

**COVER PAGE**

**██████████ COUNTY**

**COLLABORATIVE EMS RESPONSE PLAN**

The EMS Agency's Authorized Representative's signature below indicates the agency's agreement with this plan; and acknowledges its intent to foster collaboration between participating EMS agencies in order to comply with PA EMS Act 37 and develop a sustainable EMS System for our Communities.

**Agency Name**

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**Authorized Signature of Participants**

**Date:**

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**Print Name and Title**

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**FINAL DRAFT – 11/19/15**

**COLLABORATIVE EMS RESPONSE PLAN FOR  
█ County EMS AGENCIES  
THAT ELECT TO PARTICIPATE**

**APPLICABILITY**

Development of this plan was initiated by the █ County Public Safety EMS Subcommittee to address the need for supportive EMS Operations.

All █ County EMS Agencies, including but not limited to quick response services, basic life support agencies, intermediate squads, BLS squads and advanced life support agencies, that are dispatched by a recognized public safety answering point, that choose to do so may elect to participate.

**SITUATION / PURPOSE**

On April 10, 2014, provisions of Pennsylvania’s EMS System Act (Act 37) took effect. Provisions of this Act require all █ County EMS Agencies to maintain 24 hours a day, 7 days a week staffing so as to be able to respond to a request for EMS assistance when dispatched.

Agencies unable to respond as expected when dispatched are in violation of Act 37 Requirements and subject to penalty.

Act 37 permits EMS Agencies to operate EMS Services less than 24 hours a day, 7 days a week in accordance with a County-level or broader EMS Response Plan, approved by the Department of Health (DOH).

Due to the desire to avoid delays in response, provide the expected service, and comply with Act 37 Requirements, the █ County Public Safety EMS Subcommittee has initiated development of a collaborative EMS Response Plan through which agencies can collectively support one another.

It is intended that the plan provide a structure for standardized operations, and the flexibility for various differently structured agencies to address specific administrative issues in order to form long-term relationships.

**SCOPE**

This plan is intended to apply when a participating EMS agency is unable to maintain 24/7 staffing in order to respond as expected when dispatched and said agency is able to provide prior notice of same to the PSAP and any assisting agency.

When notice of “Inability to respond” has not been provided prior to dispatch, each agency is expected to be able to respond per Act 37 requirements if dispatched.

All participating plan members acknowledge the intent to comply with appropriate provisions of Act 37, and to respond to requests for EMS assistance in accord with those requirements when dispatched as the next available service.

**Definitions:**

**1. EMS agency:** An entity that engages in the business or service of providing Emergency Medical Services to patients within this Commonwealth, by operating any of the following:

- (1) An ambulance.
- (2) An advanced life support squad vehicle.
- (3) A basic life support squad vehicle.
- (4) A quick response service.
- (5) A special operations EMS service.
  - (i) a tactical EMS service;
  - (ii) a wilderness EMS service;
  - (iii) a mass-gathering EMS service; and
  - (iv) an urban search and rescue EMS service.

**2. Participating EMS agency:** Any licensed EMS agency in █████ County who elects to participate in this county wide EMS plan.

**3. Cooperative Management Agreements (CMA):** Written agreement between agencies who wish to share resources, personnel, equipment, etc. These types of agreement would spell out, who transports, how billing is handled and how reimbursement will be distributed. As well as insurance, workman’s compensation, and any other matters between the agencies that would require such an agreement. CMAs do not take the place of this plan and are not a form of mutual aid agreement.

**4. Staffed Agency:** Any agency that has staff scheduled to meet the level(s) of licensure and has not reported their status as unavailable to the PSAP. To be considered a staffed agency there must be personnel available to respond to calls for service. They **do not** have to be staffed at the agency’s station. An agency who elects to be licensed at more than one level, i.e. a BLS service that is also licensed as QRS can report their ambulance as unavailable but report the QRS as available.

**PLAN CONCEPT**

This plan provides a structure under which participating agencies may elect to collaborate in order to mitigate any delay in response when an agency that is expected to respond is dispatched, but cannot due to lack of staffing per Act 37 Requirements.

EMS agencies that foresee the need to collaborate with other agencies to meet Act 37 staffing requirements and to continue to provide reliable EMS service can elect to participate and request assistance from one or more participating agencies.

Operations between collaborating members will be standardized per the plan, however; members have the flexibility to develop Cooperative Management Agreements (CMA) addressing administrative issues specific to the agencies involved. Cooperative Management Agreements may address utilization of personnel, EMS assets, compensation, liability risks or any other topics deemed relevant by the participating Agencies.

Being a participating EMS agency means agreeing to follow the Operational Policy when requesting or providing assistance within the scope of this plan.

The need for a previously authorized CMA is at the discretion of the parties. Agencies which require a CMA may elect not to cover another agency or municipality until said agreement is in place. (An example of this is: if service A wants to use an EMT from service B but has no CMA in place, service B could refuse to allow their EMT to answer the call. If service B is dispatched they would have an obligation to respond and treat/transport the patient)

### **OPERATIONAL POLICY**

It is intended that operations under the Plan is straight forward and simplified to avoid confusion.

#### **A. Operational Policy is as follows**

The PSAP shall dispatch the home service per normal protocol unless the home service has directed another agency to be dispatched in its place, and the covering agency to be dispatched in place of the home service verifies it will respond. It shall be the responsibility of the involved agencies to make such notification to the PSAP.

#### **B. Procedures**

1. A participating EMS agency will notify the PSAP when it is unable to respond, the times / dates, and the covering agency to be dispatched in its place. The EMS agency will also notify the covering agency.
2. The covering agency designated to provide the assistance will verify to the PSAP that it has accepted responsibility for initial dispatch in place of the home agency for the times / dates specified.
3. Whenever possible, agencies shall strive to provide notice a minimum of 12-hours prior to the dispatch change.
4. Participating EMS agencies who are licensed as QRS, as well as BLS, will advise the PSAP and covering agency the availability of QRS when the BLS ambulance is reported out of service. The participating EMS agency will also advise the availability of other services they are licensed for i.e. tactical EMS, intermediate ALS, mass gathering etc.

5. Participating EMS agencies will make every attempt to designate a covering agency based on current dispatch protocol to minimize the impact on the PSAP. The PSAP will have the discretion to dispatch the closest appropriate unit. (An example of this would be: Sending a staffed BLS service for an alpha, BLS priority 2 response rather than sending a closer ALS service and tying up that resource) Each time the PSAP dispatches an agency, other than the designated covering service, the █████ County 911 center will perform a Q.I. review of the incident to insure the appropriate resource was dispatched.
  6. Dispatching will be managed by the PSAP center.
  7. When the home agency is able to resume primary coverage per the requirements of Act 37, said agency shall notify the PSAP and assisting covering agency. The assisting covering agency shall confirm and normal dispatch protocol will resume.
  8. Participating QRS Agencies shall follow the same procedures except that no covering agency may be designated for a QRS agency that calls out of service, and the PSAP shall notify any other agency dispatched into the QRS service area that the QRS is unavailable.
- C. Expectations of PSAP
1. A participating plan member agency may direct the PSAP to dispatch another covering agency in its place, temporarily for a period of hours / days or on a long term regular basis.
  2. The PSAP will adjust dispatch protocol for the period requested to reflect the availability of the agency involved so as to avoid initial dispatch of an agency that has provided prior notice of unavailability.
  3. It is the exclusive responsibility of the EMS agency to communicate availability to the PSAP per Act 37 requirements.

#### **AFFIRMATION OF MEMBERSHIP / PARTICIPATION**

1. Agencies shall acknowledge membership by a signature of an authorized person on the plan cover page. An authorized person is defined as a person who is the authorized legal representative of the organization. Membership means agreement with plan provisions / policy.
2. Membership provides each participating EMS agency one vote on all matters pertaining to the plan and its administration.
3. Each participating EMS agency shall designate (in writing) one authorized representative to vote and make decisions pertaining to the plan and its administration.
4. Each participating EMS agency may designate an alternate to make decisions and vote on matters pertaining to the plan in the absence of the designated representative.
5. Development of any CMA is at the sole discretion of the members requesting / providing assistance within the scope of the plan.
6. After the plan is established, any █████ County EMS agency may elect to become a member by provision of written notice to the Plan Administrator.
7. Any existing member may elect to withdraw from the plan by written notice to the Plan Administrator a minimum of 30 days prior to withdrawal, and provide written notice to

any participating EMS agencies with which a CMA is in affect per any terms of that agreement for termination.

### **ADMINISTRATION**

1. The plan will be administered by a Plan Administrator. The Plan Administrator will be elected by a majority vote of the participating EMS agencies. A meeting will be held within 30 days of the plan's approval by the Pa. D.O.H. The meeting will be facilitaed by the [REDACTED] County E.M.S. sub-committee chair, with the E.M.S. sub-committee secretary taking minutes. The sole purpose of the meeting will be to elect a Plan Administrator and Deputy Plan Administrator, at which point the meeting will be turned over to the Plan Administrator.
2. The Plan Administrator shall be elected within 30 days of approval of the plan by DOH.
3. After election of the first Plan Administrator, subsequent Administrators shall be elected by majority vote of members with a minimum of 6 months membership, whenever the current Administrator resigns, or the membership desires a new Administrator.
4. The Plan Administrator shall serve a term of two consecutive years and must have a two year break before being elected as the Plan Administrator for another term. The plan members can at any time, hold a vote of no confidence of the Plan Administrator. If a two thirds majority of the plan members vote to affirm the no confidence declaration, the Plan Administrator will be removed from office and a new Plan Administrator elected immediately.
5. A Deputy Plan Administrator shall be elected within 30 days of approval of the plan by DOH.
6. The Deputy Plan Administrator shall assume the role of the Plan Administrator in his/her absence.
7. In the event that a no confidence vote to remove the Plan Administrator is affirmed, the Deputy Plan Administrator shall take over the meeting and immediately hold an election to vote in a new Plan Administrator.
8. The Deputy Plan Administrator shall serve a term of two consecutive years.
9. The role of the Plan Administrator is to maintain the current plan / supporting material on file, facilitate update of the plan in accord with the wishes of plan members / Act 37, act as point of contact for County Agencies wishing to join the plan, and non-member agencies affected by the plan and maintain a current list of plan members and provide same to [REDACTED]. The Plan Administrator will also be responsible to appoint an [REDACTED] County EMS Quality Improvement Committee consisting of one representative each from [REDACTED]. All members of the Q.I. Comittee must be from a participating EMS agency.

**LIMITATIONS**

It is the understanding of Member Agencies that this plan is in accordance with Act 37 requirements.

Participating EMS agencies acknowledge the requirements of this plan do not in any way relieve an agency from compliance with Act 37, or impose any requirement or liability on plan participants or Collaborating Agencies that is not imposed by Act 37.

## Quality Improvement Process

### Goal:

- The home department will respond to requests for EMS service as directed by act 37.
- In the event that an EMS agency is unable to respond to requests for service, the ██████ County PSAP will be notified in advance of the agencies inability to respond.

### Metrics:

Statistical data will be provided to each agency, as well as the ██████ County EMS Q.I. Committee by the ██████ County 911 Center. Response data for the entire county will be provided to all participating agencies upon written request. The request will be submitted to the Plan Administrator and must be signed by the authorized legal representative of the agency.

For the purposes of this plan, measurement of turned calls will be defined as an agency who is unavailable to respond to a call for service and has not reported their unavailable status to the PSAP prior to dispatch.

A request for service that is given to a staffed agency that is unable to respond because their resources are otherwise committed will not constitute a turned call.

### Reporting:

██████ County 911 Center will provide ██████ County EMS Q.I. Committee monthly statistics, by agency, showing missed calls, delayed responses, call volume, number of times agencies have reported out of service, and the number of times that an agency did not report out of service and was unable to respond to a request for service.

### Compliance:

- It is the EMS agencies responsibility to comply with the requirements of the EMS Act.
- Agencies will receive monthly reports from the ██████ County EMS Q.I. Committee reflecting the percentage of time the participating EMS agency responded to a request for EMS assistance.
- At three consecutive months of response rates of less than 95% or three months in any six month period, ██████ County Q.I. Committee will meet with representatives of the agency to identify methods to improve response rates. It will be the agency's responsibility to implement a quality improvement plan.

- In the subsequent six months if the agency attains three consecutive months of response rates of less than 95% or three months in the six month period, the [REDACTED] County EMS Q.I. Committee will ask the [REDACTED] Compliance sub-committee of the Transportation Committee to offer assistance.
- In the third six month period that the agency attains three consecutive months of response rates of less than 95% or three months in the six month period, the [REDACTED] County EMS QI Committee and [REDACTED] will seek guidance from the DOH.

[REDACTED] County 911 will provide [REDACTED] with a report of EMS system response performance on a monthly basis. [REDACTED] will review the monthly report and will notify the Pa. DOH of any EMS agencies that are not complying with this EMS systems response plan.

# Appendix A

County Departments

[Redacted]

[Redacted]

[Redacted]

[Redacted]

County Departments

[Redacted]

County Departments

[Redacted]

County Departments

[Redacted]

Career Departments

[Redacted]