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Standard Practice for Emergency Medical Dispatch Management[1]

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INTRODUCTION

The emergency medical dispatcher (EMD) is the principal link between the public caller requesting emergency medical assistance and the emergency medical service (EMS) resource delivery system. As such, the EMD plays a fundamental role in the ability of the EMS system to respond to a perceived medical emergency. With proper training, program administration, supervision, and medical direction, the EMD can accurately query the caller, select an appropriate method of response, provide pertinent information to responders, and give appropriate aid and direction for patients through the caller. Through careful application and reference to a written, medically approved emergency medical dispatch protocol, sound decisions concerning EMS responses can be made in a safe, reproducible, and non-arbitrary manner. These benefits are realized by EMS systems when appropriate implementation, sound medical management, and quality assurance/quality improvement (QA/QI) at dispatch are provided within the EMD/EMS system. This practice assists in establishing these management and administrative standards.

1. Scope

1.1 This practice covers the function of the emergency medical dispatcher (EMD). This function is the prompt and accurate processing of calls for emergency medical assistance. The training and practice through the use of a written or automated medical dispatch protocol is not sufficient in itself to ensure continued medically correct functioning of the EMD. Their dispatch-specific medical training and focal role in EMS has developed to such a complexity that only through a correctly structured and appropriately managed quality assurance environment can the benefits of their practice be fully realized. The philosophies of emergency medical dispatch have established new duties to which the emergency medical dispatch agency must respond. It is important that their quality assurance/quality improvement (QA/QI) activities, including initial hiring, orientation, training and certification, continuing dispatch education, recertification, and performance evaluation be given appropriate managerial attention to help ensure the ongoing safety in the performance of the EMD. This practice establishes functional guidelines for these managerial, administrative, and supervisory functions.

1.2 The scope of this practice includes:

1.2.1 The entry level selection criteria for hiring emergency medical dispatchers;

1.2.2 The orientation of new emergency medical dispatchers;

1.2.3 Development of QA/QI mechanisms, management strategies, and organizational structures for use within a comprehensive emergency medical dispatch system;

1.2.4 Performance evaluation as a component of a comprehensive and ongoing quality assurance and risk management program for an emergency medical dispatch system;

1.2.5 Development and provision of continuing dispatch education activities for the emergency medical dispatcher;

1.2.6 Requirements for initial certification and recertification of the emergency medical dispatcher;

1.2.7 Provision for comparative analysis between different EMD program approaches available to the EMS community that conform to established EMD practice standards prior to implementation of an emergency medical dispatch program; and

1.2.8 Guidelines for implementation of an emergency medical dispatch program.

1.3 *This standard does not purport to address all of the safety concerns, if any, associated with its use. It is the responsibility of the user of this standard to establish appropriate safety, health, and environmental practices and determine the applicability of regulatory limitations prior to use.*

1.4 *This international standard was developed in accordance with internationally recognized principles on standardization established in the Decision on Principles for the*

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Development of International Standards, Guides and Recommendations issued by the World Trade Organization Technical Barriers to Trade (TBT) Committee.

2. Referenced Documents

2.1 *ASTM Standards:*[2]

F1258 Practice for Emergency Medical Dispatch

F1552 Practice for Training Instructor Qualification and Certification Eligibility of Emergency Medical Dispatchers

3. Terminology

3.1 *Definitions of Terms Specific to This Standard:*

3.1.1 *case review template, n*—a structured performance evaluation document containing all necessary input and output actions required of dispatchers that parallels the EMDs' on-line protocols, policies, and procedures related to call-taking and processing. It contains check-off lists and compliance scoring mechanisms that objectively rate the EMDs' performance on a single call.

3.1.2 *dispatch life support, n*—the knowledge, procedures, and skills used by trained EMDs in providing care through pre-arrival instructions to callers. It consists of those BLS and ALS principles that are appropriate to application by medical dispatchers.

3.1.3 *emergency medical dispatch agency, n*—any organization or a combination of organizations working cooperatively, that routinely accepts calls for emergency medical assistance and facilitates the dispatch of prehospital emergency medical resources/personnel and provides medically oriented pre-arrival instructions pursuant to such requests.

3.1.4 *performance evaluation, n*—the documented, objective, quantitative measure of an individual emergency medical dispatcher's performance based upon compliance with departmental protocols, policies, and procedures.

3.1.5 *pre-arrival instructions, n*—telephone-rendered, medically approved written instructions provided by trained EMDs through callers which help to provide aid to the victim and control of the situation prior to arrival of prehospital personnel.

3.1.6 *quality assurance/quality improvement (QA/QI), n*—the comprehensive program of prospectively setting standards; concurrently monitoring the performance of clinical, operational, and personnel components; and retrospectively improving these components in the emergency medical dispatch agency when compared with these standards.

3.1.7 *risk management, n*—a sub-component of the quality assurance/quality improvement program designed to: identify problematic situations and assist EMS medical directors, dispatch supervisors, and EMDs in modifying practice behaviors found to be deficient by quality assurance procedures; protect the public against incompetent practitioners; and modify structural, resource, and protocol deficiencies that may exist in the emergency medical dispatch system.

4. Summary of Practice

4.1 A comprehensive plan for managing the quality of care in an emergency medical dispatch system must include careful planning; EMD program selection; proper system implementation; employee selection, training, and certification; QA/QI; performance evaluation; continuing dispatch education; recertification; and risk management activities. These functions must be designed and implemented to assist the medical director, dispatch supervisor, and emergency medical dispatcher in monitoring and modifying EMD performance found deficient by QA/QI to protect the public against incompetent practitioners, as well as modify organizational structure, resource, or protocol deficiencies that exist in the emergency medical dispatch system.

4.1.1 *Entry Level Selection*—The selection and evaluation of new dispatchers must include clearly written objective standards to be adopted for qualifying candidates, interviewing applicants, and pre-employment aptitude and skill testing pursuant to the hiring of dispatchers.

4.1.2 *Orientation*—A pre-planned process of events focusing on the development and acclimation of an employee who will function within the organization's standards, practices, policies, and procedures.

4.1.3 *Quality Assurance/Quality Improvement*—Within a physician medically directed emergency medical dispatch system, the development and implementation of employee performance thresholds, concurrent evaluation of compliance to these thresholds through on-line supervision, retrospective evaluation of non-edited logged recordings of requests for emergency service measuring compliance with policy, practice, and procedure to validate that the practices are appropriate, and to correct the employee and practice if they are found to be deficient.

4.1.4 *Performance Evaluation*—Each EMD in an emergency medical dispatch agency must regularly and routinely be evaluated with respect to his or her adherence to policy, protocol, and procedure through the QA/QI process. This determines conformance to these elements and measures how this performance affects the efficiency and effectiveness of the emergency medical dispatch agency. The evaluation must be quantitative and qualitative.

4.1.5 *Continuing Education*—Each emergency medical dispatch agency must provide for the development and implementation of a continuing dispatch education program for the benefit of that agency's EMD personnel. This program must provide the EMD with applicable educational topics designed to enhance their general knowledge and skill in the philosophy and application of the EMD program used within the emergency medical dispatch agency.

4.1.6 *Risk Management*—A written practice and procedure shall be established for each agency that provides guidelines for physician medical directors, EMS system administrators, agency supervisors, and/or QA/QI personnel to follow when an EMD is identified as failing to meet or follow established protocols. These may be acts of omission or commission

[2] For referenced ASTM standards, visit the ASTM website, www.astm.org, or contact ASTM Customer Service at service@astm.org. For *Annual Book of ASTM Standards* volume information, refer to the standard's Document Summary page on the ASTM website.