



# Reno Fire Department



*CPSM Study  
Recommendations  
Dispatch  
2/10/20*

## CPSM Recommendation #31:

The City of Reno and REMSA should evaluate options for consolidating the REMSA dispatch operations into Reno Public Safety Dispatch.

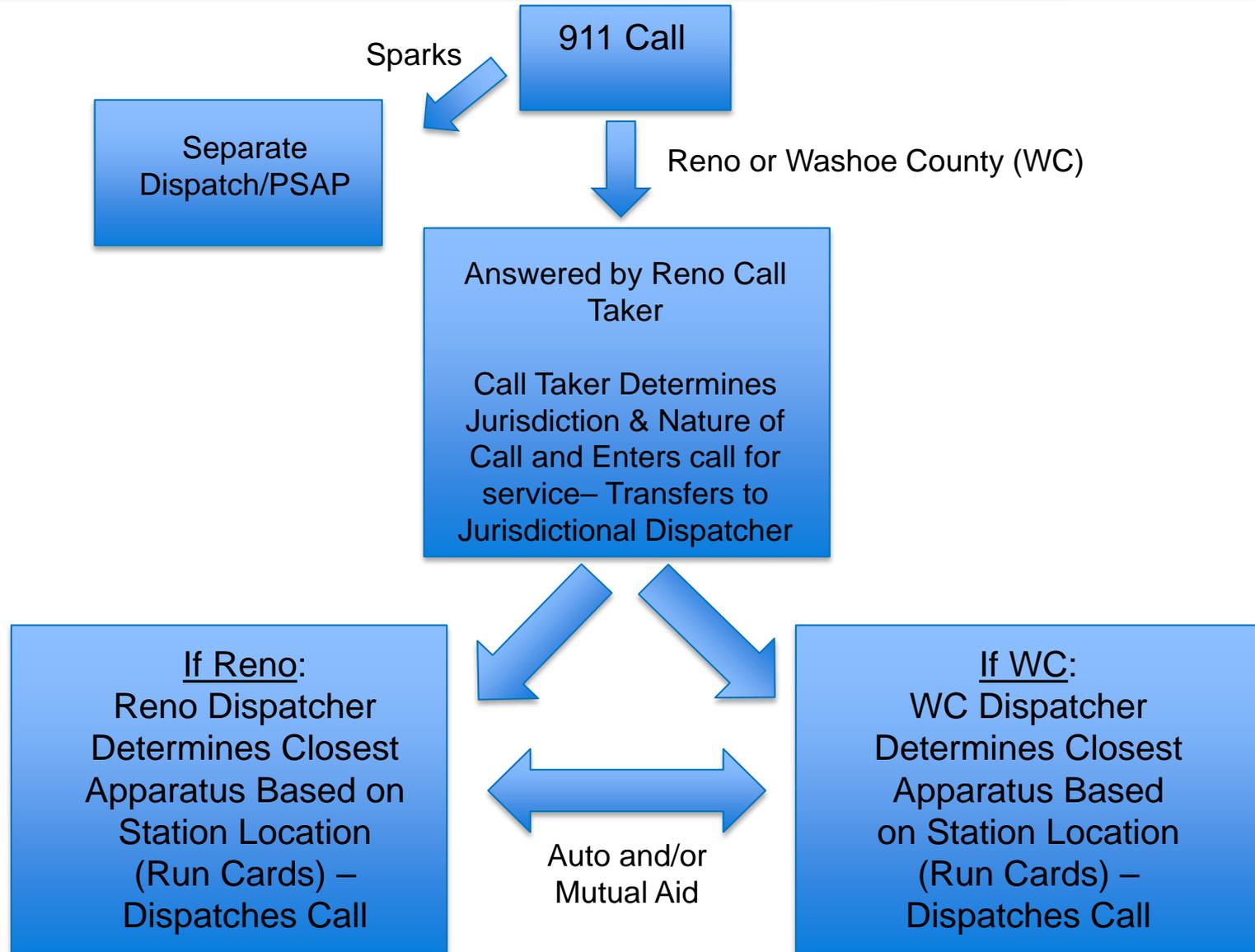
## CPSM Recommendation #32:

Reno Public Safety Dispatch and the REMSA Dispatch Center should move as quickly as possible to establish a CAD-to-CAD interface between their two centers.

## CPSM Recommendation #20:

RFD and REMSA should develop a process in which the call-screening process and call priority determinants established by the REMSA dispatch center are communicated directly to responding RFD units.

# WC FIRE SERVICE DELIVERY PROCESS



# Consolidated Dispatch

- All dispatchers are located in a single location and operate under a single system.
  
- Pros:
  - More efficient operations. Current process is redundant.
  - Eliminate the delay and risk of losing a call associated with the transfer of calls.
  - Priority of calls are known so that the appropriate resource(s) is sent to each call. Due to incomplete information currently RFD responds to a significant number of calls which do not require a Fire response or has a delayed response to calls which are appropriate for an RFD response.
  - Requires EMD in order to maximize efficiency and provide best service to the public.
  
- Cons:
  - Additional cost associated with implementation of EMD (Approximately \$150,000 start cost. Funds may be available through E-911 Board)
  - Will not happen overnight

# CAD-to-CAD

- CAD – Computer Aided Dispatch
- Allows emergency response units in remote locations to see the same calls at the same time.
- Real-time sharing of information.
- Under the current system, it does not eliminate the need to transfer calls.
- Technological challenges.

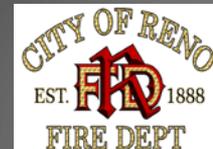
# Emergency Medical Dispatch (EMD)



## ➤ Emergency Medical Dispatch (EMD)

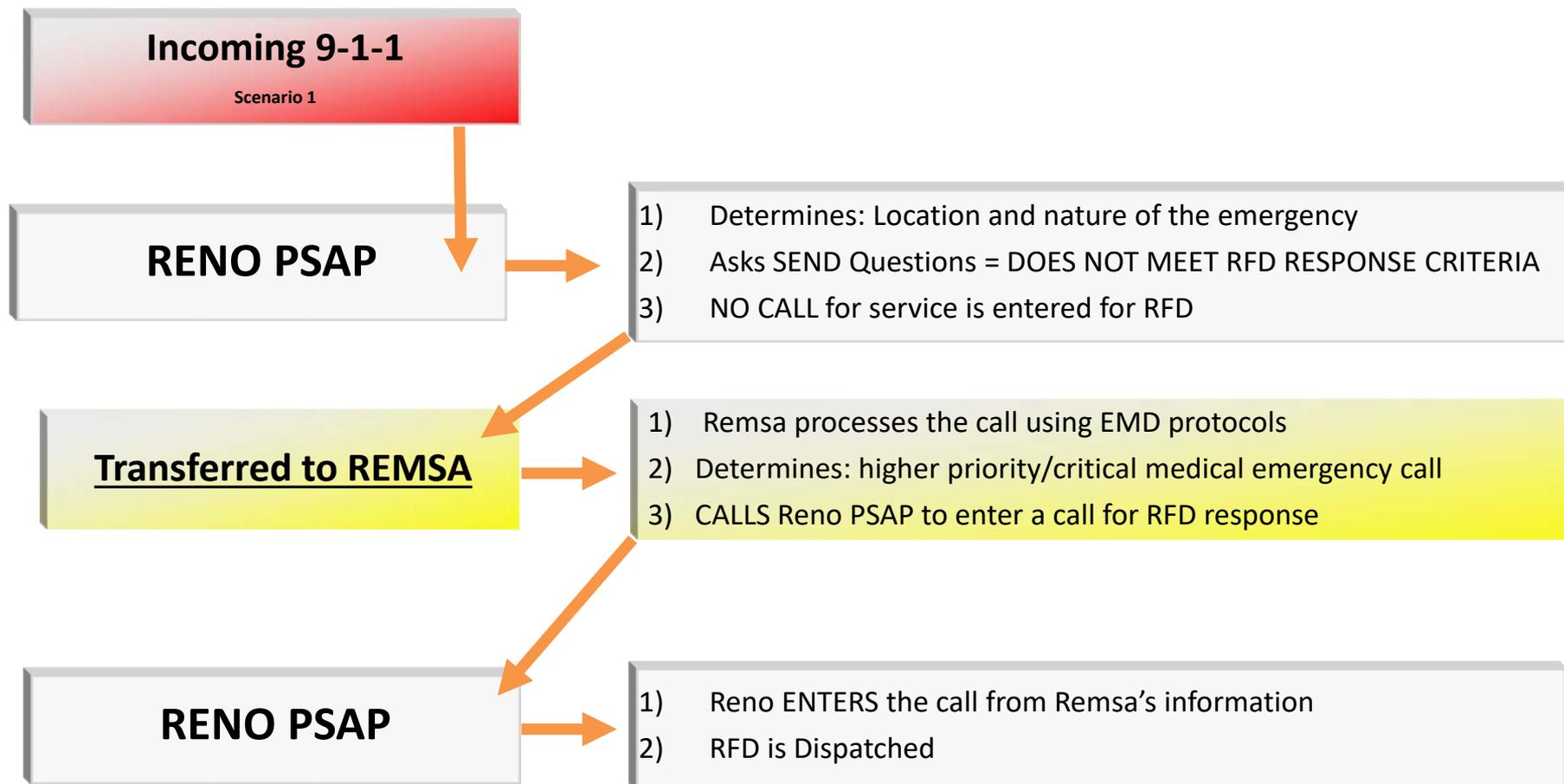
- EMD refers to a system that enhances services provided by Public Safety Answering Point (emergency) call takers, such as municipal emergency services dispatchers. Trained telecommunicators, utilizing approved guidecards that act similar to a flowchart system accurately query the caller, select and dispatch the appropriate response, and then provide life-saving instructions to assist in treating the patient until first responders arrive.
- EMD is the 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.
- BEST PRACTICE.

# Emergency Medical Dispatch (EMD)



- Benefits of EMD:
- Trained telecommunicators, using locally approved EMD Guidecards, quickly and properly determine the nature and priority of the call, dispatch the appropriate response, then give the caller instructions to help treat the patient until the responding EMS unit arrives.
- A comprehensive EMD program can reduce agency liability by providing thorough and consistent dispatch instructions, and can help meet the growing public expectation that when citizens call 911, appropriate medical care will be provided as quickly as possible.
- An EMD System can reduce unnecessary lights-and-siren response and thereby mitigate RFD volume to enhance firefighter and public safety.
- EMD helps ensure that there is no delay in dispatching the appropriate resource(s).
- Standardized and consistent use of medically approved dispatch protocols.
- Provides a basis for continuous quality improvement for medical dispatching and response.
- Recommended by the EMS Oversight Program under the DBOH as part of the county-wide strategic plan.

# Emergency Medical Dispatch (EMD) Scenario 1



# Emergency Medical Dispatch (EMD) Scenario 2

**Incoming 9-1-1**  
Scenario 2

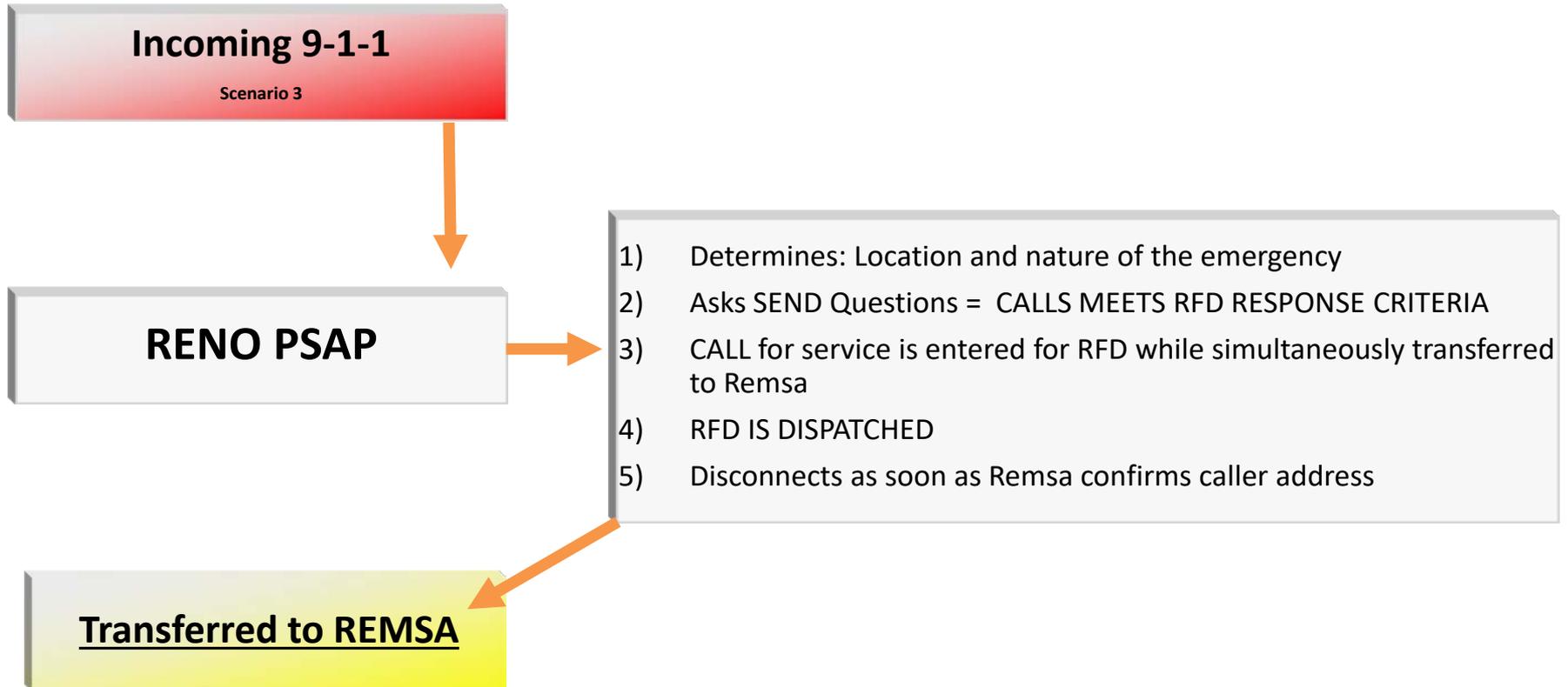
- 1) Determines: Location and nature of the emergency
- 2) Asks SEND Questions = CALLS MEETS RFD RESPONSE CRITERIA
- 3) CALL for service is entered for RFD while simultaneously transferred to Remsa
- 4) RFD IS DISPATCHED
- 5) Disconnects as soon as Remsa confirms caller address

**RENO PSAP**

- 1) Remsa processes the call using EMD protocols
- 2) Remsa CALLS Reno to update any changes in status to include:
  - Cancel RFD per Medics on scene
  - Patient's condition has worsened, upgraded Remsa priority (info relayed to RFD via Radio)
  - Patient's condition is LESS emergent than what was first stated (info relayed to RFD via Radio)
  - Remsa Advises OMEGA, ALPHA or CARD 33 response (info relayed to RFD via radio)

**Transferred to REMSA**

# Emergency Medical Dispatch (EMD) Scenario 3



# Emergency Medical Dispatch (EMD) Scenario 4

**Incoming 9-1-1**

Scenario 4

**RENO PSAP**

- 1) Determines: Location and nature of the emergency
- 2) Begins EMD processing
- 3) Enters call for Service = BOTH RFD and REMSA receive call simultaneously
- 4) RFD IS DISPATCHED
- 5) Disconnects when EMD process is completed/responders on scene

# EMD & Call Priority

- Based on EMD protocols, medical calls are given a priority response based on level of service needed (call priority).
  
- Priority 1 Calls:
  - Life threatening emergency response.
  
- Priority 2 Calls:
  - Non-life threatening emergency response.
  
- Priority 3 Calls:
  - Non-emergency response.
    - RFD should not be responding to Priority 3 calls.
    - In 2019, RFD unnecessarily responded to thousands of Priority 3 calls.

# Reno Fire Department

CITY OF  
**RENO**



Questions?