

	<p style="text-align: center;">CLEARFIELD COUNTY EMERGENCY MANAGEMENT / 9-1-1 Standard Operating Procedures</p>	<p>Initial: 3/2006</p> <p>Revised:</p>
	<p>SOP #: Fire 7-13</p>	
	<p>Subject: Fire QI Process Roles and Responsibilities</p>	

FIRE PRIORITY DISPATCH QUALITY IMPROVEMENT PROCESS ROLES AND RESPONSIBILITIES

The quality improvement process shall follow a standardized procedure as detailed below and as required by the National Academy of Emergency Fire Dispatch to meet accreditation standards.

- This program will provide all dispatch personnel with the necessary understanding and skills as they relate to the efficient and effective provision of quality assurance for the Fire Priority Dispatch System. Such quality assurance processes shall be sufficient to meet the requirements of the National Academy of Emergency Fire Dispatch for accreditation of Clearfield County Emergency Management / 911 as a Dispatch Center of Excellence.
- **QUALITY IMPROVEMENT CASE REVIEW**
 1. A sampling of at least 10 percent of all cases per week shall be randomly selected and evaluated by the EFD Quality Improvement Unit.
 2. An approximately equal number of calls shall be reviewed for each individual EFD.
 3. Minimum protocol compliance levels will be set and issued in a separate “EFD Performance Policy.”
- **CASE REVIEW FEEDBACK PROCESS**
 1. Completed Case Evaluation Records (CERs) generated by the AQUA database will be forwarded to each Dispatcher on a regular basis.
 2. Both the quality Assurance Manager and the EFD may add their comments to the forms and both must sign it.
 3. When circumstances dictate, the QA Manager will develop an action plan and document this on the form. A deadline for completion of the action plan will be given. Action plans may be necessary if remedial training is required.
 4. The QA Manager may use the form to request further QIU follow-up or action if required. Examples of QIU action include requests for a particular Continuing Dispatch Education topic to be covered, a letter of commendation be submitted, or that a problem be raised at the Fire Dispatch Review Committee meeting.
 5. Completed forms must be returned to the QA Manager within 14 days of receipt.

6. The QA Manager must be informed of the completion of any action plan noted on the form.
7. A copy of the completed form will be kept by the QA Manager in the EFD's QA file.

- **QA DATABASE / INDIVIDUAL EFD COMPLIANCE REPORTS**
 1. Compliance data for individual EFDs shall be generated from the AQUA database and forwarded to each dispatcher on a monthly basis. Data on individual dispatcher's performance will be treated as confidential; viewed only by EMA Management and the necessary dispatcher involved.
 2. Action plans will be developed, when necessary, based on average and/or cumulative compliance scores. A deadline for completion of the action plan will be given.
 3. EMA Management may use the form to request further QA follow-up or action if required.
 4. Completed forms must be returned to the QA Manager within 14 days of their receipt.
 5. The QA Manager shall be informed of the completion of any action plan noted on the form.
 6. A copy of the completed form will be kept by the QA Manager in the EFD's QA file.
- **QA DATABASE / SHIFT COMPLIANCE REPORTS**
 1. Compliance data for each shift overall may be generated from the AQUA database and posted on the FPDS bulletin board in dispatch at monthly intervals by the QA Manager.
 2. Shift compliance scores may be reviewed by EMA Management, and corrective action taken when necessary.
 3. The QA Manager will be informed of the completion of any action plan.
 4. A copy of each Shift Compliance Report will be kept by the QA Manager in the Shift's QA file.
- **QA DATABASE / DISPATCH SUMMARY COMPLIANCE REPORTS**
 1. Quality Assurance Summary Compliance Report will be generated from the AQUA database and copied to each member of the MRDC at monthly intervals. The Steering Committee will receive quarterly updates on monthly center-wide compliance.
 2. The DRC will review the Quality Assurance Summary Compliance Reports at monthly intervals. The DRC will identify performance issues and recommend actions for performance improvement.
 3. The Steering Committee will review the Dispatch Summary Compliance Report at quarterly intervals. The Steering Committee will evaluate and approve any policy changes and resource allocation plans proposed by the DRC.

- FIRE DISPATCH FEEDBACK REPORTS
 1. These forms will be made available to all field personnel who respond to FIRE calls. They will be utilized to provide feedback from the field to dispatch in the event of exemplary dispatcher performance or if a case proves problematic.
 2. Completed forms will be forwarded directly to the QA Manager via the internal mail.
 3. Upon receipt of a form, the QA Manager will review the tape of the relevant call and evaluate the case for compliance to protocol.
 4. A reply to the initiator of the query or feedback will be provided within 14 days of receipt of the form by the QA Manager.
- Copies of the completed Fire Dispatch Feedback Report will be kept by the QA Manager in the relevant EFD's file and in a file dedicated to completed Fire Dispatch Feedback Reports.
- Copies of the completed Fire Dispatch Feedback Report will be distributed by the QA Manager to EMA Management, the Fire Chief in charge of EFD and the shift supervisor.