



## EMD QUALITY ASSURANCE POLICY

APPROVED:  EMS Medical Director  
 EMS Administrator

The Quality Assurance process shall follow a standardized procedure as detailed below, and as required by the San Mateo County Public Safety Communications Center, the San Mateo County EMS Agency, as well as the National Academy of Emergency Dispatch (NAED), to meet accreditation standards.

To provide all dispatch personnel with the necessary understanding and skills to demonstrate the efficient and effective provision of Quality Assurance for the Medical Priority Dispatch System (MPDS). Such Quality Assurance processes shall be sufficient to meet the requirements of the NAED, as well as our Communications Center standards and policy, and San Mateo County EMS Agency requirements.

### 1. QUALITY ASSURANCE CASE REVIEW

- 1.1 A random sampling of 3% of all EMS calls, or 100 calls per month, whichever is greater, shall be reviewed monthly by the Public Safety Communications Quality Assurance Unit (QAU) to assure compliance to the MPDS protocol at acceptable preset levels, as defined within NAED accreditation standards. Reviews will be accomplished by reviewing the audio tape and CAD document for each call.
- 1.2 An approximately equal number of EMD calls shall be reviewed for each individual EMD dispatcher.
- 1.3 The total level of compliance required to meet NAED accreditation standards is 90% or greater for each individual dispatcher per month.

### 2. CASE REVIEW FEEDBACK PROCESS

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- 2.1 All employees shall participate in the QA process by reviewing randomly selected calls with the QAU, and discuss areas of strengths and opportunities for improvements or adjustments. These reviews will occur periodically throughout the month.
- 2.2 The completed Case Evaluation Record packet will include all reviewed calls for the month, and shall be distributed to the Shift Supervisor for review by the QAU each month. This will typically be distributed at the beginning of the month for the previous months' calls. The Shift Supervisor will distribute the packet to the employee and the Supervisor and the EMD may both add comments to the form, and both MUST sign the form.
- 2.3 When appropriate as defined on the EMD Compliance Policy, The Shift Supervisor and the EMS Program Manager may develop an intervention plan, action plan or remediation plan based on monthly total EMD Compliance scores that fall below 90%. A timeline for completion of the plan MUST be documented with clear detail on expectations and planned education and training. The EMD will also be able to add ideas to the plan if appropriate.
- 2.4 In the case of Exemplary Performance, if it will be beneficial to share details of a case or exemplary dispatcher actions with their colleagues, customers, training unit or the public, the EMD and Shift Supervisor shall be advised prior to any release.
- 2.5 Shift Supervisors may use the Case Evaluation Record packet to request further Q.A.U. follow-up or action if required. Examples of Q.A.U. action include requests for a particular Continuing Dispatch education topic to be covered if a trend is detected, a letter of commendation to be submitted, or that an operations issue or question be raised at the Medical Dispatch Review Committee or Quality Leadership Council level.
- 2.6 Completed Case Evaluation Record packets must be returned to the Q.A. Unit within 10 days of receipt by the Shift Supervisor.
- 2.7 A copy of the completed Case Evaluation Record packets will be kept by the Q.A. Unit in the dispatchers' Q.A. file. All EMD's have access to their QAU file at any time.

### 3. Q.A. DATABASE/INDIVIDUAL EMD COMPLIANCE REPORTS

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- 3.1 All reports on EMD Compliance produced by the QAU are confidential. Management personnel are the only ones who can review Compliance reports. Monthly reports will be distributed by the QAU to Shift Supervisors and the EMS Program Manager. Monthly Reports include:
    - 3.1.1 Individual Compliance
    - 3.1.2 Shift Compliance
    - 3.1.3 Communications Center Compliance
    - 3.1.4 QI Summary Report by Protocol
    - 3.1.5 Determinant Drift Report
    - 3.1.6 Protocol Compliance Summary
    - 3.1.7 Operator Comparative History
  - 3.2 Non-Compliance performance Report: Intervention, Action or Remediation Plans may be created for low performance/compliance, defined as below 90% compliance rate. A deadline for completion of the action plan MUST be given. Both the Shift Supervisor and the EMD may add their comments to this monthly report form and all involved MUST sign it.
  - 3.3 Other monthly reports may be published as well. Monthly reports may also be submitted to agencies such as the EMS Agency, the Pre-Hospital Care Committee (JPA), and the MDRC, QLC and others. All attempts will be made to keep the employee names confidential unless absolutely unavoidable.
  - 3.4 100% Compliance Board: This is a system intended to recognize a high level of performance monthly. Other excellent performance may be recognized, such as excellent customer service, excellent pre-arrival instructions, or an EMD Save. This acknowledgement could include center recognition, customer recognition, or any other method to acknowledge a job well done.
4. EMD FIELD FEEDBACK REPORTS
- 4.1 EMD Field Feedback Report forms will be made available to all field personnel who respond to EMS calls. They will be utilized to provide feedback from the field to dispatch in the event of exemplary dispatcher performance or if a case proves problematic. These forms are available via PSCD website, and hard copy forms. These can be submitted via US Mail, website, or confidential FAX.
  - 4.2 Submitted EMD Field Feedback Reports will be forwarded directly to the QAU. These forms will NOT be passed via non-confidential channels.

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- 4.3 Upon receipt of the completed EMD Field Feedback Report, the QAU will review the tape of the call and provide analysis of the finding and disposition on the review. Contact and discussion with the EMD may or may not be necessary dependant on the findings and disposition. If contact is necessary the QAU will meet and discuss the call with the employees.
- 4.4 A reply to the initiator of the query or feedback will be provided within 14 days of the receipt of the form by the QAU. The completed processed EMD Field Feedback Report will be returned to the initiator via appropriate confidential channels and the EMS Program Manager will make every attempt to make personal contact with the initiator for immediate feedback.
- 4.5 Copies of this completed form will be kept by the Q.A. Unit on the PSCD Field Feedback File.
- 4.6 Copies of this completed form will be distributed by the EMS Program Manager to the MDRC.
- 4.7 EMD Field Feedback Reports MUST be completed in a professional manner. Forms containing aggressive or abusive language will be returned to the initiator for resubmission without follow-up. A copy of such forms will be forwarded by the QAU to the EMS Program Manager.

## 5. CONTINUING DISPATCH EDUCATION

- 5.1 All EMD dispatchers are required to attend at least 36 hours of Continuing Dispatch Education (combined requirement for EMD/EFD dispatchers) activities every two years for recertification.
- 5.2 All CDE's shall be locally approved, and meet the NAED recertification requirements.
  - 5.2.1 -NAED Journal CDE: Maximum = 8 credit hours (4 per year)
  - 5.2.2 -Workshops and Seminars: Maximum = 16 credit hours (8 per year)
  - 5.2.3 -Multimedia educational products: Maximum = 16 credit hours (8 per year)
  - 5.2.4 -Quality Assurance Case Review: Maximum = 8 credit hours (4 per year)
  - 5.2.5 -Local Planning/Management Meetings: Maximum = 8 credit hours (4 per year)

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- 5.2.6 -Teaching: Maximum = 4 credit hours (2 per year)
  - 5.2.7 -Protocol Review: Maximum = 4 credit hours total
  - 5.2.8 -Miscellaneous (ridealongs, work experience) Maximum = 4 credit hours total
- 5.3 Attendance will be documented as well as a summary of topic and materials presented; this information will be kept in the dispatchers Q.A. File and Training File.

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