS REFERENCES:

Pre-hospital Care Manual:

Ref. No. 226, **Private Ambulance Provider Non 9-1-1 Medical Dispatch**

Ref. No: 620, **EMS Quality Improvement Program**