



**Recommendations for Establishing and Maintaining a Quality Assurance Program  
Related to PSAP Quality Assurance**

*Submitted March 2011 to:*

**State of Maine  
Public Utilities Commission  
Emergency Services Communication Bureau**



**MissionCriticalPartners**

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# 1 EXECUTIVE SUMMARY

## 1.1 BACKGROUND

Most emergencies begin with a call to 9-1-1. The call must be handled correctly every time by professionals using the best standardized processes and systems available. When processes fail, analysis is required, and remedial action must occur in a timely manner.

In February 2010, the State of Maine Office of Program Evaluation & Government Accountability (OPEGA) issued a report entitled, “Emergency Communications in Kennebec County.” The report identified a need for improvement in the areas of standardized protocols and quality assurance (QA). As a direct result, the Public Utilities Commission’s Emergency Services Communications Bureau (Bureau) was tasked by the 124th Legislature (P.L. 2009 Chapter 617) to implement a quality assurance program to audit and monitor compliance with emergency dispatching standards, practices and procedures of Public Safety Answering Points (PSAPs).

In May of 2010, the Bureau sought a qualified consultant to assist with the creation of a QA program. The purpose of the program was to establish processes that would audit and monitor compliance with emergency dispatch standards, practices and procedures. This included providing assistance and guidance in the establishment of processes designed to promote adherence to call-taking protocols, evaluate and make recommendations for facilitating the learning process, and provide a framework for continuous improvement at each PSAP in Maine.

Mission Critical Partners (MCP) was contracted to assist in this process. MCP is headquartered in State College, Pennsylvania, with offices in Harrisburg, Pennsylvania, and Southlake, Texas (near Dallas). MCP serves clients throughout North America. MCP’s team consists of former public safety managers, project management professionals (PMPs), and technology, forensic and policy specialists. MCP principals have each invested more than two decades in the 9-1-1 industry and continue to serve in key leadership roles in all the major industry organizations—National Emergency Number Association (NENA), Association of Public-Safety Communications Officials International (APCO), and 9-1-1 Industry Alliance (9IA)—and as advisors to key federal and state governmental bodies. MCP’s mission is to support life safety communications clients through improved policy, systems and processes.

MCP has direct experience with assisting state or regional 9-1-1 authorities in developing quality assurance review programs and has intimate knowledge of quality assurance systems that work in conjunction with structured protocol systems. MCP has worked both nationally and internationally with provincial, state, county and municipal public safety entities to develop and introduce industry-recognized quality assurance programs. In addition, the company has been directly involved in the research, development, and deployment of structured protocol systems for medical, fire and police call-processing systems.

A collaborative and strategic approach to the project ensured that all elements of PSAP call processing and internal policies and procedures were measured. Throughout the project, the focus of improving quality of service remained at the forefront. The PSAP review and the subsequent assessment of

issues guided the recommendations for improvements in processes that will prove suitable for all PSAPs.

In order to follow through with the establishment of improved standards for PSAP operations, existing standards required evaluation. This report provides an overview of current PSAP performance, as well as provides recommendations for a future plan intended to raise and improve processes germane to establishing the highest quality of service possible for the citizens of Maine.

## **1.2 METHODOLOGY**

During September and October of 2010, the state's 26 PSAPs were visited by MCP auditors. Without exception, all PSAPs participated in a positive and collaborative way, and openly welcomed the opportunity to participate in the review. A pre-approved survey instrument was used to gather and measure the review criteria (Refer to Appendix A – PSAP Initial Findings Review beginning on page 30 of this report, and then to Appendix 1 – PSAP Information Interview Instrument on page 34 of the Initial Findings Report). PSAPs were also invited to provide suggestions for improving internal processes, support from the Bureau, or any other ideas in support of PSAP operations. The findings of these reviews provide a snapshot of each PSAP on the day of their respective review. The results of the audits appear in Appendix A – PSAP Initial Findings Review.

## **1.3 OVERVIEW OF FINDINGS**

This section summarizes MCP's findings during the observation period of September and October 2010.

### **1.3.1 PSAP Review Findings**

MCP worked with the Bureau to establish the criteria for data collection. It encompassed adherence to established Rules, as well as measured statistic producing competencies of PSAP managers. The findings are summarized as follows:

**1.3.1.1 Call Processing statistics** – PSAPs were able to produce call processing statistical information. However, there were some PSAPs with unexpected variations. This matter is easily resolved by refresher training on the call statistics records information management system provided by the Bureau to each PSAP.

**1.3.1.2 ALI Discrepancy/Mapping Reporting System** – The reporting system prescribed by the Bureau is in place at all PSAPs. However, one PSAP was not following the procedure. This has since been rectified. In addition, some PSAPs had error report logs that were not up to date. All PSAPs have since demonstrated that they are now in compliance with the procedure.

**1.3.1.3 Internal Policies for Public Comment/Complaint** – There were 23 PSAPs that were in compliance, and three PSAPs that were not. Since the review, all PSAPs report that they are now in compliance with this Rule.

**1.3.1.4 Quality Assurance Programs and Processes** – Quality Assurance programs in the state’s PSAPs involve the regular review of individual telecommunicator calls where the Emergency Medical Dispatch (EMD) protocol is used. This regular review of calls, coupled with QA evaluations on a pre-determined level of compliance to protocol, helps ensure that the protocol is being followed correctly.

QA programs and processes are in place at all PSAPs. However, not all PSAPs have been able to meet the call review criteria. Of the 26 PSAPs, 19 were reporting their EMD compliance scores on a regular basis. PSAPs are continuing to make every effort to comply with the QA program and processes. Due to the absence of structured protocols for fire and police events, there is no effective QA program in place for these types of calls.

**1.3.1.5 Internal Policies and Procedures** – Most PSAPs have established internal policies and procedures that address emergency and non-emergency call processing methodologies.

**1.3.1.5.1 Call Transfer Policy** - PSAPs have call transfer policies in place. However, it is difficult to measure compliance to the policy. There are inconsistencies with regard to responsibility for EMD call processing (i.e., inconsistencies with the administering of EMD, when to transfer, which PSAP is responsible for EMD, which PSAP should give pre-arrival instructions, etc.). A statewide policy and procedure document that provides specific instructions on when to transfer, how to transfer, and language to be used, and clear and concise rules on EMD call processing is urgently required for the standardization of call transfer procedures.

**1.3.1.5.2 Fire and police Call Processing Guidelines** – Four PSAPs have developed rudimentary fire and police call processing guideline systems. The systems range from an in-house developed flip-card system, to detailed procedural documentation. Despite the best efforts of PSAP personnel to develop in-house call processing systems, commercially available structured protocol systems for fire and police are not only preferred, but provide a higher degree of liability protection. The remaining PSAPs have no system in place for police or fire calls.

**1.3.1.6 Employee Training Records** – PSAPs demonstrated a high degree of compliance to the administration of employee training records.

**1.3.1.6.1 In-Service Training Records** – All PSAPs were found to be compliant and training records are up-to-date.

**1.3.1.6.2 EMD Certifications** – All PSAPs self-reported that employee EMD certifications and licensing records, where applicable, were current and up-to-date.

**1.3.1.6.3 Continuing Education Hours (CEH) System** – Every PSAP demonstrated compliance to this Rule, and they are making every effort to ensure that telecommunicators comply with CEH recertification requirements.

**1.3.1.7 Bureau Rules** – PSAPs were evaluated on their compliance to other Bureau Rules.

**1.3.1.7.1 TTY Test Calls** – Of the 26 PSAPs, there were eight that were not in compliance with Bureau Rules. However, they have all since demonstrated compliance.

**1.3.1.7.2 Archiving of Audio Recordings** – All PSAPs were in compliance with the 30 day retention Rule.

**1.3.2. Other Findings** – There are other issues discovered by the MCP reviewers.

**1.3.2.1 Wireless Call Routing** – The system of wireless call routing is of issue with most PSAPs. For the most part, wireless 9-1-1 calls are not routed automatically to the appropriate PSAP, but to one of four centralized locations for initial processing. This model introduces an extra step in the call processing schema by creating, in the vast majority of calls, the need to transfer the call to another PSAP. The reconfiguration of wireless call routing would significantly improve call processing efficiencies, reduce the need for call transfer, and also improve response times.

**1.3.2.2 Call Sharing** - Call sharing is the sharing of calls between the County Sheriffs and the State Police. Call sharing is a workload sharing agreement designed to mitigate law enforcement staffing shortages by sharing response resources. Most *county* PSAPs prefer that call sharing be eliminated and that the Sheriffs be designated the primary responders with the State Police as backup resources.

## **1.4 RECOMMENDATIONS**

**1.4.1 General** - The recommendations in this report are intended to reinforce existing Bureau and the Department of Public Safety's (DPS) Maine Emergency Medical Services (MEMS) Bureau Rules, as well as provide a pathway to improved levels of service for Maine's citizens. The recommendations further suggest specific steps that are easily taken to ensure existing expectations for PSAPs are met and audited with a minimal impact on existing resources. These recommendations are based on past efforts to establish best practices, the current state of PSAP operations, as well as the vision of the state's emergency services stakeholders (police, fire, emergency medical services) to improve the delivery of their respective services.

**1.4.2 Institutionalizing Processes** – In order to expand the existing EMD QA and structured protocol processes already imbedded in state legislation, Bureau and MEMS rules, consideration must be given to the challenges associated to institutionalizing the recommendations supporting the adoption of fire and police protocols and QA processes as suggested in this report. For example, existing resources both at the PSAP as well as the Bureau will require evaluation to more accurately determine where resource and technology shortcomings exist. In order to adopt these recommendations, extra resources will be required. Funding for extra human resources as well as the capitol and operations costs required for program implementation will be a challenge.



Moving forward with implementing these processes in state infrastructure will most likely require at least one additional position to oversee the execution of these new programs. The expertise to manage these recommendations exists in the Bureau. However, existing resources will require expansion to achieve these goals. It should be noted that the Bureau has experience in the successful implementation of both QA and EMD programs. The elements of the program already exist, and the challenge is how to migrate the new processes for QA and structured protocols into the existing Bureau infrastructure. Model legislation templates for protocol use are available from sources such as the National Academies of Emergency Dispatch (NAED).

**1.4.3 Quality Assurance in Public Safety Communications - Recommendation #1** expresses the need for expanding the existing QA systems to encompass fire and police call processing. There has been a significant degree of success in Maine with the application of EMD protocols and the EMD QA support system. The EMD protocol provides the benchmark upon which QA can effectively be performed. The absence of the equivalent protocol systems for fire and police makes it virtually impossible to objectively QA those call types. MCP firmly believes that the growth and application of QA systems for fire and police is the next logical and necessary step in the evolution towards the further application of QA standards in Maine's PSAPs.

**1.4.4 Structured Protocol Call Processing Systems - Recommendation #2** expresses the need for expanding the existing EMD structured protocol system to include fire and police protocols. The adoption of EMD protocols has made a significant difference in the standard of care for Maine's citizens, and no doubt has saved many lives. The adoption of fire and police protocols is the next logical and necessary step in the evolution towards the further application of industry best practices and the benefits that will be further afforded to citizens. As stated in 1.4.3, the adoption of structured protocols for fire and police call processing, along with sound QA practices, ensure the highest level of care and practice for not only the state's citizens, but also for all emergency responders.

There are three implementation options outlined in section 4.10 – Implementation options. For convenience, they are paraphrased here:

**Option 1: One-Time Approach to Implementation** - For a one-time implementation of the entire costs associated to QA, Emergency Police Dispatch (EPD) protocol, Emergency Fire Dispatch (EFD) protocol, certification training, software and consulting support services, refer to Appendix D – Statewide Protocol Implementation Cost Estimate. The quote from Priority Dispatch Corp (PDC), comes in at an estimated \$2.3M. The one time approach is a very ambitious undertaking. However, the PDC quote is subject to negotiation and it is expected that implementation costs could be reduced. Also, in subsequent years, there would be recurring charges for maintenance, recertification, and continuing education materials.

**Option 2: Multi-Year Plan Approach** – A phased, multi-year plan approach is much more realistic and highly suggested particularly on an implementation of this magnitude. If the state commits to a complete system implementation spread over a fixed time period (i.e., 3 years), overall costs might also be negotiated and spread over an agreed to schedule.

**Option 3 – Voluntary PSAP Participation** – Several PSAPs have expressed an interest to move forward with adding EPD and EFD protocols to their call processing systems. Funding for a beta-style approach would have to be authorized particularly if the source is the E9-1-1 surcharge, as is the source of funding for the current EMD program.

**1.4.5 Existing PSAP Processes – Recommendations #3 thru #10** (refer to Section 5, pages 26-30) express the need for the regular auditing of PSAP compliance to existing Rules, the development of call transfer policies, and a reexamination of wireless call routing options. Although PSAPs are making every effort to comply with existing criteria, a system of checks and balances that assures accountability to existing Rules is required. A simple audit form to be completed by each PSAP on an annual basis may satisfy this need. This process, coupled with the occasional on-site review, is a simple and straightforward method to address these issues.

With regard to the call transfer policies, a working group committee consisting of PSAP representatives, with Bureau oversight should be tasked with producing a call transfer protocol template.

Wireless call routing remains an important issue and it is imperative that call routing options be researched. PSAPs openly wonder why wireless calls cannot be routed directly to them for processing. As stated, the reduction or elimination of the need to transfer wireless calls improves efficiencies and positively impacts emergency response times. This matter requires further research, and strategies for the most effective processing of wireless calls must be considered.

**1.4.6. Future PSAP Consolidation** – Consideration must be given to weighing the recommendations in this report against future PSAP consolidations in Maine. In short, the overall costs of protocol implementation would be considerably impacted should the number of PSAPs be reduced. Wireless call routing considerations would also be impacted.

## **1.5 IMPLEMENTATION OF A QUALITY ASSURANCE PROGRAM**

**1.5.1 Introduction** - Quality Assurance programs in the state's PSAPs involve the regular review of individual telecommunicator calls where the EMD protocol is used. This regular review of calls, coupled with QA evaluations on a pre-determined level of compliance to protocol, helps ensure that the protocol is being followed and correctly.

For fire and police call processing, the implementation of a comprehensive QA program on a statewide basis must be viewed as the logical next step in the progression of continuing to enhance the delivery of emergency services. As outlined in the recommendations contained in this report, the next steps to achieving this goal is the enhancing of existing Rules and the adoption of structured protocols for fire and police calls.. In other words, the implementation of a comprehensive QA program must be viewed as the expansion of existing processes augmented by additional protocol systems.

Section 4.10 outlines three options for the adoption of structured protocols and QA systems. In order to support any degree of growth in call processing methodologies, consideration must be given to establishing an advisory planning committee. This committee could help with establishing baseline

systems and resources prior to the expansion or adoption of new protocol and QA systems. Of benefit is the fact that the necessary building blocks required for this expansion have already been in place for several years. The challenge now comes in the form of growing existing best practices in such a way as to not overwhelm existing PSAP resources, or any other aspect of public safety impacted by these recommended next steps.

**1.5.2 Establishing a QA Program** – The establishment of a statewide QA program will evolve through the guidance and collaboration of the Bureau and the Advisory Committee. It is anticipated that as the program is initiated, the Public Utilities Commission (PUC) would take a proactive role in planning for Bureau support resources. As the beta-test pilot project progresses, the PUC would assume responsibility for supporting the overall program.

Consideration must be given to creating a QA program manager’s position within the Bureau. This would represent the first step in institutionalizing the QA program on a statewide basis.

**1.5.2.1 QA Program Manager** – The QA program manager would be tasked with all aspects of the management and administration of the new QA program including:

- Chair the QA Program Advisory Committee
- Program administration
- Project management of strategic long-term implementation plans
- Fiscal management of the program
- Establish of QA audit processes
- Ensure accountability for QA reporting processes
- Ensure compliance to Bureau and MEMS Rules
- Administer additional contracted resources (if appropriate)
- Annual program status report to the PUC

A detailed job description would be required for this position. The QA program manager would answer directly to the Director, Emergency Services Communications Bureau with a functional reporting path to the Maine Department of Public Safety.

**1.5.2.2 QA Program Advisory Committee** – The establishment of a QA program advisory committee is the second step in establishing a comprehensive statewide QA program. The committee should be chaired by the QA program manager. The committee should consist of representatives from the Bureau, MEMS, as well as strong representation from PSAP leaders across the state. Membership of this committee would require careful selection of participants, and may also include advisory resources from fire, law enforcement, and EMS stakeholders. The Bureau would have to assume a strong leadership role with this committee. Members would require clear and firm direction, and would need to be kept on task. The Bureau representative would be expected to ensure that decisions and recommendations not exceed the committee’s scope of work. This committee’s areas of responsibility may include, but not be limited to, the following tasks:

- Research and make recommendations to Bureau for changes to Rules in support of program expansion
- Analyze and identify additional certification training and experience needs for PSAP personnel
- Analyze and identify additional certifications needs for existing QA certified personnel
- Research which PSAPs are most appropriate for involvement in a beta-test pilot project for protocol implementation and QA augmentation
- Identify technical challenges and costs associated with interfacing the protocol software systems with existing computer aided dispatch (CAD) systems
- Make recommendations to the Bureau regarding the funding of a beta-test pilot
- Prepare a long-term strategic plan for program growth throughout the state

## **2 PROJECT OVERVIEW**

### **2.1 BACKGROUND AND HISTORY OF 9-1-1 IN MAINE**

The Emergency Services Communication Bureau (Bureau) was established in 1994 as an agency within the Department of Public Safety (DPS) to implement and manage Enhanced 9-1-1 (E9-1-1) throughout the state of Maine. It was moved under the Public Utilities Commission (PUC) in 2003.

In December 1998, the Bureau signed a contract with Bell Atlantic (now FairPoint Communications) to provide the network, database services, and the infrastructure for a statewide E9-1-1 system. Implementation was completed in the fall of 2001 for wireline telephones. At that time, the network included 49 public safety answering points (PSAPs) across Maine's 16 counties. In 2005, the Bureau began implementing wireless 9-1-1, as prescribed by the Federal Communications Commission (FCC) Docket 94-102. Phase II deployment (location determining technology) was completed by all wireless carriers by 2006. In 2007, the E9-1-1 system added Voice over Internet Protocol (VoIP) calls to its services in compliance with FCC Docket 05-116.

In 2003, the Maine State Legislature passed a bill requiring the Bureau to reduce the then 48 PSAPs to between 16 and 24 to the extent possible. A two-year process resulted in a reduction to 26 PSAPs. Although the number of PSAPs was reduced, most of the PSAPs that closed continued to operate dispatch services.

### **2.2 EMERGENCY MEDICAL DISPATCH (EMD) PROTOCOLS**

In 2005, the Bureau became responsible for the funding and delivery of Emergency Medical Dispatch (EMD) training for all PSAP call takers, and for providing approved EMD protocols for use in each PSAP. Public Law 2005, Chapter 303 also required that any dispatch-only center that voluntarily choose to deliver EMD services to comply with the same statutory requirements as PSAPs. EMD was implemented statewide in 2007. By June 2010, all EMD centers were required to move to a common protocol.

In 2010, the Bureau began requiring all newly hired fulltime dispatchers at all PSAPs and dispatch-only centers to attend a 40-hour basic dispatcher curriculum. Dispatchers hired prior to January 1, 2008, were grandfathered. Part-time dispatchers are exempt but are encouraged to attend. The basic course is recommended as a prerequisite to attending the advanced EMD course.

### **2.3 INTRODUCTION OF QUALITY ASSURANCE**

In February 2010, the State of Maine Office of Program Evaluation & Government Accountability (OPEGA) issued a report entitled, "Emergency Communications in Kennebec County." The report identified a need for improvement in the areas of standardized protocols and quality assurance (QA). As a direct result, the PUC's Emergency Services Communications Bureau (Bureau) was tasked by the

124th Legislature (P.L. 2009 Chapter 617) to implement a quality assurance program to audit and monitor compliance with emergency dispatching standards, practices and procedures of PSAPs.<sup>1</sup>

The Bureau moved forward with the development and implementation of a QA program by contracting with Mission Critical Partners (MCP).

MCP has direct experience with assisting state or regional 9-1-1 authorities in developing quality assurance review programs and has intimate knowledge of quality assurance systems that work in conjunction with structured protocol systems. MCP has worked both nationally and internationally with provincial, state, county and municipal public safety entities to develop and introduce industry-recognized quality assurance programs. MCP also has direct experience assisting state or regional 9-1-1 authorities in considering the adoption of uniform call-taking protocols. In addition, the company has been directly involved in the research, development, and deployment of structured protocol systems for medical, fire and police call-processing systems

## 2.4 RULEMAKING AND STANDARDS

The Bureau has the statutory authority to create standards necessary to provide for the operation of the state E9-1-1 system through the routine technical Administrative Rule process. The Bureau's Administrative Rules pertaining to this study are found in, Chapter 1: Standards For Establishing A Statewide Enhanced 9-1-1 System<sup>2</sup>. Minimum call answering and call taker and dispatch training standards are found in this Chapter.

DPS's Maine Emergency Medical Services (MEMS) Bureau is responsible for the coordination and integration of all state Emergency Medical Service (EMS) activities. The Maine Emergency Medical Services Act defines EMS licensing requirements and includes certification and licensing of personnel tasked with providing EMD services.

MEMS Administrative Rule Chapter 5-A Emergency Medical Dispatch Licensure sets specific QA reporting requirements as well as compliance goals for EMD call taking and dispatching throughout the state. This Rule required all dispatch centers using the EMD protocols to comply with the QA requirements beginning March 2010. Chapter 3-A Emergency Dispatch Licensure required all EMD centers to transition to a common protocol by July 1, 2010.<sup>3</sup>

There is no state standard in place for fire or law enforcement call processing. Although there are NAED companion fire and police protocols to the EMD protocol, no PSAP or dispatch-only center has implemented either protocol systems.

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<sup>1</sup> See <http://www.mainelegislature.org/ros/LOM/LOM124th/124R2/PUBLIC617.asp>

<sup>2</sup> See <http://www.maine.gov/sos/cec/rules/65/chaps65.htm#625>

<sup>3</sup> See [http://www.maine.gov/dps/ems/documents/16-163\\_C1-17\\_Effective100109&010110.pdf](http://www.maine.gov/dps/ems/documents/16-163_C1-17_Effective100109&010110.pdf)

## 2.5 EVALUATION OF MAINE'S PSAPS

The Commission contracted MCP to assist the Bureau in the evaluation of the state's PSAPs. The objective was to measure each PSAP's compliance to the established Rules and reporting requirements.

MCP visited all 26 PSAPs in Maine to conduct QA reviews on the adherence to Bureau Rules and to review any local call taking protocols. The project scope included the following tasks:

- Evaluate the current environment of PSAPs and develop a PSAP evaluation instrument
- Conduct a review of the Bureau Rules, statutes and policies related to PSAP performance as well as the Bureau of EMS Rules related to QA
- Conduct onsite evaluations of each PSAP
- Provide a preliminary assessment of Bureau/PSAP review findings

The review describes the processes established to complete the initial phases of the QA review and provides a preliminary assessment of the findings, as well as a review of the Bureau Rules, statutes, and policies related to PSAP performance. Refer to Appendix A— Public Safety Answering Point (PSAP) Initial Findings Review.

## **3 ESTABLISHING A QUALITY ASSURANCE PROGRAM**

### **3.1 INTRODUCTION**

Over the past 30 years, public and private organizations have embraced the science of Total Quality Management (TQM). The programs and processes associated with TQM are designed to enable a high quality of product or service that leads to a high level of customer satisfaction. Dr. W. Edwards Deming is considered to be the father of quality improvement processes. He believed that the way to achieve the highest level of performance requires organizations to adopt new ways and approaches to their business processes. The single biggest factor that drove business organizations to adopt TQM strategies was the assurance of a high level of quality in their respective areas of operation. This ensured a level of competitiveness and competence that lead to a high quality product or service, which ultimately resulted in elevated customer satisfaction.

The underlying philosophy of TQM is the effective management of processes that enable a never ending cycle of improvement, and that everyone involved in the process has a responsibility to meet or exceed customer expectations. This ultimately leads to satisfied consumers. It has been proven in virtually every industry that effective QA programs elevate performance by addressing key issues before, during, and after the implementation of a standardized process. These principles and processes readily transpose into the PSAP environment.

### **3.2 QUALITY ASSURANCE IN PUBLIC SAFETY COMMUNICATIONS**

In public safety communications, QA may be defined as the systematic monitoring and evaluation of the various aspects of emergency call processing (delivery of the service) that maximizes the probability that industry established standards of quality are being applied and attained by all involved in the call taking process. An effective QA program in PSAPs involves all call taking personnel participating in a continuous cycle of measurement, feedback, and education. The objective is to improve individual performance to the highest standard possible. A successful QA program is based on the fundamental philosophy that telecommunicator performance can be improved if they are properly selected, trained, involved, informed, and empowered with sound call processing standards.

A sound QA program is essential to the safe and efficient use of any structured call processing protocol system. QA helps standardize service by ensuring compliance to the protocol system.

### **3.3 BENEFITS**

QA processes ensure that telecommunicators obtain all critical scene information for responders. Since telecommunicator effectiveness is regularly measured and improved, work effectiveness increases, and risk of litigation decreases. The combination of these processes enables telecommunicators to elevate their individual levels of compliance to the protocol systems, and achieve superior work performance in the performance of their duties.



There are other significant benefits associated to a well-executed quality assurance program. Communications centers participating in the National Academy of Emergency Dispatch Accreditation of Excellence (ACE) program report the following overall improvements to the delivery of emergency call processing methodologies:

- Improved morale through regular feedback and operational support
- Lower attrition once accreditation levels have been achieved
- Reduction of public complaints through improved customer service and call processing efficiencies
- Improved standard of care and practice
- Overall reduction in call-processing times by eliminating superfluous questions not germane to the task at hand
- Responder and caller safety improved through the regular and consistent evaluation of scene safety conditions
- The effective delivery of pre-arrival instructions for police, fire and emergency medical events
- The standardization of responses based on the acuity of the event, eliminating sending too many or too few emergency responders.
- Lives are saved

### 3.4 OUTCOMES

It is the vision of the Bureau to consider examples of service improvements that will significantly raise the performance bar of PSAPs, with the end objective of providing the highest standard of care and practice possible to the citizens of Maine. As well, emergency responders are provided with consistent and accurate details of every call, enabling safer responses and higher quality information. Overall, a significant and noticeable improvement to the delivery of emergency services is achieved. The adoption of structured call processing systems coupled with an effective QA process cannot be overstated.

### 3.5 SUMMARY

Maine's QA processes have significantly improved the delivery of EMD services, as well as the standard of patient care for its citizens. Consideration must now be given to the adoption of standardized call processing and QA systems for fire and police calls for service.

**Recommendation #1 - "that the Bureau adopts and implements standardized Quality Assurance systems for fire and police calls for service."**

In order to realistically move forward with expanding the existing processes already imbedded in state legislation and Bureau and MEMS rules, the immediate challenge is institutionalizing the recommendations made in this report. An analysis of existing resources both at the state and the PSAP levels will be necessary to determine where QA resource shortcomings exist. In addition, In order to adopt these recommendations and move forward with a program, it will be necessary to establish a QA program manager. This position would oversee the implementation and execution of the proposed QA program, as well as the long range implementation of structured protocol call processing systems for

fire and police events. Existing Bureau resources possess the expertise, but current duties would not allow for an additional workload of the executing the new program.

The QA program manager would rely heavily on a yet to be established advisory working group committee. This committee would be tasked with doing the initial leg work of assisting in the implementation of the QA program, as well as the roll out of new call processing systems. Its membership must consist of Bureau, MEMS and carefully selected PSAP representatives. It is also highly suggested that a cross-section of emergency response stakeholders also participate in an advisory role.

The implementation of a comprehensive QA program on a statewide basis is an essential next step in the evolution of an already established superior system of EMD call processing methodologies. In other words, the next steps to achieving this goal is the enhancing of existing Rules and the adoption of structured protocols for fire and police call processing.

## 4 STANDARDIZATION OF CALL PROCESSING

### 4.1 INTRODUCTION

Effective QA programs are dependent on standardized processes. Uniform call taking and dispatch protocols for public safety services establish the standardized processes upon which performance is measured. Standardized call processing along with QA improves the delivery of service to the citizens of Maine.

The Bureau's successful implementation of EMD protocols and QA systems support this concept. As stated, issues such as caller safety, responder safety, scene safety, and the effective application of pre-arrival instructions are best addressed by standardized call processing systems. Structured protocols essentially provide the tools and skills that enable telecommunicators to be the best they can be. Public safety organizations such as the National Emergency Number Association (NENA), the Association of Public-Safety Communications Officials International (APCO), the National Fire Protection Association (NFPA), and the Commission on Accreditation for Law Enforcement Agencies, Inc. (CALEA) recognize the value of pre-arrival instructions, structured protocols, and QA processes in emergency call processing, and have participated in publishing best practice standards. In short, public safety professionals have affirmed that the more order and structure there is to this emergency call processing, the better the service to the public and responders. PSAPs must be enabled to do the right thing, for any call, at any time, all the time.

### 4.2 STRUCTURED PROTOCOL CALL PROCESSING SYSTEMS

**4.2.1 *Recommended Best Practices*** – NENA is a not-for-profit public safety organization that serves its members and the greater public safety community as the only professional organization solely focused on 9-1-1 policy, technology, operations, and education issues. NENA works with 9-1-1 professionals nationwide to establish industry leading standards, training, and certifications. Through the association's efforts to provide effective and efficient public safety solutions, NENA strives to protect human life, preserve property, and maintain the security of our communities. In 2008, NENA published the Emergency Call Processing Protocol Standard (NENA Emergency Call Processing Protocol Standard/Model Recommendation NENA 56-006 June 7, 2008). It provides emergency communication processing centers with a framework from which agencies can define appropriate emergency communication protocol requirements and recommendations for day-to-day operations and for disaster/major event scenarios. It is designed to provide uniformity and consistency in the handling of 9-1-1 and other emergency calls. It recommends standardized call processing protocols for all emergency call types, standardized prioritization of calls, and standardized pre-planned responses based on the level of prioritization of calls. The research, development, and implementation of call-processing protocols is endorsed by NENA as the most effective way to ensure the highest standard of care for both the emergency responders as well as the public. The public safety leaders in Maine have recognized the need for sound rules as well as the value of structured protocol and QA processes. To its credit and benefit, Maine currently meets the NENA recommended standard insofar as EMD is concerned, but does not meet the standard for fire and police call processing.

Maine remains one of the only states to have mandated the use of a high quality and internationally recognized EMD protocol system as well as a compulsory QA process for all PSAPs. This effort was successful and fully funded using E9-1-1 surcharge. To establish the same requirements for fire and police call processing would further establish Maine as a national leader in the establishment of best practices.

**4.2.2 Commercially Available Protocol Systems** - There are three structured protocol systems available for emergency call processing:

- Emergency Medical Dispatch (EMD)
- Emergency Fire Dispatch (EFD)
- Emergency Police Dispatch (EPD)

These structured protocol systems standardize call processing by ensuring that the essential objectives of emergency call processing are met. Most of these systems are researched and developed by subject matter experts and are updated on a regular basis. The desired systems are those that are supported by established councils of standards.

#### **4.3 BENEFITS**

In the absence of order, structure and employee measurement, standards of service erode and deteriorate. In the world of 9-1-1 centers, the standardization of service, and the measurement of individual compliance ensures that a constant and consistent standard of care and practice is in place at all times. For public safety communications personnel taking an emergency call for service, compliance to protocol enables the constant and consistent application of processes that are essential for achieving the essential objectives of emergency call processing:

- Determining what has happened (what is the emergency)
- Evaluating scene safety (hazards to responders and callers)
- Establishing the priority of the call (appropriate prioritization of response)
- Providing life saving support or any other appropriate pre-arrival instructions

The foregoing benchmarks establish call processing standards that the Bureau has adopted for EMD calls. By embracing fire and police protocol systems, the Bureau will significantly raise the performance bar of its PSAPs for all call types.

**Recommendation #2 - “that the Bureau adopts and implements standardized call processing protocol systems for fire and police calls for service.”**

#### **4.4 OUTCOMES AND LIABILITY**

Quality assurance programs, where used effectively, reduce complaints from the public, reduce liability, and encourage a healthy productive work environment. Although liability issues are reality in every

aspect of public safety, they are of particular importance in the PSAP environment. Historically, when a 9-1-1 call goes bad, the investigation starts with how the call was first handled. The finger of blame is pointed immediately at the PSAP. Although the use of structured protocols does not obviate litigation, they represent a significant step towards mitigating PSAP liability. According to Dr. Jeff Clawson, to date there has been no successful litigation of a PSAP that has adopted and properly implemented the NAED protocols. This fact in itself must be seriously considered when deciding on moving forward with a protocol and QA implementation of this magnitude. Litigation awards as well as the toll taken on victims as well as PSAP personnel should more than justify the rationale for implementing these processes.

## **4.5 EXPANDING EXISTING PROCESSES**

Expanding existing PSAP processes ultimately will benefit the citizens of Maine. However, this expansion will require careful financial and logistics planning very similar to the successful implementation of statewide EMD and QA processes.

### **4.5.1 Existing Rules**

As stated, the Bureau and MEMS currently have rule making authority.

The Rules that have been established by the Bureau pertain to PSAP operations. Bureau Rules are found on page 61 of Appendix A – PSAP Initial Findings Review.

The Rules that have been established by MEMS pertain to the use of emergency medical dispatch protocols and QA processes germane to EMD. MEMS Rules are found on page 50 of Appendix A – PSAP Initial Findings Review.

### **4.5.2 Broadening Existing Rules**

In order to further raise the standard of care and practice established by the EMD and QA Rules, consideration must now be given to broadening existing Rules to enable PSAPs to embrace mandatory use of fire and police protocol systems. The principles and objectives established for EMD by the MEMS Rules must now be applied to fire and police protocol call taking systems. Managing of the QA processes for EMD, EFD, and EPD, as well as the reporting and auditing of QA compliance requirements, may best be managed by one entity (i.e., the Bureau).

In addition, the compulsory use of protocol, as well as the mandatory QA of all three disciplines, must be clearly articulated and stated in a single Bureau Rule. In short, language similar to the existing MEMS Rules should be created for EPD and EFD training, QA reporting, certifications, licensing requirements, and funding. PSAPs that achieve success with structured protocols have made the use of the protocol systems a condition of employment. Clear expectations must also be established concerning compliance to all protocol systems. Refer to Appendix B – Example of New Employee Orientation Policy.

### **4.5.3 Expanding Quality Review Processes**

The new protocol systems will have a significant impact on existing QA resources. The new requirement to QA fire and police calls will significantly increase the QA workload. It is generally accepted that police calls represent about 75% of PSAP call volume, followed next by emergency medical calls (15%) followed by fire/rescue calls. Adding two more layers of QA, particularly the police call review requirements, could easily triple the current QA workload. In short, should the state move forward with this plan, additional resources will be required to meet the QA call workload increase. This does not necessarily translate to PSAPs having to hire additional employees, nor does it imply that the additional QA review must be absorbed by existing QA resources.

There are several options available to achieve QA. There are private consultants available who are properly credentialed and offer QA services on a contract (or per call review) basis.

Another alternative would be for the Bureau to hire a QA team that could travel from PSAP to PSAP to perform QA.

Technology allows us to send and receive audio files over great distances. QA evaluations can be electronically delivered in portable document file (pdf) format. In other words, QA can be done from almost anywhere with the requirement that the QA resource is credentialed and a licensed user of the QA system.

## **4.6 IMPLEMENTATION CHALLENGES**

Implementation of a state-wide roll out of two new protocol systems will have a major impact on PSAPs. The adoption of two new systems will be a long, but not impossible journey. The Bureau must be commended for its vision in championing and implementing statewide EMD. It should be noted, however, that a state-wide roll out of two new protocol systems will challenge everyone involved in the project. It will require a complete project management charter, and the utilization of consulting resources.

In order to ensure success, the Bureau will need to work with a project manager, a consulting team, as well as the protocol vendor to develop and execute a complete and detailed implementation plan. (Refer to Appendix C – Example of a Protocol Implementation Template). Note that this template is intended for protocol implementation in a single stand-alone PSAP. It is designed to lay out the steps involved in what typically takes five months to achieve. This time frame is recommended for brand new implementations with no working knowledge of protocols.

Creative planning and current PSAP familiarity with EMD and QA processes may allow for a fast track approach that may reduce this “worst-case” time frame. If the state adopted an aggressive approach to implementation (versus one PSAP at a time), it would still be a challenge to achieve statewide success in a timely fashion. The overall project timeline would be directly proportional to the number of PSAPs targeted for implementation. It is conceivable that legislators may mandate the reduction of the existing 26 PSAPs which would lessen the burden of implementation and reduce costs.

In addition to the logistics involved in the proposed implementation, there are other factors that need consideration. The challenges of learning two protocol systems will have a profound impact on some PSAP personnel. PSAPs are noted for resisting change, and there will positive and negative outcomes as this project moves forward.

It is MCP's opinion that the mandatory use of the NAED's EMD protocol and QA process offer a major advantage to PSAPs. Once an employee has been certified and trained in the EMD system, it is that much easier for that employee to learn the EPD and EFD systems. Since the three NAED protocol software systems are virtually identical in functionality, a PSAP employee who is familiar with the EMD software can easily transition to the EPD and EFD software systems. This is because all three software systems are highly intuitive and readily learned. In addition, when multiple NAED protocols are taught together within a six-month window, the cumulative number of certification training days is reduced resulting in fewer days away from their respective PSAPs.

The following is a partial list of common implementation issues:

- Certain employees will have difficulty mastering the new protocol systems
- Card set versions of the protocol systems are difficult to use (particularly EPD)
- PSAPs may resist the extra QA workload
- Employees who are technically savvy will readily adapt
- Employees who are engaged and welcome feedback (QA reports) will excel
- The need for the recommended committees may not be favorably viewed by PSAPs
- There will most likely be computer aided dispatch (CAD) interface issues
- CAD systems may require upgrading (or replacing)
- QA is delayed

Due to the experience of the Bureau in implementing EMD, most of the foregoing issues have been already been experienced and successfully dealt with by the Bureau and the affected PSAPs.

#### **4.7 FINANCIAL IMPACT**

Implementation of a state-wide roll out of two new protocol systems will require serious planning. The logistics of a phased implementation of fire and then police will present many significant fiscal challenges. They include, but are not limited to, the following examples:

- Procurement of two protocol systems (i.e., card sets, manuals, software)
- Certification training
- Adding two additional QA disciplines (i.e., certification of additional QA resources)
- Costs associated to the development of the necessary software interfaces required for the CAD systems integration
- Costs associated to the front end consulting of the overall implementation effort
- Upgrading existing CAD systems (hardware and operating software where necessary)

## 4.8 QUALITY OF E9-1-1 SYSTEMS EXPERIENCED BY CALLERS

The quality of E9-1-1 systems experienced by 9-1-1- callers is paramount and is of a high priority. The adoption of structured protocol systems for fire and police call processing must be considered the next essential step in improving the delivery of emergency services.

## 4.9 MOVING FORWARD

In order to practically address implementation issues, the following narrative outlines protocol implementation issues. It also offers options for moving forward. Protocol and QA systems implementation requires careful planning and a methodical approach. Past lessons learned in other jurisdictions have determined that a rushed approach to implementation leads to negative results from both the user and the implementation levels. The options presented herein are to be carefully weighed against funding, personnel and logistics issues.

## 4.10 STATEWIDE IMPLEMENTATION OPTIONS

Due to the complexities of the EPD protocol system, it must be stated that irrespective of implementation option choices, the EFD protocol and QA system should be completed before moving ahead with EPD.

**Option 1: One-Time Approach to Implementation** - For a one-time implementation of the entire costs associated to QA, EFD, EPD, training, software and consulting support services, refer to Appendix D – Statewide Protocol Implementation Cost Estimate attributable to the Bureau only. The quote from Priority Dispatch Corp, comes in at an estimated \$2.3M. This is a “list-price” estimate and may be completely unrealistic to complete in a one year period. The quote does not take into account any applicable discounts such as reduced consulting fees, recurring costs associated to annual licensing of the products, or recertification of telecommunicators. Although it appears to be onerous both in cost and effort, it is open to negotiation. This quote must also be considered a “worst-case” scenario but is included in this report as an initial benchmark.

**Option 2: Multi-Year Plan Approach** – A phased, multi-year plan approach is much more realistic highly suggested particularly on an implementation of this magnitude. If the state commits to a complete system implementation spread over a fixed time period, overall costs might also be negotiated and spread over an agreed to schedule.

**Option 3 – Voluntary PSAP Participation** – Several PSAPs have expressed an interest to move forward with adding EPD and EFD. Funding for a beta-style approach would have to be authorized particularly if the source is the 9-1-1 surcharge budget. Individual PSAP costs would be driven by the number of call-taking work stations, number of PSAP employees requiring training, and associated consulting expenses.



**Funding** – It is expected that any implementation costs would be authorized out of the 9-1-1 surcharge budget. However, there will be additional costs that PSAPs must consider and be prepared to bear. These costs include but are not limited to:

- Backfilling of vacancies created by certification training
- Associated training costs such as travel
- Overtime incurred due to scheduling conflicts
- Protocol software integration fees charged by CAD vendors
- Potential CAD operating system upgrade costs

PSAPs would need to plan budgets accordingly in order to absorb such implementation costs.

## 5 PUBLIC SAFETY ANSWERING POINT (PSAP) INITIAL FINDINGS REVIEW

### 5.1 INTRODUCTION

This section of the report summarizes the findings of the PSAP Initial Findings Review, and makes recommendations where appropriate. Note that PSAPs had the opportunity to comment on initial findings, and were encouraged to resolve outstanding issues and provide evidence of compliance documentation to the Bureau. Refer to Appendix E – Post-PSAP Review Correspondence.

### 5.2 CALL PROCESSING STATISTICS

**General Comments**—Call processing statistics portion of the review focused on two areas:

- Average call answer times for 9-1-1 calls
- Average call processing time for 9-1-1 calls

#### **Observations**

**Average Call Answer Times for 9-1-1 calls** - Variations from the call answer time generated by the PSAP did not vary significantly from the times generated by the Bureau.

**Average Call Answer Times for 9-1-1 calls** – Variations from the average call processing time statistics generated by the PSAPs varied significantly from the times generated by the Bureau.

**Recommendation #3** - *“that the Bureau provide refresher training to PSAP personnel on the MagIC software system.”*

### 5.3 ALI DISCREPANCY/MAPPING ERROR REPORTING SYSTEM

**General Comments**—The Automatic Location Identification (ALI) Discrepancy/Mapping Error Reporting System Call Processing statistics portion of the review focused on three areas:

- ALI discrepancies
- Mapping Error discrepancies
- Discrepancy/Mapping Error reporting systems.

A template for ALI and mapping error reporting was developed by the Bureau and distributed to all PSAPs for implementation.

#### **Observations:**

#### **Internal PSAP Log**

The use of the ALI Discrepancy/Mapping Error reporting system was in place at all PSAPs. All but one PSAP used the system.

### ***Sent to FairPoint (Error Reporting)***

Error reports are sent via fax to FairPoint Communications for processing as directed in the ALI/Mapping Error Reporting Procedure.

### ***Reconciliation of Error Reports***

Error reports are either lost or misfiled at the PSAP and not getting entered into the error report log book.

**Recommendation #4 - “that the Bureau annually audit PSAPs to ensure that the ALI Discrepancy/Mapping Error reporting system policy is being followed.”**

## **5.4 INTERNAL POLICIES FOR PUBLIC COMMENT/COMPLAINT**

**General Comments**—The Internal Policies for Public Comment/Complaint portion of the review focused on two areas:

- The review of PSAP policies and processes for public comment and complaint, and
- Obtaining examples/proof of process.

### ***Observations:***

#### ***PSAP Policies and Processes for Public Comment/Complaint***

At the time of the MCP visit, 23 PSAPs were able to demonstrate compliance to the Rule. Three PSAPs were unable to provide evidence at the time of review.

**Recommendation #5 - “that the Bureau audit PSAPs that were not in compliance with the Bureau’s Public Comment/Complaint Rule.”**

## **5.5 QUALITY ASSURANCE PROGRAMS AND PROCESSES**

**General Comments**—The Quality Assurance Programs and Processes portion of the review focused on two areas:

- Policies and systems used for QA for EMD calls (as per EMS Rules Section III. Quality Assurance/Quality Improvement)
- Any other quality review efforts for fire and police (law enforcement) calls

#### ***Quality Assurance Programs and Processes***

MEMS has established processes to ensure that QA is done on a regular basis and that QA status reports are submitted by PSAPs on a monthly basis. Along with annual visitations to all PSAPs, MEMS staff also facilitates support groups meetings that are well received by the PSAPs.

All PSAPs were able to demonstrate the existence of an EMD QA program. Not all PSAPs have been able to review the prescribed number of EMD calls. Compliance to the EMD protocol is steadily increasing in all PSAPs. At the time of the review, 19 PSAPs were reporting their EMD compliance scores on a regular basis. Due to the absence of structured protocols for fire and police, there is QA data available for non-EMD calls.

**Recommendation #6 - “that the Bureau regularly audit PSAPs to ensure ongoing compliance to Maine Emergency Medical Services (MEMS) Quality Assurance Rules.”**

#### **Quality Review Efforts for Fire and Police (Law Enforcement) Calls**

There is no effective QA process in place for fire and police (law enforcement) calls.

### **5.6 INTERNAL POLICIES AND PROCEDURES**

**General Comments**—The Internal Policies and Procedures portion of the review focused on the following areas:

- Policies and procedures in place that are used for emergency and nonemergency call processing, transfers and dispatch.
- Policies and procedures in place that are used for emergency medical call processing and dispatch, and for the transfer of EMD calls between PSAPS and other centers (EMD centers or not).
- Obtaining soft copies of relevant policies and procedures if available.

#### **Policies and Procedures**

Most PSAPs have established internal policies and procedures that address emergency and non-emergency call processing methodologies.

#### **Call Transfer Policy**

PSAPs have call transfer policy in place. However, it is difficult to measure compliance to the policy. In addition, there are reported inconsistencies with regard to responsibility for EMD call processing (i.e., inconsistencies with the administering of EMD, when to transfer, which PSAP is responsible for EMD, which PSAP should give pre-arrival instructions, etc.).

There is a need for a statewide policy and procedure document that provides specific instructions on when to transfer, how to transfer, and language to be used, and clear and concise rules on EMD call processing is required for the standardization of call transfer procedures.

What are of particular concern are issues surrounding call ownership. Ideally, all PSAPs should have the training, tools, and processes that enable the immediate processing of all types of calls for service. The adoption of EMD, EPD, and EFD protocols at all PSAPs and issues surrounding call ownership as well as call transfer should be considered a high priority. The sooner that life-saving pre-arrival instructions (PAIs) are administered to callers trapped in a sinking vehicle, trapped in a structure fire, or experiencing a medical emergency, the higher the standard of care and practice for the residents of Maine.

**Recommendation #7 - “that the Bureau establish a mandated policy and procedure Rule that provides specific direction and language for Call Transfer.”**

### ***Fire and Police Call Processing Guidelines***

Four PSAPs have created internally developed fire and police call processing guidelines. The introduction of software-based structured protocols along with effective QA processes for law enforcement and fire events standardizes call processing. Structured protocols, combined with regular call review (QA), result in a consistently high standard of care and practice.

**Recommendation #8 - “that the Bureau investigate commercially available fire and police call processing and QA systems.”**

## **5.7 EMPLOYEE TRAINING RECORDS**

**General Comments**—The Employee Training Records portion of the review focused on the following areas:

- Basic and in-service training records
- Status of EMD certifications
- In house Continuing Education Hours (CEH) tracking system

### ***In-Service Training Records***

All PSAPs keep detailed in-service training records.

### ***EMD Certifications***

MEMS supports a telecommunicator certification and licensing database that tracks expiry dates. In an effort to assist telecommunicators, reports are forwarded to PSAPs on a regular basis.

PSAPs self-reported that telecommunicator EMD certifications and licensing requirements were current and up-to-date.

### ***Continuing Education Hours (CEH) System***

In-house Continuing Education Hours (CEH) systems at each PSAP were reviewed. It appears that every PSAP director understands the requirements for CEH, and is making every effort to ensure that telecommunicators comply with the CEH recertification requirements.

## **5.8 BUREAU RULES**

**General Comments**—The Bureau Rules portion of the review focused on the following areas:

- Review all documentation that is required by the Bureau Rules
- Specifically review Telecommunications Device for the Deaf (TTD) test calls

### **TTY Test Calls**

Eight PSAPs fell short of meeting the testing criteria as required by the Bureau Rule.

**Recommendation #9 - “that the Bureau regularly audit PSAPs to ensure ongoing compliance to the Bureau’s TDD Test Call Rules.”**

### **Archiving of Audio Recordings**

All PSAPs were in compliance with the 30 day retention Rule. It should be noted that the 30 day rule is somewhat shorter than typically found at PSAPs across the nation. The following are examples of out-of-state audio call retention criteria:

- Arizona = 180 days
- Georgia = 3 years
- Oregon = 7 months

It should be noted that Maine PSAPs are keeping their audio recordings well beyond the 30 day minimum requirement.

**Wireless Call Routing** – A recurring issue was the routing of wireless 9-1-1 calls. This routing introduces an extra step in the call processing schema by creating, in the vast majority of calls, the need to transfer the call to another PSAP. The reconfiguration of wireless call routing would significantly improve call processing efficiencies and reduce response times.

**Recommendation #10 - “that the Bureau investigate alternate options for PSAP wireless call routing.”**

**Call Sharing** – Call sharing is the sharing of calls between local County Sheriffs and the State Police. It is a law enforcement model designed to mitigate law enforcement staffing shortages by sharing response resources. It has been in place in various locations since the early 1990’s, and is locally maintained on a rotating schedule. Most county PSAPs report that call sharing is problematic as it complicates response logistics, and requires an extra effort to determine who should respond to a call for service. On occasion, law enforcement resources may have to respond to locations outside their normal duty district which further increases response times. It was the general consensus that county PSAPs prefer that call sharing be eliminated, and that the Sheriffs be designated the primary responders with the State Police as backup resources.

**Computer Aided Dispatch (CAD)** – There is noticeable disparity in PSAP CAD systems. Some PSAPs use functional and relatively newer CAD system technologies, while others are attempting to make the most of CAD systems that are completely obsolete.

## Appendix A—PSAP Initial Findings Review

**State of Maine**  
**Public Utilities Commission**  
**Emergency Services Communication**  
**Bureau**  
**Public Safety Answering Point (PSAP)**  
**Initial Findings Review**  
**and**  
**Review of Rules, Statutes, & Policies**  
**Related to PSAP Quality Assurance**

January 18, 2011



**MissionCriticalPartners**





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## **INTRODUCTION AND OVERVIEW**

### **BACKGROUND AND HISTORY**

The Emergency Services Communication Bureau (Bureau) was established in 1994 as an agency within the Department of Public Safety (DPS) to implement and manage Enhanced 9-1-1 (E9-1-1) throughout the state of Maine. It was moved under the Public Utilities Commission (Commission) in 2003.

In December 1998, the Bureau signed a contract with Bell Atlantic (now FairPoint Communications) to provide the network, database services, and the infrastructure for a statewide E9-1-1 system. Implementation was completed in the fall of 2001 for wireline telephones. At that time, the network included 49 public safety answering points (PSAPs) across Maine’s 16 counties. In 2005, the Bureau began implementing wireless 9-1-1, as prescribed by the Federal Communications Commission (FCC) Docket 94-102. Phase II deployment (location determining technology) was completed by all wireless carriers by 2006. In 2007, the E9-1-1 system added Voice over Internet Protocol (VoIP) calls to its services in compliance with FCC Docket 05-116.

In 2003, the Maine State Legislature passed a bill requiring the Bureau to reduce the then 48 PSAPs to between 16 and 24 to the extent possible. A two-year process resulted in a reduction to 26 PSAPs. Although the number of PSAPs was reduced, most of the PSAPs that closed continued to operate dispatch services.

In 2005, the Bureau became responsible for the funding and delivery of Emergency Medical Dispatch (EMD) training for all PSAP call takers, and for providing approved EMD protocols for use in each PSAP. Public Law 2005, Chapter 303 also required that any dispatch-only center that voluntarily choose to deliver EMD services to comply with the same statutory requirements as PSAPs. EMD was implemented statewide in 2007. By June 2010, all EMD centers were required to move to a common protocol.

In 2010, the Bureau began requiring all newly hired fulltime dispatchers at all PSAPs and dispatch-only centers to attend a 40-hour basic dispatcher curriculum. Dispatchers hired prior to January 1, 2008, were grandfathered. Part-time dispatchers are exempt but are encouraged to attend. The basic course is recommended as a prerequisite to attending the advanced Emergency Medical Dispatch course.

In February 2010, the Office of Program Evaluation & Government Accountability (OPEGA) issued a report entitled, “Emergency Communications in Kennebec County.” The report identified a need for improvement in the areas of standardized protocols and quality assurance (QA). As a direct result, the Bureau was tasked by the 124th legislature (P.L. 2009 Chapter 617) to implement a quality assurance program to audit and monitor compliance with emergency dispatching standards, practices and procedures of PSAPs. The resulting QA program is intended to audit and monitor compliance with emergency dispatching standards, practices, and procedures of PSAPs.



## APPENDIX A – PSAP INITIAL FINDINGS REVIEW

The Bureau moved forward with the development and implementation of a QA program by contracting with Mission Critical Partners (MCP).

MCP has direct experience with assisting state or regional 9-1-1 authorities in developing quality assurance review programs and has intimate knowledge of quality assurance systems that work in conjunction with structured protocol systems. MCP has worked both nationally and internationally with provincial, state, county and municipal public safety entities to develop and introduce industry-recognized quality assurance programs. MCP also has direct experience assisting state or regional 9-1-1 authorities in considering the adoption of uniform call-taking protocols. In addition, the company has been directly involved in the research, development, and deployment of structured protocol systems for medical, fire and police call-processing systems.

### **RULEMAKING AND STANDARDS**

The Bureau has the statutory authority to create standards necessary to provide for the operation of the state E9-1-1 system through the routine technical Administrative Rule process. The Bureau's Administrative Rules pertaining to this study are found in, Chapter 1: Standards For Establishing A Statewide Enhanced 9-1-1 System. (Refer to Appendix 5—65 Public Utilities Commission, 625 Emergency Services Communications Bureau, Chapter 1: Standards For Establishing A Statewide Enhanced 9-1-1 System). Minimum call answering and call taker and dispatch training standards are found in this Chapter.

DPS's Maine Emergency Medical Services (MEMS) Bureau is responsible for the coordination and integration of all state Emergency Medical Service (EMS) activities. The Maine Emergency Medical Services Act defines EMS licensing requirements and includes certification and licensing of personnel tasked with providing EMD services.

MEMS Administrative Rule Chapter 5-A Emergency Medical Dispatch Licensure sets specific QA reporting requirements as well as compliance goals for EMD call taking and dispatching throughout the state. This rule required all dispatch centers using the EMD protocols to comply with the QA requirements beginning March 2010. Chapter 3-A Emergency Dispatch Licensure required all EMD centers to transition to a common protocol by July 1, 2010.

There is no state standard in place for law enforcement or fire call processing. Although there are companion police and fire protocols to the EMD protocol, no PSAP or dispatch-only center has implemented either protocol systems.



## APPENDIX A – PSAP INITIAL FINDINGS REVIEW

### EVALUATION OF MAINE’S PSAPS

The Commission contracted Mission Critical Partners (MCP) to assist the Bureau in the evaluation of the state’s PSAPs. The objective was to measure each PSAP’s compliance to the established rules and reporting requirements.

MCP visited all 26 PSAPs in Maine to conduct QA reviews on the adherence to Bureau rules and to review any local call taking protocols. The project scope included the following tasks:

- Evaluate the current environment of PSAPs and develop a PSAP evaluation instrument
- Conduct a review of the Bureau rules, statutes and policies related to PSAP performance as well as the Bureau of EMS rules related to QA
- Conduct onsite evaluations of each PSAP
- Provide a preliminary assessment of Bureau/PSAP review findings

This review describes the processes established to complete the initial phases of the QA review and provides a preliminary assessment of the findings, as well as a review of the Bureau rules, statutes, and policies related to PSAP performance.

### INITIAL PHASES OF THE QUALITY ASSURANCE REVIEW

In order to measure each PSAP’s compliance to the rules and reporting requirements, MCP collaborated with the Bureau to develop a survey instrument. Once the Bureau approved the final version of the instrument, a plan was established to introduce the PSAPs to the first stages of the project. Refer to Appendix 1—PSAP Interview Information Instrument.

A letter of introduction was sent by the Bureau to each of the 26 PSAPs. This letter introduced the MCP reviewers, as well as provided the reasons behind the audit effort. The letter defined the scope of the review, and that the results of the review were intended to help the state establish long-term “Best Practices.” It also stated that PSAPs would have an opportunity to examine and comment on their draft reviews.

Two on-line orientation sessions were held September 8 and 9, 2010. Participants were sent a slide presentation and provided with conference bridge call-in information. During these orientation sessions, PSAP personnel reviewed a tentative visitation schedule, as well as what specific information would be required by the MCP reviewers.

The majority of the PSAP reviews were conducted during the last week of September and the first week of October.



## APPENDIX A – PSAP INITIAL FINDINGS REVIEW

It must be noted that this review represents a snapshot of what was observed at each PSAP on the date of their review. It does not reflect subsequent steps taken by PSAPs to address any observed or reported shortcomings. However, PSAPs are expected to take immediate steps to correct any deficiencies identified by the reviewer process.

### INITIAL FINDINGS

The initial findings of the PSAP reviews are summarized in Table 1: PSAP Reviews—Initial Findings on page 32 of this review.

### CALL PROCESSING STATISTICS

**General Comments**—The call processing statistics portion of the review focused on two areas:

- Average call answer times for 9-1-1 calls
- Average call processing time for 9-1-1 calls

The Bureau provided MCP with the statistical data for both areas in advance of the PSAP review visitations. However, it was decided that the PSAPs should also be tasked with producing these times to determine how well PSAPs could utilize the Management Information System (MIS) software package provided by the Bureau to PSAPs for such purposes.

A comparison was done between the Bureau-produced statistics and the locally-produced statistics.

#### ***Average Call Answer Times***

This statistic was intended to measure how quickly 9-1-1 calls are answered. The time interval for this measurement is described as the “ring time” (i.e., how long the call “rings” in the PSAP until it is answered by the telecommunicator).

Figure 1 compares statistical data generated locally at each PSAP, as well as the data generated by the Bureau:



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Figure 1. Average Call Answer Times—PSAP vs. Bureau

PSAP	Call Answer Time (seconds)		
	PSAP Stat	Bureau Stat	Variation (+/-) from Bureau
Androscoggin County Sheriff's Office	:03	:05	-:02
Bangor Police Department	:05	:04	+:01
Biddeford Police Department	:05	:05	:00
Brunswick Police Department	:05	:03	+:02
Central Maine Regional Communications Center	:05	:05	:00
Cumberland County 9-1-1	:04	:06	-:02
DPS Gray	:04	:04	:00
DPS Houlton	:05	:05	:00
DPS Orono	:04	:04	:00
Franklin County Sheriff's Office	:04	:04	:00
Hancock County Regional Communications Center	:04	:05	+:01
Knox County Regional Communications Center	:04	:04	:00
Lewiston/Auburn 9-1-1	:06	:04	+:02
Lincoln County 9-1-1	:06	:04	+:02
Oxford County 9-1-1	:05	:04	+:01
Penobscot County Regional Communications Center	:03	:06	-:03
Piscataquis County Sheriff's Office	:04	:06	-:02
Portland Police Department	:05	:05	:00
Sagadahoc County Communications	:04	:03	+:01
Sanford Police Department	:05	:04	+:01
Scarborough Police Department	:06	:05	+:01
Somerset County Communications	:05	:04	+:01
Waldo County Regional Communications Center	:05	:05	:00
Washington County Regional Communications Center	:03	:06	-:03
Westbrook Police Department	:05	:05	:00
York Police Department	:05	:05	:00

Observation: The average call answer time statistics for all PSAPs is exceptional. The call answer time standard as suggested in the *National Emergency Number Association (NENA) Call Answering Standard/Model Recommendation Document 56-005, June 10, 2006*, is:



## APPENDIX A – PSAP INITIAL FINDINGS REVIEW

**“3.1 Standard for answering 9-1-1 Calls.** Ninety percent (90%) of all 9-1-1 calls arriving at the Public Safety Answering Point (PSAP) shall be answered within ten (10) seconds during the busy hour (the hour each day with the greatest call volume, as defined in the NENA Master Glossary 00-001). Ninety-five percent (95%) of all 9-1-1 calls should be answered within twenty (20) seconds.”

Chapter 1 of Bureau rules set a call-answering standard that mirrors the above NENA recommended standard:

**“§3. Minimum Public Safety Answering Point Requirements and Public Safety Dispatcher Requirements**

1. Call answering and call transfer performance standards
  - A. Call answering. Ninety percent of all 9-1-1 calls received by a PSAP shall be answered in 10 seconds or less.”

Maine’s PSAPs should be commended for their efforts to ensure that incoming 9-1-1 calls are answered well within established call answering standards.

Variations from the call answer time generated by the PSAP did not vary significantly from the times generated by the Bureau but could reflect an area where additional training of PSAP personnel on the MagIC software system might be beneficial.

### ***Average Call Processing Times***

The average call processing time statistic was intended to measure the average “talk time” for each 9-1-1 call. The time interval for this measurement is described as the time from call answer to the time the call disconnected.

The statistics reported by the PSAPs did not always reflect the same times produced by the Bureau. Of the 26 PSAPs, only 14 reported the same findings. Figure 2 shows where the differences in reporting times occurred:





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Figure 2. Average Call Processing Time Variations

PSAP	Call Processing Time (min/seconds)		
	PSAP Stat	Bureau Stat	Variation (+/-) from Bureau
Androscoggin County Sheriff's Office	1:43	1:48	- :05
Bangor Police Department	1:24	1:24	:00
Biddeford Police Department	1:20	1:43	:-23
Brunswick Police Department	1:37	1:37	:00
Central Maine Regional Communications Center	1:14	1:14	:00
Cumberland County 9-1-1	1:14	2:46	-1:12
DPS Gray	1:30	0:43	:-13
DPS Houlton	1:38	1:38	:00
DPS Orono	1:02	1:02	:00
Franklin County Sheriff's Office	1:34	1:39	:-05
Hancock County Regional Communications Center	1:18	1:18	:00
Knox County Regional Communications Center	:59	0:59	:00
Lewiston/Auburn 9-1-1	1:13	1:13	:00
Lincoln County 9-1-1	1:28	1:28	:00
Oxford County 9-1-1	1:50	1:30	+ :20
Penobscot County Regional Communications Center	2:28	2:28	:00
Piscataquis County Sheriff's Office	1:35	1:35	:00
Portland Police Department	1:20	1:42	:-22
Sagadahoc County Communications	1:57	1:43	+ :14
Sanford Police Department	1:20	2:50	-1:30
Scarborough Police Department	1:47	2:27	:-40
Somerset County Communications	1:42	1:42	:00
Waldo County Regional Communications Center	2:25	2:25	:00
Washington County Regional Communications Center	1:19	1:19	:00
Westbrook Police Department	1:15	1:55	:-40
York Police Department	1:30	1:17	+ :13



## APPENDIX A – PSAP INITIAL FINDINGS REVIEW

Observation: The average call processing time statistics, as reported by the state, appear to vary between a low average of 43 seconds, to a high average of 2 minutes 50 seconds. Although this range appears at first to be large, when one considers the demographics of each center, certain possible explanations emerge.

- PSAPs that answer a high volume of wireless calls that require transfer most likely consume more talk time due to initial caller interrogation, and then subsequent transfer to another PSAP.
- PSAPs that transfer a high volume of calls may stay on the line longer with the caller until the call has been answered by the receiving agency.
- Calls that are transferred from one point to the next may require additional talk time as the transferring telecommunicator may need to relay to the receiving telecommunicator details and elements of the call.
- Some PSAPs do not receive automatic number information (ANI) and automatic location information (ALI) with the call, and additional talk time is required to determine caller location and further triage the call.
- There remain a consistent number of location (ALI) database errors; address verification further increases talk time.
- Some PSAPs directly receive most of their wireless 9-1-1 calls directly, thus the talk time overhead may be significantly lower than PSAPs that receive wireless 9-1-1 calls via call transfer.
- PSAPs that use structured protocol to evaluate Emergency Medical Dispatch calls will show a higher talk time than PSAPs that transfer such calls to another agency for processing.
- PSAPs that do not correctly use structured protocol to evaluate Emergency Medical Dispatch calls will show a lower talk time than PSAPs that follow the protocol correctly.
- PSAPs that have a comparatively higher law enforcement or fire call volume (compared to Emergency Medical Dispatch calls) will show a lower talk time than PSAPs that have a comparatively higher volume of Emergency Medical Dispatch calls.
- PSAPs serving urban areas with reliable addressing consume less time in location verification than PSAPs serving rural or unorganized areas.

The foregoing examples may or may not apply to the Maine PSAPs, but are offered as typical reasons call processing times may vary. Certainly, the regional diversity of PSAPs and size of the state impact call processing times and may be partly responsible for statistical anomalies.

It is still generally accepted that caller location continues to be an ongoing challenge to 9-1-1, particularly in the initial steps of call processing. The absence of structured call protocols for police and fire calls, as well as the lack of a comprehensive QA program, may also skew call-processing times. Nonetheless, it remains that there is a significant range of call processing times reported by both individual PSAPs as well as the state. As previously stated, additional training of PSAP personnel on the MagIC software system might resolve the statistical discrepancies.



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It should also be noted that there is no accepted standard for call processing times. Historically, emergency calls for service were processed as quickly as possible, often at the risk of not gathering enough information about the call. In addition, pre- arrival instructions (PAIs) were seldom if ever given to the caller. As stated previously, Maine’s PSAPs are mandated to use EMD protocol but there are no mandated protocols in place for law enforcement or fire calls.

Some public safety agencies continue to view police and fire call processing as events that need to be dealt with as quickly as possible, often at the expense of caller safety, scene safety, and responder safety. This philosophy, while understandable, is based solely on a “time is of the essence” view of response. While urgency remains a key element in emergency response, significant changes have been adopted in how such calls are processed. It is generally accepted that certain elements of an emergency call for service become mandatory. For example, in a medical emergency involving cardiac arrest, it becomes the duty of the call taker to immediately provide instructions on how to perform cardiopulmonary resuscitation (CPR). Calls involving the administering of PAIs increase call processing times, and such calls simply cannot be subject to time-centric analysis.

As public safety agencies adopt a more thorough and standardized standard of care and practice, variations in call processing as well as call transfer times will continue to vary. It is MCP’s opinion that despite the reported overall range of call processing times and considering the broad demographics of the state, the call processing times are reasonable.

In addition, should software-based structured protocols be introduced for law enforcement and fire events, more reliable call processing times will be attainable. It is generally accepted that calls that are handled using standardized protocol systems proceed in a more timely and efficient manner.

### **ALI DISCREPANCY/MAPPING ERROR REPORTING SYSTEM**

**General Comments**—The ALI Discrepancy/Mapping Error Reporting System Call Processing statistics portion of the review focused on three areas:

- ALI discrepancies
- Mapping Error discrepancies
- Discrepancy/Mapping Error reporting systems.

The following excerpt from Chapter 1 of Bureau Rules describes the error reporting requirements:



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### “§3. **Minimum Public Safety Answering Point Requirements and Public Safety Dispatcher Requirements**

#### **2. Administration**

- E. Discrepancies.** Each PSAP shall constantly compare the ALI information from the database with information supplied by the caller to identify discrepancies. Errors shall be documented and forwarded to the Bureau for correction in a manner prescribed by the Bureau.”

### “§7. **Procedures for cooperation and coordination with telephone utilities and municipalities for implementation**

- 4. Trouble reporting.** Each PSAP call taker shall fill out a trouble report when a call is found to have erroneous database information. The information shall be forwarded through the PSAP Coordinator to the Bureau, the Service Provider, and the telephone companies in a format established by the Bureau.”

It should be noted that a template for ALI and mapping error reporting was developed by the Bureau and distributed to all PSAPs for implementation. Further, all PSAP personnel have received training on the application of this process, and should understand the need for identifying, reporting, and tracking error reports. Refer to Appendix 2—Maine Ali/Mapping Error Reporting Procedure for PSAPs.

#### ***Internal PSAP Log***

The use of the ALI Discrepancy/Mapping Error reporting system was verified by the PSAPs providing evidence that the prescribed system existed and was in regular use.

At the time of the MCP visit, all but one PSAP used the system, although it was evident that some only put it in place upon notice of the upcoming review. The one PSAP that did not have a reporting system in place was Sanford Regional Communication Center. The MCP reviewer reported that there was no logbook in use at the time of the interview. It was explained that the call taker initiates ALI error reports, prints them in hard copy and then faxes the reports to FairPoint. Hard copies are kept in a file, but there are no control numbers. Most discrepancies were reported to be corrected and the forms returned within three days. However, the lack of a log makes it difficult to determine if any error reports are outstanding. The MCP reviewer requested that they start keeping a log and using control numbers.

This is reflected for each PSAP by observing a “Y” or “N” under the column “Internal PSAP Log” in Table 1. PSAP Reviews—Initial Findings.

#### ***Sent to FairPoint (Error Reporting)***

FairPoint Communications is the Enhanced 9-1-1 service provider for Maine. As such, it serves as the single point of contact in the State of Maine for error reporting.



## APPENDIX A – PSAP INITIAL FINDINGS REVIEW

It was demonstrated that error reports are sent via fax to FairPoint Communications for processing as directed in the ALI/Mapping Error Reporting Procedure. This is reflected for every PSAP by observing a “Y” under the “Sent to FairPoint” column in Table 1. PSAP Reviews—Initial Findings. However, closer examination of the reporting logs revealed that there appeared to be a range of turnaround times for reports sent to FairPoint for resolution.

The MCP reviewers did an on-site cursory review of turnaround times, and felt it was prudent to capture these statistics and report them as part of the PSAP review process. Referring to Table 1. PSAP Reviews—Initial Findings, under the column “Duration for turnaround in days,” there is a best-case scenario for turnaround baseline of about 2-3 days for most PSAPs. Other PSAPs appear to experience longer turnaround times, with the worst case was in the 7-10 day range.

Although this does not seem to be an issue to the PSAPs, the MCP reviewers openly questioned the disparity in the FairPoint turnaround time. Upon further investigation, it was determined that FairPoint processes all error reports in a fairly expeditious manner. However, resolved error reports are only faxed back to the originating PSAPs on Friday, not daily.

### ***Reconciliation of Error Reports***

The MCP reviewers observed many examples of error reports that had not been reconciled. Although the number of un-reconciled reports represented a smaller percentage of the overall reporting system, it nonetheless raised a flag. It was difficult to determine one way or another if every error report submitted to FairPoint was in fact processed and the error resolved by examination of the PSAP’s logs. Since FairPoint has a policy of faxing error reports back to the PSAP every Friday, it is suspected that the reports faxed back to the PSAPs are either lost or misfiled at the PSAP and not getting entered into the error report log book.

Further investigation raised another possibility for some of the outstanding ALI error reports. There are many reported issues of ALI errors concerning VoIP originated calls. Apparently, the VoIP providers may not be cooperating in an expeditious manner with efforts to resolve ALI errors generated when some of their respective subscribers place calls to 9-1-1.

It may also be of value if PSAPs could review their outstanding ALI error reports to determine if the reports are the result of a VoIP-originated call. Due to the issues concerning errors in the ALI database, and the chronic problem of caller location, it would make sense to communicate to PSAPs the importance of ensuring that the ALI error reporting procedures are followed.



## INTERNAL POLICIES FOR PUBLIC COMMENT/COMPLAINT

**General Comments**—The Internal Policies for Public Comment/Complaint portion of the review focused on two areas:

- The review of PSAP policies and processes for public comment and complaint, and
- Obtaining examples/proof of process.

The excerpt from Chapter 1 of Bureau Rules describes the public comment and complaint process requirements:

**“§3. Minimum Public Safety Answering Point Requirements and Public Safety Dispatcher Requirements**

**2. Administration**

- J. Public comment and complaint process.** Each PSAP shall develop a written procedure for receiving comments and complaints from the public and from public and private safety agencies served by the PSAP. Each PSAP's public comment and complaint documents shall include the name, title and contact information for the person designated by the PSAP to receive comments and complaints pursuant to this subsection. The Bureau shall assist each PSAP to develop and publicize these procedures, particularly through training on such procedures.”

### ***PSAP Policies and Processes for Public Comment/Complaint***

At each PSAP, the MCP reviewers requested evidence of compliance to the policies and procedures that are used for the processing of both internal (agency) and external (public) comment/complaint.

At the time of the MCP visit, 23 PSAPs were able to demonstrate compliance to the rule. This is reflected for each PSAP by observing the “Y” or “N” under the “Internal Policies for Public Comment/Complaint” column in Table 1. PSAP Reviews—Initial Findings.

The three PSAPs that were unable to provide evidence at the time of review are listed below, along with the comments of the MCP reviewer:

**Cumberland County 9-1-1**—At the time of review, there was no Complaint Policy in place. It appears that most complaints that are filed are internal in nature, and are handled by the Command Staff and existing internal process. It was reported that most complaints are brought up in Board Meetings, and that there have been about six external complaints in nine years.

**Portland Police Department**—All complaints are handled through the Police Chief’s office. Although no written policy is in place, all complaints are handled through the existing chain of command using the



## APPENDIX A – PSAP INITIAL FINDINGS REVIEW

standard practice. The complaint is forwarded to the Director who investigates and then further delegates it to the shift supervisor for further review with the employee. The supervisor reports back to the Director for direction on the disposition of the complaint.

Sanford Regional Communication Center—This agency has just recently shifted from a police-based agency to a self-standing agency that reports directly to the Town Manager. No direct policy related to this exists, but the agency plans to develop something in the very near future. It was reported that all agency complaints are forwarded to the Police Chief’s office for resolution. The complaint is then sent down to the PSAP Director’s office, who then pulls the tape and the computer aided dispatch (CAD) record, reviews the case and sends the comments back up to the Chief’s office for disposition. With the new agency structure, this process will likely need updating.

Overall, it appears that across the state, complaints from the public are infrequent. Some interviewees reported that they could not remember the last time a public complaint was received. Others reported that internal complaints from emergency responders were more frequent. In general, anecdotal reports of public complaints were perceived as asking too many questions or customer service issues with individual telecommunicators. These complaints are reported as being resolved by the PSAP supervisor, who contacts the complainant and reassures the complainant that the matter will be resolved internally, with no further action required.

Overall, public complaints are uncommon. However, this does not obviate the need for a policy and process.

### QUALITY ASSURANCE PROGRAMS AND PROCESSES

**General Comments**—The Quality Assurance Programs and Processes portion of the review focused on two areas:

- Policies and systems used for QA for EMD calls (as per EMS Rules Section III. Quality Assurance/Quality Improvement)
- Any other quality review efforts for Fire and Police (Law Enforcement) calls

#### **Quality Assurance Programs and Processes**

The following excerpt from Chapter 1 of Bureau Rules describes the QA program requirements:

- “§3. **Minimum Public Safety Answering Point Requirements and Public Safety Dispatcher Requirements**
2. **Administration**
- K. **Quality Assurance (QA) Program.** Each PSAP shall establish a quality assurance program which shall include a process for auditing the performance of each of its public safety dispatchers. The Bureau



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shall assist each PSAP to develop its Quality Assurance Program, particularly through training on the development of such plans.”

In addition, the Maine Emergency Medical Dispatch Priority Reference System—(EMS Rules. Section III in Appendix 3) describes in detail the Quality Assurance/Quality Improvement (QA/QI) program requirements.

The MCP reviewers requested evidence of QA programs and processes from each PSAP.

All PSAPs were able to demonstrate the existence of a QA/QI program. See the “Y” under the “Quality Assurance Programs and Processes” column in Table 1. PSAP Reviews—Initial Findings.

Most PSAPs had made a sincere effort to actively review and quality review their EMD calls, while others were struggling to meet the call review (also referred to as “case review”) statistics required by the National Academy of Emergency Dispatch (NAED), the state’s adopted protocol provider. Specifically, the NAED requires the following case review audit criteria:

- Agencies whose call volume is between 43,333 and 500,000 will be required to audit a percentage ranging between 3% and 1% (based on a sliding scale calculator).
- Agencies whose call volume is below 43,333 will be required to audit 1,300 cases (25 per week).
- Agencies whose call volume is below 1,300 will be required to audit 100% of their cases.
- Agencies whose call volume is above 500,000 will be required to audit 1% of their cases.

Maine PSAPs fall under the “below 43,333” call volume criteria; therefore, all PSAPs must audit 25 EMD calls per week, or about 100 EMD calls per month.

Not all PSAPs have been able to review the prescribed number of calls. However, with the exception of Androscoggin County Sheriff’s Office and Biddeford Police Department, the remaining PSAPs are making a strong effort to conform to the call review requirements. In addition, there is no doubt that compliance to the EMD protocol is steadily increasing in all PSAPs.

At the time of the review, 19 PSAPs were reporting their EMD compliance scores on a regular basis (i.e., for the 6-month period March–August 2010). The remaining five PSAPs performing QA had not submitted reports for two or more months. One PSAP appeared to report for only three months over the 6-month sample period. Note that due to the absence of structured protocols for police and fire, there is QA data available for non-EMD calls.

Compliance to EMD protocol is scored in several areas within the protocol system. The average compliance scores indicate that most PSAPs are making the required effort to improve compliance and





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achieve the desired results. Figure 3 shows a snapshot of the average EMD compliance scores of each PSAP for the reporting period March–August 2010:

**Figure 3. Average EMD Compliance Scores & Months Reported to the Bureau of EMS**

<b>PSAP</b>	<b>Average Compliance Scores</b>	<b>Months Reported</b>
Androscoggin County Sheriff's Office	N/A	0
Bangor Police Department	94%	6
Biddeford Police Department	N/A	0
Brunswick Police Department	94%	6
Central Maine Regional Communications Center	74%	3
Cumberland County 9-1-1	95%	6
DPS Gray	76%	6
DPS Houlton	83%	6
DPS Orono	84%	5
Franklin County Sheriff's Office	95%	6
Hancock County Regional Communications Center	82%	6
Knox County Regional Communications Center	86%	6
Lewiston/Auburn 9-1-1	75%	6
Lincoln County 9-1-1	88%	6
Oxford County 9-1-1	87%	6
Penobscot County Regional Communications Center	96%	6
Piscataquis County Sheriff's Office	91%	6
Portland Police Department	88%	6
Sagadahoc County Communications	86%	6
Sanford Police Department	78%	4
Scarborough Police Department	93%	4
Somerset County Communications	90%	6
Waldo County Regional Communications Center	88%	6
Washington County Regional Communications Center	94%	6
Westbrook Police Department	89%	6
York Police Department	97%	4



## APPENDIX A – PSAP INITIAL FINDINGS REVIEW

Overall, PSAP managers and supervisors clearly understand the need for regular call review. As shown in Figure 3, PSAPs actively engaged in regular call review were able to produce evidence of high compliance to the EMD protocol, whereas PSAPs that were struggling to perform call review reflected lower compliance scores. Overall, most PSAPs are coping well with their QA call review.

Androscoggin is clearly struggling to implement QA processes. The MCP reviewers found that the review of calls at this PSAP was spotty at best and usually the result of a complaint. It appears that they are struggling with resource shortages and are finding it difficult to meet the call review goal. There are two certified reviewers at this center, and there is a third one about to be trained. No reports have been submitted to MEMS to date. This PSAP is making every effort to start to review EMD calls and is hoping to get on board soon. There is a short-range goal of attempting to start reviewing calls for the month of October. It was reported there were some technical issues with storage of the ProQA call processing data, which are now resolved. This call processing data is exported from ProQA to AQUA. AQUA is the brand name of the QA software program used to review and score calls. AQUA is installed locally, so they are more or less ready to go. The MCP reviewers listened to an EMD call where the compliance to the protocol was near accreditation levels (95%). It would stand to reason that although call review has not started at this PSAP, the effort from certain PSAP staff to follow the protocol is evident, and once call review commences, it should not take long for this PSAP to achieve high levels of compliance to the protocol.

Biddeford Police Department has a QA process in place, but at the time of this visit, it was just being implemented. The MCP reviewer observed there was a very detailed QA/QI policy in place that mirrors the policy provided by the state. It has now been completely adopted and implemented. Drexel White, MEMS, is scheduled to visit this PSAP and assist in getting the program back on track. Since QA had not started, there was no data available at the time of the visit.

### ***Quality Review Efforts for Fire and Police (Law Enforcement) Calls***

With regard to the application of QA processes to Law Enforcement and Fire/Rescue calls, the absence of structured protocols for these call types does not easily allow for effective call review. The MCP reviewers were offered anecdotal comments that some calls are reviewed for customer service, but overall the QA process applied to EMD calls is not being applied to any other call types.

## **INTERNAL POLICIES AND PROCEDURES**

***General Comments***—The Internal Policies and Procedures portion of the review focused on the following areas:

- Policies and procedures in place that are used for emergency and nonemergency call processing, transfers and dispatch.



## APPENDIX A – PSAP INITIAL FINDINGS REVIEW

- Policies and procedures in place that are used for emergency medical call processing and dispatch, and for the transfer of EMD calls between PSAPS and other centers (EMD centers or not).
- Obtaining soft copies of relevant policies and procedures if available.

The following excerpt from Chapter 1 of Bureau Rules describes the requirements for the establishment of internal policies and procedures necessary for the establishment of call handling procedures:

**“§3. Minimum Public Safety Answering Point Requirements and Public Safety Dispatcher Requirements**

**2. Administration**

- B. Call handling procedures.** Each PSAP shall work with the public safety providers served by the PSAP to establish call handling procedures. Each PSAP shall review these procedures regularly with the Bureau.”

### ***Policies and Procedures***

Most PSAPs have established internal policies and procedures that address emergency and non-emergency call processing methodologies.

Sanford Regional Communications Center did not produce call processing policies, but an internal policy on call transfer was in place. There are no policies or procedures in place for EMD other than a general order that all medical calls will be processed using the EMD protocol. As previously mentioned, Sanford Regional Communications Center has just recently shifted from a police-based agency to a self-standing agency that reports directly to the Town Manager. Policies are being developed in the transition.

Soft copies as well as hard copies of relevant policies and procedures were reviewed and retained by the MCP reviewers, and there were no anomalies or serious shortcomings with any of the PSAP standard operating procedures (SOPs).

### ***Call Transfer Policy***

With regard to call transfer policy, PSAPs have policy in place. However, the MCP reviewers were unable to confirm whether the policy was being followed in a regular and consistent manner. In most cases, the procedures were fairly explicit and detailed as to how transfers were to be handled, the language to be used, and when the call could be released to the receiving agency. There were several anecdotal reports of inappropriate call transfers, particularly from PSAPs that field a large number of wireless calls. Most PSAPs reported that the situation has improved somewhat, but there were ongoing reports of “cold transfers” (i.e., calls that are transferred from one PSAP to another without any monitoring from the originating PSAP).



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Another issue that surfaced was the matter of delays caused by wireless call transfers. The current routing of wireless calls to centralized PSAPs where the call inevitably must be transferred to another PSAP introduces at least one additional step in the call processing methodology. Further, should a wireless call be transferred to the incorrect PSAP, another step in handling the call further exacerbates delays.

Unlike most of the other PSAPs, Lincoln County 9-1-1 reported that all wireless calls in their jurisdiction are routed directly to their PSAP. Lincoln County suggested to MCP that the Bureau revisit the manner in which wireless calls are routed throughout the various PSAP jurisdictions.

**Police and Fire Call Processing Guidelines**

All but four PSAPs were able to provide various iterations of internally developed police and fire call processing guidelines. Some PSAPs such as Lincoln County have an internally developed fire specific flip card guideline system available for call takers. Lincoln is also developing a similar system for law enforcement based on the PowerPhone police training syllabus. Other PSAPs have call processing guidelines that are stored in binders near the call taking positions.

The prime benefit of structured protocol in emergency call processing is the standardization of all steps in the processing of an emergency call. Structured protocols, combined with regular call review (QA), enable call takers to gather critical information in a concise and accurate manner every time a call is received. Protocols also assure the immediate delivery of life saving PAIs. The result is a consistently high standard of care and practice. In short, the same level of service used for EMD is also available for fire and police calls. Despite the efforts of PSAPs to develop internal police and fire call taking and dispatch systems, none was viewed as equivalents to commercially available protocol systems. Most PSAPs agreed that commercially available systems offer a more structured approach to police and fire call taking, and that these systems offer an improvement over existing fire and police call processes.

Figure 4 shows which PSAPs have developed internal policies and procedures as well as police and fire call processing guidelines:

**Figure 4. PSAPs With Internal Policies & Procedures/Police & Fire Call Processing Guidelines**

PSAP	Internal Policies & Procedures	Police & Fire Call Processing Guidelines
Androscoggin County Sheriff's Office	Y	Y
Bangor Police Department	Y	Y
Biddeford Police Department	Y	Y
Brunswick Police Department	Y	Y
Central Maine Regional Communications Center	Y	Y
Cumberland County 9-1-1	Y	Y
DPS Gray	Y	Y



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PSAP	Internal Policies & Procedures	Police & Fire Call Processing Guidelines
DPS Houlton	Y	Y
DPS Orono	Y	Y
Franklin County Sheriff’s Office	Y	Y
Hancock County Regional Communications Center	Y	Y
Knox County Regional Communications Center	Y	Y
Lewiston/Auburn 9-1-1	Y	Y
Lincoln County 9-1-1	Y	Y
Oxford County 9-1-1	Y	N
Penobscot County Regional Communications Center	Y	Y
Piscataquis County Sheriff’s Office	Y	Y
Portland Police Department	Y	N
Sagadahoc County Communications	Y	Y
Sanford Police Department	N	N
Scarborough Police Department	Y	Y
Somerset County Communications	Y	Y
Waldo County Regional Communications Center	Y	Y
Washington County Regional Communications Center	Y	Y
Westbrook Police Department	Y	Y
York Police Department	Y	N

**EMPLOYEE TRAINING RECORDS**

**General Comments**—The Employee Training Records portion of the review focused on the following areas:

- Basic and in-service training records
- Status of EMD certifications
- In house Continuing Education Hours (CEH) tracking system

The following excerpt from Chapter 1 of Bureau Rules describes the requirements for the establishment of internal policies and procedures necessary for the establishment and maintenance of training records.

**“§3. Minimum Public Safety Answering Point Requirements and Public Safety Dispatcher Requirements**

**3. Reports and Records**

**E. Maintenance of Training Records.** The official or department or agency head shall maintain records regarding the basic and in-



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service training of public safety dispatchers as provided in this chapter. Such training records shall document at a minimum, the subject taught, duration of training, instructor(s), test scores as applicable, and signed attendance rosters, and be made available for review as requested by the Bureau.”

The following excerpt from Chapter 1 of Bureau Rules describes the requirements for dispatcher training.

**“§3. Minimum Public Safety Answering Point Requirements and Public Safety Dispatcher Requirements**

**3-A. Training**

- A. Basic Public Safety Dispatcher Training; Minimum Mandatory Staff Training Requirements.** All full-time public safety dispatchers must successfully complete, within the first 12 months of initial employment, the Basic Public Safety Dispatcher Training Course at the Maine Criminal Justice Academy approved by the Bureau. All full-time public safety dispatchers must satisfactorily maintain the basic certification by completing any recertification requirements as may be prescribed by the Bureau. The Bureau, for good cause, may extend the 12-month period for not more than 180 days and may waive the Basic Public Safety Dispatcher Training Course requirement when an equivalent course has been successfully completed. This section does not apply to any person employed as a full-time public safety dispatch personnel on or before 1 January 2008.
  
- B. Training on PSAP E-9-1-1 Call Answering Technology.** All persons, full or part-time, who are employed as a public safety dispatcher at a PSAP, must within 90 days of assignment, complete a Bureau approved course on the proper operation of Bureau-provided PSAP equipment and on proper call handling and processing of 9-1-1 emergency calls. Such public safety dispatchers may be assigned call taking responsibilities prior to the completion of the approved course when working under the immediate supervision of another certified dispatcher.
  
- C. Courses.** The Bureau shall provide tuition-free training courses, the successful completion of which meets the basic training requirements in 3-A(A) and (B). The Bureau shall include in the Basic Public Safety Dispatcher Training course, a program a block of instruction aimed specifically at the requirements of the



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Americans with Disabilities Act (ADA) for direct and equal access to 9-1-1 services for persons with disabilities who communicate via TTY/TDD.

- D. Continuing Education Public Safety Dispatcher Training as Required.** As a condition of continued employment, each public safety dispatcher must successfully complete continuing education training as prescribed by the Bureau with the advice and comment of the E9-1-1 Council. The minimum continuing education requirements for all public safety dispatchers shall be at least 12 hours of approved education each year. The Bureau, with the advice and comment of the E9-1-1 Council, may establish requirements for specific training topics and hours as a portion of the annual requirements and must include annual refresher training for dispatchers in the recognition and processing of TTY/TDD calls.
- E. Credit for Courses.** The Bureau may grant training credits to be applied to recertification training requirements for courses completed at accredited colleges and universities, through professional journals, audio and visual media, teleconferencing and the Internet. The Bureau shall establish a process for the approval of training courses that may be applied toward annual certification training requirements, coordinate delivery of training with postsecondary schools and other institutions and public safety emergency communications agencies, and administer training programs.”

*MEMS Chapter 3-A Emergency Medical Dispatch Center Licensure*, describes EMD licensure requirements and *Chapter 5-A Emergency Medical Dispatch Licensure*, and the requirements for Continuing Education Hours (CEH):

### “§4. License

1. A license issued by the Board under this chapter is valid for two years from the month of issuance unless earlier suspended or revoked or as otherwise specified in these Rules.
2. An application will not be accepted as complete unless it includes all materials required to be evaluated for licensure. To obtain a new or renewed license, an applicant must:
  - A. Be at least 18 years of age on the date of application;
  - B. Not have received a two-year Maine EMS Emergency Medical Dispatcher license within the past year;



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- C. Be capable of performing emergency medical dispatch services, as described by the approved Maine EMS Emergency Medical Dispatcher Functional Position Description;
- D. Be employed by a Maine licensed Emergency Medical Dispatch Center; and
- E. Submit the following to Maine EMS:
  - 1. A completed Maine EMS application.
  - 2. Current training certification from the entity that provides the Board approved statewide emergency medical dispatch protocols.
    - a. A current training certification or recertification cannot be used more than one time to fulfill Maine EMS Emergency Medical Dispatcher training requirements for a new or renewal license.
    - b. If a training certification or recertification was completed more than a year prior to application, a license may be issued that is valid for two years from the certification month.
    - c. Prior to July 1, 2010, applicants for license renewal may also meet renewal training requirements by submitting a Board-approved refresher course at the appropriate level, or a course judged by Maine EMS to be equivalent, in the case of an applicant whose Maine license is current or not expired by more than two years, or twenty-four (24) of Maine EMS-approved continuing education hours (CEH). The categories and required amounts for Emergency Medical Dispatcher CEH are:
      - i. Category 8 – EMD Operations – 4 hours
      - ii. Category 2 – BLS Topics – 8 hours
      - iii. Category 9 – EMD Crisis Communications – 6 hours
      - iv. Category 10 – EMD Special Needs – 6 hours

### ***In-Service Training Records***

Telecommunicator in-service training records were reviewed. Without exception, every PSAP keeps detailed in-service training records. All records examined by the MCP reviewers appeared to be accurate and up-to-date.

### ***EMD Certifications***

The status of telecommunicator EMD certifications was reviewed. Without exception, every PSAP reported that EMD certifications as well as licensing were current and up-to-date. In some cases, telecommunicators were in the process of renewing their certifications. There was no evidence of telecommunicators not having proper credentialing.

### ***Continuing Education Hours (CEH) System***

In-house Continuing Education Hours (CEH) systems at each PSAP were reviewed. It appears that every PSAP director understands the requirements for CEH, and is making every effort to ensure that telecommunicators comply with the CEH recertification requirements.





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On several occasions, the MCP reviewers were questioned with regard to “what activities or documentation review qualifies for CEH credit?” PSAP personnel were referred to *MEMS Rule Chapter 5-A Emergency Medical Dispatch Licensure (4.2.E.2.c)* for clarification. The EMD recertification requirements established by the NAED were also referenced. The NAED recertification guidelines are shown in Appendix 4. Note that CEH credits equate to the NAED’s definition of Continuing Dispatch Education (CDE) hours, and that the existing state rules are in alignment with the NAED requirements.

The PSAP Directors reported that many telecommunicators use the NAED publication, “*Journal of Emergency Dispatch*” as a reliable source of CEH credits. The Journal is the official publication of the NAED, and is provided free to telecommunicators certified in EMD. It is published six times a year, and is designed to keep emergency dispatchers, center directors, quality assurance personnel, and others interested in emergency dispatch protocols up-to-date with the latest factoids, research, and advice from field experts.

The Bureau also provides PSAPs with the NAED “EMD Advancement Series” which is a computer-based continuing education program designed specifically for the EMD. The self-paced two-hour learning sessions provide the opportunity for EMDs to acquire two CEH credits, four times a year.

### BUREAU RULES

**General Comments**—The Bureau rules portion of the review focused on the following areas:

- Review all documentation that is required by the Bureau rules
- Specifically review TTY Test Calls

The following excerpt from Chapter 1 of Bureau Rules describes the requirements for the establishment of internal policies and procedures necessary for the establishment of records retention and call handling procedures:

**“§3. Minimum Public Safety Answering Point Requirements and Public Safety Dispatcher Requirements**

**2. Administration**

**I. Records retention. All voice and TDD recordings of incoming 9-1-1 calls shall be retained for a minimum of 30 days. It is recommended that such materials be retained for a minimum of 60 days.**

**4. Equipment**

**E. TTY/TDD Test Calls.** PSAPs shall conduct internal TTY/TDD test calls in which random test calls are processed at each call answering position. Test calls shall include two types of calls (1) silent, open line calls, and (2) calls that are introduced by



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transmitting TTY/TDD tones. PSAPs shall require each dispatcher to conduct TTY/TDD test calls, as needed to ensure all dispatchers are able to process both sending and receiving calls, on a routine basis, but no less than every three months. PSAPs shall complete and maintain records of such test calls that identify the dispatcher, date/time of call, call taking position, silent or transmitted tone, and whether the call met standard operating procedures. Such test records shall be made available for review by the Bureau. The Bureau will assist with the development of TTY/TDD test call procedures and forms.

### ***TTY Test Calls***

The Americans with Disabilities Act (ADA) is a federal statute intended to provide a clear and comprehensive national mandate for the elimination of discrimination against individuals with disabilities. The ADA requires all PSAPs to provide direct, equal access to emergency services for people with disabilities who use teletypewriters (TTYs), which are also known as “telecommunications devices for the deaf (TDDs).” These requirements are outlined in the U.S. Department of Justice Technical Assistance document—Americans With Disabilities Act—Access for 9-1-1 and Telephone Emergency Services (<http://www.ada.gov/911ta.pdf>).

The ADA requires that frequent testing is essential to ensure direct and equal access. Testing call takers and their equipment is an effective way to ensure compliance with the ADA's requirement and ensure that accessibility features are maintained in operable working condition.

The Bureau's rules for testing TTY calls meets the testing criteria established by the aforementioned U.S. Department of Justice Technical Assistance document.

The MCP reviewers confirmed the requirement to test for Hearing Carry Over (HCO) and Voice Carry Over (VCO). PSAPs that are actively following the Bureau rules confirmed that HCO and VCO testing is part of the process and is being done by the compliant PSAPs.

Refer to Figure 5. Compliance to Bureau Rules—TTY Testing.



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Figure 5. Compliance to Bureau Rules—TTY Testing

PSAP	Compliance to Bureau Rules—TTY Testing
Androscoggin County Sheriff's Office	N
Bangor Police Department	Y
Biddeford Police Department	Y
Brunswick Police Department	Y
Central Maine Regional Communications Center	Y
Cumberland County 9-1-1	Y
DPS Gray	N
DPS Houlton	Y
DPS Orono	Y
Franklin County Sheriff's Office	Y
Hancock County Regional Communications Center	Y
Knox County Regional Communications Center	Y
Lewiston/Auburn 9-1-1	Y
Lincoln County 9-1-1	Y
Oxford County 9-1-1	N
Penobscot County Regional Communications Center	Y
Piscataquis County Sheriff's Office	Y
Portland Police Department	Y
Sagadahoc County Communications	Y
Sanford Police Department	N
Scarborough Police Department	N
Somerset County Communications	Y
Waldo Co Regional Communications Center	N
Washington County Regional Communications Center	Y
Westbrook Police Department	N
York Police Department	N

Eight PSAPs fell short of meeting the testing criteria as required by Rule.

Androscoggin County reported that TTY test calls are not currently being processed or logged at this time. The MCP reviewers produced a copy of the Bureau rules. The PSAP director agreed that TTY call testing needs to be done, and will start doing quarterly testing.

DPS Gray reported that TTY test calls are not currently being done or logged at this time. The MCP reviewer produced a copy of the Bureau rules. The PSAP director agreed that TTY call testing needs to be done, and a testing program implemented in the immediate future.



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Oxford County reported they had a log and manual in place, but at the time of the review, they were unable to locate either one. The MCP reviewer was assured that PSAP supervisors will resume testing on a monthly basis, and that documentation will be reestablished as required by the Bureau rules. On a positive note, they reported there is a hearing-impaired person in Dixville, New Hampshire. This person communicates on a regular basis with the PSAP staff, and is happy to assist with TTY testing. It is expected that this relationship will continue, and that PSAP staff will remain well versed in the processing of TTY calls.

Sanford Regional Communications Center did not have a TTY testing log in place, and there was no other documentation in place demonstrating that TTY call testing occurs. The MCP reviewer explained the Bureau rules and pointed out the requirements for ensuring that testing occurs and is documented. The MCP reviewer was assured that every effort would be made to comply.

Scarborough Police Department reported that TTY testing is done, but there was no tracking log in place. Test calls have been made from the facility as part of new hire training, but PSAP staff was unable to provide evidence of these test calls. Most calls are done employee to employee. This PSAP was advised to continue to test TTY calls and implement a log archive of test calls.

Waldo County advised the MCP reviewer that at one time they tracked TTY test calls in accordance with the Bureau rules but reported that current TTY call testing is done mostly as part of an online training system. They will ensure that quarterly testing is done and that testing is now tracked.

Westbrook Police Department informed the no log for in place for TTY testing, and that no test calls are done at this PSAP. Westbrook produced evidence that there is internal policy in place for Silent Calls only. The MCP reviewer explained the Bureau rules, and reiterated the need to comply.

York Police Department reported there is no log in place for TTY testing, and no test calls are done at this PSAP. York produced evidence that there is internal policy in place for Silent Calls only. The MCP reviewer explained the Bureau rules and reiterated the need to comply.

Of concern is the ongoing random placing of test calls by the DOJ (or their agents) to PSAPs throughout the United States. The majority of Maine PSAPs are considered adept at the processing of TTY calls. For all others, compliance to Bureau rules should be a priority

### ***Archiving of Audio Recordings***

The following excerpt from Chapter 1 of Bureau Rules describes the requirements for the continuous voice recording of 9-1-1 calls.



## APPENDIX A – PSAP INITIAL FINDINGS REVIEW

### “4. Equipment

- B. Continuous logging equipment.** Each PSAP shall provide and run continuously a logging recorder that will record both sides of a conversation on each incoming 9-1-1 call, and contemporaneously document the year, date and time of each recorded event.”

All PSAPs were in compliance with this rule.

## GENERAL OBSERVATIONS AND FEEDBACK FROM PSAPS

The MCP reviewers were well received at the all PSAPs. Participants were frank and candid with their opinions, and all had made an effort to prepare the information requested for the interview. This section captures general observations made by the MCP reviewers, as well as provides a summary of comments offered by PSAP personnel.

### ***Wireless 9-1-1 Calls***

The following issues were raised:

- PSAP personnel openly questioned why individual PSAPs could not handle their own wireless calls.
- There is a disparity of wireless call volume between PSAPs.
- The transfer of wireless calls between PSAPs delays response particularly when more than one transfer occurs. Examples offered included:
  - When a wireless call is first answered, an initial interrogation occurs. If there is a need to transfer the call a second or third time, additional interrogations inevitably occur.
  - If the call is transferred “cold” to another dispatch center (i.e., without an introduction or lead-in from the first call taker), then the interrogation process begins all over again. This creates frustration for both the call taker as well as the caller.
  - Some wireless callers require longer interrogation particularly if they are not sure where they are.
  - Some PSAPs perform EMD and dispatch for the initial call, but may also transfer the call to another dispatch center for processing.

### ***Call Sharing***

Call Sharing is a law enforcement model created several years ago. It was designed to mitigate law enforcement staffing shortages by sharing response resources. It involves a rotating schedule involving State Police and County Sheriffs.

The following issues were raised:



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1. PSAPs report that the Call Sharing concept improves responder safety, but creates call management issues for PSAPs.
  - a. For example, if a caller dials 9-1-1 five minutes before 0700, a Sheriff's Deputy may respond. However, if that call is placed five minutes past 0700, a State Trooper may respond.
2. Androscoggin County reports call sharing since 1990.
3. Due to distance issues in certain regions, call sharing increases response times. This arises when law enforcement responds to calls out of their normal patrol zone.
4. PSAPs would prefer that call sharing go away and that the Sheriff handle all calls, with State Police as backup.

### ***Call Transfer***

The following issues were raised:

1. PSAPs report that the transfer of calls between PSAPs has improved, but remains problematic as transfers cause delays in response.
2. Some PSAPs have not enforced their own call transfer policies and procedures.
  - a. Although the Bureau trains telecommunicators to perform call transfers in a specific manner (e.g., that hot calls should require the call taker to stay on the line until the call has connected, introduce the call, and remain on the line until the caller is engaged by the second call taker), the Bureau has not introduced specific procedures or language.
3. The incidents of cold transfers have decreased.
4. There have been anecdotal instances where calls have been improperly transferred or transfers to the incorrect agency.
5. 9-1-1 calls are supposed to be transferred from trunk to trunk ensuring that ANI and ALI data transfers with the call.
  - a. Some PSAPs report that some 9-1-1 calls are transferred on administrative lines. In this situation, ANI and ALI are absent, and callers are subjected to another round of interrogation.

### ***Computer Aided Dispatch (CAD)***

There is no common statewide CAD system in place. Existing CAD systems are disparate, and some obsolete. The following issues were raised:

1. There should be a common CAD system for all PSAPs.

### ***Comments on State Program***

All PSAPs recognize and value the efforts being made to improve the quality of emergency services throughout the state. However, there were many suggestions for improvement. The following issues were raised numerous times and are paraphrased as required:



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1. Most PSAPs are in favor of the adoption of Fire and Police protocols. However, it was made very clear that the Bureau needs to provide resources and support should QA be required.
2. QA should be off-loaded to the Bureau.
3. Steve Bunker is doing “a GREAT job!”
4. ETC is an exceptional program. The program provides great information for new hires. Only issue is the fragmentation of how the courses are offered. Very difficult to plan a training cycle as an agency based on the availability of classes.
5. PSAPs need more training funds.
6. More on-line training.
7. Likes the involvement of Southern Maine Community College (SMCC). The Director knows that when an employee has attended these programs he knows exactly what information has been provided to the employee.
8. Bureau trainers should have PSAP experience.
9. Disappointed in the development of the Certification of Terminal Operator (CTO) course. (Likes the concept, but disappointed that it appears that content was worked around a 40-hour window (i.e., filling 40 hours with random content rather than allowing content to drive the length of time needed to deliver a course).
10. One stop training program—a full training academy that provides all required training from beginning to end (i.e., send an employee to training and have them returned fully trained).
11. Refresher training for EMD-Q over and above (or in conjunction with) the quarterly meetings provided now.
12. Fund and train persons used for back-fill purposes.
13. Train PSAPs and EMS to speak the same language as they both have an interest in the EMD process but do not always send the same message.
14. Most training opportunities are in the southern portion of the state.
15. Provide diversity training.
16. Additional and affordable training for more experienced staff.
17. Management and leadership training for managers and supervisors.
18. Additional training on the “how to” related to EMD-Q, especially for administrators on how to access reports and what the reports can be best used for.
19. Continuing Education Hours (CEH) credits for recertification is a challenge.
20. Staffing studies are needed to determine if PSAPs are adequately staffed.
21. Establish an operations committee with dispatchers sitting on the committee.
22. Bureau rules should be regularly reviewed and updated.
23. The importance of whom we serve, the citizens, is being lost.
24. Provide the technical support necessary for PSAPs to do their job (ProQA refresher).
25. Provide the tools to support stakeholders and make their PSAP operations a success (training, technology, ANI/ALI, mapping).
26. Talk of consolidation fragments relationships with other PSAPs.
27. Increase in public education concerning 9-1-1, EMD protocol, etc.



## APPENDIX A – PSAP INITIAL FINDINGS REVIEW

28. Need to get a handle on 9-1-1 surcharges, and make more effective use of funds (CAD upgrades, offset personnel costs, fire and police protocols, ergonomically correct workstations, additional protocol software).
29. Bureau is doing a good job, and is providing good training to the PSAPs.
30. PSAPs need to have the funding and support to implement additional programs.
31. Mandates are being put into place to push out small PSAPs.
32. Perception that the state wants to take over control of 9-1-1.
33. State has put considerable funds toward studies.
34. State tends to put more money into certain PSAPs (additional positions at Central Maine Regional Communications Center).
35. Feels that the overall checks and balances of the entire system could be improved.
36. Bureau could track EMD licenses and notify dispatchers and centers of pending expirations.
37. Refresher on MagIC software—practical sessions on how to run reports, what the stats can be used for, limitations of MagIC, etc.
38. PSAPs are underrepresented.
39. Enforce standardized practices between all PSAPs.
40. Take a stronger stand on consolidation and a bigger leadership role when it comes to 9-1-1 advocacy and standardization.
41. EMD could have been rolled out better, as it has taken awhile for everyone to get on board.
42. A statewide common CAD platform would be great.
43. ESCB and EMS come out with some written policy that reinforces statewide standards such as:
  - a. Call transfer policy.
  - b. EMD'ing calls that get transferred (who does the EMD).
44. Wireless calls should be directed to the County facilities rather than to DPS centers as current procedure only adds confusion and frustration for callers who need to repeat information already provided.
45. Bureau creates an EMD-only call center.
46. Likes the state standard for EMD protocol.
47. Like standardized new hire training.
48. PUC could use some help in understanding how things work at the local level.
49. Provide an updated list of PSAPs and who dispatch-only centers.
50. Local funding difficult, especially for back filling shifts and paying overtime.
51. State needs to provide more preparation and training work for PSAP Directors.
52. Route wireless calls directly to the respective PSAPs in the respective jurisdictions.
53. Statewide call transfer protocol/procedure would be greatly appreciated.
54. Would like EMD-Q support beyond the quarterly meetings and would be open to an outside agency assisting in the process.
55. Does not believe they deliver as high a level of service as prior to the state-mandated implementation of EMD.
56. State reluctant to relinquish wireless calls.
57. PSAP consolidation of one PSAP per county will be a detriment to customers.





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58. State agencies conducting PSAP audits coordinate schedules so that they arrive at the PSAP on a given day, and all information is provided then rather than up to fourteen separate visits throughout the year.
59. Have a State Compliance officer in place to conduct all audits for the different state agencies.
60. Drexel White does a very good job of communicating
61. State needs to do regular audits of all PSAPs.
62. Little or no follow-up on questions or requests for assistance.
63. Improved communications from the PUC.
64. Falmouth and Yarmouth getting direct call transfer from Gray with no EMD done on the direct transfer.
65. Somewhat concerned about the number of PSAPs required and the consolidation process, but enjoys providing a good service for his citizens.



APPENDIX A – PSAP INITIAL FINDINGS REVIEW

**TABLE 1. PSAP REVIEW–INITIAL FINDINGS**



APPENDIX A – PSAP INITIAL FINDINGS REVIEW

PSAP	Call Processing Statistics		ALI Discrepancy/Mapping Error Reporting System			Internal Polices for Public Comment/ Complaint	Quality Assurance Programs and Processes	Internal Polices and Procedures	Police and Fire Call Processing Guidelines	Employee Training Records	Bureau Rules
	Average Call Answer Times for 9-1-1	Average Call Processing Time for 9-1-1 call	Internal PSAP Log	Sent to FairPoint	Duration for turn around in days						
Androscoggin County Communications Division (ASO)	:05	1:43	Y	Y	2-7	Y	Y	Y	Y	Y	N
Bangor Police Department	:04	1:24	Y	Y	2-4	Y	Y	Y	Y	Y	Y
Biddeford Police Department	:05	1:20	Y	Y	2-3	Y	Y	Y	Y	Y	Y
Brunswick Police Department	:03	1:37	Y	Y	2-10	Y	Y	Y	Y	Y	Y
Central Maine Regional Communications Center	:05	1:14	Y	Y	2-7	Y	Y	Y	Y	Y	Y
Cumberland County 911	:05	1:14	Y	Y	2-3	N	Y	Y	Y	Y	Y
DPS - Gray	:05	1:30	Y	Y	5	Y	Y	Y	Y	Y	N
DPS - Houlton	:05	1:38	Y	Y	N/A	Y	Y	Y	Y	Y	Y
DPS - Orono	:04	1:02	Y	Y	2	Y	Y	Y	Y	Y	Y
Franklin County Sheriff's Office	:04	1:34	Y	Y	2-5	Y	Y	Y	Y	Y	Y
Hancock County Regional	:05	1:18	Y	Y	2-3	Y	Y	Y	Y	Y	Y
Knox County RCC	:04	:59	Y	Y	2-7	Y	Y	Y	Y	Y	Y
Lewiston / Auburn 9-1-1 Emergency	:04	1:13	Y	Y	2-7	Y	Y	Y	Y	Y	Y
Lincoln County 9-1-1	:04	1:28	Y	Y	3-9	Y	Y	Y	Y	Y	Y
Oxford County 91-1	:04	1:50	Y	Y	6	Y	Y	Y	N	Y	N
Penobscot County Regional Communications Center	:06	2:28	Y	Y	2-3	Y	Y	Y	Y	Y	Y
Piscataquis County SO	:06	1:35	Y	Y	2-3	Y	Y	Y	Y	Y	Y
Portland Police Department	:05	1:20	Y	Y	6	N	Y	Y	N	Y	Y
Sagadahoc County Communications	:03	1:57	Y	Y	2-5	Y	Y	Y	Y	Y	Y
Sanford Regional Communications Center	:04	1:20	N	Y	3	N	Y	N	N	Y	N
Scarborough Police Department	:05	1:47	Y	Y	5	Y	Y	Y	Y	Y	N
Somerset County Communications	:04	1:42	Y	Y	2-3	Y	Y	Y	Y	Y	Y
Waldo County Regional Communications Center	:05	2:25	Y	Y	7+	Y	Y	Y	Y	Y	N
Washington County Regional Communications Center	:06	1:19	Y	Y	2-3	Y	Y	Y	Y	Y	Y
Westbrook Police Department	:05	1:15	Y	Y	4	Y	Y	Y	Y	Y	N
York Police Department	:05	1:30	Y	Y	4	Y	Y	Y	N	Y	N



APPENDIX A – PSAP INITIAL FINDINGS REVIEW

**APPENDIX 1—PSAP INFORMATION INTERVIEW INSTRUMENT**



**PSAP INFORMATION INTERVIEW INSTRUMENT**

**INTRODUCTION**

This document is to be used by Mission Critical Partners in the gathering of information concerning the State of Maine PSAP Quality Assurance Program Review. This form is the property of the State of Maine and is intended only for use by the MCP interviewer.

Note: The alpha-numeric references that appear in parentheses are specific references to the rules established under Chapter 352 of Title 25 of the Maine Revised Statutes Annotated. The rulemaking authority for the Emergency Services Communications Bureau is found in 25 MRSA §2926. The administrative rules pertaining to this study are found under 65 Public Utilities Commission, 625 Emergency Services Communications Bureau, Chapter 1: Standards For Establishing A Statewide Enhanced 9-1-1 System.

In addition to the above, the State of Maine EMS Office has established specific reporting requirements as well as compliance goals. These are defined by Administrative Rule 16 Department of Public Safety, 163 Bureau of Emergency Medical Services (MAINE EMS) Chapter 3-A Emergency Medical Dispatch Center Licensure, and Chapter 5-A Emergency Medical Dispatch Licensure. References to these documents are indicated where appropriate.

**MCP INTERVIEWER:** \_\_\_\_\_

**PSAP:** \_\_\_\_\_

**DATE:** \_\_\_\_\_ **TIME STARTED:** \_\_\_\_\_ **TIME ENDED:** \_\_\_\_\_

**TO MCP INTERVIEWER** - The following information should be ready and available upon your arrival at the PSAP:

**1. CALL PROCESSING STATISTICS (January 01 to June 30, 2010)**

1. Average Call Answer Times for 9-1-1 calls: \_\_\_\_\_ seconds (3.1.A)
2. Average Call Transfer Times for 9-1-1 calls: \_\_\_\_\_ seconds (3.1.B)
3. Average Call Processing Time for 9-1-1 call: \_\_\_\_\_ seconds

**2. ALI DISCREPANCY REPORTING SYSTEM**

1. Review and document ALI how discrepancies are dealt with at this PSAP (3.2.E).

APPENDIX 1- PSAP INFORMATION INTERVIEW INSTRUMENT

2. Review and document how Map Error discrepancies are dealt with at this PSAP.
3. Obtain examples of forms or systems that have been developed in this regard.

FINDINGS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. INTERNAL POLICES FOR PUBLIC COMMENT/COMPLAINT**

1. Review and document policies used for public comment/complaints. Each PSAP's public comment and complaint documents shall include the name, title and contact information for the person designated by the PSAP to receive comments and complaints (3.2.J).
2. Obtain examples, including customer surveys, in this regard if available.

FINDINGS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**4. QUALITY ASSURANCE PROGRAMS & PROCESSES**

Quality assurance processes shall include a process for auditing the performance of each of its public safety dispatchers (3.2.K).

1. Review and document policies and systems in used for quality assurance for EMD calls (EMS Rules Section III. Quality Assurance/Quality Improvement).

APPENDIX 1- PSAP INFORMATION INTERVIEW INSTRUMENT

- 2. Review any other quality review efforts for Fire and Police calls.

FINDINGS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**5. INTERNAL POLICIES & PROCEDURES**

Each PSAP shall work with the public safety providers served by the PSAP to establish call handling procedures (3.2.B).

- 1. Review and document policies and procedures in place that are used for emergency and non-emergency call processing, transfers and dispatch.
- 2. Review and document policies and procedures in place that are used for emergency medical call processing and dispatch, and for the transfer of EMD calls between PSAPS and other centers (EMD centers or not).
- 3. Obtain soft copies of relevant policies & procedures if available.

FINDINGS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**6. POLICE & FIRE CALL PROCESSING**

- 1. Review and document internally developed policies, procedures or protocols germane to Fire and Police call processing.

APPENDIX 1- PSAP INFORMATION INTERVIEW INSTRUMENT

2. Obtain soft copies (electronic) of Fire and Police policies and procedure if available.

FINDINGS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**7. EMPLOYEE TRAINING RECORDS**

1. Review in-house training system.
2. Review records kept on in-house training.
3. Do not remove or copy in-house training records.
4. Review basic and in-service training records. Such training records shall document at a minimum, the subject taught, duration of training, instructor(s), test scores as applicable, and signed attendance rosters, and be made available for review as requested by the Bureau. Such training records shall document at a minimum, the subject taught, duration of training, instructor(s), test scores as applicable, and signed attendance rosters, and be made available for review as requested by the Bureau (3.3.E).
5. Review status of EMD certifications (5-A.4.E.2)
6. Review in house Continuing Education Hours (CEH) system (5-A.4.E.c)



FINDINGS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**8. BUREAU RULES**

1. Review all documentation that is required by the Bureau rules.
2. This includes but is not limited to the following:
  - a. **TTY Test Calls (3.4.E)** - The official or department or agency head shall maintain PSAPs shall conduct internal TTY/TDD test calls in which random test calls are processed at each call answering position. Test calls shall include two types of calls (1) silent, open line calls, and (2) calls that are introduced by transmitting TTY/TDD tones. PSAPs shall complete and maintain records of such test calls that identify the dispatcher, date/time of call, call taking position, silent or transmitted tone, and whether the call met standard operating procedures. Such test records shall be made available for review by the Bureau.
  - b. **Records retention (3.2.I)** - All voice and TDD recordings of incoming 9-1-1 calls shall be retained for a minimum of 30 days. It is recommended that such materials be retained for a minimum of 60 days.

FINDINGS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional Comments:





## **APPENDIX 2—MAINE ALI/MAPPING ERROR REPORTING PROCEDURE FOR PSAPS**

## Maine ALI/Mapping Error Reporting Procedure for PSAPs

<b>1. Purpose</b>	<b>2</b>
<b>2. General Reporting Instructions</b>	<b>3</b>
<b>3. Maine ALI Discrepancy Procedure</b>	<b>3</b>
<b>Completing an Incorrect Location Information Report</b>	
<b>Wireline Discrepancy Procedure</b>	
<b>No Record Found Procedure</b>	
<b>VoIP Discrepancy Procedure</b>	
<b>Wireless Call Discrepancy Procedure</b>	
<b>Map Error Reporting Procedure</b>	
<b>4. Contacts</b>	<b>7</b>

## PURPOSE

**This document sets forth the procedure for Maine Public Safety Answering Points to report ALI (wireline, wireless and VoIP) as well as mapping errors for correction to FairPoint, the Enhanced 9-1-1 Service Provider.**

## GENERAL REPORTING INSTRUCTIONS

1. At least once every 24 hours, the PSAP Administrator reviews all Incorrect Location Information Reports completed and printed by call takers through Vesta.
2. Each new Incorrect Location Information Report must be given a unique control number and logged on the PSAP Incorrect ALI Log. The control number consists of the 3-digit PSAP ID assigned by the ESCB and the next consecutive number in the ALI log.
3. If a PSAP is a Vesta Meridian site, it must stamp the Report with the PSAP name stamp.
4. Municipal PSAPS must confirm the address correction with their Municipal Addressing Officer prior to sending the discrepancy to FairPoint for processing.
5. Incorrect Location Information Reports must be sent (via fax) to FairPoint by 4 pm each day, including weekends and holidays.

The toll free fax number for the FairPoint DBMC: 1-866-925-3488.

The PSAP must retain a copy of the ALI Discrepancy form for its records, and save all Outstanding Incorrect Location Information Reports until resolved.

6. Upon receiving a resolved ALI Discrepancy Report from FairPoint, the PSAP will match it up with their original copy of the report. The ESCB recommends resolved Incorrect Location Information Reports be saved for one year.

## MAINE ALI DISCREPANCY PROCEDURE

### **Completion of Incorrect Location Information Report by Telecommunicator**

If a telecommunicator discovers a discrepancy in a caller's ALI information, he or she creates an Incorrect Location Information Report. A telecommunicator need only enter information to be corrected. The only mandatory field is the "Call Taker" field.

<u>ANI Incorrect:</u>	If the phone number is wrong, enter the correct number.
<u>ALI misrouted. Route to:</u>	If the record was misrouted, enter the name of the PSAP it should be sent to.
<u>ESN incorrect:</u>	If the call was misrouted due to an incorrect ESN, enter the ESN number it should have been sent to, if known. If unknown, enter the PSAP name it should have been sent to.

Address Incorrect.

Change to:

If the street address is wrong in any way, which includes a missing street number, incorrect street name or incorrect community, enter the correct address in this field. Supplemental information (i.e., rear entrance, 2nd floor) can also be noted here.

EMS Agency incorrect.

Change to:

Enter the name of the Ambulance or First Responder that should appear.

Fire Agency incorrect.

Change to:

Enter the name of the fire department that should appear.

Police Agency incorrect.

Change to:

Enter the name of the fire department that should appear.

Other error in ALI:

Check this box if there is another error in ALI that needs correction and use the "Remarks" field to explain it.

Remarks:

Enter in any supplemental information that you would like added to the ALI record, or additional information that will be helpful to the entity correcting the ALI record.  
You can also use this field to record the source of the correction, i.e., caller or responder.

Call Taker:

The telecommunicator enters his/her name.

## Wireline ALI Discrepancy Procedure

1. When an ALI discrepancy of a **wireline call (landline)** is identified on a 9-1-1 call, the Telecommunicator at the Public Safety Answering Point (PSAP) completes an Incorrect Location Information Report.
2. Continue with General Reporting Instructions.

## No Record Found Procedure

If a telecommunicator receives a call from a wireline telephone number and ALI information (the name and address of the caller) is not present, they should process an Incorrect ALI Report in accordance with the Incorrect ALI Procedure. Information captured by the PSAP should be as detailed as possible, and include the calling parties name, address and phone number.

## Voice Over IP (VoIP) Discrepancy Procedure

Calls made to 9-1-1 from a VoIP telephone received on a 9-1-1 trunk can be identified by the following:

1. The Class of Service "VOIP"
2. A routing phone number (MTN) beginning with (207) 211-XXXX.
3. The carrier information will not appear in the COID field but rather in the supplemental ALI line.
4. The Emergency Responder information will not be provided.

### Class of Service

```
207
VOIP 18:58 11/02
(207) 942-1999

MAXIE SMART
2139 ESSEX

VNAGE BANGOR ME
Carrier's Company ID

ESN= 952 MTN: 207-211-0319
VoIP ESN for PSAP P-ANI or Routing Number

LAT: +44.872344 LON: -68.782802
ELV:

VOIP CALL
Will never contain Police, Fire, Rescue Info
QUERY CALLER FOR LOCATION
QUERY CALLER FOR CALL BK#
```

### VoIP Discrepancies to Report:

1. Incorrect address of caller
2. Routed to wrong PSAP
3. Format of ALI Record is Incorrect
4. Misspelling of address information
5. No ALI available message
6. No Call Back Number
7. Other

### VoIP Reporting Procedure:

1. Call takers should create an Incorrect ALI Problem Report (Incorrect Location Information Report) in the same manner as for wireline calls. Fill in appropriate boxes, keeping in mind that VoIP calls will **not** display the correct police, fire and rescue information. In the "Remarks" area, describe the problem. Be as specific as possible.

## 2. Continue General Reporting Procedures

### ***Wireless ALI Discrepancy Procedure***

Examples of ALI Discrepancies for wireless calls include but are not limited to the following:

- Tower not in PSAP jurisdiction—Incorrect Routing
- Misspelling of address information
- Format of ALI Record is incorrect, i.e., ALI not in all capital letters
- No call back information available; only P-ANI (207) **511-XXXX**)
- No tower address available
- Class of Service not WPHI or WPH2
- No ALI Available Message Incorrect Sector Orientation
- Address for tower is incorrect
- Latitude/Longitude is incorrect

### ***Wireless Reporting Procedure:***

- Call takers should create an Incorrect ALI Problem Report (Incorrect Location Information Report) in the same manner as for wireline calls. Fill in appropriate boxes, keeping in mind that wireless calls will **not** display the correct police, fire and rescue information. In the “Remarks” area, describe the problem. Be as specific as possible.
- Continue with General Reporting Procedures

Examples of Wireless Errors:

**Example 1:** Address of tower is incorrect. Community should be Portland, not South Portland. Call should route to Portland, not South Portland.

**Example 2:** Format of ALI record is incorrect; should be all capital letters.

**Example 3:** Latitude/Longitude place this tower in a different community than the address indicates. Please research.

### ***Map Error Reporting Procedure***

PSAPs are responsible for reporting map problems identified when using Orion MapStar. The error is transmitted by the PSAP to FairPoint who will direct it to the Maine Office of Geographic Information Systems (MEGIS) who manages map data for the Emergency Services Communication Bureau (ESCB).

3. Call taker completes the “Incorrect Location Information Report” with MapStar and provides a printed copy to the PSAP Supervisor. The “Remarks” section can be utilized for comments and descriptors.



4. Continue with General Reporting Procedure.

### **Examples of Map Errors**

**Example 1:** A landline call comes in and the call's ALI shows up in Vesta, but does not show up on map.

Number	Street	City	ESN
19	Crazy Eight Wy	Vassalboro	1017

The call taker should use the "Remarks" section describe the map error. *"This address and street did not appear on the map. This is a valid address and needs to be added."*

**Example 2:** While performing the "Find Directions" task, the user notices that the directions do not show the shortest, most direct route. Instead, it displays a "round about way" of getting there.

By reporting this error to MEGIS, they will then be able to research the problem and find the geometry error. The cause is usually a missing intersection or by a missing street segment or some other type of map data error.

**Example 3:** A fire station appears on the wrong side of the road. General map display issues such as these are a broad area of concern. PSAP personnel use the map more than any other group in the state. They usually also have a good knowledge of their coverage areas. Errors or omissions on the map should be reported. Staff will review these errors. In some cases, MEGIS can update the data. In other cases, a different agency will need to make the update and that may take some time.

**If a problem occurs with a map display immediately following logging off and on Orion MapStar, the PSAP should contact MeGIS (during normal business hours) or the FairPoint E9-1-1 Response Center (FERC) after hours.**

### **CONTACTS**

FairPoint DBMC  
(non-published number)

Emergency Services Communication Bureau Database Services

(207) 287-6086 (phone)

(207) 287-1039 (fax)

MEGIS E9-1-1 Support Group

1-800-665-2830 (phone)

1-866-710-7381 (fax)

FairPoint Enhanced 9-1-1 Response Center (FERC)

(non-published number)





**APPENDIX 3—MAINE EMERGENCY MEDICAL DISPATCH PRIORITY REFERENCE  
SYSTEM—EMS RULES**

Maine EMS  
Emergency Medical Dispatch  
Priority Reference System

## I. Introduction

1. Emergency Medical Dispatch Priority Reference System
  - A. The Maine EMS Emergency Medical Dispatch Priority Reference System (EMDPRS) is defined in 32 M.R.S.A. §85-A as: "...a system approved by the bureau and the board that includes:
    - a. A protocol for emergency medical dispatcher response to calls;
    - b. A continuous quality improvement program that measures compliance with the protocol through ongoing random call review of each emergency medical dispatcher; and
    - c. A training curriculum and testing process consistent with the protocol."
  - B. Chapters 3-A, 5-A and 9-A of the Maine EMS Rules refer to the EMDPRS in matters of Emergency Medical Dispatch (EMD) Center and Emergency Medical Dispatcher licensing, training and quality assurance.
  - C. This document codifies the components of the EMDPRS as approved by the Maine Board of Emergency Medical Services and the Emergency Services Communication Bureau (ESCB) and supersedes all previous EMDPRS protocol, quality assurance and training standards and criteria for emergency medical dispatch approved by the Maine EMS Board and the ESCB.

## II. Protocol

- A. Approved Protocols
  1. The following EMD protocols and training programs are approved by the Maine EMS Board, with the condition that these programs abide by all Maine EMS requirements:
    1. National Academies of Emergency Dispatch and Priority Dispatch Inc.
    2. National Emergency Communications Institute (NECI - Maine EMS approved "common in-state version" is the ONLY approved NECI version)
    - d. PowerPhone
  2. Effective July 1, 2010, the Medical Priority Dispatch System (MPDS) from the National Academies of Emergency Dispatch shall be the (sole) statewide EMD protocol used by licensed EMD Centers and Emergency Medical Dispatchers.
- B. The Maine EMS State Medical Director is the approving authority for EMD protocols used by Maine licensed EMD Centers and Maine licensed Emergency Medical Dispatchers.
3. Protocol Requirements

- C. Dispatch Life Support Protocols is a system that is physician-reviewed and approved, up-to-date, with proven validity and reliability.
- D. The Maine EMS-approved protocols must be used to its full extent on every call, following a process that includes:
  - 3. Categorical questioning of all callers:
  - 4. Verification of the incident location
    - e. Verification of the call-back number<sup>4</sup>
    - f. Nature of the call
    - g. Consciousness of the patient(s) (Yes / No)
    - h. Breathing status of the patient(s)
    - i. Approximate age of patient(s)
    - j. Gender of patient
    - k. Also helpful is:
      - l. Proximity of caller to patient
      - m. Additional, complaint-specific questions as indicated by the nature of the call and as directed by the protocol;
      - n. Medical case questions that should emphasize symptoms
      - o. Differentiation of agonal respirations should be very clear, with questions that maximize the ability of the EMD to decipher from the caller if breathing is or is not compatible with life;
      - p. Trauma case questions that should emphasize mechanism
      - q. Trauma criteria must be clearly defined and in accordance with Maine EMS-approved and national guidelines, including mechanisms of injury such as long falls
      - r. Protocol must identify circumstances that necessitate special rescue
      - s. Method for assigning relative priority to calls that may affect level of response;
      - t. Capacity must exist for selecting appropriate number, nature, and mode of responding units;
      - u. Scripted and systematic pre-arrival instructions as necessary, including directing bystanders to provide medical aid as indicated, including but not limited to:
        - Prevention of further injury to patient(s), bystander(s), and responders
          - i. Typically do not move the patient
          - ii. Do evacuate the patient, the caller, and anyone else in immediate danger (case-by-case basis, e.g. carbon monoxide poisoning)

---

<sup>4</sup> It is mandatory that “a” and “b” come first. The rest of the items are in a recommended sequence.

- iii. Assess for hazards on or around the scene
  - 5. Ongoing assessment of patient status
  - 6. Medical management
    - v. Remove pillows from head
    - w. Airway opening
    - x. Artificial ventilation
    - y. Cardio-pulmonary resuscitation (CPR)
      - 1. Cardiac / Respiratory Arrest instructions must be clear, and in accordance with current Maine EMS-approved and national CPR guidelines;
      - 2. AED instructions should be appropriate
    - iv. Foreign-body airway obstruction (FBAO) removal
    - v. Bleeding control via direct pressure and elevation
    - vi. Keep patient warm
    - vii. Childbirth instructions
    - viii. Medication administration instructions (e.g. Epi-Pen)
    - ix. Particular phrases available for use in repetitive persistence
    - z. Provision of other post-dispatch instructions that may continue to assist the patient(s) and prepare the responders for rapid and safe access, as well as other preparations for circumstances related to the call, including but not limited to:
      - aa. Identification of the incident location (e.g. turning on outside lights)
      - bb. Locking up pets
      - cc. Unlocking doors and/or providing key holder information
      - dd. Gathering medications
      - ee. Scene preservation
      - ff. Asking if patients are under doctor's care / if there are doctor's instructions for condition
      - gg. Additionally, following ASTM guidelines:
- E. EMD systems must also include access to and knowledge of:
- F. Mass casualty plans;
- G. Directory of emergency response resources;
- H. Description of communications system configuration;

hh. Record-keeping system (in accordance with the Maine EMS-approved Quality Assurance program)

ii. Must meet or exceed the NHTSA-defined (32) chief complaint types

### III. Quality Assurance/Quality Improvement (QA/QI)

#### I. Introduction

J. The requirements and criteria for QA/QI contained in this document are pursuant to the Maine EMS System Rules and Maine EMS law (32 M.R.S.A. §85-A).

K. The Maine EMS State Medical Director is the medical oversight for Maine licensed EMD Centers. EMD Centers are encouraged to establish and maintain a relationship with a local physician for purposes of quality assurance and continuing education.

#### 4. Responsibilities

L. Licensed EMD Centers and licensed Emergency Medical Dispatchers are required as a condition of licensure to participate in a Maine EMS approved QA/QI program.

M. A licensed EMD Center is responsible for conducting a quality assurance/quality improvement program as required by the Maine law, Maine EMS System Rules and the EMDPRS.

N. A licensed EMD Center will designate a quality assurance/quality improvement manager to oversee the Center's quality assurance/quality improvement program.

#### 5. Levels

O. Quality Assurance/Quality Improvement must include:

- Field level - Direct observation within the EMD Center
- Administrative level - Case review, identification of positive and negative trends

jj. Management level - High-level coordination of medical oversight

#### 6. Scope

P. The goal of EMD QA/QI is to ensure effective and efficient emergency medical dispatch.

Q. Each emergency medical dispatcher employed by an EMD Center must regularly and routinely be evaluated to ensure compliance with EMD protocol and operating policies and procedures. Evaluation - using a Case Review Template - must be qualitative and quantitative and must include retrospective review of non-edited logged recordings of EMD calls and any associated documentation.

R. Cases must be randomly selected, and equitably representative of each employee's work. For each individual, the following are minimum variables that must be tracked:

7. Compliance to systematic "all caller" questions (see Maine EMS criteria for EMD Protocols)

8. Appropriate selection of protocol based on patient(s)' complaint



- kk. Compliance to systematic “complaint-specific” questions
- ll. Appropriate determination of call priority
- mm. Compliance to systematic “pre-arrival” instructions
- nn. Compliance to systematic “post-dispatch” instructions
- S. Data will be maintained electronically at each EMD Center, to include:
  - Individual compliance
  - Shift compliance
    - oo. Service compliance
- T. Service compliance results will be reported monthly to the State EMD Coordinator in the format requested.
- U. An EMS service to EMD Center feedback loop should be established by all services/centers and their physician medical director(s).
- V. The QA/QI component must follow a standardized written format
- W. Users of the system should be instructed on the need for constructive input
- X. Progress on any issues raised should be tracked by the EMD and EMS directors
- Y. Challenging callers, e.g. hysterical, speech or hearing impaired, developmentally disabled, non-English speakers, etc. are not exceptions to the EMD requirement. These callers deserve and should receive the same systematized and comprehensive approach to EMD. The Emergency Medical Dispatcher and the EMD Center will make every effort in this regard, and the QA/QI process will seek to ensure compliance.
- Z. Effective July 1, 2010:
  - The Quality Assurance Program from the National Academies of Emergency Dispatch shall be the (sole) statewide EMD Quality Assurance/Quality Improvement program used by licensed EMD Centers and Emergency Medical Dispatchers;
  - Persons engaged in the direct quality assurance review of Emergency Medical Dispatchers at Maine-licensed EMD Centers must be certified - and maintain certification - as an ED-Q by the NAED
- 7. Follow-up on QA findings
- 8. All deviations to protocol must be mitigated, when noted
  - AA. Retraining and behavior modification should be emphasized in QA/QI
  - BB. Whenever positive trends are noted, they should be rewarded
  - CC. The EMD Center, in conjunction with its physician medical director and /or Maine EMS, should establish and follow written practice and procedure documents, and guidelines for EMD oversight in order to mitigate QA/QI deficiencies

- DD. Regular feedback, either positive or negative, must be provided to individual employees.

#### IV. EMD Training Programs and Instructors

##### 9. Program Requirements

- 10. EMD Training must meet or exceed ASTM F 1258 – 95 (Reapproved 2006) – Standard Practice for Emergency Medical Dispatch and ASTM F 1552 – 94 (Reapproved 2002) – Stand Practice for Training Instructor Qualification and Certification Eligibility for Emergency Medical Dispatchers.
- 11. Effective July 1, 2010, the Priority Dispatch Inc. Advanced Emergency Medical Dispatch Course shall be the (sole) emergency medical dispatch course-leading-to licensure approved by the Maine EMS Board and the ESCB.

##### 12. Training Requirements for Supervising Instructor

- 9. Instructors for Maine EMD courses-leading-to licensure must meet the following requirements:\

- 10. Be currently certified as an advanced EMS provider (current certification at or above EMT-Intermediate level, or, alternatively, CC-RN, PA, MD or DO) ;

- EE. Be currently certified as an EMD (in an EMD program approved by Maine EMS;

- FF. Be a “Competent instructor” as delineated by NHSTA curriculum and by meeting all criteria set forth by ASTM F 1552-94 (2002), including :

- pp. Instructor qualifications , including “proven competence as an instructor;”

- qq. Training Course Administration requirements must be consistently met, including reporting to Maine EMS and/or ESCB the following, upon request:

- GG. Student attendance and performance records

- HH. Identity and qualifications of the instructor(s)

- 13. Student evaluations of instructor(s)

- 14. Student evaluations of course content

- II. Effective July 1, 2010 an instructor for a Maine EMS-approved EMD course leading to licensure must be certified by the NAED as an EMD instructor.

##### 15. Testing Requirements

- 16. Testing shall be comprehensive.

- 17. Testing shall include a written exam, which must occur on the last day of the course; and, practical exercises based on true-to-life EMD scenarios of medical 911 call-taking, processing, and dispatching.

- 18. Every student shall participate in the exercises

- 19. Every guide card / protocol shall be covered by at least one scenario during the course.

EMDPRS Approval Dates:

Board of Maine Emergency Medical Services  
Emergency Services Communication Bureau

June 5, 2009

June 11, 2009



## **APPENDIX 4—NAED CDE (CONTINUING DISPATCH EDUCATION) GUIDELINES**

## **NAED CDE (Continuing Dispatch Education) Guidelines**

“Recertification for the medical, fire, or police protocols requires 24 hours of CDE every two years. For those holding more than one certification, a sliding scale applies.

Your agency's CDE Program should be organized around the training and responsibilities of the dispatchers and meet the following specific objectives:

1. Developing a better understanding of telecommunications and the emergency dispatcher's roles and responsibilities
2. Enhancing on-line skills in Pre-arrival Instructions and in all emergency telephone procedures within the practice of emergency dispatch
3. Improving skills in the use and application of all component parts of the Priority Dispatch System® (PDS) including interrogation and prioritization
4. Providing opportunities for discussion, skill practice, and critique of skill performance

### **CDE-approved categories**

1. Official Academy created educational product/program—Quizzes relating to articles describing medical, fire, and police protocols are included in each issue of the NAED's official publication. For a sample of current and past articles click here. To learn more about the magazine [click here](#).
2. Workshops and Seminars—Members may receive credit from learning more about emergency dispatch services, and preferably to the required skills of an EMD, EFD, or EPD (i.e., airway management, review of essential telecommunication skills, telephone scenarios, legal issues, computer-aided dispatch, stress reduction, and refresher courses). Tapes or CDs of previous Navigator classes can be used as well.  
**Max: 16 credit hours**
3. Multimedia Educational Products—Members may use multimedia education products that illustrate and review proper emergency care, and rescue and dispatch procedures. Titles are restricted to emergency service topics, and preferably dispatch-related.  
**Max: 16 credit hours**
4. Quality Assurance—Members may provide quality assurance case review, planning and analysis of issues or findings identified by dispatch, theoretically or in practice. For example, you may critique your own work to identify where you can make changes to improve your effectiveness.  
**Max: 8 credit hours**
5. Meeting Attendance—Members can attend local planning and management meetings, including those organized to discuss planning major disasters, mass casualty, trauma, and HazMat.  
**Max: 8 credit hours**

6. Teaching—Members qualify for CDE through teaching courses within the scope of PDS protocols to the general public or any individual. The CDE application must include a synopsis of the subjects taught.

**Max: 4 credit hours**

7. Protocol Review of the Medical, Fire and Police Protocols—Members may formally review revisions to any of the protocol updates.

**Max: 4 credit hours(4 per year)**

8. Miscellaneous—This can include ride-alongs, providing tours of your communication center, and on-duty work experience as an emergency medical technician, paramedic, fire fighter or police officer.

**Max: 4 credit hours**

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**65 PUBLIC UTILITY COMMISSION**

**625 EMERGENCY SERVICES COMMUNICATIONS BUREAU**

**Chapter 1: STANDARDS FOR ESTABLISHING A STATEWIDE ENHANCED 9-1-1 SYSTEM**

**SUMMARY:** This chapter outlines the standards, specifications, and procedures to establish a statewide Enhanced 9-1-1 system pursuant to 25 M.R.S.A. §2926.

**§1. Definitions**

- 1. Automatic Location Identification (ALI):** the automatic display at the Public Safety Answering Point (PSAP) of the caller's telephone number, the address/location of the telephone and supplementary emergency services information.
- 2. Automatic Number Identification (ANI):** The telephone number associated with the access line from which a call originates.
- 3. Computer-linked Communication Center (CLCC):** A facility equipped, at an agency's own expense, with ALI/ANI display and print out capability. It receives a 9-1-1 call only when it is transferred from a PSAP and dispatches emergency services to the caller.
- 4. Continuous Logging Recorder:** A device that records both sides of a conversation on each incoming 9-1-1 call and contemporaneously documents the year, date and time of each recorded event.
- 5. Emergency Services Communication Bureau (Bureau):** The Bureau within the Public Utilities Commission authorized to develop, establish and manage the statewide Enhanced 9-1-1 system in Maine, pursuant to 25 M.R.S.A. §2926.
- 6. Emergency Service Zone (ESZ):** A defined geographical territory consisting of a specific combination of law enforcement, fire, and emergency medical service coverage areas.
- 7. Enhanced 9-1-1 (E-9-1-1) Service:** An emergency telecommunications service that automatically displays a caller's location and telephone number on a screen at a call answering center. This service uses the caller's location, not telephone exchange, to direct a call to the appropriate Public Safety Answering Point.
- 8. Instant Playback Recorder:** A device that allows for the instant playback of the audio portion of the last 9-1-1 call.
- 9. Master Street Address Guide (MSAG):** The database of street names and number ranges with their associated communities defining Emergency Service Zones and their associated



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Emergency Service Numbers (a 3 or 4 digit number used to uniquely identify an Emergency Service Zone).

**10. Public Safety Answering Point (PSAP):** A facility equipped to receive ANI/ALI and assigned the responsibility of initially receiving 9-1-1 calls and, as appropriate, directly dispatching emergency response services or transferring the calls to other public or private safety agencies for dispatch.

**11. Service Provider(s):** The vendor or vendors selected by the Emergency Services Communication Bureau to provide the network, routing capabilities, databases, and equipment necessary to operate a statewide E-9-1-1 system.

**12. TTY/TDD:** A telecommunications device for the deaf that permits typed telephone conversations with or between deaf, hard of hearing, or speech impaired people, including Hearing Carry Over (HCO) and Voice Carry Over (VCO).

**13. Uninterruptible Power Supply (UPS):** A device designed to provide a continuing source of power without regard to the interruption or loss of commercial power.

**14. Public Safety Dispatcher:** A person who works in a PSAP or other public safety communications or dispatch center and is trained to receive, evaluate and dispatch emergency calls.

**15. Full-time Public Safety Dispatcher:** A person employed as a public safety dispatcher with the reasonable expectation of working at least 1,040 hours in any one calendar or fiscal year.

**§2. Network design specifications. Repealed. See Chapter 2.**

**§3. Minimum Public Safety Answering Point Requirements and Public Safety Dispatcher Requirements**

**1. Call answering and call transfer performance standards**

**A. Call answering.** Ninety percent of all 9-1-1 calls received by a PSAP shall be answered in 10 seconds or less.

**B. Call transfer.** Ninety percent of all transfers from a PSAP to dispatching centers shall be initiated within 15 seconds from receipt of call.

**2. Administration**

**A. PSAP Coordinator.** Each PSAP shall designate an individual to serve as its PSAP Coordinator for all issues involving E-9-1-1 service and the Bureau.

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**B. Call handling procedures.** Each PSAP shall work with the public safety providers served by the PSAP to establish call handling procedures. Each PSAP shall review these procedures regularly with the Bureau.

**C. Back-up arrangements.** Each PSAP shall have written backup arrangements in place, for both its primary and secondary backup PSAP sites, in the event that its dispatch capability is compromised and its calls must be rerouted and handled by either one of these sites.

**D. 24-hour operation and staffing.** Each PSAP shall operate and have call answering staff on duty 24 hours per day, seven days per week.

**E. Discrepancies.** Each PSAP shall constantly compare the ALI information from the database with information supplied by the caller to identify discrepancies. Errors shall be documented and forwarded to the Bureau for correction in a manner prescribed by the Bureau.

**F. Seven-digit telephone numbers.** Each PSAP shall maintain, at its own expense, at least one unpublished telephone number to allow for administrative purposes associated with the PSAP. Each PSAP shall also maintain, at Bureau expense, one seven-digit emergency telephone number to be published in the white pages of the telephone book as a backup to dialing 9-1-1. This number will also be used for the receipt of incoming emergency calls transferred to the PSAP by other PSAPs for certain alternate and default routing arrangements.

**G. PSAP security.** All access to a PSAP shall be secured to prevent entry by the public or unauthorized persons.

**H. Data security**

(1) Caller information provided during a 9-1-1 call shall be used only for the purpose of processing an emergency call and subject to existing statutory limitations on such information.

(2) The Bureau shall establish personnel security clearance standards for PSAPs to protect the confidentiality of ANI and ALI data. These criteria may include:

- (a) A state and national III record check by fingerprint identification.
- (b) A review of state and national arrest and fugitive files.
- (c) Disqualification for PSAP employment if any criminal record, employment history, or character issue so warrants.

(3) The physical layout of a PSAP shall insure that no unauthorized individual is able to view ANI/ALI information.

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**I. Records retention.** All voice and TDD recordings of incoming 9-1-1 calls shall be retained for a minimum of 30 days. It is recommended that such materials be retained for a minimum of 60 days.

**J. Public comment and complaint process.** Each PSAP shall develop a written procedure for receiving comments and complaints from the public and from public and private safety agencies served by the PSAP. Each PSAP's public comment and complaint documents shall include the name, title and contact information for the person designated by the PSAP to receive comments and complaints pursuant to this subsection. The Bureau shall assist each PSAP to develop and publicize these procedures, particularly through training on such procedures.

**K. Quality Assurance (QA) Program.** Each PSAP shall establish a quality assurance program which shall include a process for auditing the performance of each of its public safety dispatchers. The Bureau shall assist each PSAP to develop its Quality Assurance Program, particularly through training on the development of such plans.

**3. Reports and Records**

**A. Annual Report.** Within 30 days of the close of each calendar year, the highest elected official of each political subdivision and the head of each state department and agency employing public safety dispatchers shall provide the Bureau with a report containing a list of the names and dates of employment of all public safety dispatchers.

**B. Report on New Public Safety Dispatchers.** Whenever a public safety dispatcher is newly appointed, the official or department or agency head shall send notice of appointment within 30 days to the Bureau on a form provided for that purpose. The form is deemed an application for admission to the training program or for other certification as required by this chapter.

**C. Report of Termination of Public Safety Dispatchers.** Whenever the employment of a public safety dispatcher is terminated, the official or department or agency head shall send notice of the termination within 30 days to the Bureau on a form provided for that purpose.

**D. Reports of Convictions or Misconduct by Public Safety Dispatchers.** In the event that a public safety dispatcher is convicted of a crime or violation or engages in conduct that could result in suspension or revocation of the dispatcher's certificate

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pursuant to this chapter, the official department or agency head shall immediately notify the Director of the Bureau with the name of the dispatcher and a brief description of the conviction or conduct.

**E. Maintenance of Training Records.** The official or department or agency head shall maintain records regarding the basic and in-service training of public safety dispatchers as provided in this chapter. Such training records shall document at a minimum, the subject taught, duration of training, instructor(s), test scores as applicable, and signed attendance rosters, and be made available for review as requested by the Bureau.

### **3-A. Training**

#### **A. Basic Public Safety Dispatcher Training; Minimum Mandatory Staff Training**

**Requirements.** All full-time public safety dispatchers must successfully complete, within the first 12 months of initial employment, the Basic Public Safety Dispatcher Training Course at the Maine Criminal Justice Academy approved by the Bureau. All full-time public safety dispatchers must satisfactorily maintain the basic certification by completing any recertification requirements as may be prescribed by the Bureau. The Bureau, for good cause, may extend the 12-month period for not more than 180 days and may waive the Basic Public Safety Dispatcher Training Course requirement when an equivalent course has been successfully completed. This section does not apply to any person employed as a full-time public safety dispatch personnel on or before 1 January, 2008.

**B. Training on PSAP E-9-1-1 Call Answering Technology.** All persons, full or part-time, who are employed as a public safety dispatcher at a PSAP, must within 90 days of assignment, complete a Bureau approved course on the proper operation of Bureau-provided PSAP equipment and on proper call handling and processing of 9-1-1 emergency calls. Such public safety dispatchers may be assigned call taking responsibilities prior to the completion of the approved course when working under the immediate supervision of another certified dispatcher.

**C. Courses.** The Bureau shall provide tuition-free training courses, the successful completion of which meets the basic training requirements in 3-A(A) and (B). The Bureau shall include in the Basic Public Safety Dispatcher Training course, a program a block of instruction aimed specifically at the requirements of the Americans with Disabilities Act (ADA) for direct and equal access to 9-1-1 services for persons with disabilities who communicate via TTY/TDD.

**D. Continuing Education Public Safety Dispatcher Training as Required.** As a condition of continued employment, each public safety dispatcher must successfully complete continuing education training as prescribed by the Bureau with the advice and comment of the E9-1-1 Council. The minimum continuing education requirements for all public safety dispatchers shall be at least 12 hours of approved education each year. The Bureau, with the advice and comment of the E9-1-1 Council, may establish requirements for specific training topics and hours as a portion of the annual requirements and must include annual refresher training for dispatchers in the recognition and processing of TTY/TDD calls.

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**E. Credit for Courses.** The Bureau may grant training credits to be applied to recertification training requirements for courses completed at accredited colleges and universities, through professional journals, audio and visual media, teleconferencing and the Internet. The Bureau shall establish a process for the approval of training courses that may be applied toward annual certification training requirements, coordinate delivery of training with postsecondary schools and other institutions and public safety emergency communications agencies, and administer training programs.

**3-B. Certification**

**A. Granting of Certification.** The Bureau shall certify each public safety dispatcher who completes the Basic Public Safety Dispatcher Training Course. Such certification shall be granted for two years from date of issuance, upon which time the person must apply for recertification within 90 days prior to expiration to retain certification. All full-time public safety dispatchers must satisfactorily maintain the basic certification by completing any recertification requirements. Courses and certifications attained out of state may be evaluated by the Bureau on a case-by-case basis, comparing them with Bureau-approved courses for possible partial or full credit.

**B. Recertification** The Bureau, with the advice and comment of the E9-1-1 Council, shall establish requirements for the recertification of all public safety dispatchers, to include the timeframe for recertification, the completion of specified in-service training hours, and the application form.

**C. Revocation of Certificate for Conviction or Misconduct by a Public Safety Dispatcher.** In the event that a public safety dispatcher is convicted of a crime or misdemeanor or engages in unlawful conduct, the Bureau Director, with advice and comment by the E9-1-1 Council, may revoke or suspend the certification of a public safety dispatcher for cause, after affording the person a hearing before the E9-1-1 Council.

**D. Additional certificates.** The Bureau may offer additional certificates to be awarded for completion of additional education, experience and certified Bureau-approved training including, but not limited to, executive, mid-management, instructor and communications specialists certificates.

**E. Falsification of Application.** Knowing or willful falsification of an application for employment or application for certification or recertification as a public safety dispatcher shall be justification for denying admission to training and/or continued certification as a public safety dispatcher.

**4. Equipment**

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**A. Telephone equipment.** Each PSAP shall have telephone equipment that ensures system and functional compatibility with the network. All telephone equipment shall have the following features:

(1) **Barge-in capability:** To allow a PSAP operator to enter a call without the original call taker having to do anything.

(2) **Monitoring capability:** To provide for the monitoring of incoming emergency calls for supervisory and training purposes.

**B. Continuous logging equipment.** Each PSAP shall provide and run continuously a logging recorder that will record both sides of a conversation on each incoming 9-1-1 call, and contemporaneously document the year, date and time of each recorded event.

**C. Instant playback recorders.** Each PSAP shall provide and run an instant playback voice recorder capable of recording the voice conversations for each answering position.

**D. Equipment Tests.** PSAPs shall ensure that all call answering and dispatch equipment is maintained in operable working order. All PSAPs shall conduct periodic tests of all call answering workstations that include spare or backup workstations, exercising all critical functions and features, and TTY/TDD call reception and transmission. Equipment checks shall be conducted on a routine basis, but no less than monthly. PSAPs shall complete and maintain records of such tests and make them available for review by the Bureau. The Bureau will assist with the development of equipment test procedures and forms.

**E. TTY/TDD Test Calls.** PSAPs shall conduct internal TTY/TDD test calls in which random test calls are processed at each call answering position. Test calls shall include two types of calls (1) silent, open line calls, and (2) calls that are introduced by transmitting TTY/TDD tones. PSAPs shall require each dispatcher to conduct TTY/TDD test calls, as needed to ensure all dispatchers are able to process both sending and receiving calls, on a routine basis, but no less than every three months. PSAPs shall complete and maintain records of such test calls that identify the dispatcher, date/time of call, call taking position, silent or transmitted tone, and whether the call met standard operating procedures. Such test records shall be made available for review by the Bureau. The Bureau will assist with the development of TTY/TDD test call procedures and forms.

## **5. Facilities**

**A. Emergency power provision.** Each PSAP shall have an emergency power generator capable of providing for the essential power requirements of the facility to ensure continuous operation for a minimum of twenty-four hours during commercial power outages. Sufficient fuel should be available for 12 hours operation at full load, at any time, on two hours notice. If a source of supply is not reliable or readily available, or if special arrangements must be made for refueling as necessary, a supply sufficient for 24 hours operation at full load shall be maintained. (NFPA 1221)

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**B. Uninterruptible power supply.** Each PSAP shall provide uninterruptible power supply (UPS) capability on all critical pieces of the system, particularly the telephone system itself. (The Bureau shall provide UPS on all Bureau-provided 9-1-1 equipment.) UPS equipment will ensure that emergency calls in progress and subsequent calls will not be interrupted during commercial power fluctuations and outages. The UPS shall supply uninterruptible power for a minimum of 30 minutes to allow for manual or automatic transfer from the public service AC power to localized auxiliary AC power.

**6. Standards for Computer-linked Communication Centers**

**A. Computer-linked Communication Center.** A Computer-linked Communication Center (CLCC) shall receive the same caller name, number, and emergency service provider information received at the PSAP as the call is transferred from the PSAP to the CLCC. A CLCC will directly dispatch the appropriate service based on the needs of the caller.

**B. CLCC operating standards**

(1) **Training.** Call answering personnel shall be trained at CLCC expense in the following areas:

(a) Training on the proper operation of PSAP equipment purchased at CLCC expense.

(b) Training on the proper handling of incoming 9-1-1 emergency calls.

(2) **Data security.** Each CLCC shall provide protection and confidentiality for ANI and ALI data as described under Subsection 2, Paragraphs G and H of this section.

(3) **Records Retention.** All voice recordings and TDD records of incoming 9-1-1 calls shall be retained for a minimum of 30 days. It is recommended that such materials be retained for a minimum of 60 days.

**§4. Public Safety Answering Point Sites**

**1. Compliance.** Public Safety Answering Point sites shall comply with the PSAP standards set forth in Section 3, Subsections 1 through 5.

**2. PSAP Sites**

**A. Minimum PSAP Designation.** There may be at least one PSAP designated in each County.

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**B. Total Number of PSAPs.** As of October 15, 2007, the Bureau will support with funds collected by the surcharge authorized in 25 M.R.S.A. §2927, no more than the following number of PSAPs: 5 in Cumberland County; 3 in York County; 2 in Androscoggin County; 2 in Penobscot County; and 1 each in all other counties in the State. The State Police PSAPs in Gray and Orono shall not be included in these limits.

**C. Consolidation**

(1) **Ten calls or Less.** Any municipal PSAP existing as of July 1, 2005 that answered on average less than 10 calls per day for the time period January 1, 2004 – December 31, 2004 must file a plan with the ESCB no later than July 1, 2006 describing how it plans to consolidate with another entity taking greater than 10 calls per day, no later than October 15, 2007, unless it chooses the option in Section 4.2.D.

(2) **Consolidation in Androscoggin, Cumberland, Hancock, Kennebec, and York Counties.** For those counties in which PSAPs must be consolidated to reach the limits specified in section 4(2)(B) of this rule (Androscoggin, Cumberland, Hancock, Kennebec, and York), plans shall be submitted to the ESCB no later than July 1, 2006 reflecting agreements that have been reached to bring about that consolidation.

(3) **State Police Consolidation.** The State Police shall file a report no later than July 1, 2006 reflecting agreements that it has reached for consolidating its PSAPs.

(4) **Use of Consolidation Savings.** The Bureau may dedicate up to 25% of the funds saved from eliminating PSAPs, for use by any PSAP consolidating PSAP and dispatch functions for improved interoperability.

(5) **Implementation.** The Bureau shall accept any consolidation plans meeting the requirements stated in C (1-3) above. If plans meeting these requirements are not submitted, the Bureau shall determine which PSAPs will continue to receive financial support from the 911 surcharge funds.

**D. Locally-funded PSAPs.** Any PSAP receiving fewer than 10 calls per day as described in Section 4.2.C (1) or a PSAP no longer receiving surcharge funding as described in 4.2.C(5), may continue to act as a PSAP if it reimburses ESCB all costs associated with PSAP status. Such election must be made no later than July 1, 2006, with reimbursement to begin October 15, 2007.

**§5. Public Safety Answering Point equipment**

**1. Technology for system network. Repealed. See Chapter 2.**

**2. Public Safety Answering Point equipment.** The Bureau shall provide each PSAP with the following at no charge:



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**A. Equipment.**

- (1) Automatic telephone number identification (ANI) display capability.
- (2) Automatic location identification (ALI) display capability.
- (3) Call detail information reporting capable of identifying, at a minimum, the caller's ANI, the trunk number to the PSAP, the call taker position at the PSAP, the time the call is answered, transferred or terminated, and the duration of the call.
- (4) Call record management system.
- (5) Printer for call detail information.
- (6) 30-minute uninterruptible power supply (UPS) on Bureau-provided equipment.
- (7) TDD communications capability with record printout.

**B. Interface capabilities.** Essential Bureau-provided equipment shall have the capability to interface with existing call logging and instant playback recording devices.

**C. Maintenance.** The Bureau shall provide ongoing maintenance on all Bureau-provided equipment.

**§6. Procedures for developing and maintaining address and routing databases**

**1. Address and Routing Database Development**

**A. Physical addresses.** Each municipality participating in the E-9-1-1 system shall provide the Bureau with a list of accurate physical addresses for all published residential and business telephone subscribers and coin-telephones within its municipal boundaries. These addresses shall be linked with corresponding telephone numbers in telephone companies' customer service databases.

**B. Master Street Address Guide.** Each municipality participating in the E-9-1-1 system shall provide the Bureau with accurate road names, number ranges, and emergency service zones (ESZ) for the purpose of creating the Master Street Address Guide (MSAG). The MSAG shall be used to route 9-1-1 calls to the proper PSAP and display the correct ANI/ALI information.

**2. Address and routing database maintenance**

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**A. Municipal maintenance.** After establishment of the MSAG, each municipality participating in the E-9-1-1 system shall continue to verify the accuracy of the routing information contained in the MSAG and to advise the Bureau, on an as-occurred basis, of any changes in road names, the establishment of new roads, changes in address numbers used on existing roads, closing and abandonment of roads, changes in police, fire, emergency medical service or other appropriate agencies, jurisdiction over any address, annexations and other changes in municipal and county boundaries, incorporation of new communities or any other matter that will affect the routing of 9-1-1 calls to the proper PSAP.

**§7. Procedures for cooperation and coordination with telephone utilities and municipalities for implementation**

**1. Municipal Coordinator.** Each municipality participating in the E-9-1-1 system shall designate an individual to serve as their Municipal Coordinator for all issues involving the development and maintenance of address information for the E-9-1-1 addressing and routing databases.

**2. Database maintenance.** Each Municipal Coordinator shall notify the Bureau and Service Provider of any changes, deletions and additions to the MSAG on an as-occurred basis. The Service Provider shall update the MSAG within 24 hours of notification by a municipality. Each municipality shall review the MSAG yearly, at a minimum, to ensure accuracy of the data and the emergency service zones.

**3. Discrepancy reporting. Repealed. See Chapter 2.**

**4. Trouble reporting.** Each PSAP call taker shall fill out a trouble report when a call is found to have erroneous database information. The information shall be forwarded through the PSAP Coordinator to the Bureau, the Service Provider, and the telephone companies in a format established by the Bureau.

STATUTORY AUTHORITY: 35-A M.R.S.A. §§ 104, 111, and 25 M.R.S.A. §2926

EFFECTIVE DATE: This rule was approved as to the form and legality by the Attorney General on September 6, 2007. It was filed with the Secretary of State on September 10, 2007 and became effective on September 15, 2007.

EFFECTIVE DATE -- DEPARTMENT OF PUBLIC SAFETY, EMERGENCY SERVICES  
COMMUNICATION BUREAU, 16-574 CMR c.1:  
December 24, 1995 - filing 95-498

EFFECTIVE DATE (ELECTRONIC CONVERSION):  
May 15, 1996

NON-SUBSTANTIVE CHANGES:

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July 29, 1996 - §2(G) - removal of "the" before the word "Maine" as approved by the agency.  
January 28, 1999 - converted to Microsoft Word.

MOVED TO PUBLIC UTILITIES COMMISSION, 65-407:  
September 13, 2003 - authorized by P.L. 2003 c.359

ADJUSTED TO 65-625 (NEW UNIT NUMBER ASSIGNED BY BUREAU OF THE BUDGET):  
September 16, 2003

AMENDED:  
May 28, 2005 – Section 4, filing 2005-182  
January 29, 2007 – filing 2007-23  
September 15, 2007 – filing 2007-388

## **Appendix B—Example of New Employee Orientation Policy**

## NEW EMPLOYEE ORIENTATION POLICY

All new employees of the Regional 9-1-1 Communications Department are required to review and understand the following expectations of their employment in 9-1-1 and with the City of Anywhere, Maine.

- I understand and accept that protocol use for Fire, Police, and Emergency Medical dispatching is mandatory on all calls.
- I understand that compliance to protocols is 95%, however I will strive to meet the department vision of 100% on every call.
- I have read and understand the departmental rules and regulations.
- I understand that regular audits will be conducted on any/all electronic systems (i.e. MDT logs, City email, etc.) and I will not engage in inappropriate messaging on any of these systems. Disciplinary action, up to and including termination of my employment may result if I use these systems for anything other than work related purposes.
- I understand that I will be held accountable to all department values, as posted in the Center.

Employee: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

## **Appendix C—Example of Protocol Implementation Template**

## **PHASE DETAILS AND TASK DESCRIPTION**

### **Purpose of the Comprehensive Implementation**

The purpose of the implementation plan is to assist your dispatch center in meeting all the standards necessary for accreditation by the National Academies of Emergency Dispatch (“NAED”) as an Accredited Center of Excellence (“ACE”). To accomplish this Priority Dispatch Corp (“PDC”) will provide you with a self-sustaining quality assurance/quality improvement and risk management system that will ensure a continuous, safe and effective emergency dispatch operation both now and in the future. PDC Consultants will assist with the implementation of the standards that are included in this document. Our consultants will provide a report after each visit on the progress of the implementation to date, listing achievements set by the project plan and the accreditation standards, also noting the deliverables provided by PDC.

### **Initial Assessment**

Prior to the initial visit, PDC Consultants will obtain information about the Communications center, key management officials, the current emergency dispatch methodology, emergency services provided, unit allocation, response times, management practices, quality assurance and risk management programs as they relate to the emergency dispatch function.

Other information obtained includes local issues of concern, demographic and statistical data. Most information is gathered through the use of survey instruments. These instruments will be completed and returned to PDC for review. PDC’s assessment focus is directed towards training needs and quality assurance issues, the agency dispatch policies, practices and procedures, and a comprehensive systems approach to emergency services dispatch evaluation. PDC may elect to perform an on-site visit to help facilitate the gathering of information.

An on-site Technical Assessment must be completed well ahead of implementation. This must consist of a PDC Technical expert travelling to the client’s facility and conducting an in-depth analysis of the client’s IT infrastructure. This should include, but not be restricted to the:

- CAD Manufacturer and Operating System Version
- Number of workstations involved in the implementation
- Version of Windows and Base Memory considerations
- Existence of PDC Certified ProQA/CAD interfaces
- Network infrastructure and design

Once the assessment process is completed, a proposal is drafted to define specific solutions for implementing the Priority Dispatch System with the agency. The following pages describe each process of the implementation.

**Phase 1 Implementation Pre-Plan:**

**A. Establish Oversight Committees Membership / Identify Agency Project Manager**

PDC will directly assist your agency in establishing the membership of the Steering Committee and the Dispatch Review Committee ("DRC"). An agency project manager will be identified to work with PDC in establishing the phases of implementation, training dates, and site visits. The agency project manager will also have the responsibility of acting as a liaison between the Steering Committee and PDC for the duration of the implementation plan.

**1. Steering Committee**

The membership of the Steering Committee should include:

- Director of Emergency Operations
- Medical Advisory Physician
- Law Enforcement Authority (Chief of Police; Sheriff)
- Chief of the Fire Department
- Communications Supervisor
- Quality Improvement Unit Supervisor

This group's role is to make policy and procedures, approve or disapprove recommendations by the DRC. It will also have overall responsibility for managing the implementation plan, ensuring that all tasks are completed to its satisfaction within the allotted time frame. The Steering Committee should meet on a monthly basis initially and then quarterly, as need dictates. These monthly meetings should review the status of the implementation plan, protocol compliance data, and the status of achieving ACE certification.

**2. Dispatch Review Committee (DRC)**

This is a middle-management working group. The DRC is responsible for the formal process of reviewing Quality Improvement Unit-generated compliance. This includes review of individuals, shifts, and the entire center. The review will include the analysis of problematic and/or exemplary cases, implementation and follow-through of all report forms, tracking mechanisms, quality assurance processes, and operational feedback review. This group also makes formal recommendations for CDE program changes to the Dispatch Steering Committee.

The membership of the Dispatch Review Committee should include:

- Communications Supervisor
- Dispatch Supervisor
- Dispatcher



## APPENDIX C - PROTOCOL IMPLEMENTATION TEMPLATE – EXAMPLE ONLY

- Field Operations (Police, Fire and Medical personnel)
- Training Manager
- Members of the Quality Improvement Unit

The DRC's role is to act as the working group for the implementation, monitor the Quality Assurance/Quality Improvement ("QA/QI") process and its findings, and make recommendations based on these findings. The process should include the development or modification of policy and procedure for approval by the Steering Committee, and establishing the Continuing Dispatch Education program. The DRC will also be responsible for the day-to-day management of the completion of the various tasks identified in the project plan, and in some cases certain members may undertake the activities described in these tasks. The DRC should meet regularly or as needs dictate.

The DRC and Steering Committee may elect to hold joint meetings, but they should act as two separate bodies. *Both the DRC and Steering Committees should plan to have a joint meeting, in any case, during each of the Consultant's site visits, to facilitate any concerns or questions that might arise out of the initial implementation.*

Please have these individuals chosen and ready to meet during the Organizational Phase.

### **3. Quality Improvement Unit**

#### **Quality Improvement Unit (QIU)**

When an agency has more than one person filling the ED-Q role, all of the ED-Qs collectively comprise the quality Improvement Unit.

#### **Emergency Dispatch –Quality (ED-Q)**

A certified, competent dispatcher/call taker who has taken on the quality function of the communication center. This person has a responsibility to the emergency dispatchers, the Dispatch Supervisors, the Dispatch Review committee, and the Dispatch Steering Committee to provide timely, accurate, and appropriate information in order to "improve" the system based on verifiable data.

All members of the QIU need to be available during the Organizational Phase.

### **C. Agency to Identify Emergency Dispatch trainer candidates (optional)**

Your instructor(s) should have some education of adult learning methods along with hands-on training experience, and in the case of Medical implementations, must be ALS (Paramedic) trained (ALS training is a requirement of ASTM standards for PDC instructors). *(See pages 13-17 of this document for a detailed description of requirements.)* PDC does not attempt to teach your staff how to teach in the general sense, but rather gives guidance on how to teach the PDC course specifically. The teaching skills of these paramedics will be pivotal in the success of your

implementation, and so they must be selected wisely. They are *not*, however, required to be paramedic instructors. Your instructor(s) should become part of the QIU staff.

The in-house PDC instructor candidate(s) will be required to attend a minimum of five (5) courses: Course 1 to certify as a PDC, Courses 2-4 to audit and participate as an instructor's aide, and Course 5 to teach the course and be certified by a PDC Master Instructor, as provided by NAED requirements. It may take more courses as may be needed for the instructor candidate to complete their training. Should your organization not contract for the number of courses needed to certify all candidates, PDC will facilitate the candidate's attendance at a course (or courses) held by other agencies. PDC will not levy any charge for attending any course after the initial certification course, but your agency should expect to fund any traveling, accommodation, and subsistence expenses incurred by your staff. The instructor candidate(s) must meet the minimum standards set forth by the NAED (which meets and exceeds ASTM requirements). A copy of the NAED instructor prerequisites and certification requirements are provided within this proposal.

Your PDC instructor(s) will be restricted by contract to the provision of PDC training courses for the personnel of your agency only. There can be allowances for this provision under certain conditions in the contract. These contracts must be signed prior to the initiation of PDC training courses in your organization, and the contracts will specifically be between PDC and the individuals nominated by you. Instructors may provide in-house training, once certified, during this project. However, should the agency prematurely terminate the contract, for whatever reason, the in-house instructor will lose their certification.

**D. ProQA-CAD Integration - *This includes the installation and Configuration of each version of ProQA, FairCom, and AQUA***

- **ProQA Installation and Configuration with the Agency Computer Aided Dispatch (CAD)**
- A certified CAD interface for each of the ProQA software versions must be installed and tested well in advance of the "go live" date. Note that the client CAD supplier will most likely charge a fee for ProQA software integration. PDC must ensure that the appropriate integration and functionality of each ProQA CAD interface has commenced and that every effort has been made to resolve any outstanding integration issues. If there are shortcomings, these need to be identified to the client and an Acceptance of Shortcomings form completed by the client. PDC will make every effort to work with the supplier of your CAD system on the integration of the PDC software (ProQA™) with your CAD software. The system should not be brought on line until all issues have either been resolved or accepted by the client. It is important to note that the bulk of the integration work will have to be performed by the local CAD vendor, and delays in this regard must be resolved between the client the CAD vendor. PDC will make every effort

to collaborate and work in a proactive manner to assist in the resolving of outstanding integration issues.

- PDC Technical Personnel will assist the Agency's IT personnel in the installation and configuration of each version of ProQA (i.e. EMD, EPD, EFD) and FairCom Server. Local response configurations and CAD codes must be decided in advance of the go live date. This information must be input, configured and tested in CAD. QIU personnel will be trained in the export/import and reporting processes in ProQA.

- **Advanced Quality Assurance (AQUA™)**

AQUA will be installed and configured in the designated location. Since there is no CAD integration required for AQUA, installation is generally simple and straightforward. The client should have determined the number of AQUA installations required for QA purposes. Generally this is determined by the call volume, and the number of personnel assigned to the QIU. QIU personnel will be trained in the export/import and reporting processes.

## **Phase Two: Organization**

This phase will begin once the contract for services has been executed, and the above pre-implementation processes are established.

### **A. Leadership Orientation (Day 1)**

PDC shall conduct a Leadership Orientation for persons appointed to the PDC Steering Committee, DRC, QIU, and any other individuals designated by your agency. ***It is important that all of the senior management team attend this orientation, and demonstrate to the dispatch team the level of importance and their commitment to the implementation plan.*** This orientation is designed to be an introduction to the philosophy and objectives of the implementation plan. It is often helpful to invite representatives from organizations such as PSAP managers from adjoining agencies, neighboring medical, fire, and police dispatch management personnel.

### **B. Conduct First DRC and Steering Committee Meeting (Day 2)**

The purpose of this meeting is to clarify roles and responsibilities during the implementation project, and to discuss the agreed schedule. The combined committee will also be asked to discuss, and, if necessary, amend policies regarding compliance to the use of the PDC and the QI process, prior to their adoption.

### **C. QIU Setup and QI Personnel Orientation (Day 3) / Training (Days 4-5)**

PDC will provide the staff appointed to the QIU with comprehensive training in the performance of their duties. This will include provision of copies of potentially useful policies and all

necessary forms, support in setting up necessary filing and tracking systems, and instruction on the use of the PDC QI database (AQUA) provided by PDC during this phase.

#### **D. Field Responder Guide and SEND Card Training**

PDC will provide training to your staff on how to train other affiliated agency trainers in the use of the Field Responder Guides and SEND cards.

#### **E. Facilitate Bulletin Board communication processes and create a Reference Folder in Dispatch**

The purpose of these tools is to ensure that all dispatch staff have access to up-to-date information on the PDC related policies, the implementation process, and their performance in the use of the system.

#### **F. End of Phase One Deliverables:**

- *Management Seminar*
- *AQUA case review software*
- *PDC Protocol Card Sets*
- *Pocket User Guides*
- *SEND Cards*
- *Implementation documents*
- *End of Phase Report*

### **Phase Three: Training and Implementation**

#### **A. Emergency Certification Dispatch Course(s)**

Trained instructors will provide instruction for your dispatch staff in the use of the card set version of the Priority Dispatch system and other aspects of emergency dispatch and call taking during these courses. All staff with responsibility for any aspect of the dispatch function should attend one of these courses and will be expected to pass the final examination or a re-test. All members who are certifying as PDC's must also have current certification in CPR. Ideally, all members of the Steering Committee, DRC and QIU should also attend. Our experience has been that the attendance of carefully selected field personnel can assist in overcoming any concerns that field staff may have about the PDC, and may also help in breaking down the barrier that often exists between operations and dispatch. Recertification is required every two years.

#### **B. IT/System Admin Training and ProQA Training**

PDC IT/System Implementation Specialist will conduct a training session for IT personnel and the System Administrator. This is a 4 – 6 hour long session.

When the ProQA-CAD interface is completed, and the software is brought on-line, PDC will provide communication staff with ProQA software training. Computer work stations will be required for onsite software training. Should the integration and implementation of ProQA in the CAD system be delayed, a separate visit will be scheduled for training.

**C. Field Orientation and Distribution of Field Responder Guides**

During this phase all of the responder personnel will receive a tutorial on the purpose of the PDC and its anticipated impact on field operations. This is generally facilitated through the existing training organization, with the assistance of the PDC consultant. Responder staff will also be instructed in the use of a Field Feedback Form which allows them to request follow-up on cases where the actions of dispatch staff were exemplary or where the information given did not match the situation found at the scene. These forms will be distributed at this time. All responder staff will also be provided with a Field Responder Guide which will offer further information and a means of translating the PDC codes transmitted by the dispatchers into the specific protocols used in dispatching the unit(s).

**D. SEND Card Orientation and Training**

PDC provides (with the exception of EFD) as an integral part of the implementation, credit-card type documents to be issued to co-responder personnel and to any local dispatch staff. These list a small number of questions, detailing the minimum data to be passed by responding personnel from these organizations to their dispatch center. Field Responders personnel should be provided with a brief tutorial when these cards are issued, detailing their purpose.

**E. Failure of Certification Examinations**

All dispatch staff are expected to certify as Emergency Dispatchers by the NAED prior to their use of any of the protocol systems. Subsequently, any staff who fails their first attempt at the certification examination will be offered the opportunity to re-test. They will be advised of areas of weakness identified from their first exam, and be given suggestions on the areas they may wish to study. When they feel ready, they will be invited to contact the National Academy of Emergency Medical Dispatch for an oral (telephone) re-test focused on their areas of weakness. Should they fail this they may, at your agency's discretion, participate in a second full PDC course and take the written test again.

**F. Initiate use of the Priority Dispatch System / On-Line Training**

Upon completion of certification training, your agency should start using the system to process 9-1-1 calls. Dispatch staff will be expected to use it to interrogate callers, assign codes, relay

information to responders, and to give telephone instructions to callers. At this stage, however, your agency should not make any changes to its response configurations and modes. For the first four weeks the role of the members of the QIU will be to act as on-line trainers, providing as much support as possible to the dispatch staff using the system. Coverage by the QIU should be arranged to maximize the amount of time they spend in the dispatch center on all shifts. In particular twenty-four hour cover should be provided for the first two days of initiation of the system's use. PDC's consultant will participate in this, providing support during the initial go-live. Compliance to the protocols and scripts must be emphasized right from the beginning, with constant reinforcement.

### **G. ProQA Implementation**

Once the ProQA integration has been tested and accepted by the client, and all staff has been trained in its use, ProQA may be immediately utilized for on-line call processing. At this point, the QIU should be trained to access the quality improvement and management information reports provided as an integral part of the system. ProQA data is used in conjunction with AQUA to enhance call review as an integral part of the QI process.

### **H. Case Review**

At this point in the project, evaluation of randomly selected calls by the QIU will commence. PDC's consultant will provide oversight and feedback on this process. The members of the QIU will provide feedback on individual cases to the dispatch staff supervisors, who will then provide feedback to the individual. Remedial training activities may be necessary to prevent a recurrence of any identified problems. In order to meet accreditation standards, the QIU must review a statistically significant number of cases proportionate to the total number of 9-1-1 calls received at the center. This equates to reviewing:

- Agencies whose call volume is between 43,333 and 500,000 will be required to audit a percentage ranging between 3% and 1% (based on this sliding scale calculator)
- Agencies whose call volume is below 43,333 will be required to audit 1,300 cases (25 per week)
- Agencies whose call volume is below 1,300 will be required to audit 100% of their cases
- Agencies whose call volume is above 500,000 will be required to audit 1% of their cases
- The AQUA software will assist the reviewing team in providing compliance reports which can be measured against Accreditation requirements.

### **Public Education**

PDC will assist in the development of a public education program. This is important to raise awareness of the benefits of the Priority Dispatch System providing presentations to special interest groups, as well as demonstrating the system to other entities. Dispatchers should be invited to participate in any presentations and demonstrations.

## **I. Press Releases**

PDC can offer a suggested outline for news media and press use.

### ***Deliverables:***

- *Certification Courses as needed*
- *Protocol card sets*
- *Field Responder Guides*
- *Quality Assurance Guide*
- *SEND Cards*
- *Implementation documents*
- *ProQA and AQUA Reports*
- *Trainer Development Report and Instructor Trainer Kit*
- *Integrated CAD/ProQA software*
- *End of Phase Report*

## **Phase Four: Quality Assurance**

### **A. Continuing Dispatch Education (CDE) Program**

Provision of CDE classes should commence no later than one month after implementation of the Priority Dispatch System. In part fulfillment of the minimum re-certification requirement of twenty-four hours of CDE per two years, we would recommend that you provide all dispatch staff with one hour of classroom-based CDE per month. The PDC consultant will work with the QIU staff to develop topics for CDE. These topics should be linked to the findings of the quality improvement process. Details of the forms of CDE required for re-certification beyond didactic sessions will be provided.

### **B. Ongoing Case Review**

The consultant will assist the QIU, and DRC in the interpretation of the results from data gathered during the QA/QI process. The DRC and Steering Committee should plan to meet jointly each time the consultant makes a visit to the site.

### ***Deliverables:***

- *End of Phase Report*

## **Phase Five: Quality Improvement**

***Ideally, this phase will be entered when overall compliance of your dispatch staff is ninety percent or greater. This should be achieved within three to six months of the go-live date.***

### **A. Enhancing Response Configurations and Modes**

Once the required levels of compliance have been achieved, your agency may wish to make adjustments to its response configurations and modes. PDC will assist in this process. Examples of changes you may wish to make also include:

- multi- agency response
- emergency vs. non-emergency response
- fine tuning resource allocation

### **B. Evaluate Response Configuration**

Once changes to response configurations and modes have been implemented, the impact of these changes should be evaluated. Further adjustments can then be made as necessary and should be an ongoing process for the life of your agency.

#### ***Deliverables:***

- *End of Phase Report*

## **Phase Six: Accreditation**

### **A. Final System Assessment and Review**

PDC Consultants will assist you in gathering and presenting the necessary evidence to make an application to the National Academies of Emergency Dispatch to become an Accredited Center of Excellence. The Consultant's final report will identify areas of your Operation that you may wish to give particular attention to after completion of the project.

### **B. Schedule Press Conference**

Your accreditation plaque will be presented by a senior officer of the National Academies of Emergency Dispatch. As accreditation is a direct reflection of your organization's achievements



and the high quality of service provided to the community which it serves, you may wish to schedule a press conference on this occasion.

***Deliverables:***

- *Final Report*

**Program Maintenance Implementation**

Upon completion of the initial comprehensive PDC implementation, the terms and conditions regarding PDC program maintenance specified in the Consulting Agreement and End User License Agreements shall take effect. Our standard contract (a copy of which will be provided should you decide to implement this project) requires that your organization should, for a period of six years following the completion of this project:

- Maintain accreditation as an NAED Accredited Center of Excellence by adhering to the documented standards and participating in three-yearly re-accreditation reviews;
- Maintain certification of in-house PDC Trainers, to include their attendance at two yearly update seminars;
- Maintain the currency of the PDC card sets and software by installing updates and purchasing upgrades as they become available.

**During this period PDC undertakes to provide your organization with the following:**

- Continuing support and provision of reasonable technical assistance for all aspects of the Protocol systems;
- Continuing review and comment upon your organization's suggested modifications to response configurations;
- Provision of the latest generally available improvements to the Protocols, in an effort to keep your Protocols current for standard-of-care reasons. Updates to the *current* edition of the cards and software will be provided free of charge. Upgrades to new editions of Protocols will be charged at a proportion of the original license cost. Software maintenance is provided for via a maintenance contract;
- Provision of your organization's currently authorized PDC Trainer(s) with timely updates to all Protocol and Protocol training materials, and assistance in having such Trainer(s) meet and keep current with the NAED's Trainer certification

## APPENDIX C - PROTOCOL IMPLEMENTATION TEMPLATE – EXAMPLE ONLY

requirements;

- Assistance in maintaining NAED accreditation as an Accredited Center of Excellence.

**NAED Twenty Points of Accreditation**

Following are the standards which your agency must meet in order to be eligible for accreditation by the National Academy of Emergency Medical Dispatch as a Dispatch Center of Excellence. Full support will be afforded by PDC’s consultant in achieving these standards.

1	<i>All medical dispatch call-taking and dispatching work stations</i> – Indicate the total number of stations and how many are active (call-taking) versus supervisory or standby.
2	<i>Current Advanced PDC licensing of each PDC position</i> – List all PDC and/or ProQA license numbers.
3	<i>Current Academy certification of all PDC personnel</i> – List all functioning PDCs to include first and last name, hire date, (re)certification date, next expiration date & certification number; also list instructor(s) used for initial PDC training during the application period.
4	<i>Maintenance of Academy certification</i> – Provide copies of all policies related to certification and training of existing and newly hired PDCs; include policy on how newly hired PDCs will be certified within three (3) months; include policy indicating that all PDCs will be trained by current Academy-certified instructors; and include policy detailing routine provision of Continuing Dispatch Education (CDE) opportunities.
5	<i>Minutes from Medical Dispatch Review Committee (DRC) and Steering Committee meetings</i> – Provide copies of agendas and minutes for at least six (6) months of DRC meetings and two (2) Steering Committee meetings within a nine (9) month period immediately prior to this application to include meeting type (DRC vs. Steering), attendance and date held; list the names and organizational titles or positions of the DRC members; list, separately the same for Steering Committee members.
6	<i>PDC quality assurance and improvement methodology</i> – Provide complete description of methods used to evaluation PDC performance in using all elements of the PDC correctly; include succinct details of how PDC compliance is checked, tabulated and shared with the PDCs; list the beginning date on which both center and shift compliance scores were formally posted; list the beginning date on which individual compliance scores were privately shared with each PDC.
7	<i>PDC Quality Assurance and Improvement database</i> – Provide case review compliance summaries with monthly totals for the six (6) month period immediately prior to this application; include the incidence of each Chief Complaint Code (1-32) among all calls; include the incidence of each Determinant level ( <b>ALPHA</b> , <b>BRAVO</b> , <b>CHARLIE</b> , <b>DELTA</b> ) among all calls; include protocol compliance levels showing all seven (7) scoring areas.
8	<i>The number and percentages of randomly reviewed cases</i> – Provide verification

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	<p>that the percentage of random cases reviewed, through a formal quality assurance audio case review process for the six (6) month period immediately prior to this application, equals or exceeds that required by the Academy-approved sliding-scale formula: “The greater of 25 cases per week or 3% of the total weekly EMS call volume.”; list the total number of EMS calls processed during the six (6) month period immediately prior to this application. These include all 911 calls (or 999, 114, or other automatically routed emergency number calls) plus seven-digit number calls from the public; list the total number of EMS calls randomly review during this period; exclude calls from medical, physician, nursing or extended care facilities.</p>
<b>9</b>	<p><i>Consistent, cumulative, PDC case review at or above the following percentages –</i></p> <ul style="list-style-type: none"> <li>95% - Case Entry protocol compliance</li> <li>95% - Chief Complaint selection accuracy</li> <li>90% - Key Question protocol compliance</li> <li>90% - Post Dispatch Instruction protocol compliance</li> <li>95% - Pre-Arrival Instruction protocol compliance</li> <li>90% - Sub determinant code selection accuracy</li> <li>90% - Cumulative overall score</li> </ul> <p>Include monthly totals of the seven (7) scoring areas above for the six (6) month period immediately prior to this application; submit a summary separately; list all scores by month and year with the most recent month last. All scores for months 1 and 2 must be higher than 70%; for months 3 and 4 must be higher than 80%; and for months 5 and 6 must be equal to or exceed listed Academy standards.</p>
<b>10</b>	<p><i>Correct quality assurance and improvement scoring and practices through independent Academy review of randomly assigned cases –</i> Contact the Academy Executive Director or Board of Accreditation Chair for instructions on selecting and submitting 25 cases on tape (including case review forms and scores) from assigned times and dates designed by the Academy. The Academy’s Board of Accreditation will carefully review these cases for both standard compliance to protocol and correctness of case review evaluation and scoring by your reviewers.</p>
<b>11</b>	<p><i>EMS field personnel orientation to the proper use of the PDC with Pocket User Guides and through in-service or video orientation –</i> Provide a brief description of the PDC field personnel orientation process; include a copy of any orientation videotape or other audio-visuals used; list the total number of field personnel oriented; list the total number of Pocket User Guides distributed.</p>
<b>12</b>	<p><i>Use of field responder Medical Dispatch Feedback Reports –</i> Provide a brief description of the procedure for processing and distributing feedback reports; include a copy of the implemented feedback report form; include a copy of the implementation policy or memorandum.</p>

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<b>13</b>	<i>Current Continuing Dispatcher Education (CDE) program functions</i> – Provide a brief description of locally-approved CDE activities which meet Academy recertification requirements; include CDE program schedules and topics for the six (6) month periods immediately prior and subsequent to this application (12 months total); include attendance records for the six (6) month period immediately prior to this application.
<b>14</b>	<i>Police and Law Enforcement receipt of S.E.N.D. (Medical Miranda) pocket protocols and related in-service or video orientation</i> – Provide a brief description of the S.E.N.D. implementation and orientation process; include a copy of any orientation videotape used; list the number of law enforcement personnel oriented; list the number of S.E.N.D. cards distributed.
<b>15</b>	<i>Correct location configuration of all PDC response assignments</i> -- Provide a brief description of the development, revisions and approval of current response assignments (including configuration and mode); include copies of all DRC and Steering Committee meeting minutes reflecting this revision and approval process; include formal written approvals by the medical director, the DRC and the Steering Committee.
<b>16</b>	<i>Field implementation of all PDC response assignments</i> – Provide a copy of the PDC protocols showing all local response assignments listed by sub determinant; include a copy of the implementation policy or memorandum.
<b>17</b>	<i>Monitoring and maintenance of PDC response assignments</i> -- Provide a copy of the memorandum of agreement to formally review and re-approve all response assignments and mode each year through the DRC and Steering Committee structure.
<b>18</b>	<i>Medical Director oversight and controls</i> -- Designate a licensed medical physician to provide medical oversight to the communications center and PDC processes; list the name, address, specialty, license number and state(s) or province(s) in which this person is licensed; include a copy of the memorandum of agreement allowing the medical director the full level of medical dispatch involvement as designated in the NAEMSP Position Paper on PDC.
<b>19</b>	<i>Sharing of non-confidential data with the Academy for review</i> – Provide a memorandum of agreement to share non-confidential, nameless data and anonymous questionnaires with the Academy for review to enhance the on-going improvement of the PDC and PDC in general.
<b>20</b>	<i>Support of the Academy's Code of Ethics and practice standards</i> – Completion by and signature on the Accreditation Application by an authorized representative.

**Example of the Schedule for a Comprehensive Implementation Plan of the Priority Dispatch System (Including Consultant Site Visits)**

Phase / Task	Description	Site Visits
<b>Pre-Implementation</b>	Complete recruitment of Personnel to QIU Establish PDC oversight committee membership / identify project manager Identify current response criteria (ABCD) Identify in-house instructors Initiate Medical Control Schedule implementation and PDC training CPR train communications staff	
<b>Phase One</b>	<b>Organization</b>  Management seminar  Conduct first combined DRC and Steering Committee meeting QIU setup QI personnel / orientation and training Start CAD integration (software development only) Sign PDC Trainer contracts Post PDC notice board and reference folder in dispatch center	<b>Month One Visit One (5 days)</b>
<b>6 Deliverables</b>	<i>AQUA (case review software)</i> <i>Implementation documents</i> <i>End of Phase Report</i>	
<b>Phase Two</b>	<b>Initiation</b> 3-day PDC courses as necessary  Four-hour ProQA Training courses (optional) Field orientation and distribution of Pocket User Guides SEND Card orientation and video Initiate PDC Trainer development Re-tests Initiate use of PDC / on-line training Initiate ProQA implementation (optional) Initiate off-line case review Initiate public education Publish press releases	<b>Visit Two (N*3 days) (N'/2 days)</b>

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**7 Deliverables**

*Certified PDC Report*  
*PDC Protocol Card Sets*  
*Pocket User Guides*  
*SEND Cards*  
*PDC Trainer Development Reports*  
*PDC Trainer Kit*  
*End of Phase Report*

**Phase Three**

**Quality Assurance**

Initiate Continuing Dispatch Education  
 Review of QIU  
 Conduct second Combined DRC/Steering Comm. Meeting

**Month Two**  
**Visit Three**  
**(2 days)**

**8 Deliverables**

*End of Phase Report*

**Phase Four**

**Quality Improvement**

Enhance response configurations and modes

Evaluate system impact

**Month 3**  
**Visit Four**  
**(2 days)**

**9 Deliverables**

*End of Phase Report*

**Phase Five**

**Accreditation**

Final system assessment and review/Preparation of Accreditation Documents  
 Schedule accreditation press conference

**Month 6**  
**Visit Five**  
**(2 days)**

**10 Deliverables**

*Final report*

**Total Site Visits**

**Total Days**

**Five**  
**11+(N\*3)+**  
**(N'/2)**

**End Implementation / Enter Program Maintenance Phase**

**Summary of Deliverables:**

1. 5 QI logistic, training and evaluation visits (10 days);
2. 3-day PDC Certification Courses as needed for up to 24 students and PDC instructor development (i.e., Train-the-Trainer) (2-3 days on-line with PDCs in Communication Center);
3. One Management Seminar / Executive Certification Course (1 day);

APPENDIX C - PROTOCOL IMPLEMENTATION TEMPLATE – EXAMPLE ONLY

4. Manual Protocol Licensure for the appropriate number of dispatch work stations;
5. ProQA licensure for the appropriate number of dispatch work stations and 1 ProQA Licensure for 1 supervisory/QI workstation, plus ProQA training (optional);
6. 1 AQUA database;
7. 1 PDC Trainer Materials Package for your agency including:
  - a. *Course slides*
  - b. *Course transparencies*
  - c. *Master audio/video training tape*
  - d. *Anonymous hero video*
  - e. *Manual protocol card sets (6)*
8. The appropriate number of Pocket User Guides for all field responders and QIU members;
9. The appropriate number of SEND Cards for law enforcement and/or fire personnel in your agency's response area.



## **Appendix D—Statewide Protocol Implementation Cost Estimate**

APPENDIX D - STATEWIDE PROTOCOL IMPLEMENTATION COST ESTIMATE



Priority Dispatch Corporation  
 139 E. South Temple, 5th Floor  
 Salt Lake City, Utah 84111  
 United States of America  
 800-363-9127 x. 132

Name State of Maine Attn: Eric Parry  
 Address \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Date 02/02/11  
 By Adam Hinckley  
 Title Director  
 Dept. Client Services

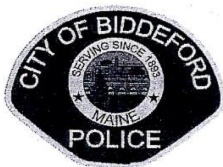
	Qty	Description	Unit Price	TOTAL
Dispatch Software		ProQA Medical Software Stations	3,300.00	-
		ProQA Medical Software 2nd Language	900.00	-
	137	ProQA Fire Software Stations	3,100.00	424,700.00
	14	ProQA Fire Software Stations 2nd Language	900.00	12,600.00
	137	ProQA Police Software Stations	4,900.00	671,300.00
	14	ProQA Police Software Stations 2nd Language	900.00	12,600.00
	15	Client/Server Software - 15 PSAP's	2,500.00	37,500.00
AQUA		AQUA Quality Improvement/Case Review Software	1,900.00	-
		AQUA EMD Module	800.00	-
	2	AQUA EFD Module	600.00	1,200.00
	2	AQUA EPD Module	1,000.00	2,000.00
Cards		MPDS Manual Dispatch Card Sets - back up	395.00	-
		MPDS Quality Assurance Guides	45.00	-
		MPDS Field Responder Guides	10.00	-
	137	EFD Manual Dispatch Card Sets - back up	395.00	54,115.00
		EFD Manual Dispatch Card Sets 2nd Language	595.00	-
	50	EFD Quality Assurance Guides	45.00	2,250.00
		EFD Field Responder Guides	10.00	-
	137	EPD Manual Dispatch Card Sets - back up	495.00	67,815.00
		EPD Manual Dispatch Card Sets 2nd Language	595.00	-
	50	EPD Quality Assurance Guides	45.00	2,250.00
	EPD Field Responder Guides	10.00	-	
		SEND Cards (Medical Miranda)	0.50	-
Training	525	EPD/EFD Protocol Training and Certification (5 days)	590.00	309,750.00
	20	ProQA Software Training Days	1,500.00	30,000.00
	5	AQUA Software Training Days	1,500.00	7,500.00
	15	Technical Evaluation Days	1,500.00	22,500.00
	15	Software Support/Install Days	1,500.00	22,500.00
	150	Implementation Support/QIU Training Days/Consulting	1,500.00	225,000.00
	30	On-Site Go-Live Support	1,500.00	45,000.00
	47	On-Site Visits/Travel Expenses	1,500.00	70,500.00
		Annual CDE Series (Renewable)	150.00	-
		SEND - Special Procedures Briefing CD	65.00	-
	ECHO Determinant Practice CD	65.00	-	
Support	1	Year 1 total System Support** -Includes existing Statewide MPDS System Support		274,000.00
		Note: Bid is for the implementation and training of a combined PSPD system and may not be bid or quoted as separate items. * Assumes training site with 2/1 PC training stations ** Total System Support includes technical telephone support, free updates and upgrades for all software and printed protocols, and 25 days of on-site QA or technical support or refresher training annually. All Amounts are in U.S. Dollars		-

**Quote Year 1**  
 Signature \_\_\_\_\_  
 Expires 180 Days Delivery Upon Request

Year 1 Total	\$ 2,295,080.00
Shipping	
State Tax	0.00%
Local Tax	0.00%
<b>Total</b>	<b>\$ 2,295,080.00</b>

## **Appendix E—Post-PSAP Review Correspondence**

APPENDIX E - POST-PSAP REVIEW CORRESPONDENCE



# CITY OF BIDDEFORD

Police Department  
39 Alfred Street, Biddeford, ME 04005



2011 JAN 25 A 9:07

**Roger P. Beaupre**  
Chief of Police

MAINE PUBLIC  
UTIL. COMM.

Phone – (207) 282-5127  
Fax – (207) 284-2401  
e-mail – Chief @ bpd.net

January 24, 2011

Maria P. Jacques, E9-1-1 Director  
Emergency Services Communication Bureau  
101 Second Street  
Hallowell, ME 04347

RE: PSAP Review Findings

Dear Director Jacques,

After reviewing the Mission Critical Partners report dated January 18, 2011, I would like to note that the Biddeford Communications Center is in full compliance (effective September 2010) with all Emergency Medical Dispatching rules and regulation, including the quality assurance regulations, as set forth by Maine Emergency Medical Services (Maine EMS) and the Maine Emergency Services Communications Bureau (Maine ESCB).

If you need any further information please free to contact me at the above number or at [fisk@bpd.net](mailto:fisk@bpd.net). Thank you.

Sincerely,

A handwritten signature in cursive script that reads "JoAnne W. Fisk".

JoAnne W. Fisk  
Deputy Chief



ROBERT A. MOULTON  
CHIEF OF POLICE

## TOWN OF SCARBOROUGH

Police Department  
SCARBOROUGH, MAINE  
04074

RECEIVED

2011 FEB -7 A 9:52  
Tel: 207-883-6361  
Fax: 207-730-4250

MAINE PUBLIC UTIL. COMM. January 26, 2011

MARLA A. St-PIERRE  
CAPTAIN

DAVID W. GROVER  
CAPTAIN

Maria P. Jacques, E9-1-1 Director  
Public Utilities Commission  
Emergency Services Communications Bureau  
18 State House Station  
Augusta, ME 04333

RE: PSAP Review Findings

---

Regarding the Public Safety Answering Point Initial Findings Review dated January 18, 2011 please find the below items and supporting documentation that Scarborough PSAP would like addressed and corrected in the final report.

1. Figure 1 Average Call Answer Times-PSAP vs. Bureau indicates that Scarborough PSAP's average time is :06 seconds. This is incorrect and not the number that was given to Eric Parry during his visit. Please find attached a copy of our Agent Overview report indicating that our average ring time during the time frame specified was :05 seconds.
2. Figure 2 Average Call Processing Times PSAP vs. Bureau indicates that Scarborough PSAP's average call processing time is 1:47 and the Bureau is 2:27. According to our Agent Overview report our average call processing time is 2:27. I can only assume that the numbers between Scarborough and the Bureau have been reversed in the document. Please see our attached Agent Overview report that indicates this for the time frame specified in the study.
3. Page 18 indicates, among other things, that having Police and Fire call processing guideline protocols "assures" the immediate delivery of life saving PAIs. While the intent of this statement is well meaning, it is not a fact that protocols "assure" immediate delivery of PAIs. In fact and as proven by the current EMD protocols at times they delay life saving PAIs and dispatching of ALS equipment.

4. Figure 5 along with page 26 indicates that Scarborough PSAP was not in compliance with Bureau rules in regards to TTY testing by not having a tracking log in place. In fact there is a log in place and has been current since 2008. At the time of the visit this log was kept paperless and was not available to be viewed by Eric Parry. Despite Scarborough PSAPs wishes to be as paperless as possible we have begun a paper log printed quarterly to be stored in a notebook kept in the Communications Center accessible at all times for inspection.
  
5. Page 33 Table 1 indicates the average call answer time is .05 seconds which is correct but is in discrepancy with the incorrect information in Figure 1 as noted previously in paragraph #1 and in our Agent Overview report for the time frame specified. Also on page 33 in Table 1 the average call processing time is documented as 1:47. This time is not correct and should show 2:27 as noted previously in paragraph #2 and in our Agent Overview report for the time frame specified.

Thank you for your assistance in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Robert Moulton", with a stylized flourish extending to the right.

Robert Moulton  
Chief of Police



# Agent Overview

From: 01/01/2010 00:00:00  
To: 06/30/2010 23:59:59

Report Totals: ALL GROUPS

	Inbound	% of Total	Avg Ring	Max Ring	AVG Talk	Max Talk	Avg Hold	Max Hold
Totals:	5048		00:00:05	00:00:40	00:02:27	00:43:01	00:01:01	00:04:51

Created on: 02/02/2011 09:42:13



STATE OF MAINE  
 Department of Public Safety  
**Consolidated Emergency Communications Bureau**  
 42 State House Station  
 Augusta, Maine  
 04333-0042

Paul R. LePage  
 GOVERNOR

John E. Morris  
 COMMISSIONER

January 28, 2011

Ms. Maria Jacques  
 Director  
 Emergency Services Communications Bureau  
 Maine Public Utilities Commission  
 18 State House Station  
 Augusta, Me 04333-0018

Dear Ms. Jacques,

This letter is in response to your January 24, 2011, PSAP Review Findings letter and its attached report prepared by Mission Critical Partners.

In February 2010, the Office of Program Evaluation & Government Accountability (OPEGA) issued a report entitled, "Emergency Communications in Kennebec County." The report identified a need for improvement in the area of standardized protocols and quality assurance (QA). As a direct result, the Emergency Services Communications Bureau was tasked by the 124<sup>th</sup> Legislature in P.L. 2009 Chapter 617, to implement a quality assurance program to audit and monitor compliance with emergency dispatching standards, practices and procedures of PSAPs.

Your Bureau contracted with Mission Critical Partners who, after conducting a survey of all the PSAPs, made site visits to evaluate those agencies in their E911 call handling procedures and related areas. The results of their survey and evaluations were reported in the above cited document.

I've noticed that the statistics reported in Figure 2 on page 7 don't seem to support the Observations noted in narrative format on page 8. For example, the statistics in the chart show that the four Department of Public Safety operated PSAPs have average call times that fall within the acceptable standards. Each of these PSAPs also have a high percentage of calls that are transferred out of the PSAP to other dispatch locations. According to the narrative Observations on page 8, a high percentage of calls being transferred generally equates to average call times that exceed the acceptable standards. It seems that either the chart of statistics is incorrect or the narrative observations – at least in the case of the 4 DPS PSAPs – aren't supported by the statistical analysis of the call data.

The Observations that I am referring to are listed below;

---

INTEGRITY \* FAIRNESS \* COMPASSION \* EXCELLENCE

Offices located at: 45 Commerce Drive, Suite #1, Augusta, Maine  
 (207) 624-7001 (Voice) (888) 524-7900 (TDD) (207) 287-3428 (Fax)



- PSAPs that answer a high volume of wireless calls that require transfer most likely consume more talk time due to initial caller interrogation, and then subsequent transfer to another PSAP.
- PSAPs that transfer a high volume of calls may stay on the line longer with the caller until the call has been answered by the receiving agency.
- Calls that are transferred from on point to the next may require additional talk time as the transferring telecommunication may need to relay to the receiving telecommunicator details and elements of the call.

DPS Gray has consistently had the State's highest volume of calls, and of all the calls received during 2010, 62,720 calls, or 39.59% were transferred to other PSAP/dispatch centers. Houlton RCC currently receives only cell phone traffic, and during this year they transferred 30% of their total traffic. DPS Orono receives only cellular E911 calls. During 2010, the Orono RCC transferred 40.56% of those calls to other agencies. Each of these centers' average call times are within the acceptable standards. Another example of this outside of the Department of Public Safety is identified on page 18, where it is reported that the Lincoln County PSAP receives its own cellular E911 traffic and transfers calls to local dispatch centers and it also has average call times within acceptable standards.

As indicated above, the report makes assumptions on the reasons for the longer processing time of calls; however, no definitive answers are provided. PSAPs, such as Sanford, Cumberland County, Penobscot County, Scarborough and Waldo County, show high call processing times yet handle little to no cellular E911 traffic. If the observations indicate cellular phone traffic and call transfers create higher call processing times, then what can be the explanation for high call processing times when a PSAP's percentage of cellular phone calls and call transfers is low? It would be greatly appreciated to have further clarification of the points that Mission Critical Partners are attempting to make with the statistics and the observations.

I would like to report that DPS has addressed and corrected an issue that was raised during the interviews for this report. On page 25, the report has identified DPS Gray as not conducting or logging TTY test calls. This oversight has been corrected, and they currently have implemented the practice and documentation for TTY test calls.

It was identified in this and previous reports that cellular phone calls should be routed to the local appropriate PSAP. In this report on page 27, under "Wireless 9-1-1 Calls," it states that "PSAP personnel openly questioned why individual PSAPs could not handle their own wireless calls." It has been our position that cellular calls should be routed to the local appropriate PSAP. We as a Bureau have worked cooperatively with the Emergency Services Communications Bureau to redirect cellular calls to local PSAPs and will continue to do so. In the Department's response to the Maine Public Utilities Commission's Docket 2010-185, we suggest that the Emergency Services Communications Bureau work with the PSAPs and cellular carriers to identify the number of 9-1-1 cellular calls being transferred from one PSAP to another PSAP and route the cellular traffic of each cellular sector to the PSAP that appears to be getting the majority of calls on that sector.

On behalf of the Department, I would like to thank you for the opportunity to respond to this report and look forward to continued cooperation moving forward with E9-1-1 in the State of Maine.

Sincerely,

Cliff Wells  
Director

RECEIVED  
2011 FEB -3 A 8:53  
MAINE PUBLIC  
UTIL. COMM.



To: Maria P. Jacques, ENP, Director  
Public Utilities Commission  
Emergency Services Communication Bureau

From: RJ Legere, Communications Director

Date: February 1, 2011

Reference: PSAP Findings Document

I would like to follow-up with you regarding the PSAP Quality Assurance report that was done on October 5, 2010 here at Sanford RCC.

In the months leading up to the inspection, Sanford Regional Communications Center had implemented two very significant changes that required us to prioritize the various demands on our communications staff. These changes included implementing a change in oversight from the Police Department to the Town Manager and the relocation of the communications center to a new building. Preparing for and implementing these major changes did put us behind on a number of other important tasks. Since the report was completed we have made a concerted effort to address the areas of concern identified in the report. I would appreciate it if the following areas were included in the final report:

- ALI Discrepancies: A log has been established to better track when incorrect ALI's are faxed out and corrections received.
- An S.O.P. Committee has been formed and several policies are currently in the draft stage nearing completion.
- 3 Supervisors are now in place with a fourth being interviewed next week and one of them is handling the EMD QA. A QA/QI policy is also being drafted.
- We have completed our hiring and will be fully staffed as of February 7, 2011.



- A log has been established for the purpose of testing TTY calls and Supervisors will be testing their shift on a monthly basis and if not monthly at the very least quarterly and each shift will be maintaining a training log.

Sanford Regional Communications and its employees have done an exceptional job with all of the transitions over the past two years and I would just like the report to accurately reflect the professionalism and dedication they provide to the citizens they serve.

Thank you for your time and consideration in this matter.



Penobscot Regional Communications Center  
97 Hammond Street  
Bangor, Maine 04401  
jryan@penobscot-county.net

February 2, 2011

Maria Jacques, Director  
Emergency Services Communications Bureau

Subject: PSAP Quality Assurance Report

Maria,

After reviewing the report, I would like to say that overall the report was done very well. Penobscot Regional Communications Center had no deficiencies but I would like to comment on a few things that I believe should have been in the report or were reported incorrectly:

- There should have been a section reviewing policies set forth by the ESCB or MEMS Bureaus (or lack of). There have been mandates put in place but no consequences for non-compliant agencies.
- Quality Assurance reviews should have been taken to the next level. Agencies are reporting, but are they reporting accurate information and doing the QA checks in accordance with the requirements. The review done by MCP was on the honor system.
- I believe that centers should have also been broken into categories by size. Especially when it came to EMD reporting. Agencies with large EMD numbers have a greater challenge in reaching a high QA percentage compared to agencies that only do a few EMD's.
- The training section talks about Continuing Education Hours (CEH) for communication operators. We do not use the CEH system anymore.
- The report noted that the majority of PSAP's are in favor of the Law and Fire Protocol Cards. I do not believe this statement. In talking to most agencies I believe you will find just the opposite.

Thank you for the opportunity to file my thoughts and should you have any questions please feel free to contact me.

Respectfully,

James E. Ryan Jr.



Penobscot Regional Communications Center  
97 Hammond Street  
Bangor, Maine 04401  
jryan@penobscot-county.net

Executive Director  
PRCC

CITY OF WESTBROOK  
PUBLIC SAFETY  
EMERGENCY COMMUNICATIONS  
DEPARTMENT

RECEIVED  
2011 FEB -3 A 8:47

MAINE PUBLIC  
UTIL. COMM.

February 2, 2011

Maria P. Jacques, ENP, Director  
Public Utilities Commission  
Emergency Services Communication Bureau  
Mail Address: 18 State House Station  
Augusta, ME 04330-0018

Dear Director Jacques:

I would like to take this opportunity to thank you and your staff for your continued support. I speak for the entire leadership team in the City of Westbrook when I say that this recent Public Safety Answering Point (PSAP) audit was both helpful and informative. We share in the hope that your report will serve as a starting point to build support for the Bureau and individual PSAPs. Our hope is that increased support will enhance the professionalism and consistency of 911 service being provided to the citizens of Maine.

I have attached a copy of Westbrook's policy on Silent and TTY calls which is now in place. I have also attached our agency's EMD Center Protocol Compliance Report and QI Summary Report for your consideration. You will notice that our individual and summary reports for the months of March to August 2010 indicate Westbrook's compliance score is 91.44% which differs from the 89% reported in the audit report.

Thank you once again for the opportunity to participate in and respond to the audit report. I look forward to its release and the discussion that follows.

Sincerely,



Gregory A Hamilton, Director

570 MAIN STREET • WESTBROOK, MAINE • 04092  
PHONE: (207)854-0644 X407 • FAX: (207)854-0648

## WESTBROOK EMERGENCY COMMUNICATIONS

### OPERATING GUIDLINE

#### Silent Calls and TTY/TDD Calls

**Purpose:**

The purpose of this policy is to ensure that call taking personnel effectively recognize and respond to "silent", open line and TTY calls where the caller is unable or unwilling to communicate by voice. In order to ensure that all TTY calls are properly identified, call takers must be able to recognize TTY tones and/or query every "silent" or open line call with a TTY greeting

**Procedure:** When the call taker answers a 9-1-1 call with the standard spoken greeting and receives only a silent or open line, the call taker should repeat the standard question slowly and clearly, "9-1-1 what is your emergency"?

Listen for 2-3 seconds for any background sounds which may give an indication of what is happening, i.e....snickering would lead one to believe children are playing with the phone. In such cases disconnect the caller, call back and ask if there is an emergency, if not, ask to speak to a parent. If parents are said not to be home, tell the child that he or she is not to dial 9-1-1 again unless it is an emergency or the local police will be sent to the house. Refer name and phone number to the supervisor for later call back to speak with the parent(s).

If your questioning gets no verbal reply, a TTY message should be

transmitted to check for the possibility of a TTY user that has failed to signal. The call taker should manually place the APU in TTY mode and send out the programmed text message "9-1-1 WHAT IS YOUR EMERGENCY Q GA". If no response from the caller, send the TTY greeting a second time.

If a TTY response is received, the APU will detect the signal and automatically open the TTY window. Utilize the pre-programmed TTY messages to communicate with the caller and/or use the keyboard to type questions and responses. Utilize the common TTY abbreviations to save keyboard time and improve caller understanding.

If attempts to communicate via TTY mode fail to elicit a reply, exit the TTY mode to restore call taker voice capabilities.

If, rather than snickering, a gasping sound or no sound is heard, assume that medical aid and or police are required. Verbally advise the caller to press any button on their keypad to indicate that they can hear you. If they respond, advise the caller:

- "If you need the Police, Press 1 "
- "If you need the Fire Department, Press 2"
- "If you need an Ambulance, Press 3"

Listen for a response and watch your ANI screen for the digits being pressed by the caller. If the caller is responsive, gather as much information as possible by asking YES or NO questions and advise the caller to:

- Press 4 for YES and 5 for NO

If none of these procedures elicits a response, contact the designated law enforcement agency shown on the ALI screen and give



notification of the silent or open line call. If any doubt exists as to the status of a call or the safety of the caller, always send POLICE to check on the well being of the caller.

While awaiting units to arrive, keep the line open and repeat the questions periodically. Continue to listen for sounds from the caller or background noises. Reassure the caller that assistance is being sent. Inform responding units of any changes in caller or location status.

The sole exception to the above procedure is when the ALI indicates that the silent call is from a bank or retail store. In that case, notify the local law enforcement agency immediately. The open line may indicate that the facility and/or staff are the victim of a robbery or other threat.

In order for call takers to effectively communicate with TTY callers, all personnel are required to be trained and familiarized with the use of the TTY equipment and TTY protocols prior to call handling assignment. Following initial training thru the Emergency Services Communications Bureau, all call takers will participate in periodic refresher training.

Refresher training shall include weekly TTY testing on E9-1-1 equipment, monthly practice calls, reviews of agency "silent" call policies, reading applicable state & federal ADA guidelines and attending meetings with local members of the deaf, hard of hearing or speech impaired public in order to better understand the deaf culture and their needs.

In order to maintain call taker TTY skills and to ensure proper equipment functioning, on a monthly basis each call taker shall

practice sending and receiving both "silent" TTY calls and calls which transmit an initial TTY tone to activate the TTY APU automatic detection features. The tests should be both planned and unannounced, utilizing the various features of the TTY equipment. Messages should include the use of common TTY abbreviations as used by the deaf community. The testing should cover each call taker and each call answering position

Test calls may also be conducted by calling within the Center or by call our back-up PSAP or actual members of the deaf community in the agency's jurisdiction as a means to improved public relations and education in the availability of 9-1-1 as the approved TTY emergency number.

The agency shall maintain records of all call taker training and also record the results of all test calls conducted to include, at a minimum; the date and time of the test call, identification of the call taker and position, and whether the call was a "silent" or transmitted tones, along with notations of whether the call was processed acceptably according to the agency's procedures.

## Communication Center Protocol Compliance Report

<b>Agencies</b>	Westbrook Communications
<b>View / Filter By...</b>	(Reviewed Cases)

Name (# of Cases)	Case Entry	Chief Complaint	Key Questions	PAIs	PDIs	Final Coding	Customer Service	Column Average
██████████ (34)	97.50%	90.97%	98.68%	0.00%	89.06%	78.82%	98.76%	90.47%
██████████ (25)	94.00%	96.12%	95.96%	N/A	86.88%	82.40%	99.76%	91.07%
██████████ (16)	93.56%	91.06%	94.38%	N/A	89.33%	87.50%	99.44%	91.17%
██████████ (25)	91.96%	83.32%	91.72%	50.00%	69.13%	85.60%	96.20%	84.04%
██████████ (67)	88.76%	81.81%	84.19%	N/A	75.46%	84.18%	96.73%	82.88%
██████████ (85)	99.29%	95.78%	99.75%	75.00%	98.95%	97.18%	99.82%	97.73%
██████████ (81)	99.51%	96.99%	98.57%	100.00%	96.93%	96.05%	100.00%	97.63%
██████████ (7)	89.29%	89.14%	99.14%	N/A	100.00%	100.00%	100.00%	95.51%
██████████ (94)	92.34%	84.89%	97.60%	56.50%	88.21%	89.15%	96.76%	89.74%
██████████ (81)	90.54%	91.07%	92.51%	100.00%	87.66%	86.17%	98.93%	89.65%
██████████ (87)	90.97%	93.64%	93.51%	100.00%	86.71%	94.71%	97.32%	91.94%
<b>Totals: (602)</b>	<b>93.79%</b>	<b>90.77%</b>	<b>94.95%</b>	<b>69.07%</b>	<b>88.45%</b>	<b>90.13%</b>	<b>98.32%</b>	<b>91.44%</b>

## QI Summary Report

Agencies	Westbrook Communications
View / Filter By...	(Reviewed Cases)

Distribution: All Cases

Determinant	# of Cases Reviewed	% of Cases Reviewed	# of Cases Entered	% of Cases Entered
OMEGA	10	1.66%	10	1.66%
ALPHA	182	30.23%	182	30.23%
BRAVO	67	11.13%	67	11.13%
CHARLIE	171	28.41%	171	28.41%
DELTA	165	27.41%	165	27.41%
ECHO	7	1.16%	7	1.16%

\* Total Cases Reviewed: 602  
\* % Reviewed for Period: 39.81%

\* Total Cases Entered: 602  
Call Volume: 1512

**Statistics:**

Protocol #	# of Cases	% Call Volume	Case Entry	Key Questions	PAIs	PDIs	Chief Comp.	Final Coding	Avg	Customer Service
1	27	1.79%	94.52%	90.81%	N/A	93.52%	94.44%	94.07%	93.47%	98.89%
2	14	0.93%	95.00%	95.79%	N/A	96.43%	91.50%	91.43%	94.03%	100.00%
4	1	0.07%	100.00%	100.00%	N/A	100.00%	100.00%	100.00%	100.00%	100.00%
5	7	0.46%	100.00%	100.00%	N/A	97.14%	76.14%	94.29%	93.51%	99.57%
6	66	4.36%	91.65%	96.23%	100.00%	88.41%	87.15%	88.79%	90.48%	97.39%
7	1	0.07%	100.00%	100.00%	N/A	90.00%	100.00%	100.00%	98.00%	100.00%
8	2	0.13%	100.00%	100.00%	N/A	100.00%	56.50%	90.00%	89.30%	100.00%
9	4	0.26%	100.00%	97.00%	100.00%	100.00%	83.25%	85.00%	93.05%	100.00%
10	63	4.17%	98.10%	96.60%	49.00%	74.59%	94.60%	92.70%	90.45%	99.05%
11	2	0.13%	95.00%	100.00%	75.00%	100.00%	78.50%	70.00%	86.20%	98.50%
12	25	1.65%	85.84%	84.72%	100.00%	67.50%	90.56%	92.00%	84.97%	98.48%
13	18	1.19%	93.28%	95.94%	N/A	79.12%	89.72%	95.56%	90.72%	93.94%
17	96	6.35%	94.33%	95.90%	100.00%	90.22%	93.02%	91.67%	93.07%	98.97%
18	4	0.26%	100.00%	100.00%	N/A	100.00%	100.00%	100.00%	100.00%	100.00%
19	11	0.73%	99.09%	95.73%	66.67%	87.50%	92.09%	89.09%	91.56%	98.55%
20	1	0.07%	100.00%	100.00%	N/A	100.00%	100.00%	100.00%	100.00%	100.00%
21	21	1.39%	90.00%	93.33%	0.00%	73.50%	78.52%	82.86%	82.94%	96.10%
23	11	0.73%	94.55%	98.18%	N/A	100.00%	95.18%	98.18%	97.22%	97.09%
25	6	0.40%	100.00%	98.67%	N/A	90.00%	88.83%	86.67%	92.83%	99.00%
26	84	5.55%	92.49%	94.32%	N/A	95.42%	89.05%	85.71%	91.40%	98.17%
27	2	0.13%	100.00%	100.00%	N/A	100.00%	100.00%	100.00%	100.00%	100.00%
28	18	1.19%	96.33%	95.94%	0.00%	96.33%	91.44%	77.78%	90.36%	95.44%
29	2	0.13%	100.00%	77.00%	N/A	70.00%	100.00%	90.00%	87.40%	98.50%
30	5	0.33%	88.00%	91.20%	N/A	85.00%	99.00%	68.00%	86.24%	94.80%
31	40	2.64%	90.35%	92.70%	100.00%	80.29%	88.78%	92.00%	89.23%	99.20%
32	4	0.26%	95.00%	89.50%	N/A	75.00%	83.25%	85.00%	85.55%	99.25%
33	37	2.45%	92.89%	96.78%	N/A	99.29%	91.08%	92.43%	94.49%	99.68%
37	30	1.98%	96.17%	96.53%	N/A	92.67%	97.90%	94.00%	95.45%	98.37%
<b>Totals</b>	<b>602</b>	<b>39.81%</b>	<b>93.79%</b>	<b>94.95%</b>	<b>69.07%</b>	<b>88.45%</b>	<b>90.77%</b>	<b>90.13%</b>	<b>91.44%</b>	<b>98.32%</b>

*Cumberland County Regional Communications Center  
CCRCC*

22 B High Street  
Windham, Maine 04062

Maria Jacques  
Public Utilities Commission  
Emergency Services Communications Bureau  
18 State House Station  
Augusta, Maine 04330-0018

RECEIVED  
2011 FEB -4 A 9:16  
MAINE PUBLIC  
UTIL. COMM.

February 2, 2011

Dear Maria,

I have had an opportunity to review the Mission Critical Partners, PSAP Initial Findings Review that was sent out in late January.

It appears that Cumberland County was noted as having two deficiencies:

- 1) Complaint Process
- 2) Quality Assurance Program

**I am very pleased to report that each of these deficiencies has been corrected.**


I have enclosed a copy of our new Complaint Process policy and a copy of the actual complaint form that will be available on our website.

As you know, on January 29, 2011, we hired Cumberland County's first Deputy Director here at the CCRCC. The Deputy Director, Matt Magill, has been assigned two main functions. These two functions are training and quality assurance.

Matt, who already serves as our EMD Director, is beginning to put together a Quality Assurance program which includes Law Enforcement and Fire calls. Matt will continue to keep you informed of his progress on the program and will also forward to you the Policy and Procedure on the QA program as soon as it is reviewed / approved by our Board of Directors.

Please let me know if you have any questions / concerns about our complaint policy or our Quality Assurance program plans.

Respectfully submitted,

  
Bill Holmes, Director

**Cumberland County Regional Communications Center**

22B High St

Windham, ME 04062

207.893.2810

[www.cumberlandcounty.org/ccrcc](http://www.cumberlandcounty.org/ccrcc)

**CCRCC / CITIZEN COMPLAINT FORM**

Employee's Name: (If Known)	Control Number:
--------------------------------	-----------------

Complainant's Name:	Home Address:	Home Telephone:
---------------------	---------------	-----------------

Witnesses / Other Complainants:	Home Address:	Home Telephone:
---------------------------------	---------------	-----------------

Date / Time of Incident:	Location of Incident:
--------------------------	-----------------------

Details of the Complaint:

Details of the Complaint (Cont.'d - Page 2): Please Sign Page 3 when completed
---







**AFFIRMATION**

I, \_\_\_\_\_, do hereby affirm that the foregoing information provided by me is true and correct to the best of my knowledge and belief. I understand that any false, misleading, or untrue statements, accusations or allegations made by me, either orally or in writing to any person (s) investigating this complaint may subject me to civil and/or criminal prosecution.

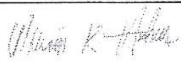
I realize that it may become necessary during the investigation of this complaint for me to meet with representatives of the Cumberland County Regional Communications Center to discuss this complaint, either in the presence or absence of the accused department member (s) at the discretion of the department. I hereby accept the premise that if any action is initiated through a court or administrative proceeding as a result of my complaint, my testimony before these hearings may be required. I agree to make myself available as a witness before either of the aforesaid bodies, upon request by the Director or his/her designee.

Signed, \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_  
in the Town/City of \_\_\_\_\_, State of Maine.

Witness, \_\_\_\_\_ Witness, \_\_\_\_\_

**TITLE: Complaint Procedure**

**Policy # D-103**

**Approved By:** William Holmes, Director      **Effective Date:** 01-27-11  
**Director's Signature:** 

**I. PURPOSE:** The purpose of this policy is to provide the citizens of Cumberland County and the Public Safety agencies we serve with a procedure to file a complaint with the CCRCC.

**II. POLICY:** It is the policy of the Cumberland County Regional Communications Center to ensure that all citizens and agencies served have the ability to file a complaint with the CCRCC regarding the actions / inactions of the center or center staff.

All complaints filed with the CCRCC regarding the center operations or staff conduct must be filed in writing with the CCRCC administration.

It shall be the policy of the CCRCC that all written complaints received shall be investigated by the CCRCC Director or his/ her designee.

**III. PROCEDURE:**

**Citizen Complaints**

1. The CCRCC shall maintain a Citizen Complaint form on the CCRCC website. Citizens wishing to file a complaint on the CCRCC or staff member of the CCRCC must use this form and submit the complaint to the CCRCC Director / designee.
2. Citizens shall complete all sections of the complaint form, sign the form and submit the form to the CCRCC Director / designee.

**Agency Complaints**

1. Public safety agencies / staff members wishing to file a complaint with the CCRCC regarding the CCRCC operations of actions / inactions of staff members must file the complaint in writing.
2. An agency / member written complaint can be as simple as an email to a shift supervisor or CCRCC administration requesting a review of a call or incident or it can be a formal written complaint requesting an investigation of an incident.
3. All agency complaints will be brought to the attention of the Director / designee for review assignment based on the nature / severity of the complaint.

**Staff complaints**

1. In the event that a staff member of the CCRCC wishes to file a complaint regarding the actions of another CCRCC staff member, the complaint must be in writing to a supervisor, the Director or his designee.

**All Complaints**

The Director / designee shall ensure that all complaints filed with the CCRCC are promptly investigated. In all cases, the Director / designee shall inform the complainant of the outcome of the investigation / review.

\*\* As we have practiced for many years, agencies served by the CCRCC are still able to call into the center to speak with a supervisor to ask for a call review and receive a verbal or email response without the event rising to the level of a Complaint.

**Jacques, Maria**

**From:** Robert J. Scamman [rscamman@yorkpolice.org]  
**Sent:** Thursday, February 03, 2011 8:04 AM  
**To:** Jacques, Maria  
**Cc:** Douglas P. Bracy  
**Subject:** RE: PSAP Findings Document  
**Follow Up Flag:** Follow up  
**Flag Status:** Red  
**Attachments:** TTY Test Calls Memo 020311.pdf

Maria:

I am addressing the only two areas that the York Police Department were noted as being deficient:

First with respect to Police and Fire Call Processing Guidelines I think there must have been some misunderstanding as our department has long had such guidelines in place. The fire departments created a set of "Flip Cards" similar to the EMD Flip Cards that we currently use for fire calls, and they were last updated in October of 2009. There is also a specific policy in our Department SOP Manual that dictates how emergency calls requiring a law enforcement response are to be answered etc. Although neither of these is as good as the software program utilized for Medical Calls such as "PRO-QA", I don't believe that we are required at this time to have any such program in place. If I am in error please let me know as soon as possible.

Second with respect to TTY Test Calls, I have put out a memo indicating that we will in fact be conducting test calls as required by the ESCB and that we will maintain a log of these calls. This will also be included as part of our Communications Policies and Procedures. Please let me know if this suffices.

Thank you,  
 Bob



**Robert J. Scamman, Sr.**  
*Lieutenant*  
 Town of York, ME Police Department  
 36 Main Street, York, ME 03909-6244  
 i: [www.yorkpolice.org](http://www.yorkpolice.org)  
 e: [rscamman@yorkpolice.org](mailto:rscamman@yorkpolice.org)  
 p: (207) 363-1031, Ext. 103  
 f: (207) 363-1033

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**From:** Jacques, Maria [mailto:Marie.Jacques@maine.gov]  
**Sent:** Monday, January 24, 2011 12:25 PM  
**To:** sheriffandyso@roadrunner.com; rlafrance@roadrunner.com; kletourneau@roadrunner.com; on.gastia@bangormaine.gov; jroach1053@aol.com; chief@bpd.net; fisk@bpd.net; rizzo@brunswickpd.org; kschofie@brunswickpd.org; smoeller@brunswickpd.org; wolmes@cumberlandcounty.org; Wells, Clifford S; Luce, Davene S; Labree, Chad E; Beem, Kathryn J; scott, Kevin T; mcaton1@myfairpoint.net; fcsd@myfairpoint.net; rmeldrum1@myfairpoint.net; crcc911@co.hancock.me.us; llothrop@knoxcountymaine.gov; 911director@auburnmaine.gov; pellerin@co.lincoln.me.us; oxfrccdir@megalink.net; jryan@penobscot-county.net;

2/8/2011

piscso@myfairpoint.net; davidgr@midmaine.com; jcraig@portlandmaine.gov; thomasc@portlandmaine.gov; director@sagcommunications.com; mgreen@sanfordmaine.org; RJLegere@sanfordmaine.org; kjandreau@ci.scarborough.me.us; rmoult@ci.scarborough.me.us; mike.smith@somersetcounty-me.org; communicationsdirector@waldocountyme.gov; manager@washingtoncountymaine.com; rcc@washingtoncountymaine.com; ghamil@westbrook.me.us; wbaker@westbrook.me.us; Douglas P. Bracy; Robert J. Scamman

**Cc:** Alden Peterson; Chief Cammack; Chief MacKenzie; Clifford.S.Wells@maine.gov; dhannan@oxfordnetworks.com; kromano@fairpoint.com; Paul Reitchel; Percy Brown; Pike, Dennis; Ryan, Elizabeth; Sherrif Pike; Webber, Robert; White, Drexell R; Nancy.Armentrout@maine.gov; Bunker, Stephan; Robin.M.Dayton@maine.gov; Gasper, Robert K; Jacques, Maria

**Subject:** PSAP Findings Document

PSAP Director or Manager:

Attached you will find a document prepared by Mission Critical Partners, *PSAP Initial Findings Review and Review of Rules, Statutes and Policies Related to PSAP Quality Assurance*, which is a summary of findings gathered from the PSAP site visits conducted last fall.

It must be noted that this document represents a snapshot of what was observed at each PSAP on the date of its review. It does not reflect subsequent steps taken by PSAPs to address any observed or reported shortcomings. However, PSAPs are expected to take immediate steps to correct any deficiencies identified by the review process. My staff is available to assist with these efforts.

Because the purpose of Quality Assurance Review is to allow for continuous process improvement, PSAPs may write a letter to the Bureau describing the steps taken to correct any deficiencies noted. These responses will become an addendum to this document. **These letters are due by February 4, 2011.** The final report, which will include recommendations on establishing a quality assurance program within the Bureau and recommendations on standardized call handling procedures, is due next month. This document and its addendum will be included as an appendix.

Lastly, I want to thank you all for the cooperation and warm welcome you extended to the Mission Critical team. They were impressed by the level of professionalism and dedication to the quality assurance process.

I am available by email ([maria.jacques@maine.gov](mailto:maria.jacques@maine.gov)) or by phone at 287-6083 should you have any questions or concerns.

Maria P. Jacques, ENP, Director  
Public Utilities Commission  
Emergency Services Communication Bureau  
Mail Address: 18 State House Station  
Augusta, ME 04330-0018

Phone: (207) 287-6083  
Fax: (207) 287-1039

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2/8/2011



# TOWN OF YORK, MAINE Police Department

**Douglas P. Bracy**  
**Chief of Police**


(207) 363-4444

*Mailing Address:*  
36 Main Street  
York, Maine 03909

*Facsimile*

(207) 363-1035

**Committed  
to excellence**

Memorandum To: All Communications Personnel  
Subject: TTY Test Calls  
Date: February 3, 2011   
From: Lt. Robert J. Scamman

The ESCB Rules require that: PSAPs conduct internal TTY/TDD test calls in which random test calls are processed at each call answering position. Test calls shall include two types of calls (1) silent, open line calls, and (2) calls that are introduced by transmitting TTY/TDD tones. PSAPs shall require each dispatcher to conduct TTY/TDD test calls, as needed to ensure all dispatchers are able to process both sending and receiving calls, on a routine basis, but no less than every three months. PSAPs shall complete and maintain records of such test calls that identify the dispatcher, date/time of call, call taking position, silent or transmitted tone, and whether the call met standard operating procedures. Such test records shall be made available for review by the Bureau.

Effective immediately we will be conducting tests in accordance with the ESCB Rules and we will maintain a Log documenting these calls.

If anyone has any questions or concerns please see me.

STATE OF MAINE  
COUNTY OF ANDROSCOGGIN  
SHERIFF'S OFFICE

2 TURNER STREET • UNIT #9 • AUBURN, MAINE • 04210  
(207) 784-7361 1-800-492-0737



GUY P. DESJARDINS  
SHERIFF

J. MICHAEL LEMAY  
CHIEF

February 3, 2011

To: Maria P. Jacques  
From: Kevin Letourneau, Dispatch Supervisor  
Androscoggin County Sheriff's Department  
RE: PSAP Review Findings Addendum

RECEIVED  
2011 FEB -4  
MAINE PD  
UTIL. CO

Maria,

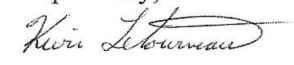
The report shows that our agency was not in compliance with TTY test calls. We have since put together a binder with practice scenarios and logs. Each dispatcher will be required to complete two scenarios each month and sign the log sheet.

The second item stated that our agency was not in compliance with the EMD reporting process. Since the time of the interview, our agency has been submitting reports. We have submitted four months of reports with an average score total of 81%. We have another dispatcher scheduled to attend ED-Q training. We are making steady progress and hope to be able to raise our scores in the near future.

I hope this information helps to complete your report. If there is anything more that I can do, please let me know.

I can be reached at (kletourneau@roadrunner.com) or 784-7361 ext 223.

Respectfully,

  
Kevin Letourneau



**COUNTY OF OXFORD**  
**Regional Communications Center**  
**Post Office Box 179 – 26 Western Avenue**  
**South Paris, Maine 04281-0179**

RECEIVED  
2011 FEB -4 A 9:11

MAINE PUBLIC  
UTIL. COMM.

James P. Miclon  
Director  
William D. Daniels  
Supervisor  
Linda G. Lewis  
Assistant

Steven R. Cordwell  
Supervisor  
Terri L. Littlehale  
Supervisor  
Cammie L. Sprague  
Supervisor

Maria P. Jacques, Director  
Public Utilities Commission  
Emergency Services Communication Bureau  
18 SHS Augusta, ME 04333

Thursday, 03 February 2011

Dear Maria:

The following is my response reference to the Quality Assurance Review as requested.

Two areas that I observed that need responses are the TTY quality assurance and the fire / law protocols. To address the TTY issue, the day of the review, my TTY assigned staff member had taken the document we use to log TTY training for updating, this document was in her locker and she was not in on the day of the review. We conduct TTY training monthly and log each staff members training, either in house or with a member of the deaf community who we work with. So the document is available for review.

As to the fire service and law enforcement scripted protocols, we have desperately attempted to fund such standardized protocols for use here at our center. Although we do not use flip charts, or any other standard form of questioning, our staff is trained and has become accustomed to using standard questioning of callers. We have established written policy and procedures for dealing with fire and law emergency and non-emergency calls to the center.

Although not sighted in the report, my four supervisors and one member of the communications advisory board who attended the review meeting did however find the review thought provoking and caused us to sit down and review areas that we found through our conversations that we need to improve on and clarify. So all in all this was a very good process and helpful.

Respectfully,  
  
James P. Miclon, Director

Dedication-Respect-Service-Integrity



**Jacques, Maria**

---

**From:** Owen Smith [communicationsdirector@waldocountyme.gov]  
**Sent:** Friday, February 04, 2011 9:15 AM  
**To:** Jacques, Maria  
**Subject:** Attached action on PSAP review  
**Attachments:** tty protocol.rtf

Dear Maria Please find an attachment that outlines our corrective action to the deficit noted in the Mission Critical review. Owen

Owen Smith  
Communications Director  
Waldo County Regional Communication Center  
111 Miller Street  
Belfast ME 04915  
207-338-2040  
207-338-1341  
[communicationsdirector@waldocountyme.gov](mailto:communicationsdirector@waldocountyme.gov)

2/8/2011

Reference to PSAP review findings

Waldo County RCC was found to be deficient in following bureau rules on TTY practice and logging. As a result of this we have starting February 1 2011 re-instituted the required practice calls.

Each dispatcher will make a minimum of two TTY calls each quarter. They will utilize in-house equipment and internal phone system. Upon finishing the calls he/she will make out the form, log it and return the form to Dispatcher Andrew Cardinale who monitors the TTY program.

Owen Smith

3 February 2011