


Sierra – Sacramento Valley EMS Agency Program Policy

911 Ambulance Provider Dispatch Requirements

	Effective: 06/01/2016	Next Review: 04/2019	414
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	Approval: Victoria Pinette – Executive Director		SIGNATURE ON FILE

PURPOSE:

To establish minimum requirements for 911 ambulance dispatching.

AUTHORITY:

- A. California Health and Safety Code, Division 2.5, § 1797.
- B. California Code of Regulations, Title 22, Division 9.
- C. California Supreme Court Decision. County of San Bernardino v. City of San Bernardino (1997) 15 Cal 4th 909 California Health and Safety Code sections 1443 and 1444; Welfare and Institutions Code section 17000.
- D. State of California – Health and Human Services Agency, Emergency Medical Services Authority, Dispatch Program Guidelines, March 2003, EMSA #132.
- E. Office of the Attorney General, State of California, Bill Lockyer, Attorney General, Opinion of Bill Lockyer – Attorney General. Thomas Lazar – Deputy Attorney General, No. 03-316, September 5, 2003.

DEFINITIONS:

- A. **911 Ambulance Provider** – An organization authorized by S-SV EMS, through an EOA or non-EOA agreement, to provide 911 ambulance services in the S-SV EMS region.
- B. **Ambulance Provider Dispatch Center** – A 911 ambulance provider dispatch center that a PSAP relays emergency call information to for the purpose of dispatching ambulance resources.
- C. **Emergency Medical Dispatch (EMD)** – A series of components that allows a dispatcher to provide pre-arrival instructions and, if utilized, dispatch an appropriate level of response as determined by Medical Priority Dispatch System (MPDS) protocols.

- D. **Exclusive operating area (EOA)** – An EMS area/sub-area defined in the EMS plan for which S-SV EMS restricts operations to a single provider of 911 ground ambulance services.
- E. **Public safety answering point (PSAP)** – The primary public safety agency at which a 911 call is first received.
- F. **Secondary public safety answering point (Secondary PSAP)** – A dispatch center that a PSAP transfers/relays 911 calls to for the purpose of dispatching emergency resources, including ambulances.

POLICY:

- A. Any dispatch center (including non-emergency providers) receiving a request for emergency medical assistance from any member of the public, either through the 911 system or via a seven (7) digit number, shall promptly notify the applicable dispatch center for the first responder and/or 911 ambulance provider of the call.
- B. All 911 ambulance providers shall operate their own dispatch center, contract with an existing dispatch center, or join with other providers to operate a dispatch center. If a 911 ambulance provider utilizes dispatch services provided by another organization, it must have a written contract for those services.
- C. All 911 ambulance providers shall maintain dispatch services necessary to receive and respond to requests for emergency ambulance services and monitor system status. The 911 ambulance provider's dispatch center shall:
 - 1. Receive and process calls for emergency medical assistance from PSAPs and seven (7) digit telephone lines.
 - 2. Identify and dispatch the closest available 911 ambulance(s) to the scene of the emergency in accordance with current EOA and non-EOA agreements.
 - 3. Only dispatch the number of ambulances appropriate for the type of incident or as requested by the Incident Commander (IC).
 - 4. Notify responding personnel and agencies of pertinent incident information.
 - 5. Monitor and track responding resources (automatic vehicle locators are recommended).
 - 6. Coordinate with law enforcement, first responders and other EMS providers as needed.
 - 7. Provide required data to S-SV EMS.

- D. To maintain the integrity of EOA's within the S-SV EMS region, the exclusive 911 ambulance provider for the service area where the call is located shall be dispatched to all emergency calls within that service area unless a closer provider is requested through mutual/automatic aid.
- E. It is the goal of S-SV EMS that all callers requesting emergency medical assistance from any area within the S-SV EMS region have access to EMD services. National certification of the dispatch center's program is encouraged, but not required.
- F. If the dispatch center utilizes an S-SV EMS approved MPDS, the dispatcher shall follow the protocols associated with that system.
- G. Ambulances shall not at any time proceed at a level of response other than as directed by the PSAP or ambulance provider dispatch center.
- H. 911 ambulance providers shall have a written policy and shall make all reasonable efforts to immediately notify the jurisdictional PSAP, if applicable, of the location from where the ambulance is responding from.
- I. The dispatch center shall be staffed with sufficient properly trained personnel to accomplish all dispatch, EMD and MPDS functions (as applicable).
- J. A computer-aided dispatch (CAD) system shall be utilized to record dispatch information for all 911 ambulance requests. CAD system information shall include a minimum of caller, incident date, incident location, assigned unit ID, reason for cancellation (if applicable), and all appropriate incident times (hours, minutes and seconds).
- K. The dispatch center shall have capabilities for 24-hour real time recordings of all emergency telephone lines and radio frequencies. All radio and telephone communications shall be recorded on tape or other digital recording medium and maintained for a minimum of 90 days.
- L. Providers shall have a plan to provide ambulance dispatch services during any period of primary dispatch failure. The plan shall ensure that an equivalent dispatch center or dispatch system, approved by S-SV EMS, is able to serve as a backup dispatch center within five (5) minutes of failure of the primary dispatch center.

CROSS REFERENCES:

- A. Emergency Medical Dispatch Program Approval (405).