PURPOSE
To identify the minimum requirements for an agency to be approved as an emergency medical dispatch (EMD) provider, pursuant to the California Health & Safety Code Section 1797.220 and 1797.223.

AUTHORITY
California Health and Safety Code - Division 2.5: Emergency Medical Services [1797. - 1799.207.]

EMD Center Approval Process
Non-EMD provider agencies requesting approval to become an EMD Center in Riverside County must submit a Riverside County Emergency Medical Dispatch Application.

Local provider agencies that plan to utilize contracted EMD services must also submit a REMSA EMD Application. Additionally, the contracted agency that provides EMD services on their behalf must submit an Emergency Medical Dispatch Contracted Provider Agency form.

Both forms (above) can be obtained by sending a request to EmergencyMedicalDispatch@rivco.org.

REMSA will advise of program approval or disapproval in writing within ninety (90) days of receipt of all required application documentation. Identified program deficiencies must be corrected within sixty (60) days of notification. If, after 60 days, the identified deficiencies are not resolved, the application will be considered abandoned and will be withdrawn from consideration. Once an application is withdrawn, the applicant agency will need to initiate a new application if they wish to continue the approval process.

Initial program approval periods expire after two (2) years.

REMSA may audit program materials and/or records as part of the EMD program verification process or for cause.

EMD Center Reapproval Process
EMD Centers must apply for program reapproval a minimum of ninety (90) days prior to the current approval period expiration date. A Riverside County Emergency Medical Dispatch Application Renewal must be obtained and used.

REMSA will advise of program reapproval or disapproval in writing within sixty (60) days of receipt of all required application documentation.

Program reapproval periods expire after four (4) years.

EMD Center Staffing Requirements
Program Administration - Local
EMD Centers operating in Riverside County will employ an EMD Program Coordinator, who will be International Academies of Emergency Dispatch (IAED) certified and qualified by education and experience in the EMD and Quality Management program process. Nothing in this section prohibits the same individual from being responsible for more than one (1) function, so long as they meet the qualifications of each position that they hold.
Duties of the Program Coordinator will include but not be limited to:
1. Administering the EMD program
2. Coordinating all clinical and field activities related to the EMD program
3. Ensuring that all emergency medical dispatchers meet all continuing education and update requirements as needed to maintain continuous certification.
4. Assuring that all aspects of the EMD program comply with state and county laws and policies
5. Administration of the EMD Quality Management program (i.e., quality improvement and quality assurance program).
6. Work to assure uninterrupted function and regular maintenance of the MPDS
7. Be the authorized point of contact for all matters relating to the agency’s EMD program
8. Review the EMD program (CDE, Training, Orientation, QM activities, etc.) at least annually, retaining all applicable records for a period of four (4) years or as required by IAED whichever is longer.

Program Administration - Contracted
EMD provider agencies contracting EMD services will employ an EMD Liaison, who will function as a point of contact between their EMD contracted agency and REMSA. Nothing in this section prohibits the same individual from being responsible for more than one (1) function, so long as they meet the qualifications of each position that they hold.

Medical Direction and Oversight
EMD Centers will designate a current employee who is a licensed physician, or contract the services of a licensed physician, who will serve as a Medical Advisor. The EMD Center Medical Advisor will provide medical oversight for all medical aspects of the EMD program. This will include, but not be limited to:
1. The Emergency Medical Dispatch Protocol Reference System (EMDPRS) excluding protocols that pertains to Local Medical Control review and approval. Local Medical Control review and approval is deferred to REMSA and its Medical Director
2. The EMD training program
3. The CDE program
4. Compliance standards
5. Policies and procedures
6. The Quality Management program
7. Risk management functions
8. Records management

The EMD Medical Advisor will have medical management and accountability for the:
1. Approval of the EMD Center’s training program. They will participate in the ongoing evaluation and review of their agency’s program
2. Approval of their agency’s CDE program
3. Design of the medical aspects of their agency’s EMD orientation and performance evaluation methods
4. Approval of the EMDPRS utilized by their agency excluding protocols that pertains to Local Medical Control review and approval. Local Medical Control review and approval is deferred to REMSA and its Medical Director
5. Review of the Quality Management program, training, and risk management functions in their agency’s Continuous Quality Improvement (CQI) plan, including the establishment and monitoring of programs designed to correct identified medical quality issues
6. Participation in REMSA’s system CQI process

The EMD Medical Advisor will:
1. Be licensed in California and hold board certification in, or have verifiable experience practicing, Emergency Medicine
2. Possess knowledge of EMS systems in California and Riverside County
3. Be familiar with dispatching systems and methodologies

The EMD Medical Advisor will be responsible for ensuring that the provider agency’s EMD Program is established following state and local guidelines and policies.
Training and Certification
The scope of practice for EMD Center dispatch personnel will be consistent with the role and responsibility of the Emergency Medical Dispatcher, as described in the current version of the IAED’s Emergency Medical Dispatch Course Manual.

EMD centers will ensure that their dispatchers continuously maintain IAED and cardiopulmonary resuscitation (CPR) certifications. CPR training programs approved for EMD dispatchers in Riverside County include the American Heart Association (AHA), American Red Cross (ARC) and the IAED (Dispatcher Directed CPR).
Provider agencies and/or provider agency dispatch personnel are not permitted to medically triage or give prearrival, or post-dispatch, instructions to any 9-1-1 caller unless they have IAED MPDS certification AND current approval from REMSA.

EMD Center Operations
Only provider agencies with written approval from the Riverside County EMS Agency (REMSA) may operate as an EMD center.

Agencies that provide EMD will operate twenty-four (24) hours a day, seven (7) days a week, except under certain circumstances such as infrequent dispatcher work overload or under disaster conditions as specified by the State of California Government Code, California Emergency Services Act, Chapter 7, Division 1, Title 2, Section 8558.

Provider agencies that utilize contracted EMD services from another EMD Center must ensure the following:
1. The contracted EMD Center is an (IAED) certified EMD center.
2. The contracted EMD Center is in good standing with, and has unrestricted approval from, their local EMS Agency (LEMSA).
3. The contracted EMD Center meets and/or exceeds the requirements of this policy and REMSA Policy #7101 (CQI System).
4. The contracted EMD Center adopts REMSA local medical control criteria for Medical Priority Dispatch System (MPDS) protocols 9, 10, 14, 18, 24, 28, 33, 34, 36 & 37 and any other protocols that may apply in the future.
5. The contracted EMD Center establishes a liaison for both agencies that will serve to communicate and coordinate with REMSA.

The EMD Center’s Program Coordinator, or the provider agency’s contracted agency EMD Liaison, must notify REMSA in writing of any EMD program operational change(s), which may include but not be limited to:
1. Modifications in the MPDS
2. Changes to policies and/or procedures
3. Substantial program or administrative changes not previously submitted during the last approval period
4. Termination of the use of a contracted EMD provider agency or substantial changes in the contracted EMD services provider’s EMD program.

EMD Centers should make every effort to provide notification to REMSA within twenty-four (24) hours but no less than seventy-two (72) hours.

REMSA recommends that all EMD Centers strive to attain the Accredited Center of Excellence (ACE) designation by the IAED.

EMD Center CAD Requirements
EMD Centers that utilize the Riverside County contracted 9-1-1 ambulance transport provider will establish a real-time data link, capable of transmitting emergency response information, which will include but not be limited to EMD MPDS response determinants (e.g., 9-E-1, 26-Ω-2, etc.) and geographical location of the emergency response. For the purposes of this section, a “real-time data link” refers to either a direct Computer-Aided Dispatch (CAD)-to-CAD transmission or an indirect connection, which may include but not be limited to, a ring down line, intercom, radio, or other electronic means to achieve timely notification of caller data in accordance with California Health and Safety Code 1797.223.
All EMD Centers will utilize Priority Dispatch Corporation’s ProQA™ dispatching software for the purposes of call-taking and dispatching, and AQUA™ for the purposes of case review and quality management. EMD Centers will, within ninety (90) days from the release date, update their CAD system to the newest version of ProQA™ and/or AQUA™.

EMD Center Quality Management
REMSA will establish an EMD Quality Review Taskforce (EQRT) and conduct meetings on a predetermined basis. EQRTs will, at minimum, be comprised of each EMD Center’s EMD Program Coordinator or their designee. EQRTs will provide a forum for:

1. The exchange of best practices, ideas and information between EMD Centers to improve overall system performance.
2. The discussion and resolution of inter-organizational issues related to EMD operations and the EMS system.
3. EMD advisories throughout the EMS system.
4. Identifying system-level EMD training needs or procedural changes as they relate to this policy.
5. Providing feedback on EMD and reporting to the PMAC (Prehospital Medical Advisory Committee) as needed / requested.

EMD Quality Management programs will be incorporated into the provider agency’s overall system CQI program.

EMD Centers will establish policies and procedures through their Quality Management program, to include but not be limited to:

1. Implementation and application of MPDS
2. Local medical control approval of all current and future applicable protocols (e.g., protocols 9, 10, 14, 18, 24, 28, 33, 34, 36 & 37)
3. Protocol compliance
   i. Agency and individual protocol compliance
   ii. Emergency Rule procedures
   iii. Quality Assurance / Improvement
   iv. Continuing Dispatch Education (CDE) requirements
   v. Performance management and remediation
   vi. Customer service
   vii. Language translation processes
4. Call taking by authorized emergency dispatchers only and processes for EDs with expired, suspended, or revoked IAED certification.

EMD Centers will assure that call acuity (i.e., ProQA Response Determinants) is integrated into their ePCR platform.

EMD Centers will utilize AQUA™ software for quality improvement / assurance evaluation.

EMD Quality Management programs will, at a minimum, evaluate protocol compliance and conduct random case reviews for both individual emergency dispatchers and the agency.

EMD Center Reporting Requirements
REMSA will collect and analyze activity data from EMD Centers to assist with system overview, improvement, development, and policy priorities. Reports will be submitted quarterly to REMSA and will be due by the end of the following month after the end of each quarter (April, July, October, and January).

EMD Centers will review the following reports monthly. This list is not exhaustive and only includes the mandatory minimum:

1. EMD Determinant Drift Report
2. EMD Time Analysis by Dispatch Level
3. EMD Performance Report
EMD Center Record Management Requirements

EMD Centers will maintain copies of their basic training program course completion records, “in-house” EMD CDE topics (methodologies, dates, times, locations, and the number of CDE hours awarded for each session) and copies of EMD CDE course completion records according to IAED standards.

Each EMD Center will retain Compliance-to-Protocol reports, as required by law.