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| ***REPLACE WITH YOUR MASTHEAD*** | | |
| **VFIS logo black JPG** | **SOG Title:** | |
| **SOG Number:** | |
| **Original Date:** | **Revision Date:** |
| **ABC Fire Department General Operating Guideline** | | |

**Priority Disptching**

***This is a sample of a standard operating guideline (SOG) on this topic. You should review the content, modify as appropriate for your organization, have it reviewed by your leadership team and if appropriate your legal counsel. Once adopted, make sure the SOG is communicated to members, implemented and performance monitored for effective implementation.***

**Purpose:**

To prioritize the response of emergency service units to ensure maximum utilization of resources and ensure units are responding in a mode that corresponds with the prioritization level of the emergency request.

**Scope:**

It is the responsibility of all personnel and associated parties to adhere to this policy in order to prevent death, injury, and property damage.

**Procedure:**

**Certification in an approved emergency dispatching (ED) program:**

Public Safety Answering Points (PSAP) shall confirm that call takers are certified under a recognized ED program and are offered the required recertification and continuing education to fulfill the needs of the certification.

**Regional EMS and Fire Protocols:**

Regional Medical Advisory and Fire Service Committees shall ensure present dispatch guidelines adhere to and practice recognized ED standards. Protocols, guidelines, and policies must all follow established standards and response procedures.

**Systemized caller interrogation process:**

Call intake should be methodical, standardized, and without deviation from recognized ED program standards. Call takers shall not deviate from established protocols for any reason not clearly defined in the call taking process.

**Systemized pre-arrival medical instructions:**

The provision of standardized pre-arrival medical instructions is critical to an ED program. Positive patient outcome is very dependent on the provision of basic instructions and medical assistance.

**Tiered EMS responses:**

The appropriate utilization of EMS resources is highly dependent on the ED process. Use of ALS units for BLS responses, dual dispatch of advanced life support (ALS) and basic life support (BLS) units for single patient events, and fire service first response are examples of situations in which resources could be better utilized. The triage of calls, the assigning of case specific EMS units, and the inclusion of First Responders are all critical aspects of a tiered system.

**Quality assurance/case review process:**

Emergency service agencies shall incorporate into present quality assurance programs a mechanism in which PSAPs are a vital aspect. On a regular basis, services shall review responses and cross-reference the priority response level assigned to the call. Records shall be maintained and utilized for the overall

**Improvement of the system:**

Emergency services shall be provided with a defined chain of command/liaison with the local PSAP with the intention of reviewing cases and continuously improving the systems efficiency.

**Classification of responses (EMS Based):**

This section reflects the most common priority code system. Some departments may use alternate systems:

* Alpha - Emergency response: No lights/no sirens, BLS Solitary response
* Bravo - Emergency response: Lights/sirens
* Charlie - Emergency response: Lights/sirens
* Delta -Emergency response: Lights/sirens
* Echo - Emergency response: Lights/sirens

*NOTE: Fire department activity responses will be assigned Alpha responses unless there is confirmed injury/entrapment. Behavioral emergency responses shall be assigned Alpha responses unless call-taking information dictates a higher priority response.*

**Alpha responses**:

In the case of responses assigned the "Alpha" response, EMS units, though still responding in the immediate mode, shall respond without the use of warning lights and/or audible devises. This response mode does not change the fact the unit is responding to an emergency, it simply suggests the mode in which the unit physically responds to the scene of the emergency.

Call dispatch: On the initial dispatch of an emergency call, call takers/communication technicians will ensure the following information is included in the dispatch:

* Station/units assigned to the response
* Location of the emergency
* Nature of the emergency
* Response mode assigned as determined by the ED program/process
* Any additional/pertinent medical information relayed by the caller or responding agencies on scene.

**Call downgrading/upgrading:**

Crews, on their response, shall be provided with additional information based on information available to the PSAP. Field crews shall not make decisions to alter a response mode based on personal suspicion or belief. Responding units may consider altering response mode based on additional information provided by the PSAP or information relayed from police, fire, or other EMS agencies on scene. Based on this information, the PSAP will, if required, alter the response mode and alert responding units.

Call/unit rerouting: During periods of high call volume or multiple responses within specific jurisdictions, ONLY the PSAP shall have the control over re-routing units to higher/lesser priority assignments based on demand, unit availability, and status of responding units (ALS versus BLS).

***This is a sample guideline furnished to you by VFIS. Your organization should review this guideline and make the necessary modifications to meet your organization’s needs. The intent of this guideline is to assist you in reducing exposure to the risk of injury, harm or damage to personnel, property and the general public. For additional information on this topic, contact your VFIS Risk Control representative.***

**References:**

NVFC "Emergency Vehicle Safe Operations For Volunteer and Small Combination Emergency Service Organizations"