



Allegany County Emergency Services Board Policies and Standards

Subject: Alert & Response Policy

Approved:

Approved: W. Shaw Ah, Emergency Services Board Chair

1. Purpose

- a. It is essential to provide prompt and efficient response to the citizens of Allegany County. As such, it is necessary to develop a policy to ensure that Emergency Services is responding to each request for help in a timely manner. This policy outlines the steps which have been developed and adopted to achieve the goal of having a staffed units responding calls to include routine Basic Life Support (BLS) calls within 7 minutes and Critical Advance Life Support (ALS) calls within 3 minutes.
- b. ALS is an essential part of pre-hospital medical care. It is important that every patient requiring ALS care receives it. However, the need for ALS care should never result in the delay of transporting a patient to the closest appropriate hospital when a BLS unit provides the initial response. It should be noted that transporting a patient "without delay" assumes the field provider has access to the patient and understands that issues such as, remote location, stairs, and extrication will extend on scene times.

Each individual Company will be solely responsible to establish a response index for their first due area. The box cards shall be in accordance with county, state, and medical direction protocol.

2. IamResponding

IamResponding system provides the ability to let Fire-Rescue, EMS Companies and the 911 Joint Communications Center know immediately who is responding to incidents, where they are responding, and approximately when they are arriving. This can save critical time, and reduces response times, for Fire-Rescue and EMS Companies responding to emergencies. It is imperative that first responders log in when available to help expedite the dispatch process.

3. Alerting for Alpha, Bravo & Omega BLS calls as determined by EMD

The 911 Joint Communications Center (radio call sign "Allegany" will perform the following alerting procedures:

- a. When an emergency medical service (EMS) related call is received, Allegany will dispatch the first due company for an ambulance. If after seven minutes for BLS calls, there is no response, additional units will be dispatched as per the chart on page 4.
- b. On the initial dispatch BLS (Alpha & Bravo) calls and when the first due ambulance is not available or does not respond, Fire-Rescue First Responders from that box area will also be dispatched. If the Fire-Rescue First Responders fail to respond it is at the discretion of those on scene if additional First Responders are dispatched.
- c. If after seven minutes on BLS calls there is no Ambulance responding, the closest staffed Ambulance is dispatched. The chart on page 4 is used to determine what other units are dispatched.
- d. The dispatch script will always state if the call type is ALS or BLS.

4. Alerting for Charlie & Delta ALS calls as determined by EMD

The 911 Communications Center will perform the following alerting procedures:

- a. When an emergency medical service related call is received, Allegany will dispatch the first due ambulance for the call. If after three minutes there is no response from that ambulance, the closest staffed ambulance is dispatched. The chart on page 4 is used to determine what other units are dispatched.
- b. If after seven minutes the first due ambulance has not responded, the next due ambulance and Fire-Rescue First Responders are dispatched.

Allegany has the authority of altering under any circumstances to provide prompt care to the patient. (Example: using other returning ambulances near the call, chase cars or individual providers in the area of need, and / or who have contacted Allegany. Using EMD and call history, Allegany may divert an already responding unit to a higher priority call. In this case, Allegany will dispatch additional resources based on the original call and available resources.

5. Alerting for Echo and ALS HOT calls as determined by EMD

The following types of "Hot" or serious calls will automatically have ALS dispatched on the initial alert:

- a. Unconscious / Unresponsive
- b. Cardiac or Respiratory Arrest
- c. Severe Trauma involving multi-systems
- d. Falls Greater than 3 feet
- e. Motor Vehicle Crash with rollover, entrapment, pedestrian struck, involving UTV, ATV, or motorcycle
- f. Mass Casualty Incident (MCI)

- g. Burns of second or third degree
- h. Smoke or Carbon Monoxide poisoning
- i. Crushing injuries
- j. Other calls where the information received by Allegany indicates a pending life or death situation.

The 911 Joint Communications Center will always alert the first due company first for an ALS Ambulance along with Fire-Rescue First Responders for the box area of the call. In the event a first due ambulance is not ALS, Allegany will alert the next due ALS Ambulance and follow the chart on page 4 to dispatch additional units.

Allegany will have the discretion of dispatching additional units under special circumstances to provide prompt care to the patient. (Example: using other returning ALS Ambulances, chase cars or individual ALS providers in the area of need who have contacted Allegany)

ALS (Charlie & Delta) Dispatch	
Initial	# First Due ALS Ambulance
3 Minutes	Closest Staffed ALS Ambulance
7 Minutes	# Next Due ALS Ambulance
7 Minutes	Fire-Rescue 1 st Responders

ALS -HOT (Echo) Dispatch	
Initial	# First Due ALS Ambulance
	Fire-Rescue 1 st Responders *
3 Minutes	Closest Staffed ALS Ambulance
	Next Due ALS Ambulance

BLS (Alpha & Bravo) Dispatch	
Initial	First Due Ambulance
7 Minutes	Next Due Ambulance
7 Minutes	Closest Staffed Ambulance
7 Minutes	Fire-Rescue 1 st Responders

Fire-Rescue Dispatch	
Initial	First Due Fire-Rescue
7 Minutes	Response Check
	Next Due Fire-Rescue

= If a BLS Ambulance responds in place of an ALS Ambulance, next due ALS Ambulance is Dispatched.

***Fire-Rescue First Responders are not dispatched to medical facilities with nursing staff present unless specifically requested by the

facility or responding EMS unit.***

****Fire-Rescue First Responders will be dispatched on all EMS calls when the primary Ambulance is already on a call.

6. Request for an ALS on BLS Dispatched Calls

A BLS crew must contact Allegany as soon as possible to request an ALS Intercept. ALS Intercepts can be requested when:

- a. The initial response did not include an ALS response and the responding crew feels that the skills provided by an ALS provider will be needed;
- b. After assessing the patient(s) the BLS crew determines the patient would benefit from skills provided by an ALS provider; or
- c. While enroute to the hospital the patient condition changes and the patient would benefit from skills provided ALS.
- d. The BLS crew will package and begin patient transport ensuring not to delay transport of the patient to the closest appropriate hospital. ALS Intercepts will occur en route to the hospital if the ALS unit does not arrive on scene before the BLS ambulance is ready to transport the patient.

7. Responding Units

- a. An ambulance **will not** respond unless one of the following applies:
 - 1) The ambulance is staffed with an EMT or above and a qualified driver. (This is the preferred method); or
 - 2) The ambulance responds with one of the crew members listed in item 1 above and will pick up the other crew member along the direct route to the call; or
 - 3) The ambulance is responding with one crew member trained at minimum EMT level with absolute knowledge that the second crew member is on the scene of the incident or will arrive at the same time or before the ambulance arrives.
 - 4) When a chase unit or ambulance is responding, they **must identify if they are ALS or BLS**. If they do not, Allegany must query them for their staffing.
- b. Units responding on emergency calls will utilize their emergency lighting and audible devices.

8. Delayed and Failed Responses

- a. If after the mutual aid fill unit is Dispatched "D", and the first due company unit with minimal staffing is not responding, the first due company unit is marked as a Late Response "LR".
- b. If after the mutual aid fill unit Arrives "A" on scene, and the first due company unit with minimal staffing has not Responded "EN", they will be marked as a Failed Response "FR".
- c. If a unit does not Arrive "A" with the minimal staffing, they will be marked a Failed Response "FR".
- d. For those Companies having a response failure of 25% or greater for three months in a row will be dual alerted. For those Companies having EMS and Fire, the dual alerting will be based on just EMS or Fire failures. In order to go back to normal alerting, the company must go three months in a row below 25%.

9. Re-alerting a Failed Company

When a company (unit) has a Failed Response "FR" to a call, they will automatically be dual alerted with the next due mutual aid company for all dispatches within the thirty (30) minute period following the previous Failed Response (FR). This time will start once mutual aid has cleared the scene returning to station or enroute to the hospital.

10. Request for an Ambulance or ALS Assist by Outside Jurisdictions

Outside jurisdictions or ambulances not dispatched by the Allegany County 911 Joint Communications Center who are requesting an ambulance or ALS Intercept, will not be permitted to make a specific unit or company request. Alerting for an ambulance or ALS provider will be performed in order of the closest BLS / ALS Unit to the requested location as per the 911 Joint Communication Center and the boundary and box alarm assignments on file.

11. ALS Intercept

- a. When an ALS Intercept occurs, the transfer of ALS equipment, if necessary, should be brief and transport resumed as quickly as possible. At no time is an exchange of patients to occur unless the transport is of special needs. The use of Interstate entrance and exit ramps is permitted if it will not cause much delay. ALS assessments and interventions will be performed en route to the hospital.
- b. ***Rendezvous with an ALS unit within 5 minutes of the hospital should not occur.*** Rarely will the patient benefit from ALS care in the field this close

to a hospital. Once the BLS ambulance has determined that the ALS intercept cannot occur outside of the five minute time frame they are to notify the 911 Communications Center of such so the ALS response unit can be cancelled.

12. Equipment and Staffing of First Responder Units

- a. Fire and EMS Units responding as First Responder Units to EMS Assist Incidents must provide their staffing. I.E. 1 EMT onboard, or 2 EMRs onboard, and or no medical personnel onboard.
- b. All responders are considered to be CPR trained and can be used for CPR and lift assists.
- c. Fire and EMS Units responding as First Responder Units to EMS Assist Incidents must be equipped with the EMS equipment listed in that particular apparatus standards. I.E. if an apparatus is responding on EMS Assists the EMS equipment is not optional.

13. Release of Provider

- a. BLS staffed ambulances can only be cancelled by a fully staffed Basic Life Support ambulance which is on the scene.
- b. The only exception to this is when a Fire-Rescue First Response Unit staffed with at least one EMT arrives on the scene. If after assessing the patient, the BLS provider feels that the ambulance is not needed, then the BLS provider can cancel the responding unit(s) en route to the scene. That BLS provider will be responsible for documenting the event in the Maryland Elite system.
- c. ALS staffed ambulances, chase cars, etc. cannot be cancelled until a Basic Life Support ambulance or Fire-Rescue First Response Unit staffed with at least one EMT arrives on the scene. If after assessing the patient, the BLS crew feels that ALS care is not needed, then the BLS provider can cancel the ALS responding unit en route to the scene.
- d. If the ALS unit arrives on the scene prior to transport and after assessing the patient determines ALS care is not required, the ALS provider may turn care over to the BLS provider(s) if the BLS provider feels he/she is capable of providing care for the patient. *Refer to Maryland Protocol.*

14. Scene Safety

The operational setting continues to evolve to a more dangerous and unknown environment. In many incidents, the determination that a scene is safe or unsafe is very difficult for a 911 Technician to establish with complete certainty. In those cases, it is the First Responder's responsibility to always be on guard and make

a decision using EMS protocol if the scene is safe to enter or to stage out. In those incidents where Allegany determines there is an active assault, or post active assault, weapons in the area, or an unknown situation that the dispatcher does not feel comfort with; Allegany will send an APAG to the companies dispatched on the call stating that the scene is not safe and to stage out. The Allegany will always announce over the radio during pre-arrival instructions if the scene is not safe.

15. Definitions

EMD:

Omega- BLS, non-emergent, EMS Service type calls

Alpha- BLS, non-emergency response (minor injury or illness)

Bravo- BLS emergency response (minor injury with potential to worsen)

Charlie- BLS emergency, ALS non-emergency (life-threatening potential)

Delta- BLS & ALS emergency (life-threatening)

Echo- BLS, ALS, nearest trained responder (FD, PD), all emergency (cardiac arrest, total airway obstruction, non-breathing)

Trained Personnel: A Maryland EMT, CRT-I, or Paramedic

Certified / Licensed: the provider is in possession of a valid certification or license issued by the Maryland Institute of Emergency Medical Services Systems to provide care to the level specified.

County / State Minimum Ambulance Manning Standard:

Ambulance: 1 certified EMT and a Driver

Medic: 1 licensed CRT-I and a Driver

Paramedic: 1 licensed Paramedic and a Driver

County Minimum ALS Chase Car Manning Standard:

1 Licensed CRT-I, or Paramedic

Staffed: a department will be considered staffed when minimum standard personnel for BLS and / or ALS is posted on "IamResponding" system and available to respond within three (3) minutes.

Under Staffed: An ambulance responding with personnel below the county / state staffing standard.

Fully Staffed: An ambulance responding with required personnel meeting the county / state staffing standard.

Fill-In: Personnel and ambulance dispatched to fill a shortage in the initial alarm assignment.

Task Force: an EMS Task Force will consist of Five (5) ambulances ALS or BLS unless a specific request is made, and (3) Rescue or Rescue-Engine.

CAD Response Codes:

D - Dispatched
EN - Enroute
A - Arriving on Scene
RS - Returning to Station
LR - Late Response
NR- No Response
RS - Returning
C - In Station
DE - Dispatched Enroute
SG - Staging
EH - Enroute to Hospital
AH- At Hospital
LH- Leaving Hospital
AP- At Patient
AR- Available Radio
EX- Exchanged
EXE- Exchanged Enroute