

PRIORITY DISPATCH SYSTEM USE

	Adopted	Amended	Approved by

POLICY

Call processing and dispatch for assistance shall be provided in a standardized manner following approved Priority Dispatch System (PDS) protocols for caller interrogation, assignment of determinant codes, and provision of post-dispatch and pre-arrival instructions.

PURPOSE

To provide all Emergency Dispatchers (EDs) with approved procedures and practices for safe and effective emergency call-taking and dispatch. Those procedures and practices include interrogating the caller, assigning an accurate determinant code, providing instruction, and communicating necessary information to field responder personnel.

PROCEDURE

I. Priority Dispatch System (PDS) Protocols

1. The PDS protocols shall be used on all incoming calls where assistance is requested unless specifically stated otherwise by local agency policy and oversight authority.
 - i. Exceptions to use PDS
 - Field initiated events excluding medical calls which should be processed using the "Advanced SEND protocol" in Medical ProQa
2. A software program containing PDS protocols for Emergency Call-taking (ProQA™) shall be loaded at each call-taking position for International Academies of Emergency Dispatch (IAED) certified EDs.
 - i. Protocol cardsets for each discipline or a protocol tablet for use by a particular ED shall be kept at every ProQA™ call-taking position and be available as a resource or as an alternative in the event of computer / system failure.
3. The protocols provide standardized interrogation questions, PDS determinant codes, post-dispatch instructions, and pre-arrival instructions.
4. The PDS protocols have been approved by Response Agency Department Heads or their designees, and the Telecommunications Manager of Monroe County Central Emergency Dispatch Center.

II. Interrogation

1. All attempts to obtain Case Entry and Key Question information from the caller will be made by utilizing good communication techniques and verbalizing the questions exactly as written in the protocol.
2. If the scripted protocol question is not understood or the caller does not initially provide an answer, the ED may re-phrase the question per PDS Performance Standards.
3. Questions may only be omitted if:
 - i. The caller is in immediate danger and continuing interrogation would jeopardize the safety of the caller
 - ii. The answer is unquestionably obvious
 - iii. The answer has already been spontaneously provided by the caller

- iv. A Pre-Question Qualifier (PQQ) rules out the question
 - v. The ED is shunted to another protocol
4. EDs may adjust the script to address first party callers. e.g. "How old are you?" vs. "How old is he/she?" as described in the PDS Performance Standards.
 5. For languages that the ED is not fluent in speaking, the ED will follow the process outlined in the policy "Language Translation".

III. Determinant Codes and Responses

1. The PDS protocols will be used to select the most appropriate determinant code based on all information from Case Entry and Key Question interrogation.
2. **The ED will enter the applicable PDS determinant code in the designated field of the CAD call- entry screen.**
3. Response configurations and modes will be predetermined as outlined in the policy "Local ED Response Assignment Plan".

IV. Relay Of Information To Responding Units

1. The following shall be regarded as the minimum information to be passed to all responding personnel via Locution or verbally by ED.
 - i. The location of the incident
 - ii. The Chief Complaint/Nature
 - iii. Response:
 - (Ambulance or Ambulance Duo)
 - iv. The PDS determinant code
 - v. Safety issues
2. **Police calls: (This is the standard recommendation. Other determinations may be considered prior to Police protocol implementation.)**
 - i. P1
 - ii. P3 (Spillman Mobile CAD will provide the details)
3. Any critical incident information that the call-taker receives after responders have been alerted and prior to their arrival on scene will be passed to responding units. This includes any responder safety information and significant changes in scene circumstances or patient condition.

V. Post-Dispatch Instructions (PDIs)

1. The ED giving PDIs will follow the protocol, giving instructions appropriate to each individual call and avoiding free-lance information.
2. PDIs shall be provided to the caller whenever possible and appropriate to do so as described in the PDS Performance Standards.

VI. Pre-Arrival Instructions (PAIs)

1. PAIs shall be provided directly from the scripted text listed on each applicable PAI Panel in the protocols.
2. The ED providing PAIs will follow the script as written, avoiding free-lance information, unless it enhances and does not replace the written protocol scripts.
3. PAIs shall be provided to the caller whenever possible and appropriate to do so as described in the PDS Performance Standards.

INITIAL CALL HANDLING

	Adopted	Amended	Approved by

POLICY

When an emergency call is received, the Emergency Dispatcher (ED) shall obtain all initial case information including the location and call back numbers as described below. It is the intent of this policy that the Call Handling Process including Priority Dispatch System (PDS) Case Entry shall be followed 100% of the time, with the exception of fourth party calls.

PURPOSE

To provide all EDs with approved procedures for obtaining initial case information and appropriate verifications for all emergency cases including cases where PDS interrogation is deemed necessary.

PROCEDURE

I. Initial Call Handling Process

- a. Initial information will be gathered from the caller using the below phrases and order:
 - i. 911, "what is the address of the emergency?" (If automated introduction via phone system does not work)— including verification as described in section IV below.
 - ii. "What is the phone number you are calling from?" — including verification as described in section IV below.
 - iii. "What is your name?"
 - iv. "Okay, tell me exactly what happened?"

II. Initial Answer Phrase and Location Determination:

- a. All emergency phone lines will be answered using the standardized answer phrase 911, what is the address of the emergency?"
- b. If the caller is unable to provide a numeric address, the ED will say, "Please give me the best location you have for the incident."
 - i. If the caller does not know the location, the ED will utilize GPS coordinate plotting using available technology.
- c. The ED will enter the address or location provided by the caller into the CAD incident using the most accurate information available from the caller (This could be a numeric address, intersection, business, landmark, etc.).
- d. Verification will be completed as described in section IV below.
 - i. Potential exceptions where caller does not know his/her location:
 - Stuck accelerator
 - Sinking vehicle

- Disoriented

III. Callback Number

- a. The call-taker will ask "What is the number you are calling from?"
- b. If the caller is unable to provide their number the ED will ask "Is there a number at that location that you can provide to me?"
- c. Callback number information will be entered into the CAD incident in the appropriate field
- d. Verification will be completed as described in section IV below

IV. Verification Process

- a. Where ANI/ALI information is available:
 - i. If caller is calling from the exact location where help is needed, the ED will verify the address information obtained by using the ANI/ALI screen, accepting the address given by the caller only when the ANI/ALI information matches the caller's information.
 - ii. Where ANI/ALI information is not available or the caller is not at the actual location where help is needed, the ED will verify the address (or location) by stating the following: "Please repeat the address/location for confirmation."
 - iii. All residential (or suspected residential) locations where there is no ANI/ALI information or the ANI/ALI information does not match the exact location given by the caller, the ED will also ask "Is this a house or an apartment?" The ED will correctly enter this information into the CAD incident.
 - iv. For all non-residential locations, the ED will obtain all necessary access information, which may include: building name, business name, floor number, office or suite number, specific entrance instructions, and intersection or street segment (for roadway incidents).
 - v. Callback information will be considered verified if it matches ANI/ALI information.
- b. Once the ED has entered the address/location into the CAD incident, he/she will geo-verify the entered address/location by ensuring that CAD returns a valid address or location and it matches the initial information entered and obtained from the caller.
- c. If ANI/ALI or callback number information is not present the ED will ask "Please repeat the address/number for verification."

V. Caller's Name

- a. The ED will obtain the caller's name as described above in section I.
- b. The caller's name will be entered into the CAD incident in the appropriate field.

VI. Complaint Description

- a. Based on the caller's response, the call-taker will determine if the PDS protocols are required
 - i. If the PDS protocol is required, the call-taker will immediately launch ProQA™ for the appropriate discipline and enter the reported information in the corresponding field and continue with PDS protocol interrogation.
 - ii. If the PDS protocol is not required the call-taker will enter the reported information directly into the CAD incident in the appropriate field and continue with agency approved questioning process

iii. If the PDS protocol is required, Primary PDS discipline for common calltypes

Police	Fire	Medical

CALLER MANAGEMENT AND CUSTOMER SERVICE

	Adopted	Amended	Approved by

Emergency dispatchers (EDs) shall follow the appropriate caller management and customer service practices when processing requests for assistance. The desired behavior is for EDs to act in a manner that is compliant with the internal Core Values and International Academies of Emergency Dispatch (IAED) Code of Ethics and Code of Conduct at all times.

PROCEDURE

I. Caller Reassurance and Explanations

- a. Once Case Entry is complete or when required, the ED will use calming or reassuring statements. This may also include a request and explanation of the reason for the request. The ED shall respond to all questions or concerns in a voice tone that is indicative of being concerned for the caller and the victim/ patient.
- b. The desired behavior is to use customer service statements in an attempt to complete the interrogation process. If the caller becomes agitated or uncooperative, use the appropriate calming techniques.
 - i. Example: **“It’s important I get this information so we can get the right help to you.”** Repeat this as often as necessary using repetitive persistence.
 - ii. The ED will not use phrases such as “I have to ask you these questions” as this statement and similar statements that use variations on “have to” and “questions” are shown to irritate callers, undermines the intent and result of the call interrogation process, and sounds cold, clinical, and uncaring. Effective caller management skills are a very important part of protocol.
 - iii. At any time during the call, the ED may update the caller on the response status using positive ambiguity:
 - “My partner has an ambulance started” (If call is dispatched)
 - “We have help on the way” (If call is dispatched)
 - “They will be there as soon as possible” (If call is dispatched)
 - “They are coming as quickly as possible” (If call is dispatched)
 - “We are getting help **started** to you” (Always true once the call is entered to CAD)
 - “As we are talking, I/my partner **will be** sending help (Always true)

- iv. The ED may not give the caller an ETA or location on responding units since the caller may rely on these statements to the detriment of patient/victim or make decisions for self transport based on the location or ETA of responders

II. Distressed, Hysterical, Aggressive and Abusive Callers

- a. It is recognized that some callers will be highly distressed, uncooperative and at times abusive. Callers may behave this way at times when they are frightened and feel helpless. When faced with these callers, the ED will maintain a professional demeanor and provide acceptable calming techniques throughout the call.

III. Customer Service Expectations

- a. The ED will express, through voice and mannerisms, concern for the caller and the patient/victim. The ED will be respectful and courteous at all times.
- b. The ED will maintain a calm, even, normal speaking volume. The voice tone of the ED shall be caring, avoiding yelling and any display of anger or contempt. The rate of the ED's speech will ensure effective communication with the caller.
- c. Whenever possible, the ED will give clear, brief explanations as to what he/she is doing and why. The ED will check understanding of the caller periodically.
- d. The ED will avoid unnecessary gaps by telling the caller what s/he is doing and what is going to happen next. The ED may use phrases such as "Just a moment while I update that information you gave me into the call" to fill gaps. The ED will continually reassure callers that he/she is there to help.
- e. The ED will, when required use 'POSITIVE AMBIGUITY' (promise only what you can deliver). The ED shall not mislead the caller, even if motivated by kindness. The ED shall not make promises or create unrealistic expectations for the caller.
- f. The ED will never make any statements that foster or create feelings of helplessness, guilt or panic.
- g. The ED will never threaten a caller in any way or engage in any discriminatory, derogatory or demeaning behavior toward the callers, through language, attitude, or voice intonation.
- h. The ED will use 'REPETITIVE PERSISTENCE' for those callers that are not calmed by using the above caller management techniques. 'Repetitive Persistence' includes the following:
 - i. Requesting an action, followed by a reason for complying with the action.
 - ii. Repeat this, using exactly the same phrasing and tone of voice until the caller listens and cooperates.
 - iii. The ED will whenever possible, obtain and use a caller's first name or title (Jane, Bill, Mr. Jones, Mrs. Stevens, etc.).
- i. The ED will give callers firm but gentle encouragement when providing instructions.
- j. When the caller is unable to answer questions after the ED makes multiple attempts to employ caller management techniques, the ED will calmly ask the caller if he/she can speak to someone else.

IV. Caller Management — Third Party Callers

- a. The ED must assume that third party callers have valuable information even if they say they know nothing.
- b. The ED will always attempt to ask all Case Entry and Key Questions of third-party callers when possible.
- c. Once the ED has made several attempts to gather information without success, the call may be terminated once it has been determined that the caller has no further information **and** cannot or will not get close to the incident.
- d. In cases where callers indicate they received a call from someone reporting an emergency who is not with the caller, the ED will attempt to obtain a callback number for the location of the incident to attempt to call back for better information, e.g. family member calling for another family member; security calling in an incident in a warehouse.

CERTIFICATION OF EMERGENCY DISPATCH

	Adopted	Amended	Approved by

POLICY

Staff employed in the position of Emergency Telecommunicator are required to receive initial certification as an Emergency Dispatcher (ED) for all Priority Dispatch System Protocols used by and must maintain this/these qualification(s) through the re-certification process.

PURPOSE

To inform all Emergency Dispatchers of the requirements for certification and re-certification in PDS Protocols.

PROCEDURE

I. Emergency Dispatcher Certification

- a. All personnel employed in the position of Emergency Telecommunicator are required to be certified as an Emergency Dispatcher (ED) through the International Academies of Emergency Dispatch (IAED) in the PDS discipline(s) utilized in their work environment
- b. Training and retraining opportunities will be provided to facilitate obtaining and maintaining this certification
- c. In the event the employee does not pass the initial certification exam, s/he will be provided with supportive training based on feedback received from the IAED
- d. Any employee who does not pass the certification exam will be required to follow the current IAED retest process

II. Recertification

- a. Emergency Telecommunicators are required to maintain current ED certification(s). This requires the completion of Continuing Dispatch Education (CDEs) requirements as prescribed by the IAED and successfully passing the IAED Recertification Exam(s) prior to certification expiration
- b. Opportunities for completion of the Continuing Dispatch Education requirement will be provided
- c. Designated personnel will maintain CDE records and a record of ED certification status
- d. Details of CDE requirements are contained in a separate policy

III. Certification Expiration, Revocation or Suspension

- a. In the event the IAED ED certification expires or becomes void due to suspension or revocation, the employee will not process emergency calls via the PDS protocols until their certification status is resolved

CONTINUING DISPATCH EDUCATION PROCESS, ROLES AND RESPONSIBILITIES

	Adopted	Amended	Approved by

POLICY

The Continuing Dispatch Education (CDE) process shall follow a standardized procedure as detailed below to meet the needs of the center and as required by the International Academies of Emergency Dispatch (IAED) to meet Priority Dispatch System (PDS) re-certification standards.

PURPOSE

To provide all dispatch personnel with ongoing education to enhance knowledge, skills and abilities within the center as well as for the use of the PDS. Such Continuing Dispatch Education processes shall be sufficient to meet the requirements of the IAED for re-certification.

PROCEDURE

I. CDE Program Objectives

- a. Development of a better understanding of telecommunications and of the Emergency Dispatcher's (ED's) specific roles and responsibilities
- b. Improving skills in the use or application of all component parts of the protocol, including interrogation and prioritization
- c. Providing opportunities for discussion practice of skills and constructive feedback of performance

II. CDE Program Management

- a. The Dispatch Review Committee (DRC) shall be responsible for defining the topics that the CDE program will address
- b. The Training/QAU Coordinator shall be responsible for scheduling educational opportunities as necessary to address identified needs
- c. Appropriate CDE topics may be identified in a number of ways:
 - i. Required state or local training
 - ii. As a result of the DRC's recommendations
 - iii. Based on the findings of the Quality Assurance Unit (QAU)
 - iv. Via direct requests for further action by the QAU

v. Via requests from EDs

- d. The Training/QAU Coordinator shall be responsible for ensuring that necessary educational opportunities are:
 - i. Delivered by qualified personnel (as defined by the DRC)
 - ii. Indicative of the learning needs of the EDs and relevant to their associated work
 - iii. Attended by all EDs
- e. The Training/QAU Coordinator shall be responsible for maintaining appropriate records regarding the CDE program
 - i. CDE Lesson Plan including:
 - 1. Title
 - 2. Presenter name and title
 - 3. Date(s) and time(s)
 - 4. Number of CDE hours
 - 5. Materials to be used
 - 6. Objective
 - 7. Content summary
 - ii. Attendance records
 - 1. Copy for agency file
 - 2. Copy to individual ED's training file
 - iii. Employee CDE status and expiration date tracking
 - 1. Quarterly status updates to EDs regarding CDE progress towards meeting requirements
 - 2. Reminders to EDs at least 3 months before expiration of specific certification

III. Meeting Re-Certification Requirements

- a. EDs are ultimately responsible for ensuring they attend sufficient educational opportunities to meet any state /local or IAED re-certification requirements. They must alert their Supervisor of any likely challenges in complying with this requirement
- b. The IAED minimum CDE requirement per 2 year certification period is based on the number of PDS protocols the ED is certified to use
- c. Refer to the current IAED re-certification requirements at www.emergencydispatch.org/Recertification

IV. Types Of Cde

- a. The following are acceptable forms of CDE
 - 1. Workshops and seminars
 - 2. Attendance at planning and management meetings
 - 3. Quality assurance and case review

4. Review of dispatch related audio, video and written materials
 5. Providing public education
 6. Protocol review
 7. Miscellaneous, such as ride-a-longs and work experience
- b. Other related CDE sessions will be submitted to the IAED for consideration of its educational relevance based on its relationship to the science of Emergency Dispatch and the use of the protocols.

PRIORITY DISPATCH PROTOCOL COMPLIANCE, PERFORMANCE MANAGEMENT AND REMEDIATION

	Adopted	Amended	Approved by

Purpose:

The intent of this policy is to ensure our communication center complies with the intent and objectives of the Priority Dispatch System (PDS) protocols. The agency and individual emergency dispatchers are required to meet minimum performance requirements as detailed below. Remedial training and education will be provided for Emergency Dispatchers that are at or below the Performance Improvement Threshold.

Intent:

To provide clear emergency dispatcher performance requirements and identify areas for remedial training.

PROCEDURE:

I. Case Review

- a. Cases are imported to AQUA using random import at the required number per week according to the ACE calculator for purposes of performance management. Focused review or special cases may be imported and reviewed but do not count toward performance management for accreditation purposes. These are used to coach and evaluate specific types of cases such as cardiac arrests that have not already been randomly reviewed. All employees are subject to random review.

II. Agency Compliance

- a. On a monthly basis, the communications center will strive to remain at or below the agency threshold for Accreditation level performance.

	ACE			
High Compliance		The individual dispatcher is NOT held to the benchmarks in this table, these are agency expectations and goals. The actual requirements for performance are based on comparison to all dispatchers within the agency through a "Threshold Report" in AQUA, see section II below.		
Compliant				
Partial Compliance	10%			
Low Compliance	10%			
Non-Compliant	7%			
Percentage of Deviation Accepted	Critical Deviation	Major Deviation	Moderate Deviation	Minor Deviation
Total Accreditation Acceptance	3%	3%	3%	3%

III. Individual Compliance

- a. Individual Emergency Dispatcher performance will be evaluated quarterly as calculated by the

Performance Threshold report available in AQUA. Each Emergency Dispatcher is expected to maintain individual performance at or above the Agency Cumulative Performance value. Emergency Dispatchers will be provided regular feedback on all reviewed cases.

- b. Any Emergency Dispatcher that falls at or below the "Performance Improvement Plan Threshold" as calculated by the Performance Threshold report available in AQUA, will be placed on a one-month Performance Improvement Plan (PIP). A PIP is supportive and educational. The goal of this process is to provide constructive feedback and training in a positive environment that encourages high performance. The individual's supervisor or a qualified trainer shall handle all remedial training.

The Performance Improvement Plan will include:

1. Specific performance issues to be addressed
 2. A clear explanation of expectations related to the performance issues
 3. A means to ensure that the employee understands the expectations
 4. Educational methods to be employed (texts, videos, podcasts, multimedia, one-on-one training, lecture/classroom training, self-directed research, etc.)
 5. Specific content to be covered
 6. A means to measure progress (improvement)
 7. Benchmarks for performance improvement
 8. A time frame for reaching benchmarks
 9. Consequences if the performance is not corrected
 10. Signatures of both the calltaker and her/his supervisor
- c. A Performance Improvement Plan is complete when all stated performance goals are reached. If the Emergency Dispatcher does not meet the minimum performance within the specified time frame, a new Performance Improvement Plan will be issued, and the remediation extended. The new PIP will contain any unmet criteria, as well as more focused and/or new educational strategies to be employed to assist the Emergency Dispatcher to be successful in demonstrating the required performance
 - d. The individual's supervisor may refer an ED for progressive discipline when compliance continues to fall below standard when remedial training has failed to show measurable sustained improvement
 - e. Progressive Discipline shall be handled according to agency policy

IV. Trigger Points for Additional Review and Action Plan

- a. An ED may be subject to progressive disciplinary action after sufficient remedial training and performance improvement interventions have not yielded desired results. Progressive disciplinary action may result from any of the following:
 - i. 3 consecutive quarters with performance at or below the Individual Performance Threshold
 - ii. Abandonment; (not providing life-saving instructions when warranted)
 - iii. Negligence; (providing instructions "that are not in the protocols" or does not enhance the protocol script as written; that harms or may harm the patient/subject)
 - iv. Actions detrimental to the safety of citizens, victims, callers, and patients
 - v. Prohibited behaviors as defined in IAED ED-Q Standards and agency policy

MAINTAINING CURRENT PRIORITY DISPATCH SYSTEM STANDARDS

	Adopted	Amended	Approved by

POLICY

Agency will utilize the most current Emergency Dispatch practices by implementing the latest version of the Priority Dispatch System (PDS) and Emergency Dispatch Quality Improvement (EDQ) performance standards within one year of its official release by the International Academies of Emergency Dispatch (IAED). Agency will provide all of its certified Emergency Dispatchers (EDs) with the necessary training to use the latest version of the PDS.

PURPOSE

To provide all EDs the latest version of the PDS protocols and necessary training in order to keep up-to-date with the most recent standards in emergency dispatching. As new research and technologies become available in emergency dispatching, EDs will require training, protocol and practice to deliver the best possible service to the community.

PROCEDURE

- I. The IAED will notify Agency when a new release of the PDS or EDQ Performance Standards are available for use.
 - a. Agency will:
 - i. Acquire the updated PDS protocols for all ED call-taking positions, and the EDQ Performance Standards for the Quality Assurance Unit (QAU)
 - ii. Schedule a transition date for use of the updated version once approved by the Dispatch Steering Committee (DSC)
 - b. Members of the following groups will be provided training and/or information on the updated version of the PDS
 - i. DSC
 - ii. Dispatch Review Committee (DRC)
 - iii. All EDs based on discipline being updated (Medical, Fire, or Police)
 - iv. All EDQ reviewers
 - v. All Field Responders
 - c. Members of the following groups will be provided training and/or information on the updated version of the EDQ Performance Standards
 - i. DSC
 - ii. DRC
 - iii. All EDQ reviewers
 - d. The DSC will evaluate and approve the use of all new versions of the PDS and EDQ Performance Standards.