

Sierra – Sacramento Valley EMS Agency Program Policy			
Emergency Medical Dispatch (EMD)			
	Effective: 10/01/2026	Next Review: 04/2029	405
	Approval: Troy M. Falck, MD – Medical Director		SIGNATURE ON FILE
	Approval: John Poland – Executive Director		SIGNATURE ON FILE

PURPOSE:

To establish criteria for EMD approval/utilization in the S-SV EMS region.

AUTHORITY:

- A. HSC, Div. 2.5, § 1797.
- B. CCR, Title 22, Div. 9.

POLICY:

- A. No later than January 1, 2027, all public safety agencies that process 911 emergency medical response requests, shall provide a minimum of the following EMD prearrival medical instructions:
 - 1. Airway and choking instructions for infants, children, and adults.
 - 2. Automatic external defibrillator (AED) and CPR instructions for children and adults.
 - 3. Childbirth instructions.
 - 4. Hemorrhage/bleeding control instructions.
 - 5. Epinephrine auto-injector administration instructions for suspected anaphylaxis.
 - 6. Naloxone administration instructions for suspected narcotics overdoses.
- B. A public safety agency may also satisfy the above minimum EMD requirements by one of the following methods:
 - 1. Utilizing a nationally recognized EMD program that includes all prearrival medical instructions listed above, or;
 - 2. Contracting with another agency that provides all prearrival medical instructions listed above.
- C. A public safety agency that processes 911 emergency medical response requests may additionally utilize a nationally recognized EMD program that consists of Medical Priority Dispatch System (MPDS) processes used to determine the appropriate number, type, and response priority of assigned EMS resources.
- D. A private ground ambulance provider may also utilize a nationally recognized EMD program for providing applicable prearrival medical instructions and MPDS services.

- E. All EMD providers, programs and services in the S-SV EMS region shall be approved by the S-SV EMS Medical Director. Approved EMD providers, programs and services are subject to periodic review by S-SV EMS.
- F. The S-SV EMS Medical Director is authorized to exercise medical control of all EMD programs/services within the S-SV EMS region.

CONTINUOUS QUALITY IMPROVEMENT (CQI):

- A. A public safety agency that provides only the minimum EMD prearrival medical instructions listed in this policy ('POLICY' Section, Item A.1. - A.6.) shall work collaboratively with S-SV EMS in providing EMD data for CQI purposes.
- B. Any public or private EMS dispatch center that utilizes a nationally recognized EMD program must maintain standardized CQI program, which includes the following:
 - 1. An EMD CQI coordinator who meets the following minimum qualifications:
 - a. A currently licensed/certified physician, RN, PA, paramedic, AEMT or EMT, who has at least two (2) years of practical experience within the last five (5) years in prehospital EMS with a basic knowledge of EMD, and who has received specialized training in the CQI/case review process, or;
 - b. An emergency medical dispatcher with at least two (2) years of practical experience within the last five (5) years, and who has received specialized training in the CQI/case review process.
 - 2. The EMD CQI coordinator will work collaboratively with S-SV EMS in providing data used for EMS system analysis.
 - 3. EMS dispatch center and personnel performance will be evaluated through reviewing of dispatch records, audio recordings and applicable provider field records. All written CQI records shall be maintained for a minimum of two (2) years. EMD programs shall maintain telecommunication records for a minimum of 100 days, or longer if required for evidence or pending litigation.

PROCEDURE:

- A. EMD program/service requests shall be submitted to S-SV EMS, and shall include the following:
 - 1. The type(s) of EMD services to be provided.
 - 2. A plan for how EMD services will be provided.
 - 3. The name and qualifications of the EMD program administrator.
 - 4. A description of the EMD provider CQI program (if applicable).
 - 5. The name and qualifications of the CQI coordinator (if applicable).

-
- B. Requests to provide EMD services will be processed within 30 calendar days of submission of all required program materials.
- C. If a request to provide EMD services is denied, S-SV EMS will provide written notice of the reason for denial, and specific recommendations to fulfill compliance requirements (if any) within 30 calendar days of receiving all required program materials.
1. If a public safety agency's request to provide EMD services is not timely approved or is denied, an appeal shall be conducted in conformance with the administrative adjudication proceedings set forth in Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the California Government Code. A final decision rendered pursuant to this appeal may be further appealed to a court of competent jurisdiction.
 2. If a private ground ambulance provider's request to provide EMD services is not timely approved or is denied, an appeal may be made to the S-SV EMS JPA Governing Board of Directors. The decision rendered by the S-SV EMS JPA Governing Board of Directors shall be final.
- D. If an approval to provide EMD services is suspended or revoked, S-SV EMS will provide written notice of the reason for the suspension or revocation. This written notice will include the effective date of such suspension or revocation and any requirements necessary to become compliant (if applicable).