

March 13, 2008

Board Members
Marquette County Central Dispatch Policy Board
180 US 41 East
Negaunee, MI 49866

Dear Board Member:

At the upcoming meeting of the Marquette County Central Dispatch Policy Board, scheduled for March 20, 2007, an item regarding ambulance dispatch in the Marquette area has been placed on the agenda. At this meeting, I believe you will be presented with information from Joe VanOosterhout, Cheryl Hill and others that may lead you to believe certain things about the current dispatching laws in the State of Michigan. As I am unsure if I will have the opportunity to speak on this issue outside of making a brief statement during the public comment section of the meeting, I would like take a moment to present you with some information and two ambulance dispatching alternatives that I hope you'll take a few moments to look over prior to the meeting so that the discussion on this topic can include information from all parties involved.

At MediRide, Inc. EMS, it is our desire to ensure that the patients of this area have access to the fastest care available. The people deserve the fastest available care. It's our feeling that the State of Michigan also recognizes this ideology and that the expression of this ideology is laid out clearly in the laws governing dispatching in the State of Michigan. We believe that enacting policies, such as the current ambulance dispatch policy passed on June 15, 2006 without any questions or input from this agency, a user of the system, and a provider of emergency care, is very dangerous, and a detriment to the health and welfare of all people requiring emergency assistance in this area.

I'd like to provide you with data, taken directly from the State of Michigan law regarding dispatch. It is as follows. PLEASE NOTE: BLUE TEXT & BOLDFACE ADDED.

The State of Michigan laws governing 911 Dispatch Centers (such as Marquette County Central Dispatch) speak directly to this issue:

EMERGENCY 9-1-1 SERVICE ENABLING ACT, Act 32 of 1986 – states:

484.1102 Section 102 (Definitions): Identifies the following:

(l) "Direct dispatch method" means that the agency receiving the 9-1-1 call at the public safety answering point (PSAP) decides on the proper action to be taken and dispatches the appropriate available public safety service unit **located closest to the request for public safety service.**"

(ee) "Relay method" means that a PSAP notes pertinent information and relays it by a communication service to the appropriate public safety agency or other provider of emergency services that has an available emergency service unit **located closest to the request for emergency service** for dispatch of an emergency service unit. [This is the method used by Marquette County Central Dispatch.](#)

(ll) "Transfer method" means that a PSAP transfers the 9-1-1 call directly to the appropriate public safety agency or other provider of emergency service that has an available emergency service unit **located closest to the request for emergency service** for dispatch of an emergency service unit.

You will note that regardless of the "method" used, all are directed to dispatch the closest unit available.

**484.1204 System designs.
Section 204**

(2) Every 9-1-1 system shall be designed so that a 9-1-1 call is processed by means of either the direct dispatch method, the relay method, or the transfer method. (methods defined above).

Clearly, this section refers back to the dispatch methods listed above and obviously means that they should be followed. Marquette County Central Dispatch is in violation in this case.

**484.1303 Tentative 9-1-1 service plan; adoption by resolution; requirements; payments for installation and recurring charges associated with PSAP.
Section 303**

(b) Operational considerations, including but not limited to, the designation of PSAPs and secondary PSAPs, the manner in which 9-1-1 calls will be processed, the dispatch functions to be performed, **plans for documenting closest public safety service unit** dispatching requirements, the dispatch of Michigan state police personnel, and identifying information systems to be utilized.

Marquette County Central Dispatch complains that it's too difficult and confusing to figure out which unit is "closer." They are in obvious violation of this part seeing as how they refuse to create a plan to document which agency (MediRide or MGH) is closer. I have provided Marquette County Central Dispatch with GPS plotted locations to help in that determination. They refused to acknowledge them. They state that because we're only a mile apart, they cannot discern who is "closer." Obviously, with GPS plotted locations, accurate to within 100 feet, it should be relatively easy to discern which is closer.

According to the Emergency 911 Telephone Services Committee, Policy E, states:

"In compliance with the Public Health Code:

- "9-1-1 emergency service dispatches including ambulance calls **are required by statute to send the closest appropriate vehicle to the scene of the emergency**. These service calls are not bound by contractual agreements, either public or private, but instead by the concept of what is best for a citizen during an emergency situation."

The Public Health Code speaks to this issue in two areas:

Sec. 20919 (1) A local medical control authority shall establish written protocols for the practice of life support agencies and licensed emergency medical services personnel within its region. The protocols shall be developed and adopted in accordance with procedures established by the department (Department of Public Health) and shall include all of the following:

(a) The acts, tasks, or functions that may be performed by each type of emergency medical services personnel licensed under this part.

(b) Medical protocols to ensure the appropriate dispatching of a life support agency based upon medical need and the capability of the emergency medical services system."

The Marquette County EMS Medical Control Authority DOES have a protocol that speaks to this issue and it states, "Ambulance services shall be immediately dispatched to any reported medical emergency or request for medical assistance utilizing the 'closest available ambulance' procedure within their approved service area."

Nowhere in the Michigan State statutes or the Marquette County EMS Medical Control Authority protocols is a provision for "special requests" allowed. They both are very clear when they state that the "closest car concept" should be used. In fact, the ETSC, in its suggested policies for dispatch of ambulance suggests that even those communities that have contracted for ambulance services, "These service calls are not bound by contractual agreements, either public or private, but instead by the concept of what is best for a citizen during an emergency situation. **Thus, in consideration of deciding to dispatch an**

ambulance, faced with choosing based on a contractual basis, the PSAP should always decide in favor of the closest vehicle concept.”

If you'd like to research this information for yourself, you may do so by visiting the State of Michigan's web site, or by typing the following links into your browser...http://www.michigan.gov/msp/0,1607,7-123-1593_47748---,00.html. A link to Act 32 of 1986 is here for your reference. <http://www.legislature.mi.gov/documents/mcl/pdf/mcl-act-32-of-1986.pdf>.

MediRide, Inc. EMS understands the need for dispatchers at Marquette County Central Dispatch to do their jobs as accurately and efficiently as possible, and we also understand that ambulance dispatching is not their only role. We appreciate the difficult job before them, however, the law is the law and we believe spells out how dispatching is to be done very clearly. In an effort to help Marquette County Central Dispatch to become compliant with the law, and still function at its most efficient level, we have developed two scenarios with which ambulance dispatching can be accomplished more efficiently and are as follows:

- **CLOSEST VEHICLE CONCEPT** (as required)
 - Marquette County Central Dispatch Operators will dispatch all calls for emergency assistance within any geographical service area covered by two (2) or more identical level services using the closest vehicle concept with the understanding that vehicles will be considered to be located at the address of the EMS agency on said agency's State of Michigan license. (ex. MediRide, Inc. EMS ambulances located at its station on Washington Street, & MGH EMS ambulances located at its station at Marquette General).
 - While these two locations may be located a mile apart, the laws do not allow for the assumption that these two individual locations are actually the same location. They are, in fact, two separate locations. GPS plotting (already provided to MCCD) can be used to determine how to dispatch which unit.
 - Adoption of this plan would eliminate prior confusion and dispatch problems with agencies stationing units in parking lots, driveways, and alleys in order to usurp other companies, and would eliminate the necessity for EMS units "roaming" the streets requiring dispatchers to poll available units and determine locations. All units would be considered to be at their station of license and dispatched accordingly.
- **CONTINUE CURRENT DISPATCH POLICY / ELIMINATING DANGEROUS SPECIAL REQUESTS**
 - Marquette County Central Dispatch Operators will continue to alternate calls between agencies, but eliminate the "special requests" that have caused serious delays in patient care.
 - These "special requests" a caveat added to the current dispatch policy seem to serve special interests much more than the patients requiring assistance. Employees of certain institutions have been told, without merit that they must request a certain service or their insurance will not cover their ambulance services, patients calling the emergency department have been told to hang up and dial 9-1-1 and ask for a certain ambulance, Lifeline customers may have had ambulance choices made for them without their knowledge, patients of certain health clinics may have patients requiring emergency assistance and ambulances are "requested" for them, possibly without their knowledge. All of this is happening and there have been multiple instances in which patients have had to wait for emergency ambulance services when there were other ALS ambulances sitting idly and could have responded immediately.
 - There are documented occasions in which there have been clear conflicts of interest with MGH EMS employees, working for other EMS agencies making "requests" for MGH EMS. Often times these requests are for patients who are "unresponsive." Clearly, this type of activity is not in the spirit of the policy and not in the best interests of the patients. MCCD cannot police this type of activity, nor should it be put into the position to have to. I do believe that if MCCD cannot police this type of underhanded behavior by some EMS agencies, the dispatch policy itself is flawed and should be thrown out.

This has been an ongoing battle for us from nearly three years now. Some may lead you to believe that MediRide, Inc. EMS was in "agreement" with the current dispatching methods. I find that hard to believe as we were not even informed of any possible changes prior to the changes being made. In fact, I have documentation of multiple letters and emails to Mr. VanOosterhout declaring our opposition to the policy.

March 7, 2010

We believe that ultimately, patient access to the fastest care available is the ultimate responsibility of Marquette County Central Dispatch and the EMS providers. Drawing comparisons to dispatch of police units or wrecker units, as some have done in the past, is completely ridiculous and inappropriate. It's comparing apples to oranges. The urgency with which wreckers and the like are dispatched will not make the difference between life and death! Special money interests should not have the final say in how patients in this, or any other county, are treated. It could be you waiting for an ambulance. Waiting unnecessarily.

I ask that the two alternative dispatch methods explained above as well as the clearly stated dispatch laws be seriously looked at and considered as very viable ambulance dispatch methods for this county. I thank you for your time in looking over this important information, and I look forward to seeing you at the meeting on March the 20th. In the meantime, if you have any questions for me, or would like any additional information, please feel free to contact me, anytime at the office (906) 226-4565, at my cell phone (906) 361-4565, or by email daveg@mediride.com. Thank you, again.

Respectfully,

David L. Guizzetti, MBA, NREMT
President & CEO