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About This Course

Course Content

The purpose of this course is to help you understand the major issues involved with implementing change in an organization and to offer insight into some common concepts regarding quality, its implementation, and its management. You will be introduced to the various roles and responsibilities within a quality management system, and you will learn how to conduct effective case review.

This course will focus heavily on performance trending. The concept of performance trending will be applied to individuals, shifts, and the center as a whole. Even though emergency calls are reviewed one at a time, the bigger focus will remain on how performance is trending over time. Keep in mind that trends can increase, decrease, or level off. However, the intent of this course is to teach you how to improve calltaker performance and maintain it over time. Additionally, you will learn appropriate ways to manage performance improvement plans, analyze trend data, and develop meaningful ongoing training materials.

Most of the course content will be presented by the instructor. The instructor will use various types of media to support the concepts and skills that are presented. You will also participate in learning activities such as participating in discussions, listening to call recordings, reviewing calls, and evaluating appropriate methods of feedback.

The content of this course is certified by the International Academies of Emergency Dispatch® (IAED™).

Course Objectives

By the completion of the course, you will be able to:

1. Explain the difference between quality assurance, quality improvement, and quality management.
2. Explain the roles and responsibilities of those participating in quality assurance, quality improvement, and quality management.
3. Explain the importance of specific, fair, and consistent standards and practices in a calltaker quality assurance program.
4. Apply the current IAED ED-Q™ Performance Standards to conduct fair, consistent, and effective case review.
5. Explain the importance of performance trending and describe some statistical techniques that can be used to analyze trend data.
6. Construct effective, strengths-based feedback.
7. Explain the importance of continuing dispatch education (CDE), performance improvement plans, and appropriately recognizing success.
8. Describe several records and reports that can be used to support a quality management program.
Course Materials

The materials you received for this course will help you to better do the difficult tasks expected of an Emergency Dispatch Quality Assurance Specialist (ED-Q™). In addition, there are online tools available to you which will be periodically updated by the IAED.

The ED-Q Performance Standards you received provide the performance minimums for all three Priority Dispatch System™ protocols (MPDS®, FPDS®, PPDS®). You will use these performance standards to review cases in class (and in your agency after you are certified). You should always keep these performance standards in a place that is readily accessible when you are doing case review. You will need to refer to them often.

This course manual is unlike many training manuals you may have used in the past. It is not meant to duplicate the contents of the course, but instead to supplement the materials that will be presented by your instructor. You should read the entire manual during this course.

This manual is intended to help you become familiar with quality management principles related to the Priority Dispatch System protocols and expose you to the relevant terminology and concepts. You will also be introduced to some behaviors that are triggered wherever change occurs in working practices. We will look at employee motivation concepts and some aspects of W. Edwards Deming’s management theory. For those who have had previous quality training, this manual should provide a refresher and a platform upon which to build additional knowledge and skills.

For consistency in meaning, we use generic job titles throughout the text that refer to specific job functions. The specific titles used in your agency may be different. It is important for you to identify the position that corresponds to each of the following:

- **Calltaker**: IAED-certified Emergency Dispatcher™ (EMD™, EFD™, EPD™)
- **ED-Q**: IAED-certified Emergency Dispatch Quality Assurance Specialist
- **Direct supervisor**: The individual responsible for overseeing the calltaker’s day-to-day performance
- **Field provider**: The emergency responders (firefighters, paramedics, law enforcement officers)

Note taking is a very important technique that helps you retain what you have learned. We have purposely left considerable space in the margins for you to take notes to help you recall instruction and comments made by the instructor and other class participants.
Chapter Layout

The chapters in this course manual are designed to make it easy to find and understand the information presented. Each chapter contains the following elements:

- **Overview:** Chapter Overviews provide a quick statement on the purpose of each chapter.
- **Objectives:** Chapter Objectives highlight the core principles covered in each chapter. Chapter Objectives appear at the beginning of each chapter. They also appear in the margins of the text next to relevant sections of the manual.
- **Glossary Terms:** Glossary terms are highlighted in purple and are defined in the glossary at the back of the manual.
- **Critical Concepts:** Critical Concepts emphasize important principles of quality assurance, quality improvement, and quality management.
- **Points to Ponder:** Points to Ponder help summarize and review the main points of each chapter. The questions contained in these sections encourage you to apply the principles of the chapter to situations in your own dispatch center.
- **Summary:** The Summary for each chapter provides a brief review of the main principles of each chapter.
- **Self-Assessment:** Self-Assessments challenge you on the main principles of each chapter. The questions are designed to help you prepare for the certification exam.
- **Footnotes and References:** Footnotes and References provide special notes and references for additional resources covering specific topics. Not all chapters have a Footnotes and References section.

Student Participation

Your active participation in this course is not only welcomed, but expected. Sharing your perceptions and knowledge will enhance your own experience in the course and enhance the experience of those around you.

Certification Exam

At the completion of this course, an ED-Q Certification Exam will be administered. It consists of 50 true-false and multiple-choice questions. The exam must be completed before you leave the course. To become certified as an ED-Q, you must pass the test with a minimum score of 80%.

Upon Successful Completion of This Course

Your application and exam will be forwarded to the IAED for processing. If the requirements for certification are met, you will become one of thousands of currently certified ED-Qs worldwide. You will receive confirmation of your accomplishment in the form of a certificate and diploma. You should receive these documents within three to six weeks following your course attendance.
Recertification

Your ED-Q certification is valid for two years and automatically recertifies your calltaker certification in the same discipline (EMD, EFD, EPD). Several months prior to its expiration, you will receive an application for recertification from the IAED. To recertify as an ED-Q, you must:

1. Be currently certified as a calltaker by the IAED and submit verification that CPR certification (or course completion) is still current if recertifying EMD-Q.
2. Demonstrate that you have read and understand all current ED-Q Performance Standards by passing the ED-Q Recertification Exam with a minimum score of 80%.
3. Verify that you have been employed doing case review with a Priority Dispatch System-licensed agency for at least 12 months out of the past 24-month recertification period (a letter from your supervisor will meet this point), or verify that you have reviewed at least 50 cases provided by the IAED (or a Priority Dispatch System-licensed agency) during this same period.
4. Verify that you have completed the minimum number of discipline-specific continuing dispatch education (CDE) hours plus an additional six hours of quality-assurance-specific CDE.
5. Submit a signed ED-Q Recertification Application, which verifies agreement to abide by the Academy’s Code of Ethics, Code of Conduct, and professional practice standards.

If you have any questions or comments about this course or your certification, please contact the IAED by phone at (800) 960-6236 or (801) 359-6916, by fax at (801) 359-0996, by email at info@emergencydispatch.org, or on the Web at www.emergencydispatch.org.

Instructor name: __________________________________
Phone number: __________________________________
Email: __________________________________________
Course number: ________________________________
Introduction to Quality Management

Chapter Overview
The measurable components of quality assurance and quality improvement allow the agency to identify and meet the objectives of a robust quality management program. In such high performing centers, the ability to embrace change and develop a quality culture is the hallmark of a total quality management system.

Objectives
Upon completion of this chapter, you will be able to do the following:

1. Define quality.
2. Explain the difference between quality assurance, quality improvement, and quality management.
3. List the objectives of quality management.
4. Explain the quality management cycle.
5. Explain the importance of identifying and acknowledging high performance.
6. Explain the difference between change management and change leadership.
What is Quality?

Before we delve into the specific elements of quality management, let's first define the term quality. If you look in the dictionary, you will find a number of definitions of quality. The definitions that relate to the quality of goods and services include:

- a distinguishing attribute
- essential character; nature
- a high level of value or excellence

Do these definitions help you understand what it is you do as a member of a quality management team? Probably not. It is not enough to just say that quality is a level of value or excellence. Excellence is a relative term. Excellent compared to what?

“The difficulty in defining quality is translating future needs of the user into measurable characteristics, so that a product (or service) can be designed and turned out to give satisfaction at a price that the user will pay. This is not easy, and as soon as one feels fairly successful in the endeavor, he finds that the needs of the consumer have changed, competitors have moved in, there are new materials to work with, some better than the old ones, some worse; some cheaper than the old ones, some dearer.”

—Walter A. Shewhart

A more useful definition of quality is:

“Conformance to requirements.”

—Phillip Bayard Crosby

In the communication center, requirements most often come in the form of a standard. Quality cannot exist without standards and without a reliable method of measuring conformance to those standards. Ultimately, the purpose behind measuring conformance to standards is to determine how quality can be improved over time. Any quality improvement effort should involve the following basic steps:

1. Clearly define the performance level at which each process should be operating.
2. Evaluate the current performance level and compare with the desired performance level (gap analysis).
3. Identify what’s keeping you from getting there.
4. Remove the barriers to optimal performance.

When reflecting on your own quality efforts, consider this statement from W. Edwards Deming (thought by many to be the father of the quality movement): “Nearly all quality problems lie with the system—not with the individuals in the system.” In this statement, Deming highlights the importance of looking at trends within the system as a whole and not just as individual actions.
The goal of any ED-Q should be to help their agency become an IAED Accredited Center of Excellence (ACE).

Take for example the process of a communication center becoming an IAED™ Accredited Center of Excellence (ACE). The first step is to identify the expected performance level as it pertains to using the protocol. The IAED ED-Q™ Performance Standards provide this established performance level. Next, the center must evaluate its current performance and ask, “What is keeping us from reaching the standard?” The answer to this question might include issues such as unclear expectations, insufficient feedback, or inadequate education for calltakers. The final step is then to remove those barriers by creating clear expectations, consistent feedback, and continuing dispatch education that meets specific needs.

**Points to Ponder**

- How do you define quality?
- Can quality exist in the absence of standards?
Quality Assurance

Quality assurance (QA) is the process of measuring and evaluating various aspects of performance against the accepted standards. It is one of the first steps in the quality improvement process and normally starts with the evaluation of individual calltakers, but also includes evaluation of other parts of the system.

In the communication center, these evaluations are conducted by certified Emergency Dispatch Quality Assurance Specialists (ED-Qs™). The ED-Q’s primary purpose is to objectively and consistently measure system performance through random and focused case review. The ED-Qs compare actual performance to minimum expectations (the ED-Q Performance Standards) looking for behaviors that do not meet the standards, but also looking for exceptional behaviors that exceed the standards. In addition to case review, effective ED-Qs also evaluate the protocol itself along with other tools used in the emergency calltaking process.

Accurate quality assurance data, generated monthly, provides a clear picture of the communications center’s overall compliance to protocol, determines the effectiveness of the tools calltakers use, and is the most useful measurement of quality customer care in a communication center.

Be aware that quality assurance is usually reactive and retrospective—meaning ED-Qs look back at the actions of calltakers and evaluate past performance. Unfortunately, this can easily be viewed as policing and punitive. It is, therefore, easy to understand how many calltakers dislike the feel of quality assurance. However, when done correctly, it is a key step toward effective quality management.
Quality Improvement

Quality improvement (QI) is a total system approach to continuously improving products and services. Where quality assurance concentrates on past performance, quality improvement focuses on future improvement. The goal is to create lasting change to improve system-wide performance. Essentially, QI involves measuring where you are, determining where you want to go, and implementing a plan to get there.

Quality improvement personnel take information and data from quality assurance activities (case review), look for performance trends that appear over time, and then identify strategies to improve performance. These strategies can include, but are not limited to, training on specific topics, making formal Proposal for Change (PFC) requests to the IAED to improve the protocol, or creating Performance Improvement Plans for individual calltakers as needed. Those tasked with the QI role also focus on recognizing strengths and exemplary performance. All of these tasks are a part of a continuous quality improvement cycle.

QI involves both prospective and retrospective reviews—meaning effort is put into preventing future errors in addition to correcting past mistakes. During this process, it is important to avoid attributing blame to problems that are identified. Instead, QI personnel should find ways to improve and create systems that prevent future errors.

Trying to find deficits in the system, and figuring out new ways to do things, can be challenging but rewarding. It is imperative that calltakers and administrators understand that the concept of system improvement refers to both the people in the system and the tools they use (ProQA®, CAD, etc.). Using an overdose call as an example, the question, “Is this accidental or intentional?” may be marked as having been asked in an inappropriate area (Case Entry instead of Key Questions). However effective quality improvement efforts seek to address not only that this occurred, but also why it occurred. When asked why, the calltaker may point out that s/he needed to know if police were required in addition to fire/EMS. If the police were required, the calltaker would have been expected to create the case in CAD during Case Entry, making it necessary to ask the question before arriving at Key Questions. With this understanding in hand, QI efforts can be directed where they belong—with the system that is driving the performance, and not solely on calltaker performance.

<table>
<thead>
<tr>
<th></th>
<th>Quality Assurance (QA)</th>
<th>Quality Improvement (QI)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Motivation</strong></td>
<td>evaluate past performance</td>
<td>improve system performance</td>
</tr>
<tr>
<td><strong>Methods</strong></td>
<td>case review, feedback</td>
<td>prevention, education</td>
</tr>
<tr>
<td><strong>Attitude</strong></td>
<td>required, defensive</td>
<td>chosen, proactive</td>
</tr>
<tr>
<td><strong>Focus</strong></td>
<td>individuals</td>
<td>processes, systems, teams</td>
</tr>
<tr>
<td><strong>Responsibility</strong></td>
<td>ED-Qs</td>
<td>everyone</td>
</tr>
</tbody>
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Table 1.1 QA and QI Distinctions
Quality Management

Quality management (QM) is the overall process used by an organization to ensure their product or services are consistent and maintain a level of quality for their customers. Essentially, quality management is the umbrella term that encompasses all of the quality assurance and quality improvement efforts and strategies that an organization employs. A central goal of quality management is to make quality an integral part of what the organization does from top to bottom.

A solid QM program is driven by objective and consistent case review that is conducted by trained and certified ED-Qs. The goal should be recognition as an Accredited Center of Excellence (ACE) by the IAED. An effective QM program will motivate calltakers to maintain excellence and improve individual performance, center performance, and the protocols themselves. Improved performance provides long-term benefits for the agency and, more importantly, for the callers accessing the system.

Objectives of Quality Management

Dr. Jeff Clawson, inventor of the Priority Dispatch System™ (PDS™), has stated on many occasions that there are five principle objectives to the achievement of a credible quality management program. They are:

1. Ensure that employees understand their duties.
2. Measure and evaluate employee compliance relevant to their duties.
3. Thoroughly review the effects of compliance, evaluating effectiveness, accuracy, and safety.
4. Track individual and system performance over time.
5. Make the necessary changes and assure subsequent improvements in compliance through continuing education and feedback to both the employee and manager.

You will see that this effectively creates a quality cycle, for without one element, the others do not happen.
The Quality Management Cycle

The quality management cycle is a collection of processes that work together to create a continuous cycle of system-wide improvement.

Objective 4

Explain the quality management cycle.

Routine Review

When conducting routine reviews, a variety of key performance indicators (KPI) are used to measure how well an emergency communication center is performing on a day-to-day basis. These may include, but are not limited to:

- call answer time
- response time
- call volume
- protocol compliance
- absenteeism
- attrition
- end of shift overtime

Identify Issues

After gathering the various KPIs, effort should be put into identifying issues or areas where the system is not functioning at the optimum level.

Identify Solutions

Issues that are identified in the system should then be investigated and solutions should be developed for addressing them. This may involve determining the root causes behind each issue and connecting them to a possible solution.
Take Action

After identifying possible solutions, the organization should implement a targeted intervention to bring the system back up to performing at the highest level.

Evaluate Action

Interventions to improve performance should be evaluated to determine whether or not they were effective. If interventions prove to be ineffective, they may need to be tweaked or revised.

Improve Performance

Routinely reviewing the KPIs allows an agency to quickly identify performance issues, develop a solution, take action, evaluate the action, adjust as needed, and—ultimately—improve performance.

Quality Management Cycle Example

The following example illustrates one way in which the quality management cycle might function in a communication center.

During a Dispatch Review Committee (DRC) meeting the KPIs for call answering times show that call answering times are increasing. The DRC, therefore, assigns someone to investigate and determine the root cause of this rise. The investigation looks at all the variables that could contribute to increasing call answer times (such as time of day, staffing levels, weather, new procedures, new technology, etc.). The investigator notices that the call answer times increased immediately following the implementation of a new policy allowing three call-takers to go on a break at the same time instead of only two. Further investigation finds that call answering times only increased during peak hours when there were three people on break at the same time. With this root cause identified, the DRC comes up with some possible solutions: rescinding the new policy and reverting back to allowing only two people to go on break at the same time, amending the policy and allowing three people on break only during off peak hours, or increasing staffing to cover the new break policy. The DRC forwards these recommendations to the Dispatch Steering Committee (DSC) for consideration and approval. The proposed solutions are evaluated and one is approved for implementation. If the approved solution does not lower call answer times then the agency must try again with a new solution. This process continues until a solution is found that reduces call answering times.

Identifying High Performance

A complete quality management cycle must also seek out, identify, and acknowledge the areas within the system that are functioning at a high performance level. When you pay attention to the high performing areas in the communication center and report and share that information, those areas increase and flourish. As Ralph Waldo Emmerson said, “We become what we think about all day long.”

It is vitally important that the quality management system focuses just as much (or more) on what is already working well within the organization as it does on areas in need of improvement. It may seem counterintuitive, but fo-
focusing on what is working well can actually reduce the number of things that aren’t working so well.

Identifying high performance can become a continuous cycle of quality improvement in and of itself (see figure 1.4). In this cycle, routine reviews are used to identify areas of high performance. As high performance is recognized, employees are motivated to maintain and even improve performance.

**Change Management**

Quality improvement processes often require effective *change management*. Public safety administrators generally understand how to change processes, policies, and procedures within an organization. However, they frequently struggle to understand the people side of change—how to get people to buy in and change their own personal mindset.

**Organizational Culture**

All organizations have a culture. This culture is palpable and real to the people within it. To manage change effectively, it is absolutely vital to understand the culture and norms within the organization.

Culture is like an iceberg, with most of its weight and bulk below the surface. Beliefs and behaviors are shared by members of the group and reinforced by group norms. The shared nature of culture binds it tightly into the DNA of an organization. Individuals are held accountable to the rituals and beliefs of the group and ostracized when they fail to comply.

Some characteristics of organizational culture can hinder our ability to change performance and move forward in a positive manner. For example, historically, emergency calltakers were seen as clerical workers who provided simple input functions (e.g., name, address, incident overview). Today these outdated beliefs have largely changed toward an understanding that emergency calltakers are true public safety professionals. Nevertheless, years of cultural influence still allow some of these preconceived notions to exist.

Hindrances to change can also occur within individuals. People have self-limiting mechanisms that resist personal change. Even when someone sets clear personal goals to change (like learning to use a new system), s/he simultaneously and unconsciously establishes barriers that undermine those plans. These barriers include things like competing commitments, erroneous assumptions,
or competing behaviors and beliefs. Management experts Jeffrey Pfeffer and Robert I. Sutton call this the “knowing-doing gap.”

Effective change in the emergency communication environment is dependent on multiple factors that include, but are not limited to, the following:

- ongoing performance assessment of staff and the tools they use
- specific education that is based around case review and feedback operations
- oversight groups that facilitate orderly discussion and allow all individuals within the organization to have a seat and a voice at the table
- a method for follow up on actions, suggestions, and concerns within the workgroups

Change Leadership

According to John Kotter, author and chief innovation officer at Kotter International, there is a significant difference between change management and change leadership. Change management focuses on keeping change efforts under control using tools and techniques to minimize distractions and unintended or undesired impacts. Change leadership drives change through vision, inspiration, and empowerment.

Change leaders think about how to institute the change process—knowing that there are administrative decisions that only a few individuals within the organization are able to make. Change leaders understand that not everything need be on the table to change something within the agency. Given all the limitations and barriers to change, change leaders bring together individuals with knowledge throughout the agency and experience in various workflows and then get out of the way and let them work through the objectives agreed to by the oversight teams (e.g., DRC/DSC). Essentially, change leaders oversee goal setting and then allow the group to identify ways to meet the goals. The ability to get out of the way is an essential element of effective change leadership.

Creating a Quality Culture

So, how do you make quality an integral part of the culture in your communication center? Malcolm Baldridge and W. Edwards Deming are pioneers in the quality movement. Their principles are very similar and summarized below.

First. Both of these recognized quality theorists agree that genuinely committed leadership needs to exist in the organization. Just paying lip service to quality will inevitably lead to failure. Having leaders that demand the development of continuous improvement of products and services gives rise to the thought that the organization will be around for some time. Baldridge refers to leaders “having faith” (almost like a religion) in the new model of quality improvement. Just the existence of a mission statement can help confirm the organization’s commitment to quality. However, mission statements must be accompanied by the active leadership of top management to be truly effective.
Second. Deming asserts that in order to accept change, you must first acknowledge that existing systems are not always adequate for current and future progress. He calls it “adopting the new philosophy.”

Third. As one communication center director, Thera Bradshaw, has said, “It’s time we started to do it right, not just fast.” We should not examine just the end result. We should examine the processes getting us to the end result and see if we can prevent people from making mistakes.

Fourth. When people know where they are going as an organization, many of their needs are fulfilled. They feel secure in the structure and direction and will be more reluctant to leave to go somewhere else.

Fifth. Because people are generally reluctant to embarrass themselves in front of individuals whose respect they desire, they often fail to ask questions about things they need to know. Then, because they don’t know, they become afraid and become vulnerable. They may continue to do things badly (or even dangerously) because they haven’t been told what they are doing wrong, and they can’t, or won’t, change until they have it in writing. If people are secure in the knowledge that they can ask without being ridiculed or reprimanded, they will provide better quality service.

Sixth. Many organizations are very hierarchical, with numerous layers of management between the top and bottom. Because of the multi-layered approach, it often appears (and sometimes is a fact) that the left hand doesn’t know what the right hand is doing. One approach to overcoming this problem is to restructure the organization in a radical way. A more common approach is to develop multi-level working project groups where, aside from the project leader, no one has ranked priority. It can be very easy for a senior manager to believe that all is well with the world because the supporting managers are trying to deal with the issue personally instead of recognizing when a broader approach or understanding is necessary.

Seventh. Who should develop goals and objectives for your agency? Should everyone have goals to achieve? Who writes the objectives for each job? Many studies have shown that when people are involved in the process of establishing goals for their agency and their own jobs, they tend to more readily buy into the goals and are more enthusiastic in implementing them.

Eighth. Field providers are required to qualify on specific skills during their training period in order to be deemed competent—the emphasis being on competency. They are given minimum requirements to achieve, and are signed off on how well they actually perform. Calltakers should also be required to qualify on specific skills during their training period in order to be deemed competent.

Ninth. Deming and Baldridge both suggest that it is not just the implementers who need training to deal with the changes within the organization, but the senior managers as well. Priority Dispatch Corp. invites all executive and senior managers to leadership and implementation seminars (certified by the IAED), so they are familiarized with the implementation process involved in integrating the Priority Dispatch Systems into an organization.
Summary. As we said earlier, paying lip service to quality achieves nothing worth anything. The staff can't do this alone, and neither can the managers. However, with a well-thought-out plan, with motivated people involved, and with achievable outcomes, a positive result will occur. Deming infers that it takes a special top improvement team with a plan of action to carry out the quality mission.

The public safety industry is diligent in its training and qualification of personnel who physically respond to the public they serve. So why not be diligent with the calltaker, who has the very first contact with the emergency? Quality doesn't have to be the ball and chain it was once perceived to be—it can provide the freedom to be proud of doing the right thing, in the right way, at the right time.

Summary

Phillip Bayard Crosby has defined quality as, “conformance to requirements.” In the communication center, requirements most often come in the form of a standard. Quality cannot exist without standards and without a reliable method of measuring conformance to those standards. Ultimately, the purpose behind measuring conformance to standards is to determine how quality can be improved over time.

Quality assurance (QA) is the process of measuring and evaluating various aspects of performance against the accepted standards. It is one of the first steps in the quality improvement process and normally starts with the evaluation of individual calltakers, but also includes evaluation of other parts of the system.

Quality improvement (QI) is a total system approach to continuously improving products and services. Where quality assurance concentrates on past performance, quality improvement focuses on future improvement. The goal is to create lasting change to improve system-wide performance. Essentially, QI involves measuring where you are, determining where you want to go, and implementing a plan to get there.

Quality management (QM) is the overall process used by an organization to ensure their product or services are consistent and maintain a level of quality for their customers. Essentially, quality management is the umbrella term that encompasses all of the quality assurance and quality improvement efforts and strategies that an organization employs. A central goal of quality management is to make quality an integral part of what the organization does from top to bottom.

? Points to Ponder

- Who are the change managers in your agency?
- Who are the change leaders in your agency?
- Why is it important for an organization to have both change managers and change leaders?
Quality improvement processes often require effective change management. According to John Kotter, author and chief innovation officer at Kotter International, there is a significant difference between **change management** and **change leadership**. Change management focuses on keeping change efforts under control using tools and techniques to minimize distractions and unintended or undesired impacts. Change leadership drives change through vision, inspiration, and empowerment.

### Self-Assessment

1. Define *quality*.

2. Define *quality assurance*.

3. Define *quality improvement*.

4. Define *quality management*.

5. List the five objectives of quality management.
   1. 
   2. 
   3. 
   4. 
   5. 

6. List the six steps of the quality management cycle.
   1. 
   2. 
   3. 
   4. 
   5. 
   6. 

7. It is vitally important that the quality management system focuses just as much (or more) on what is already working well within the organization as it does on areas in need of improvement.
   a. true
   b. false

8. __________ oversee goal setting and then allow the group to identify ways to meet the goals.
   a. Change managers
   b. Change leaders
Footnotes and References


Roles and Responsibilities

Chapter Overview

It is a common misconception that quality improvement refers only to those conducting case reviews on a daily basis. In fact, the total quality concept suggests that everyone has a role to play in managing quality in the communication center. In this chapter, we discuss the roles and responsibilities of the various people and committees involved in quality assurance, quality improvement, and quality management.

Objectives

Upon completion of this chapter, you will be able to do the following:

1. Explain the roles and responsibilities of those participating in quality assurance, quality improvement, and quality management.
2. Describe necessary characteristics, qualifications, and knowledge for the ED-Q.
3. Explain the importance of confidentiality and privacy for the ED-Q.
4. Describe the purpose of the Quality Assurance Unit (QAU).
5. Describe the purpose of the Dispatch Review Committee (DRC) and list typical members.
6. Describe the purpose of the Dispatch Steering Committee (DSC) and list typical members.
Quality Assurance Roles

Quality assurance in the communication center is primarily the responsibility of the Quality Assurance Unit (QAU), which is made up of all of the Emergency Dispatch Quality Assurance Specialists (ED-Qs™) in the agency. This might be one individual in some cases and it might be a team of people in others. However, in all cases, the QAU plays an important role in helping calltakers provide quality service to callers in need.

Calltakers (EMDs, EFDs, and EPDs)

Competent calltakers are on the front lines of quality public safety service. Properly equipped with appropriate information, tools, and protocols, certified Emergency Medical Dispatchers™ (EMDs™), Emergency Fire Dispatchers™ (EFDs™), and Emergency Police Dispatchers™ (EPDs™) are literally the first, first responders and are capable of providing a Zero-Minute Response™. As the front-line users of the protocol, calltakers can often see exactly what needs to happen to improve quality. Providing calltakers with the proper training, giving them the performance feedback they need, and listening to their opinions on how to improve the system is fundamental to a successful quality program.

Emergency Dispatch Quality Assurance Specialists (ED-Qs)

ED-Qs are certified professionals who have taken on a quality function in the communication center. The ED-Q’s primary purpose is to objectively and consistently measure system performance through random and focused case reviews. ED-Qs compare current performance to minimum expectations (the ED-Q Performance Standards). In addition to identifying incorrect use of the protocol, ED-Qs should acknowledge and highlight exemplary performance.

As an ED-Q, you will interact with calltakers, direct supervisors, the Dispatch Review Committee (DRC), and the Dispatch Steering Committee (DSC) in providing timely, accurate, and appropriate information to improve the system based on verifiable data.
It is important for ED-Qs to conduct case reviews across all shifts. In addition, the ED-Qs as a group need to work together to ensure consistency in case review practices. Selecting monthly ED-Q calibration cases is one way to manage variances between ED-Qs.

**Necessary Characteristics, Qualifications, and Knowledge of the ED-Q**

In order to be effective, ED-Qs must be committed to their job. In most cases, this means they are willing to remain in their position for no less than three years. In addition, all those acting in this role must maintain their IAED™ certification as an ED-Q in the discipline in which they work. Be aware that ED-Qs may not review calls or act in the role of an ED-Q for a discipline in which they are not certified. ED-Qs must have extensive knowledge of the IAED protocols, ProQA®, Performance Standards, AQUA® and their applications.

Ideally, ED-Qs are peer-reviewers who function outside the daily operations of the communication center. The IAED does not recommend that supervisors review the calls of calltakers they directly supervise. Realistically, however, this is often not possible and the direct supervisor is required to wear multiple hats as they run the shift, review cases, and provide feedback to their staff. If this is the case in your agency, be aware that calltakers can often confuse feedback with discipline. When functioning as an ED-Q, supervisors need to take extra time to reassure calltakers that routine QA feedback is non-disciplinary and is focused on a positive, educational exchange of information.

ED-Qs are required to have extensive knowledge of the IAED protocols. The concept, design, and structure of the IAED protocols rely on quality processes, and are the standard of practice for emergency calltaking. It is, therefore, essential for ED-Qs to be very familiar with how the protocols function. ED-Qs are often regarded as the de facto protocol expert in the agency, and must therefore continually hone their knowledge of the Medical, Fire, and/or Police protocols. ED-Qs may need to seek the assistance of those with spe-
cialized field knowledge such as Advanced Life Support (ALS) paramedics, firefighters, police officers, medical directors, and fire or law administrators. In addition, the Dispatch Review Committee (DRC) and Dispatch Steering Committee (DSC) can be used as resources for answering questions requiring higher levels of expertise.

Finally, ED-Qs need to have a growth mindset (see figure 2.3). This means that they eagerly look for opportunities to hone their skills, seek out information, and welcome change. Embracing this mindset will lead to actively requesting and receiving feedback from calltakers. This can be very powerful.

A growth mindset is the belief that abilities, skills, and intelligence can be developed. A fixed mindset, on the other hand, is the belief that these things are fixed traits that cannot be developed or improved upon. A fixed mindset can lead to the avoidance of taking on new challenges for fear of failure. This can also lead a person to react negatively to change and feedback. A growth mindset understands that talents and abilities can be improved with effort. As an ED-Q, it is important for you to develop a growth mindset. With this mindset, you will understand that change and improvement is not threatening because you will believe that you can do it!

**Figure 2.3** As an ED-Q, it is important for you to develop a growth mindset.

**ED-Q Professional Ethics: Confidentiality and Privacy**

As an ED-Q, it is critical that you hold firm to professional qualities and ethics. Two very important qualities include confidentiality and privacy.

ED-Qs have access to information relating to the performance of individual calltakers. This information may affect someone’s career and is private and confidential. Ultimately, the only people who may need access to this information are the individual calltaker, the direct supervisor, the communication center director, and the QAU.

Maintaining confidentiality and privacy as you carry out your responsibilities will help keep your quality assurance system strong.
Quality Assurance Unit (QAU)

All of the ED-Qs in an organization are collectively referred to as the Quality Assurance Unit (QAU). This can be a single ED-Q or a team of ED-Qs based on the needs of the local agency. Members of the QAU are responsible for ongoing random and focused case reviews. They are also responsible for tracking trends that arise in the communication center.

Consistency

To maintain an effective QAU there must be a high level of consistency among its members. The goal is to keep inter-rater variability (the amount of disagreement among reviewers) to less than 5%. Simply put, if you give the same case to each ED-Q, we want to see a high percentage of agreement in how the case is reviewed by each person. While 100% agreement is optimal, it is not always achievable. However, it is reasonable to expect 95% agreement amongst ED-Qs and the QAU must actively strive to achieve this. If calltakers believe ED-Qs do not review cases consistently, their trust in the process diminishes.

Trend Analysis

Another important role of the QAU is to track trends in the communication center. Trends in performance over time can provide information about which systems are working well and which ones require attention and training. Trends can also illuminate other issues in the communication center such as staffing deficiencies, technology failures, workflow issues, policy concerns, etc. Using trends to identify these issues allows the agency to spend its time evaluating and improving those areas where it has been demonstrated that performance is less than ideal. For example, when it is known that there has been an increase in the number of errors on Chief Complaint Selection or Pre-Arrival Instructions (PAIs), then training can be provided to help calltakers improve in these specific areas. Discussing trends throughout the committee structure (QAU, DRC, and DSC) gives everyone a chance to speak up and bring ideas, questions, and concerns to the table. This helps the QAU develop a better decision matrix on the most appropriate course of action. Everyone in the center knows what is happening and how issues are being addressed. Trend analysis focuses on how the entire agency can improve and reduces individual finger pointing. Instead of feeling like their performance is being unfairly called out, calltakers feel like they are part of the quality improvement process.

Objective 4

Describe the purpose of the Quality Assurance Unit (QAU).

Points to Ponder

- How can you motivate calltakers to take a bigger role in the quality assurance process?
- How can you make a clear distinction between quality assurance feedback and formal discipline?
- Do you naturally have a fixed mindset or a growth mindset? What can you do to develop a growth mindset?
- How can you foster consistency within the QAU?
Quality Improvement Roles

Quality improvement in the communication center revolves around analyzing data from the center and providing feedback to calltakers. Another critical part of any quality improvement system is participation in the Dispatch Review Committee (DRC). The DRC is the working group responsible for reviewing the compliance reports generated by the QAU and recommending appropriate action.

Data Analysis

Individuals performing data analysis collect data from ProQA, CAD, case reviews, and various other sources, and analyze it to discover performance patterns and trends. This type of analysis helps paint an overall picture of an organization’s performance and sets the foundation for quality improvement efforts.

It is important for the data analyst to be objective and truthful about what the data really shows. Data can be easily manipulated to misrepresent information. Accurate and truthful data, however, can be a powerful tool for creating change and improvement.

Providing Feedback

Providing feedback is a critical component of any quality improvement effort. Feedback providers must give useful feedback to calltakers that highlights strengths and identifies opportunities for improvement.

The person tasked with providing feedback, especially face-to-face feedback, varies from agency to agency. In many agencies, this responsibility is given to supervisors. Once again, be aware that in these situations calltakers may confuse feedback with discipline. When a direct supervisor reviews cases and provides feedback on those cases, it can be unclear if they are functioning as part of the quality improvement team or as a boss. This relationship dynamic can change the conversation significantly. Both parties may filter their comments or alter their willingness to accept comments based on their understanding of the situation. Having a mentor, a member of the training unit, or a supervisor that did not review the case provide feedback may work better to produce an open communication line for both parties.

Effective, strength-based feedback can go a long way toward ensuring performance improvement over time. Remember that timing is critical. It is important to provide specific case review feedback quickly enough to ensure that calltakers still clearly remember the events of the case. Additionally, providing feedback at predictable, regularly-scheduled times will reduce the anxiety that calltakers feel about feedback and will help the process run more smoothly. Finally, don’t forget that feedback applies to everyone, not just calltakers. Supervisors, managers, and administrators should also receive regular feedback. This type of feedback can help improve processes and tools across the whole system.
Dispatch Review Committee (DRC)

The Dispatch Review Committee (DRC) is a middle-management working group responsible for formally reviewing compliance reports generated by the QAU for individuals, shifts, and the entire communication center. The DRC looks at and analyzes both problematic and exemplary cases. The DRC also implements and follows through on all report forms, tracking mechanisms, quality assurance processes, and operational feedback reviews.

Members of the DRC usually include, but are not limited to:

- Direct supervisors
- Field representatives
- Calltaker representatives for each discipline used in the communication center
- QAU personnel
- Training representatives
- IT representatives (ad hoc)
- Others as appropriate (ad hoc)

It is important that the DRC takes notes of the proceedings which can be made available to the Dispatch Steering Committee (DSC). During the early phases of implementation, DRC meetings should be held weekly. The frequency of these meetings may be reduced to monthly as appropriate. To function correctly, DRC member’s attendance and participation in these meetings should be regular and consistent.

A key function of the DRC is to draft policies for the communication center and make formal recommendations to the DSC. These policies and recommendations can pertain to anything from processes within the center to continuing dispatch education programs. The IAED recommends that, at a minimum, agencies should maintain clear policies that guide operations with regards to:

- Protocol implementation
- Protocol use
- Quality improvement
- Local authorization
- Training/certification

Objective 5

Describe the purpose of the Dispatch Review Committee (DRC) and list typical members.

Critical Concepts

A key function of the DRC is to draft policies for the communication center and make formal recommendations to the DSC.
Quality Management Roles

Quality management is the overall, system-wide process of maintaining quality in the communication center. Everyone in the organization, therefore, has a role to play in this effort. With that said, there are individuals in the communication center that have the specific responsibility to make final decisions and approvals regarding system-wide policies and operations. These individuals make up the Dispatch Steering Committee (DSC) and play a primary role in the quality management process.

Dispatch Steering Committee (DSC)

The purpose of the Dispatch Steering Committee (DSC) is to make final decisions and approve or disapprove policy as recommended by the DRC. During the early phases of implementation, it would be reasonable for the group to meet monthly. As the system becomes more settled, meeting quarterly or even less frequently may be appropriate.

Points to Ponder

- How can you ensure that data analysis remains objective and truthful?
- What can you do to ensure that feedback is provided in a timely manner?
- Who sits (or should sit) on your Dispatch Review Committee (DRC)?
Members of the DSC usually include, but are not limited to the following positions:

- Communication center director
- Senior management representative
- Public safety administrators (Fire Chief, Police Chief/Sheriff, Medical Director)
- Operations Director
- Chair of the DRC or Senior QAU Person (advisory capacity only)

It is also common to have an administrative assistant attend to provide accurate minutes of the meeting.

**Critical Concepts**

The purpose of the DSC is to make final decisions and approve or disapprove policy as recommended by the DRC.

**Points to Ponder**

- How can you help others understand their role in the quality management process?
- Who sits (or should sit) on your Dispatch Steering Committee (DRC)?
Summary

In this chapter, we discussed the roles and responsibilities of those participating in quality assurance, quality improvement, and quality management. We also discussed the necessary characteristics, qualifications, and knowledge you should have as an ED-Q.

**Quality assurance (QA)** in the communication center is primarily the responsibility of the **Quality Assurance Unit (QAU)**, which is made up of all of the **Emergency Dispatch Quality Assurance Specialists (ED-Qs™)** in the agency. This might be one individual in some cases and it might be a team of people in others. However, in all cases, the QAU plays an important role in helping calltakers provide quality service to callers in need.

The ED-Q’s primary purpose is to objectively and consistently measure system performance through random and focused case reviews. ED-Qs compare current performance to minimum expectations (the ED-Q Performance Standards). In addition to identifying incorrect use of the protocol, ED-Qs should acknowledge and highlight exemplary performance.

Ideally, ED-Qs are peer-reviewers who function outside the daily operations of the communication center. The IAED does not recommend that supervisors review the calls of calltakers they directly supervise. Realistically, however, this is often not possible and the direct supervisor is required to wear multiple hats as they run the shift, review cases, and provide feedback to their staff. If this is the case in your agency, be aware that calltakers can often confuse feedback with discipline. When functioning as an ED-Q, supervisors need to take extra time to reassure calltakers that routine QA feedback is non-disciplinary, and is focused on a positive, educational exchange of information.

**Quality improvement (QI)** in the communication center revolves around analyzing data from the center and providing feedback to calltakers. Another critical part of any quality improvement system is participation in the **Dispatch Review Committee (DRC)**. The DRC is the working group responsible for reviewing the compliance reports generated by the QAU and recommending appropriate action.

**Quality management (QM)** is the overall, system-wide process of maintaining quality in the communication center. Everyone in the organization, therefore, has a role to play in this effort. With that said, there are individuals in the communication center that have the specific responsibility to make final decisions and approvals regarding system-wide policies and operations. These individuals make up the **Dispatch Steering Committee (DSC)** and play a primary role in the quality management process.
Self-Assessment

1. Describe the role of the Emergency Dispatch Quality Assurance Specialist (ED-Q).

2. Describe the role of the Quality Assurance Unit (QAU).

3. Describe the role of the Dispatch Review Committee (DRC).

4. Describe the role of the Dispatch Steering Committee (DSC).

5. ED-Qs may not review calls or act in the role of an ED-Q for a discipline in which they are not certified.
   a. true
   b. false

6. Which one of the following groups is responsible for drafting policies for the communication center?
   a. QAU
   b. DRC
   c. DSC
   d. Medical/Fire/Police Administrators

7. Which of the following is a characteristic of a growth mindset?
   a. A belief that abilities, skills, and intelligence can be developed.
   b. A belief that abilities, skills, and intelligence are fixed traits.
   c. A belief that challenges could reveal a lack of skill.
   d. A belief that feedback is threatening.
Footnotes and References


Case Review

Chapter Overview

In this chapter, we discuss the case review process. We will discuss both random and focused case reviews. We will also discuss the importance of regular calibration case reviews to help ensure that the Quality Assurance Unit maintains consistency across its members. Finally, we will emphasize the importance of providing feedback on things done well, not just on things that did not meet the standard.

Objectives

Upon completion of this chapter, you will be able to do the following:

1. Explain the difference between random and focused case review.
2. Determine the minimum required random sample size for your agency.
3. Explain the importance of calibration cases.
4. Describe the case review process.
5. Describe situations in which it is and is not necessary to provide face-to-face feedback and/or an Incident Performance Report (IPR) to calltakers.
6. Explain how individual case reviews contribute to monthly reporting data and trend analysis.
The Journey of a Case Review

The chart below shows the journey of a case review.

The life cycle of a case review begins as the calltaker uses ProQA® to process the call. Once the case is closed, the ProQA record and the audio recording of the call are saved in agency databases. In most agencies, only a small percentage of these cases will be selected for review and imported into AQUA®. Once imported, certified Emergency Dispatch Quality Assurance Specialists (ED-Qs™) use AQUA to review individual cases. Next, feedback is provided to calltakers as appropriate. Finally, the reviewed cases become part of the agency’s monthly reporting data which can be used for trend analysis and other quality improvement (QI) efforts.

Case Selection

Before cases can be reviewed, they must first be selected and imported from ProQA into AQUA. The AQUA Import function makes this a simple process by allowing ProQA records to be imported directly into AQUA. The ED-Q can import cases by date, case number, or calltaker. The ED-Q can also import a randomized selection of cases.
Random and Focused Reviews

There are two categories of case reviews: random and focused. Random case reviews are done on a purely random selection of calls, meaning that every case in the database has an equal chance of being selected without bias or pattern. Over the long run these random reviews provide a statistically reliable measurement of day-to-day calltaker performance. However, in the short run, random reviews do not always provide the desired specificity for all incident types and for all employees. Carefully selected, focused reviews supplement random reviews to ensure that the agency has specific data on all required areas of calltaker performance and protocol use. Think of focused reviews as going an inch wide and a mile deep to drill down and focus on a specific area. Random reviews, on the other hand, can be thought of as going a mile wide and an inch deep to provide a general snapshot of the agency’s performance.

Random Case Reviews

Random case review is a powerful tool to measure the use of Priority Dispatch System™ (PDS™) Protocols, and is a vital part of the QI cycle. Data from reviews—collected over time—can identify excellence in calltaker performance, confirm correct use of protocol, identify gaps in knowledge, and point out the need for system and/or protocol improvement. Random case reviews are also used for monthly, quarterly, and yearly performance reporting for the individual, shift, and agency. These monthly reports are one of the main components of accreditation.

The International Academies of Emergency Dispatch® (IAED™) has a standard for the minimum number of random case reviews you must complete, based on your total annual call volume. The IAED recommends that case reviews are done on a consistent basis. Daily is ideal, but, at a minimum, a specified number of case reviews must be completed each week to help guarantee that calltakers are receiving feedback on a consistent and frequent basis.

The following steps will help you determine the minimum required random sample size for your agency.

1. **Calculate annual call volumes for your agency**
   - The International Academies of Emergency Dispatch® (IAED™) generally recommends that agencies calculate their annual call volumes once per year. However, additional calculations may be necessary when there is a significant change in call volume (due to something like consolidation with another agency).
   - Annual call volumes are discipline specific, meaning that the annual call volumes for medical calls, fire calls, and police calls are calculated separately.
   - Annual call volumes can be determined using the reporting utility of your computer-aided dispatch (CAD) system or by running the ProQA Master Dispatch Analysis Report for a 12-month period. Contact Priority Dispatch Corp.™ (PDC™) Software Support (https://support.prioritydispatch.net/) for assistance in running a Master Dispatch Analysis Report.
2. **Input annual call volumes into the IAED Random Case Review Calculator (ACE Calculator)**
   - The IAED Random Case Review Calculator (ACE Calculator) can be found on the Reports tab in AQUA or on the IAED website (http://www.emergencydispatch.org/AccredCalculator).
   - The calculator will provide you with the number of random case reviews required for the year and week based on your annual call volumes.
     - For larger agencies (those with volumes over 43,333/yr.), the random sample will vary from 3% to 1%.
     - For agencies with call volumes lower than 43,333, the IAED is working to create a realistic standard both for single and multi-discipline random sampling. A matrix showing this standard is available on the accreditation website (https://accreditation.emergencydispatch.org/).

3. **Record the number of case reviews required for the year and week**
   a. Print, write down, or save the number of annual and weekly random case reviews provided by the calculator.
   b. Ensure that, at minimum, this number of random case reviews is completed.

### Focused Case Reviews

Focused case reviews make up a smaller portion of the total case reviews conducted by the *Quality Assurance Unit* (QAU). These reviews are differentiated from random case reviews by the fact that they are specifically selected for review based on agency-identified criteria or IAED recommendations. The purpose of focused reviews will vary from discipline to discipline and agency to agency. However, it is important for the agency to have well-defined, transparent categories for focused reviews. If calltakers understand the intent of focused reviews, they will be less likely to feel like they are being singled out by the QAU.

Reasons to conduct focused case reviews include, but are not limited to, the following:

- Infrequently used Chief Complaint Protocols
- Specific categories of PAIs as requested by a Medical Director or Senior Fire or Police Administrator (choking, active shooter, structure fire, etc.)
- Specific areas of protocols that are of a particular interest to the agency (as identified by the *Dispatch Review Committee*)
- High-risk/low-volume incident types
- Specific calltakers who did not come up in the random sample
- Calltakers (e.g., supervisors, field providers, or part-time employees) who only occasionally take calls to cover shifts (Note: These calltakers must be certified to use the protocols.)
- Specific calltakers who require an increased number of reviews (Performance Improvement Plan, new employee, etc.)
- Investigations (complaints or commendation from the public or public safety partners)
- Field feedback reviews (responders requesting a specific incident be reviewed)

It is important to understand that cases selected for focused review are not excluded from random case review. If a case that has been selected for focused review comes up in the random review process, the case must be included in the random case review reports.

**Calibration Cases**

All members of the QAU must strive to develop and maintain consistency in their case review process. Selecting calibration cases is an effective way to create and maintain ED-Q consistency and accuracy. A calibration case can be any case (random or focused) that has interesting or complex circumstances that may highlight specific case review challenges. Calibration cases should be assigned to each ED-Q for independent review. Once each ED-Q has reviewed the case, all reviewers should get together to discuss it and identify areas of agreement and disagreement. Differences in the reviews should be clarified and discussed to ensure that, in the future, all ED-Qs will review similar cases in the same way. Conducting regular calibration cases is a very effective way of ensuring consistency among ED-Qs, which, in turn, will result in a higher level of calltaker trust in the QAU.

**Objective 3**

Explain the importance of calibration cases.

**Critical Concepts**

Selecting calibration cases is an effective way to create and maintain ED-Q consistency and accuracy.

**Points to Ponder**

- How can you ensure that random calls are selected without bias or pattern?
- What kind of focused reviews would benefit your agency?
- What types of cases should be selected as calibration cases?

**The Case Review Process**

Case review is the foundation of the entire quality assurance (QA) process. In this course, the term case review refers to the activity in which the ED-Q listens to the case recording and assesses the calltaker’s use of the PDS Protocol as measured against the ED-Q Performance Standards and agency policies. The ED-Q records all information in AQUA. AQUA automatically calculates the results of the case review, based on the number of correct actions and weighted deviations, into one of five Compliance Levels:

- High Compliance
- Compliant
- Partial Compliance
- Low Compliance
- Non-Compliance
These Compliance Levels are used to determine the urgency and methods for feedback to the calltaker.

<table>
<thead>
<tr>
<th>Compliance Level</th>
<th>Feedback Time</th>
<th>Feedback Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>High Compliance</td>
<td>Immediate</td>
<td>Individual Feedback with Incident Performance Report</td>
</tr>
<tr>
<td>Compliant</td>
<td>Routine (trends)</td>
<td>Individual Performance Report</td>
</tr>
<tr>
<td>Partial Compliance</td>
<td>Routine</td>
<td>Individual Feedback with Incident Performance Report</td>
</tr>
<tr>
<td>Low Compliance</td>
<td>Urgent (72 Hour Goal)</td>
<td>Individual Feedback with Incident Performance Report</td>
</tr>
<tr>
<td>Non-Compliant</td>
<td>Immediate</td>
<td>Individual Feedback with Incident Performance Report &amp; Action Plan</td>
</tr>
</tbody>
</table>

Figure 3.3 IAED™ Quality Improvement Review Matrix.

Readiness

Case review is a challenging task that requires focus and attention. It is helpful to schedule a specific time free from phone calls or other interruptions to conduct case reviews. Make sure you have everything you need before you begin so you can focus on the calls without distractions. Things you will need may include: AQUA, ProQA, CAD, call audio files, the ED-Q Performance Standards, and copies of agency policies.

Before conducting case reviews, it is important to clear your head, calm yourself, and use the same listening skills you would expect the calltaker to use when they took the call. You must be engaged in the conversation on both sides, listening carefully to what both the caller and calltaker say. This is a different set of challenges from those faced by the calltaker. During a call, calltakers must obtain information from the caller, synthesize the answer, and enter the appropriate information into ProQA. ED-Qs must be able to monitor how the script was utilized, listen to the caller’s answer and emotional response, and evaluate if the information entered into ProQA was the appropriate choice.

Reviewing a Case

As discussed earlier in this chapter, ProQA data can be imported directly into AQUA. Importing ProQA data into AQUA brings over a wealth of information from the case and prepopulates a number of AQUA fields. In general, AQUA presupposes that the calltaker has done it right. The default selection for the performances you will be evaluating is generally “yes” or “correct.” This means that for most correct performances, you will not have to click or mark anything in AQUA. Only when performance does not meet the standard will you need to change the default response.

Remember, as you review cases, that the intent of case review is to provide feedback on things done well, not just on things that did not meet the standard. AQUA provides convenient comment boxes throughout the interface to allow you to make specific comments about almost any performance. When a performance does not meet the standard, you can use these comment boxes to provide specific information about what was expected and what was done. You can also use these boxes to provide feedback about what could be done better in the future. Likewise, when the performance exceeded the standard or when the
calltaker did the right thing in a difficult situation, be sure to provide specific comments pointing out what was done well.

As with any complex skill, case review requires practice. As a new ED-Q, it will likely take you more time to review cases than it will as you gain experience. New ED-Qs will likely need to pause the call recording often, and may need to listen to the case multiple times to make sure they get everything right. As you gain experience, however, you will likely find that you can review a case by listening to it just two or three times as described below.

• **First Hearing.** During the first hearing of the case, you should focus on entering all of the performance data into AQUA. Feel free to pause the recording as necessary to add helpful comments.

• **Second Hearing.** Listen to the case a second time to confirm that you have reviewed the case correctly. If you find that you have marked something incorrectly, this is the time to fix it. Your focus during the second hearing is to confirm your initial review, not to find more errors. Obviously, if you discover a performance error that you missed the first time, you should mark the case accordingly. However, your goal, at this point, should be to catch the calltaker doing it right.

• **Additional Hearings.** When necessary, you may listen to the case again to help you with your comments and to document any training needs.

**Critical Concepts**

As with any complex skill, case review requires practice.

**Points to Ponder**

- How can you reduce or eliminate distractions that may come up during case reviews?
- What can you do to make sure that you remember to provide comments/feedback on things done well?

**Feedback to Calltakers**

The AQUA Incident Performance Report (IPR) is a detailed report that shows calltaker performance for an individual case. The report shows what the calltaker did correctly and points out areas that did not meet standards. The IPR is commonly given to the calltaker as part of the feedback process.
There are many effective ways to provide feedback. The specific process that works best for your agency will depend on many variables including, but not limited to:

- Personnel assigned to deliver feedback (ED-Q or supervisor)
- Delivery method (hand delivered, emailed, placed in employee mail slot, communication management system, etc.)
- The Compliance Level of the case (see figure 3.3)
- Previous performance of the calltaker
- Complexity or uniqueness of the case

In general, all Non-Compliant cases require immediate face-to-face feedback to provide the calltaker with the information needed to correct the error(s) identified in the case. On the other end of the spectrum, it is vitally important to apply the same urgency in recognizing calltakers with High Compliant cases. In these situations, a formal face-to-face meeting may not be necessary. A quick verbal acknowledgment may suffice. However, it is important that the feedback be specific to the calltaker’s performance on the case. “Good job” is not the same thing as, “Really nice work on that call with the three-year-old nosebleed patient. Your calming statements made a real difference to the mom.” This statement takes just five more seconds to say, but will leave a lasting impression with the calltaker encouraging her/him to do it right again the next time.

Feedback is an essential part of any QI program. However, it is not necessary to provide individual feedback on every case. In an agency that is new to the PDS Protocols (or with new calltakers), it is important to provide as much feedback as possible. In these situations, providing calltakers with a copy of the IPR for each case reviewed is a good idea. In a more mature agency (or with experienced calltakers), providing an IPR for every single case reviewed might become cumbersome and even annoying to the calltakers. In circumstances where performance is generally high, it is reasonable to consider providing aggregate data on a monthly or quarterly basis to these calltakers. It is important for the QAU to pay attention to this process and intervene if the agency and/or individual calltaker performance starts to decline or the calltakers request more frequent and/or specific feedback.

**Points to Ponder**

- What is your current calltaker feedback process? Are there ways it could be improved?
- Are there calltakers in your agency who may not need an IPR for every case reviewed?
Monthly Reporting

After a case review has been completed and feedback has been delivered to the calltaker, the case becomes part of the monthly reporting dataset. Each individual case review provides important data. When viewed together in aggregate, this data helps quality improvement personnel see the overall performance of the agency, shifts, and individuals.

Each randomly selected case review contributes to the monthly Agency and Shift Performance reports. These reports should be posted each month in a place accessible to all calltakers. Accredited Centers of Excellence (ACE) are required to provide similar reports to the IAED Board of Accreditation. These agencies must keep Partial, Low, and Non-Compliant cases below specified thresholds.

<table>
<thead>
<tr>
<th>ACE</th>
<th>Percentage of Deviation Accepted</th>
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</thead>
<tbody>
<tr>
<td>High Compliance</td>
<td></td>
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<tr>
<td>Compliant</td>
<td></td>
</tr>
<tr>
<td>Partial Compliance</td>
<td>10%</td>
</tr>
<tr>
<td>Low Compliance</td>
<td>10%</td>
</tr>
<tr>
<td>Non-Compliant</td>
<td>7%</td>
</tr>
</tbody>
</table>

![Table: ACE Accreditation Standards](image)

**Figure 3.5 IAED Accreditation Standards.**

The IAED recommends that all agencies adopt the Accreditation Standards as their performance goal. Once your agency is at Accreditation Standards, the Board of Accreditation encourages you to consider applying for ACE.

Trend Analysis

Compiled monthly reporting data can be used for trend analysis. By looking at trends, it is possible to use past performance to predict future performance. For example, if a review of three months’ worth of case reviews shows an increasing number of Chief Complaint Selection errors, it would be reasonable to extrapolate that these errors will continue and may get worse without appropriate intervention. After discovering this trend, it would be important to look at the specific cases with these errors to see exactly what performance traits are causing the errors. It would also be important to analyze the data to determine if the problem is an agency-wide trend or if it is isolated to a few calltakers making this error multiple times. This information can then be used to design training or to develop other interventions to correct the error. After an intervention has been made, trend analysts should watch the trend to see if the number of errors is decreasing. If so, it can be assumed that the intervention was effective. If not, a new or revised intervention may be needed.
There are endless topics that can be analyzed using AQUA data: individual, team, and agency performance; trainee performance; specific PAIs; specific Chief Complaints; new additions to protocol; etc. Get creative and experiment with AQUA. What interesting trends can you find in your data? Does Shift A perform differently when their supervisor takes time off? Did performance improve after employee recognition week? Did implementing a new CAD cause a dip in performance? Have fun with it and see what you find.

**Points to Ponder**

- Where are monthly reports displayed in your agency? Do calltakers look at them?
- What are some topics in your agency that could benefit from trend analysis?

**Summary**

The life cycle of a case review begins as the calltaker uses ProQA® to process the call. Once the case is closed, the ProQA record and the audio recording of the call are saved in agency databases. In most agencies, only a small percentage of these cases will be selected for review and imported into AQUA®. Once imported, certified Emergency Dispatch Quality Assurance Specialists (ED-Qs™) use AQUA to review individual cases. Next, feedback is provided to calltakers as appropriate. Finally, the reviewed cases become part of the agency’s monthly reporting data, which can be used for trend analysis and other quality improvement (QI) efforts.

There are two categories of case review: random and focused. Random case reviews are done on a purely random selection of calls, meaning that every case in the database has an equal chance of being selected without bias or pattern. Over the long run, these random reviews provide a statistically reliable measurement of day-to-day calltaker performance. However, in the short run, random reviews do not always provide the desired specificity for all incident types and for all employees. Carefully selected focused reviews supplement random reviews to ensure that the agency has specific data on all required areas of calltaker performance and protocol use. Think of focused reviews as going an inch wide and a mile deep to drill down and focus on a specific area. Random reviews, on the other hand, can be thought of as going a mile wide and an inch deep to provide a general snapshot of the agency’s performance.

All members of the QAU must strive to develop and maintain consistency in their case review process. Selecting calibration cases is an effective way to create and maintain ED-Q consistency and accuracy.
As with any complex skill, case review requires practice. As a new ED-Q, it will likely take you more time to review cases than it will as you gain experience. New ED-Qs will likely need to pause the call recording often, and may need to listen to the case multiple times to make sure they get everything right. As you gain experience, however, you will likely find that you can review a case by listening to it just two or three times.

Remember, as you review cases, that the intent of case review is to provide feedback on things done well, not just on things that did not meet the standard.

Self-Assessment

1. What is a calibration case?

2. According to the IAED Quality Improvement Review Matrix, what is the appropriate feedback time and feedback method for a Low Compliance case?

3. Calls for random case reviews are selected:
   a. in a way that gives every case in the database an equal chance of being selected without bias or pattern.
   b. to ensure that the agency has specific data on all required areas of calltaker performance.
   c. to highlight specific case review challenges and to ensure that all ED-Qs maintain consistency and accuracy.

4. For purposes of determining the minimum required random sample size for case review, annual call volumes for medical, fire, and police are calculated separately.
   a. true
   b. false

5. Cases selected for focused review are excluded from random case review.
   a. true
   b. false

6. An AQUA® Incident Performance Report (IPR) must be given to every calltaker for every case reviewed.
   a. true
   b. false
Introduction to Performance Management

Chapter Overview

Performance management programs take input from quality assurance, quality improvement and quality management systems in an attempt to analyze trends, provide effective feedback and training, and develop plans to improve performance and recognize excellence. The ultimate goal of your performance management program should be to qualify as an IAED™ Accredited Center of Excellence (ACE), which demonstrates to your community that the level of service your agency provides meets the industry’s highest standards.

Objectives

Upon completion of this chapter, you will be able to do the following:

1. Explain the concept of *truthful accuracy*.
2. Define the statistics terms listed in this chapter.
3. Explain the concept of *negativity bias*.
4. Formulate an effective strengths-based feedback comment for both performance recognition and performance improvement.
5. Identify available resources for continuing dispatch education (CDE).
6. List the elements of an effective performance improvement plan (PIP).
7. Describe two possible methods for determining when a PIP may be necessary.
8. Explain the difference between *informal fact finding* and *formal investigation* in the risk management process.
9. Describe several examples of calltaker recognition programs.
10. Explain the benefits of accreditation for calltakers, management, the public, and ED-Qs.
What is Performance Management?

Performance management (PM) is the processes of creating an environment in the agency in which calltakers are enabled to perform at their best. It is a continuous process, involving both management and employees, aimed at creating and maintaining a high performance system. An effective performance management program focuses on the objectives and goals of both the agency and individual employees to recognize and reinforce excellence and to identify and act on opportunities for improvement.

The Quality Assurance Unit (QAU) plays an integral role in performance management by conducting case reviews and tracking performance trends. Emergency Dispatch Quality Assurance Specialists (ED-Qs™) might also be involved in analyzing performance data, providing feedback to calltakers, planning specific continuing dispatch education (CDE), assisting with performance improvement plans (PIP), recognizing calltaker success, supporting IAED™ accreditation efforts.

Analyzing Performance Data

As discussed in Chapter 2, individuals performing data analysis collect data from ProQA®, CAD, case reviews (AQUA®), and various other sources (e.g., phone systems, field responder reports, national and international databases), and analyze it to discover performance patterns and trends. Emergency communication centers generate a lot of data. From the answer of a phone line until all units return to service, data is collected constantly and in many ways. Together, these data streams allow performance management personnel to paint a picture of overall system performance. Trends discovered in this data provide essential information for performance management.

Whether you are directly responsible for analyzing data or simply the recipient of data analysis reports, it is important to understand a few simple statistical concepts and terms. As an ED-Q, it may be useful to take a basic course on statistics or to read a book or two about statistical analysis. In this course, we would like to introduce you to a few basic concepts to get you started.

Truthful Accuracy

You may have heard the tongue-in-cheek phrase, “Liars figure and figures lie.” There is a fabled public safety story in which the chief was worried about convincing the city administrators that they needed additional funding. The department’s financial analyst pulled the chief aside and said, “Chief, just give me the data and tell me what you want it to say.” Although there is an element of truth in the idea that data can be presented or organized in a way that proves anything you want it to prove, manipulating data in this way is not helpful in a performance management system. Truthful accuracy is a critical concept of statistical analysis. ED-Qs have an ethical duty to present the facts in a truthful and accurate manner. Agencies that truly want to build a high performance system must be comfortable that the data generated is accurate, objective, transparent, and truthfully presented.
Statistics Terms

Understanding some basic statistics terms will help you be a better user of statistical data. Below is a basic list of a few terms that ED-Qs should be familiar with.

- **Data set**: a collection of related facts often collected in a database (e.g., ProQA database, AQUA database, CAD database).
- **Sample size**: the number of data elements used to represent a larger data set. It is important to make sure that the sample size is large enough to ensure that outcomes are statistically relevant (or representative of the whole), but small enough to be manageable. In general, larger sample sizes provide greater accuracy than smaller sample sizes.
- **Random sample**: a collection of data elements selected in a way that ensures that every element in the data set has an equal chance of being selected without bias or pattern. Using random samples allows you to use statistical techniques to make reasonably accurate predictions about the entire data set.
- **Focused sample**: a collection of data elements that has been selected based on specific criteria. Focused samples are used to evaluate a specific set of elements for a specific reason and cannot be used to make accurate predictions about the entire data set.
- **Average**: a general term for a representative or typical value in a data set (e.g., mean, median, mode).
- **Mean**: a statistical average calculated by dividing the sum of the values in a data set by their number. For example, the sum of the values in the data set $[2, 4, 6, 8, 10, 12, 14, 16]$ is 72. Since there are 8 numbers in the data set, the mean is $72 \div 8$, or 9.
- **Median**: a statistical average determined by finding the middle value in a data set so that an equal number of elements fall above and below the value. For example, the median of the data set $[2, 2, 4, 8, 10]$ is 4 because there are two elements above it (8 and 10) and two below (2 and 2). For data sets with an even number of elements, the median is defined as the mean of the two middle values, calculated by adding them together and dividing by 2. For example, the median of the data set $[2, 2, 4, 6, 8, 10]$ is $5 \div (6 + 4 + 8 + 2 + 10 + 0) = 5$. The median is less likely to be skewed by unusually large or small values in the data set than the mean.
- **Mode**: a statistical average determined by finding the most frequently occurring value in a data set. For example, the mode of the data set $[1, 4, 2, 4, 5, 6, 7, 4, 2, 0, 10, 15]$ is 4 because it occurs more often than any other number in the set (3 times). The mode represents the most likely value in the data set.
- **Range**: the difference between the highest and lowest values within a data set. To calculate the range, subtract the smallest number from the largest number in the set.
• **Trend analysis**: the process of collecting information to identify developing patterns. For example, if a calltaker has shown an increase in MAJOR deviations over the last month, it would be useful to analyze if there is a trend in the types of behaviors generating these deviations so that an appropriate intervention can be devised to fix the root problem.

• **Inferential statistics**: statistical techniques used to make predictions about an entire data set based on random samples.

• **Descriptive statistics**: statistical techniques used to describe, summarize, or graphically represent data.

**Points to Ponder**

- How can you help ensure that the reports you produce are based on truthful accuracy?
- How much do you know about statistics and data analysis? How can you get additional help?

**Effective Strengths-Based Feedback**

As discussed in Chapter 2, providing feedback is a critical component of any quality improvement effort. Feedback can be provided in many forms: written, verbal, non-verbal, formal, or spontaneous. Feedback can be positive (documenting an action that was done correctly) or corrective (documenting an action that was done incorrectly).

The ultimate goal of feedback is to improve calltaker performance in protocol use—which directly benefits the communication center, responders, bystanders, and, most importantly, those in need of emergency help. Feedback can also be used to increase employee motivation and job satisfaction. AQUA provides information on whether or not an action was done correctly. However, it does not convey how well the action was performed or how performance can be improved. Therefore, it is vital to provide additional written feedback for each case.

Traditional feedback generally provides information about how well past behaviors comply with established standards and expected results. The assumption is that providing information about past behavior will affect future performance. However, this is not always true. Feedback provided in the traditional ways frequently fails to produce improved performance, increased motivation, or higher job satisfaction. In fact, it can actually lead to a decrease in these areas. Feedback is a powerful tool, but too often, it becomes powerfully destructive. There is often a discrepancy between the intent and the outcome of feedback. Traditional feedback can be rife with conflict and criticism, and can even be seen as a waste of time because traditional feedback is deficit based—it focuses on identifying errors and documenting mistakes (deviations).
It should not be surprising that weakness-based feedback can lead to unintended negative consequences. ED-Qs do not like writing it, supervisors do not like giving it, and calltakers do not like receiving it. One reason for the failure of this type of feedback is due to negativity bias. This is a phenomenon in which humans give three times more weight to bad experiences than to good experiences. Humans are hard-wired to notice the negative things in their environment. It is evolutionarily based and was very helpful when we needed to quickly spot a saber-toothed tiger ready to pounce. However, negativity bias can be problematic in our current world where these types of threats are minimal. Consider a calltaker reading feedback written in the ubiquitous “sandwich” style (positive comment/negative comment/positive comment). Which comments will the calltaker focus on and remember? If humans give three times more weight to negative comments, this traditional two to one ratio of positive to negative feedback still leaves the calltaker dwelling primarily on the negative. The ED-Q may have gone to great effort to provide two genuinely positive comments. Nevertheless, the only thing the calltaker remembers is the negative comment in the middle. Is it any wonder that quality assurance is often unpopular and seen as punitive?

Fortunately, there is a way to provide both positive and corrective feedback in a way that guides, motivates, rewards, and educates the calltaker. It is called strengths-based feedback. Strengths-based feedback is defined as:

“Identify[ing]…employees' strengths in terms of their exceptional job performance, knowledge, skills, and talents; provide positive feedback on what the employees are doing to succeed based on such strengths; and finally ask them to maintain or improve their behaviors…by making continued or more intensive use of their strengths.”

A strength, in this context, is a positive personality trait that affects how a person thinks and behaves. Strengths influence how a person operates in the world, how they think about themselves, and how they present themselves to others. Commenting on a person’s strengths draws their attention to it and encourages them to draw on it again in the future.
There are many different strengths inventories (lists). VIA Character Strengths (http://www.viacharacter.org/www/Character-Strengths-Survey) and Strengths Finder (https://www.gallupstrengthscenter.com/home/en-us/strengthsfinder) are two of the most widely known character strengths assessment tools. It is not necessary to use either of these assessments or to memorize any given list of strengths. Simply being aware of what a strength is will help you to identify them when doing call reviews. Identifying and developing these strengths in yourself and those you work with can increase feelings of confidence and enjoyment in the workplace.

In strengths-based feedback, ED-Qs construct comments in two different areas of focus: performance recognition and performance improvement.

### Performance Recognition

Performance recognition comments affirm and encourage the calltaker’s performance by highlighting positive actions. It is vitally important to provide feedback on the calltaker’s positive performance. It can be tempting for an ED-Q to withhold these comments from consistently high performers. However, recognizing positive performance motivates calltakers to continue their effective actions. Acknowledging positive performance on a consistent basis also increases the likelihood that the calltaker will be receptive to other performance improvement feedback and is an effective way to counteract negativity bias. Effective strengths-based performance recognition comments have the following characteristics:

- They are specific.
- They clearly identify the strength the calltaker used.
- They avoid vague generalities such as, “great job!” which leave the calltaker uncertain as to what was great or how to replicate it.
- They use “you” statements to encourage the calltaker to identify personally with the positive action.

<table>
<thead>
<tr>
<th>Objective 4</th>
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</thead>
<tbody>
<tr>
<td>Formulate an effective strengths-based feedback comment for both performance recognition and performance improvement.</td>
</tr>
</tbody>
</table>

![Figure 4.2] Strengths-based feedback can increase feelings of confidence and enjoyment in the workplace.

<table>
<thead>
<tr>
<th>Examples of Strengths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kindness</td>
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<tr>
<td>Fairness</td>
</tr>
<tr>
<td>Leadership</td>
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<tr>
<td>Gratitude</td>
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<td>Perseverance</td>
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<td>Teamwork</td>
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<tr>
<td>Patience</td>
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<tr>
<td>Determination</td>
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<td>Empathy</td>
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</table>

Table 4.1 Examples of strengths.
Examples of Strengths-Based Feedback

Using the following formula for positive performance recognition comments will help ensure that you are writing effective strengths-based feedback.

Scenario + Strength + Action + Outcome = Strengths-Based Feedback

- “The caller was upset that his car was stolen and was belligerent throughout the call (scenario). You used a great deal of patience (strength) when dealing with him. Your tone of voice was calm and even and you explained all your actions (action). A very professional interaction, thank you! (outcome).”

- “The caller stated before the address that he found his mother unconscious and not breathing (scenario). You were paying close attention (strength) and selected the fast track from CEQ3 (action) which allowed this call to be dispatched quickly (outcome).”

- “The caller was very upset and yelling that her stove was on fire (scenario). You focused in on this quickly and had that structure fire dispatched and CID instructions given at lightning speed (strength + action). The caller was out of the house and the crew on the way in less than 40 seconds. You kept her safe (outcome).”

Performance Improvement

Strengths-based performance improvement comments do not focus on the errors made during a call, but identify the actions to be taken in the future to improve performance. In doing this, the ED-Q minimizes the potential for the calltaker to respond negatively to the feedback. Let us use a calltaking example to demonstrate this point. When handling an emergency call, the calltaker should never reprimand a caller for something they did to cause the event. (“Your toddler is choking because you gave him a whole grape? Don’t you know you are supposed to cut them up first?”) Instead, the calltaker should provide reassurance and calming statements and clearly tell the caller how to intervene and hopefully correct the situation (“Kneel behind him and put your arms around his waist…”). In call review, it is equally important to refrain from writing feedback that is accusatory or points out a past failure that the calltaker cannot change. This becomes even more important for cases that were emotionally challenging for the calltaker. This does not mean that you do not provide feedback on incorrect actions. What it does mean is that you construct the feedback in a manner that allows the calltaker to focus on how to be successful in the future, not on how they failed in the past. Effective strengths-based performance improvement comments have the following characteristics:

- They identify the specific action that caused the error (AQUA deviation).
- They use future-forward phrases such as, “in order to,” “to achieve,” and “in the future,” to provide specific recommendations for future success.
- When possible, they suggest a strength the calltaker could use to be better in the future.
- They focus on the behavior and not on the person.

Objective 4

Formulate an effective strengths-based feedback comment for both performance recognition and performance improvement.
• They avoid “I” and “you” statements which tend to personalize the mistake.

Examples of Strengths-Based Feedback

Using the following formula for performance improvement comments will help ensure that you are writing effective, strengths-based feedback.

**Future Forward Intro + Scenario (+ Strength, if possible) + Correct Action + Education/Reason = Strengths-based feedback**

• “When you find yourself (future-forward intro) becoming frustrated with an excited caller who is not listening to you (scenario), patienty and calmly (strength) provide repetitive persistence, ‘Sara, I need you to listen carefully, so I can help you. Sara, I need you to listen carefully, so I can help you. Sara, I need you to listen carefully, so I can help you.’ (correct action). This repetition should help the caller calm down and focus on what you are saying (education/reason).”

• “In the future, (future-forward intro) when cardiac arrest is due to a fentanyl overdose (scenario), select the ‘ventilations-first’ pathway (correct action). Cardiac arrest due to a narcotic overdose is the result of hypoxia and the patient needs ventilations to get oxygen in the bloodstream (education/reason).”

• “To achieve (future forward intro) an early dispatch for an active shooter (scenario), focus (strength) on the answer choices in CEQ4 so you see and select ‘active assailant’ in the list (correct action). This will send a 136-ECHO-1 so it can be immediately dispatched while you continuing with protocol questioning (education/reason).”

Benefits of Strengths-Based Feedback

Strengths-based feedback has been shown to:

• Enhance individual well-being and engagement
• Reduce attrition
• Increase desire to improve
• Increase productivity
• Increase job satisfaction
• Increase the perception of fairness
• Increase motivation to improve performance

It is important to recognize that strengths-based feedback does not eliminate corrective feedback. It simply presents the information in a way that better prepares the calltaker to receive it. In Chapter 2, we briefly discussed fixed and growth mindsets and the importance of fostering a growth mindset in order to develop and improve ED-Q performance. Providing feedback in a manner that focuses on the calltaker’s strengths and also provides suggestion for ways to improve future performance, allows the calltaker to adopt and maintain a growth mindset. This is because the feedback does not focus on behaviors in the past that are unchangeable, but on efforts the calltaker can make in the future to do it right.
Continuing Dispatch Education (CDE)

Continuing dispatch education (CDE) is an essential part of performance management in every public safety communication center. CDE content should focus on improving the knowledge, skills, and attributes of each calltaker. The quality improvement process—especially case review—helps to identify performance trends that may require training. It has been proven over time that calltakers who are well-trained in the current standard of practice provide consistent, above-average performance. This benefits both your agency and the public you serve.

To recertify, each emergency dispatcher must complete a minimum number of CDE hours as published by the International Academies of Emergency Dispatch® (IAED™). The topics for CDE are almost endless and can range from very specific protocol issues to a vast array of topics sparked by real life situations, calltaker interest, and new practices. (Approved CDE Categories can be found on the IAED website.) Ideally, most CDE topics should relate to protocol-oriented issues. Case review and trend analysis will help you select topics that will be most beneficial to the calltakers in your agency.

In most communication centers, calltakers are not trained as field providers (paramedics, firefighters, or police officers). CDE can provide important background information to help calltakers better understand what is happening on the other end of the line. Providing CDE on topics such as basic fire science, officer safety, and simple medical triage can help calltakers relate to responders in a more informed and empathetic manner. Scheduling “ride-alongs” is a common way of helping calltakers see what actually happens in the field during an emergency incident. Ride-alongs can also improve communication and understanding between dispatch and operational staff.

CDE Resources

CDE courses come in many different forms and can be purchased from a number of different vendors. However, CDE does not have to be expensive. Some of the most effective CDE is developed internally by staff who understand local culture, policies, and resources and who can customize training to the calltakers’ exact needs. Another excellent CDE resource is your fellow ED-Qs. Share what you have created and find out what your colleagues are willing to share with you. Why reinvent the wheel when effective training has already been created?

Objective 5

Identify available resources for continuing dispatch education (CDE).
The IAED also provides a number of effective CDE options. Articles published in the *Journal of Emergency Dispatch* and multimedia lessons provided on the *College of Emergency Dispatch* website are designed to teach protocol-specific topics in fun and engaging ways.

**The College of Emergency Dispatch**

![The College of Emergency Dispatch](https://learn.emergencydispatch.org)

Figure 4.3 The College of Emergency Dispatch is an online education portal designed specifically for certified EMDs, EFDs, EPDs, and ED-Qs.

The College of Emergency Dispatch (https://learn.emergencydispatch.org) is an online education portal designed specifically for certified EMDs, EFDs, EPDs, and ED-Qs. In addition to offering the long-running CDE Advancement Series™ (which focuses on protocol-specific training in all three disciplines), the College also offers shorter “target lessons” that present bite-sized learning on specific topics. Courses based on presentations made at the IAED NAVIGATOR conference and an online version of the Journal of Emergency Dispatch CDE quizzes are also available on the College website.

One advantage of the College is its automatic reporting feature. Any lesson completed on the College with a passing score is automatically reported to the learner’s IAED member account and tracked for recertification. All lessons on the College website are IAED approved and fall under the “Official Academy-Created Educational Product/Program” CDE category (which has no maximum hours limitations). This means that, as the College expands to include the types of topics that are likely to come up during case review, calltakers could conceivably take all their required CDE through the College. This reduces the time and hassle of recertifying and helps ED-Qs and supervisors better track the progress of their staff toward recertification.

ED-Qs can use the site to assign content to specific staff members. For example, if a specific calltaker has difficulty with a particular Chief Complaint Protocol, diagnostic tool, or customer service behavior, the ED-Q can assign the calltaker to take a specific lesson that covers that topic.

The IAED is also working on providing ED-Q specific training on the College. ED-Qs can obviously benefit from the protocol training provided on the College; however, the IAED is also working on providing lessons focused on the practice of ED-Q itself.
Performance Improvement

Frequent and consistent case review, individual feedback, and CDE based on trend analysis may be all that is necessary to maintain high-level performance for the majority of calltakers. Often, having a supervisor or trainer sit down with the calltaker and have a conversation about specifically recognized performance trends is sufficient to motivate the calltaker to self-correct any issues in a short period of time. Agencies should, therefore, make an effort to have regular, one-on-one conversations with all calltakers (ideally on a monthly basis). These meetings do not have to be lengthy or arduous, but they need to happen. These coaching sessions should focus on specific performance trends—both positive trends and trends in need of improvement.

Performance Improvement Plans (PIP)

When coaching sessions alone are not reducing or eliminating poor performance, the next step in a progressive system should be the implementation of a performance improvement plan (PIP). Historically, many agencies have skipped this step and progressed directly to discipline or risk management procedures under the assumption that the behavior is intentional. However, a more effective approach is to assume that the calltaker lacks the training to complete the task correctly and that previous coaching sessions were inadequate in time, content, or method.

A specific PIP should be developed between the employee and the training department well before risk management (discipline) procedures are considered. This allows the agency to take a positive approach and construct a clear plan to provide the calltaker with the specific training needed to improve skills, knowledge, and ultimately performance. It is important that the PIP be consistent with current versions of the protocol, performance standards, and agency policy. To be both objective and effective, a PIP should include the following:

1. Specific performance issues to be addressed
2. A clear explanation of expectations related to the performance issues
3. A means to ensure that the employee understands the expectations
4. Educational methods to be employed (texts, videos, podcasts, multimedia, one-on-one training, lecture/classroom training, self-directed research, etc.)
5. Specific content to be covered
6. A means to measure progress (improvement)
7. Benchmarks for performance improvement
8. A time frame for reaching benchmarks

Objective 6

List the elements of an effective performance improvement plan (PIP).
9. Consequences if the performance is not corrected
10. Signatures of both the calltaker and her/his supervisor

SMART is a common mnemonic device used to help employees and training staff produce an effective PIP. The letters in this acronym stand for:

- S — Specific
- M — Measureable
- A — Achievable
- R — Relevant
- T — Time-Bound

It is important that the calltaker understand that the intent of the PIP is supportive and educational—not disciplinary. The PIP process must be separate from the formal management structure of the agency to allow protocol-specific quality issues to remain independent of the risk management or disciplinary procedures of the department. This allows the ED-Q case review process to be perceived by calltakers as being improvement-oriented rather than punitive and will make it much more likely that calltakers willingly participate in the process.

Suggested Methods for Determining Individual Performance Thresholds*

*These methods are suggestions only. The IAED is neither mandating their use nor making any claims regarding their statistical validity.

A common question the IAED receives from its members is: what triggers the need for a performance improvement plan? Is it a single Non-Compliant incident, or is there some threshold a calltaker must breach that mandates the need for a PIP to be implemented? These are good questions without easy answers. The Academy is conducting ongoing research to study predictive performance trending models in an attempt to provide an accurate, scientifically-based answer. Agencies need to look at a number of variables in addition to performance trends (e.g., work attendance, non-protocol related performance, the calltaker’s overall demeanor and attitude) when deciding when to begin a more formal performance improvement process.

For performance trending, the agency must review a multi-month sample of the calltaker’s individual performance reports to have a sample size that is large enough to draw accurate conclusions. Depending on the number of call reviews performed each month, it may take between three and six months’ worth of data to understand how much of an impact specific errors are having on performance.

As research continues on the best way to determine when a performance improvement plan is needed, two methods have been devised that may provide some preliminary guidance. The percentage factoring method uses the percentage of Partial Compliance, Low Compliance, and Non-Compliant cases taken by the calltaker as described below. The weighted level method assigns a specific weighting to each Compliance Level (High Compliance, Compliant, Partial Compliance, Low Compliance, and Non-Compliant) and uses this weighting to establish an overall average as described below.
**Percentage Factoring Method**
*This method is a suggestion only. The IAED is neither mandating its use nor making any claims regarding its statistical validity.*

IAED accreditation standards require that agencies maintain Compliance Level percentages at or below 10% for Partial and Low Compliance cases and at or below 7% for Non-Compliant cases. It may be tempting to use these same thresholds for individual calltakers. However, remember that the Academy accredits agencies, not individual calltakers; it is not appropriate to apply the agency accreditation percentage thresholds to *individuals*. A large number of cases are included in the agency calculations. Using these same calculations for an individual has the potential to greatly over-inflate the significance of the percentage of errors. For example, if an agency conducts 100 case reviews per month and one is Non-Compliant, the agency’s Non-Compliant percentage is 1%. However, if the calltaker who took that Non-Compliant call had just four cases reviewed in that same month, their Non-Compliant percentage would be 25%.

It may, therefore, be considered reasonable to double or triple the agency percentages when looking at individual performance. When using this method, the agency must set a percentage threshold that, once exceeded, will indicate that a PIP may be required. For example, a PIP might be recommended when a calltaker’s Non-Compliance percentage over a period of three to six months exceeds 14% (double) or 21% (triple) or when the calltaker’s Partial Compliance or Low Compliance percentage exceeds 20% (double) or 30% (triple).

Table 4.2 shows an example of a calltaker who does not exceed any of the agency-specified thresholds. When using the percentage factoring method, this calltaker would fall within the regular feedback process.

<table>
<thead>
<tr>
<th>Compliance Level</th>
<th>Num. Cases</th>
<th>Calltaker Percentage</th>
<th>Agency-Specified Threshold (3 times the agency percentage)</th>
</tr>
</thead>
<tbody>
<tr>
<td>High Compliance</td>
<td>5</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>Compliant</td>
<td>2</td>
<td>20%</td>
<td></td>
</tr>
<tr>
<td>Partial Compliance</td>
<td>2</td>
<td>20%</td>
<td>30%</td>
</tr>
<tr>
<td>Low Compliance</td>
<td>0</td>
<td>0%</td>
<td>30%</td>
</tr>
<tr>
<td>Non-Compliant</td>
<td>1</td>
<td>10%</td>
<td>21%</td>
</tr>
</tbody>
</table>

Table 4.2 Percentage Factoring Method (regular feedback process)

Table 4.3 shows an example of a calltaker who exceeds the agency-specified threshold for Low Compliance calls. When using the percentage factoring method, a PIP would be recommended for this calltaker.

<table>
<thead>
<tr>
<th>Compliance Level</th>
<th>Num. Cases</th>
<th>Calltaker Percentage</th>
<th>Agency-Specified Threshold (3 times the agency percentage)</th>
</tr>
</thead>
<tbody>
<tr>
<td>High Compliance</td>
<td>2</td>
<td>20%</td>
<td></td>
</tr>
<tr>
<td>Compliant</td>
<td>1</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>Partial Compliance</td>
<td>2</td>
<td>20%</td>
<td>30%</td>
</tr>
<tr>
<td>Low Compliance</td>
<td>4</td>
<td>40%</td>
<td>30%</td>
</tr>
<tr>
<td>Non-Compliant</td>
<td>1</td>
<td>10%</td>
<td>21%</td>
</tr>
</tbody>
</table>

Table 4.3 Percentage Factoring Method (PIP recommended)
Weighted Level Method*
*This method is a suggestion only. The IAED is neither mandating its use nor making any claims regarding its statistical validity.

Variations of the weighted level method are being used in a number of agencies. When using this method, the calltaker’s cumulative (minimum 3-6 months’ worth of data is recommended) individual performance is compared with the agency’s pre-determined low performance threshold. Calltakers who perform above the threshold receive routine case review feedback. Calltakers who perform below the threshold may require a formal performance improvement plan.

This method is presented as a framework whereby the agency must set its own weighted values for each Compliance Level and calculate the cumulative individual performance value. The agency must then establish its own low performance threshold. It is important to understand that as much data as possible should go into these calculations and that the intent is to identify a trend of low performance. A PIP should not be triggered by a small number of isolated cases which would be better handled by timely case review feedback.

Using the weighted level method involves four preliminary steps.

1. **Assign a value to each Compliance Level.**

<table>
<thead>
<tr>
<th>Compliance Level</th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>High Compliance</td>
<td></td>
</tr>
<tr>
<td>Compliant</td>
<td></td>
</tr>
<tr>
<td>Partial Compliance</td>
<td></td>
</tr>
<tr>
<td>Low Compliance</td>
<td></td>
</tr>
<tr>
<td>Non-Compliant</td>
<td></td>
</tr>
</tbody>
</table>

Table 4.4  Weighted Levels Chart

The IAED has not specified weights for each Compliance Level. The concept is that High Compliance and Compliant cases have a positive value and that Partial Compliance, Low Compliance, and Non-Compliant cases have a negative value. The scale should be as small as possible while allowing for adequate differentiation between Compliance Levels. Consider a range no larger than +10 to -10. Be aware that the weighting scale and PIP threshold described in this manual are examples only. Additional research is needed before the Academy can make specific recommendations for these values.

2. **Calculate each calltaker’s cumulative performance value.**

   a. Identify the number of cases in each Compliance Level.
   b. Multiply the number of cases in each Compliance Level by the weight of that level.
   c. Add up the total for all Compliance Levels.
   d. Divide the total by the total number of cases.
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3. **Determine the average (mean) calltaker performance.**

   After each calltaker’s cumulative performance value has been calculated, you must determine the average (mean) value for the entire agency. This will allow you to compare each individual calltaker’s cumulative performance value with the agency as a whole.

   a. Add each of the individual calltaker cumulative performance values together to get a total.
   
   b. Divide this total by the number of calltakers.
   
   c. The result is the agency average (mean) performance value.

4. **Determine the agency low performance threshold.**

   The average (mean) calltaker performance represents the average performance for the calltakers in your agency. Some calltakers will be above the average; others will be below the average. The low performance threshold is an agency-specified value that falls somewhere below the average and represents the level at which a PIP will be recommended. Agencies must carefully consider what this value should be based on the weighting system used.

   After completing these preliminary steps and determining the agency low performance threshold, the agency should calculate each calltaker’s cumulative performance (step 2) on a quarterly, semi-annually, or monthly running basis and compare it with the established low performance threshold. If the calltaker’s cumulative performance value falls below the low performance threshold, a PIP should be recommended.

   Agencies who choose to use the weighted level method should periodically review their agency averages and low performance threshold and make any adjustments that seem warranted. It may take a bit of trial and error to determine the numbers that will work best for your agency. Trying out different weighting systems may help you refine the process. If you find something that works well for your agency, please share it with the Academy.

   The following is an example of how the weighted level method might be applied. This example should not be considered a recommendation, but simply an illustration of the concept. Additional research is needed before the IAED can make official recommendations.

<table>
<thead>
<tr>
<th>Num. Cases</th>
<th>Weight</th>
<th>Total (Num. Cases X Weight)</th>
<th>Average</th>
<th>Calltaker Cumulative Performance Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>High Compliance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Compliant</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Partial Compliance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low Compliance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Compliant</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 4.5  Calltaker Cumulative Performance Chart

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1. Assign a value to each Compliance Level.

<table>
<thead>
<tr>
<th>Compliance Level</th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>High Compliance</td>
<td>7</td>
</tr>
<tr>
<td>Compliant</td>
<td>6</td>
</tr>
<tr>
<td>Partial Compliance</td>
<td>-1</td>
</tr>
<tr>
<td>Low Compliance</td>
<td>-2</td>
</tr>
<tr>
<td>Non-Compliant</td>
<td>-3</td>
</tr>
</tbody>
</table>

Table 4.6  Example Weighted Levels

2. Calculate each calltaker's cumulative performance value.

<table>
<thead>
<tr>
<th>Num. Cases</th>
<th>Weight</th>
<th>Total (Num. Cases X Weight)</th>
<th>Calltaker Cumulative Performance Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>High Compliance</td>
<td>4</td>
<td>x 7</td>
<td>28</td>
</tr>
<tr>
<td>Compliant</td>
<td>2</td>
<td>x 6</td>
<td>12</td>
</tr>
<tr>
<td>Partial Compliance</td>
<td>0</td>
<td>x -1</td>
<td>0</td>
</tr>
<tr>
<td>Low Compliance</td>
<td>0</td>
<td>x -2</td>
<td>0</td>
</tr>
<tr>
<td>Non-Compliant</td>
<td>1</td>
<td>x -3</td>
<td>-3</td>
</tr>
<tr>
<td>Total</td>
<td>7</td>
<td></td>
<td>37</td>
</tr>
</tbody>
</table>

Table 4.7  Example Calltaker Cumulative Performance Value

3. Determine the average (mean) calltaker performance.

- Total of each calltaker’s cumulative performance value divided by total number of calltakers

\[
\frac{49.1}{10} = 4.9
\]

Average (mean) calltaker performance is 4.9

Table 4.8  Example Agency Average Performance Value

4. Determine the agency low performance threshold.

- Perfect performance is 7 (every calltaker receives High Compliance on every call).
- Agency average (mean) performance is 4.9.
- After discussion, the agency might decide to make the low performance threshold 3.5 (a number a bit below the average)
Using these numbers, a PIP would be recommended for all calltakers with a cumulative performance value below 3.5. In this example, a PIP would be recommended for Calltaker 2 and Calltaker 6.

<table>
<thead>
<tr>
<th>Calltaker 2</th>
<th>3.2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calltaker 6</td>
<td>2.5</td>
</tr>
</tbody>
</table>

Table 4.9 PIP recommended.

**Local Oversight While Research Continues**

As the Academy continues to research the best methods and thresholds for triggering a PIP, agencies should discuss their own approach through the Dispatch Review Committee (DRC) and the Dispatch Steering Committee (DSC) and implement a system that seems reasonable for local needs. Whatever method your agency chooses to use must be objective, transparent, and applied consistently to all calltakers. Remember that consistent and frequent feedback gives calltakers an opportunity to change behaviors and improve performance in real time. Calltakers should never be surprised when a PIP is recommended because they should already be well aware of the performance improvement needed.

**Points to Ponder**

- How can you make it clear to calltakers that the purpose of a performance improvement plan (PIP) is supportive and educational—not disciplinary?
- How will your agency determine when a PIP should be initiated?

**Risk Management (Discipline)**

Unfortunately, there are times when quality-based attempts to improve performance are unsuccessful. Agencies, therefore, need to establish a risk management process for situations in which progressive discipline becomes necessary. The processes and policies related to these practices should be drafted, or at least reviewed, by the DRC and approved by the DSC. Disciplinary procedures must work in concert with local policy, the human resources department, and any memorandums of understanding (MOU) with established unions or other employee bargaining groups.

Risk management procedures should be established in a transparent way that ensures that all stakeholders have had an opportunity to weigh in on this important phase of performance management. What works well for one agency, may not work as well for another. However, there are a couple of general stages that appear in most successful risk management programs: informal fact finding and formal investigation.
**Informal Fact Finding**

The informal fact finding stage is designed to see what the employee remembers about the incident in a way that is not judgmental or accusatory. This can be as simple as asking, “What do you remember about that overdose call this morning” or “Tell me about your conversation with Supervisor Smith yesterday afternoon?” In this stage, you are simply trying to get the employee’s take on the events in question so you can better understand what happened. Your agency should have policies in place that specify the specific expectations and appropriate methods that can be used during the informal fact finding stage. Be aware, that for many issues, informal fact finding may be all that is needed to resolve the complaint. It may be that there was a simple misunderstanding or mischaracterization of the facts. It may also be that a simple problem is discovered that can be resolved with coaching or counseling.

**Formal Investigation**

When informal fact finding is not enough to resolve the issue or when the problem found is serious, a formal investigation may be required. During a formal investigation, specific information or facts (call transcripts, audio files, witness testimony, etc.) are gathered and presented. There will likely be a need to ask more pointed questions to get to the bottom of the issue such as, “Why didn’t you provide airway control instructions in the overdose incident earlier today?” or “Did you call Supervisor Smith a fool?” These proceedings are typically more formal and notes are generally taken documenting what is said and what actions are to be taken. It is important for your agency to have well documented policies and procedures dictating the structure and requirements for these investigations.

**Formal Discipline**

Formal disciplinary practices are not easy, nor are they something agencies should employ without careful consideration about what has been done to avoid this progressive step. However, there are times when a formal, written process is needed to resolve a problem or manage risk. While rare, these procedures can sometimes lead to formal discipline or even termination of employment. It is important to note that public safety agencies are often held to a higher standard than most private companies. Police, EMS, and Fire entities have minimum standards that all employees must maintain. Emergency dispatch should be no different. Once all reasonable efforts have been made to counsel, train, and educate an employee on expected minimum performance standards, termination may be what is best for the agency and even the employee involved.

**Points to Ponder**

- What risk management policies does your agency have in place?
- How can formal discipline protect the agency, the calltaker, and the public?
Calltaker Recognition

Calltaker recognition is another extremely important aspect of performance management. Used effectively, it is a communication tool that reinforces desired performance and behaviors. Recognition is a confirmation of positive performance and acknowledges that the employee is an effective contributor to the workplace.

Recognition can help combat the effects of negativity bias by promoting self-worth, ownership, and a positive image of engaged employees. Workplace cultures suffer when management teams spend more time dealing with problem employees than acknowledging employees who are performing well.

An effective calltaker recognition program must be meaningful, immediate, and powerfully reinforcing. It must include both compliance and performance variables. The desired performance, behaviors, and eligibility requirements must be clearly documented and communicated so everyone understands what is expected.

Calltaker recognition programs come in many different forms. Several examples are included in the list below, but the possibilities are limited only by your creativity.

- **Weekly, monthly, or quarterly rewards.** Monetary awards, gift cards, time off, special parking spaces and other gifts can all make great weekly, monthly, or quarterly rewards. With a little asking around, specific items like event tickets may be donated to reduce the expense.
- **Annual awards.** Annual awards (e.g., dispatcher of the year) often include an emblem, plaque, or gift and should be based on a compilation of performance variables.
- **Peer recognition programs.** These programs allow employees of all levels to recognize one another. These recognitions should be visible so everyone involved can see who is being recognized and why. Some programs allow employees to earn points and rewards as they gain recognition from their peers.
• **On-the-spot rewards.** These are rewards that may be given unexpectedly to employees for random reasons.

• **Public recognition.** This might include recognition via newsletters, local and national media, social media, bulletin boards, or announcements at staff or department meetings.

• **Informal recognition.** Leaders and supervisors can informally recognize employees through handwritten notes, emails, personal calls, or taking an employee out to lunch.

• **Appreciation events.** Employees can be shown appreciation and successes can be celebrated through holiday parties, picnics, cookouts, summer outings, luncheons, and dinners.

**Points to Ponder**

- How does your agency recognize calltaker’s positive actions?
- What can you do to make your recognition programs more meaningful?

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**Accreditation**

The true measure of success for any agency is qualifying as an Accredited Center of Excellence (ACE). After working hard to establish an effective quality management and performance management system, becoming an ACE is the logical next step in providing the highest level of care for the people you serve.

ACE agencies demonstrate an unrivaled commitment to excellence and industry best practice. To earn this distinction, centers must meet or exceed the Twenty Points of Accreditation. Fulfilling these requirements puts your center in the company of elite agencies around the world. ACE recognition is a badge of honor and these agencies lead by example in consistently providing exemplary service.
Benefits of ACE for Calltakers

As an ACE, your agency has an increased sense of accountability, validation, and pride. Calltaking can be a thankless and overlooked job. People do not see all the behind-the-scenes work calltakers do. Most are not aware of the physical, emotional, and mental toll required of the job. Achieving ACE helps calltakers get the recognition they deserve.

After your center has completed the steps to become an ACE, you hold your calltakers to an elevated status. With less room for error, calltakers become more focused and committed to following the protocols and providing exemplary customer service for each caller.

Finally, a tremendous amount of pride and satisfaction comes with achieving ACE. This recognition is tangible proof that you have accomplished something great—it is your MVP trophy.

Benefits of ACE for Management

Communication center managers and directors can justify funding for the ACE process by looking at the effect it has on staff performance. It is easy to see how following the steps to ACE improve call handling and situation outcomes. In addition, accreditation opens the door to more advanced tertiary processes like the Omega version of the protocols and the ability to implement the Emergency Communication Nurse System (ECNS) process for non-emergent medical calls for service. These options are only available to ACE agencies and provide a more appropriate and efficient use of available system resources.

Communication center leaders are constantly looking for ways to get the most out of their staff. You want to be consistent and have high expectations. ACE inspires these behaviors and drives calltakers to be at their best every day. ACE provides assurances that the agency is performing at its best with a minimum of error and risk.

Benefits of ACE for the Public

When people in the communities you serve understand that your center has achieved this accreditation, they will gain an enhanced respect and appreciation for the work you do. The public will feel safer and more secure knowing highly skilled, well-qualified, dedicated calltakers are handling their most urgent needs. Callers will automatically have a greater confidence and peace of mind knowing your center has gone above and beyond the regular call of duty to become an Accredited Center of Excellence.

Benefits of ACE for the ED-Q

Case review becomes much easier when your agency qualifies as an ACE. As we all know, it takes less time and is more enjoyable to review cases that are highly compliant. Attaining the Twenty Points of Accreditation almost ensures a very low error rate in calltaking. This gives ED-Qs the pleasure of devoting more time to making comments on positive performance. There is a great sense of pride for ED-Qs who are part of the QAU in an ACE center as they see how their work directly contributes to the excellence of the agency.
Performance management (PM) is the processes of creating an environment in the agency in which calltakers are enabled to perform at their best. It is a continuous process, involving both management and employees, aimed at creating and maintaining a high performance system. An effective performance management program focuses on the objectives and goals of both the agency and individual employees to recognize and reinforce excellence and to identify and act on opportunities for improvement.

Whether you are directly responsible for analyzing data or simply the recipient of data analysis reports, it is important to understand a few simple statistical concepts and terms. As an ED-Q, it may be useful to take a basic course on statistics or to read a book or two about statistical analysis. In this course, we introduced you to a few basic concepts to get you started.

Providing feedback is a critical component of any quality improvement effort. Feedback can be provided in many forms: written, verbal, non-verbal, formal, or spontaneous. Feedback can be positive (documenting an action that was done correctly) or corrective (documenting an action that was done incorrectly).

Strengths-based feedback is defined as:

“Identifying employee’s strengths in terms of their exceptional job performance, knowledge, skills, and talents; provide positive feedback on what the employees are doing to succeed based on such strengths; and finally ask them to maintain or improve their behaviors...by making continued or more intensive use of their strengths.”

Using the following formula for positive, performance recognition comments will help ensure that you are writing effective, strengths-based feedback.

**Scenario + Strength + Action + Outcome = Strengths-Based Feedback**

Using the following formula for performance improvement comments will also help ensure that you are writing effective, strengths-based feedback.

**Future Forward Intro + Scenario (+ Strength, if possible) + Correct Action + Education/Reason = Strengths-based feedback**

Continuing dispatch education (CDE) is an essential part of performance management in every public safety communication center. CDE content should focus on improving the knowledge, skills, and attributes of each calltaker. The quality improvement process—especially case review—helps to identify performance trends that may require training. It has been proven over time that calltakers who are well-trained in the current standard of practice provide consistent, above-average performance. This benefits both your agency and the public you serve.
When coaching sessions alone are not reducing or eliminating poor performance, the next step in a progressive system should be the implementation of a **performance improvement plan (PIP)**. Historically, many agencies have skipped this step and progressed directly to discipline or risk management procedures under the assumption that the behavior is intentional. However, a more effective approach is to assume that the calltaker lacks the training to complete the task correctly and that previous coaching sessions were inadequate in time, content, or method.

Unfortunately, there are times when quality-based attempts to improve performance are unsuccessful. Agencies, therefore, need to establish a risk management process for situations in which progressive discipline becomes necessary. The processes and policies related to these practices should be drafted, or at least reviewed, by the **Dispatch Review Committee (DRC)** and approved by the **Dispatch Steering Committee (DSC)**. Disciplinary procedures must work in concert with local policy, the human resources department, and any memorandums of understanding (MOU) with established unions or other employee bargaining groups.

Calltaker recognition is another extremely important aspect of performance management. Used effectively, it is a communication tool that reinforces desired performance and behaviors. Recognition is a confirmation of positive performance and acknowledges that the employee is an effective contributor to the workplace.

The true measure of success for any agency is qualifying as an **Accredited Center of Excellence (ACE)**. After working hard to establish an effective quality management and performance management system, becoming an ACE is the logical next step in providing the highest level of care for the people you serve.
Self-Assessment

1. The statistical term mode refers to:
   a. a statistical average calculated by dividing the sum of the values in a data set by their number.
   b. a statistical average determined by finding the middle value in a data set.
   c. a statistical average determined by finding the most frequently occurring value in a data set.

2. Which of the following statements best describes inferential statistics?
   a. statistical techniques used to make predictions about an entire data set based on random samples
   b. statistical techniques used to describe, summarize, or graphically represent data

3. What does the phrase truthful accuracy mean?

4. What is negativity bias and how might it affect the way a calltaker views feedback?

5. Using strengths-based feedback requires the ED-Q to memorize a specific list of character strengths.
   a. true
   b. false

6. The “Official Academy-Created Educational Product/Program” CDE category has no maximum hours limitations?
   a. true
   b. false

7. A specific performance improvement plan (PIP) should be developed between the employee and the training department well before risk management (discipline) procedures are considered.
   a. true
   b. false

Footnotes and References


CHAPTER 5

Records Management and Quality Improvement Reports

Chapter Overview

Considerable amounts of useful data are generated throughout the quality assurance and quality improvement process. This data includes sensitive information that must be kept confidential. Local agencies must have or develop policies and procedures to safeguard this data.

Objectives

Upon completion of this chapter, you will be able to do the following:

1. Explain the importance of keeping QA/QI data confidential.
2. Explain the importance of having clear agency policies concerning record tracking and record retention.
3. List several quality improvement reports available in AQUA® software and explain their use.
4. List several ACE reports available in AQUA® software and explain their use.
5. Explain the routing process for Shift/Team Performance Reports, Field Feedback Reports, and Proposals for Change (PFCs).
Records Management

The case review process produces considerable amounts of data. This data is used to provide performance feedback to individual calltakers, specific shifts, and the agency as a whole. Case review data can also be used to identify performance trends and to assist agencies in identifying areas in need of continuing dispatch education (CDE). Data compiled from a number of different agencies can also be invaluable to the International Academies of Emergency Dispatch® (IAED™) in their efforts to constantly improve the Priority Dispatch System™ (PDS™) protocols. Records management, or the methods by which quality assurance (QA) and quality improvement (QI) records and reports are protected, stored, and shared, is an important part of both quality management (QM) and performance management (PM).

![Figure 5.1](image.png)

Figure 5.1  To be useful, QA/QI data must be shared with those who can use it to improve their own performance and with those who have the responsibility of helping others to improve.

To be useful, QA/QI data must be shared with those who can use it to improve their own performance and with those who have the responsibility of helping others to improve. At the same time, it is important that this potentially sensitive data be held confidential and secure from those who do not need to see it. As appropriate, QA/QI data is often shared with the following individuals:

- Calltakers
- Shift supervisors
- Trainers
- The communication center director
- Public safety administrators (fire chiefs, medical directors, and police chiefs)
- Members of the Dispatch Review Committee (DRC)
- Members of the Dispatch Steering Committee (DSC)
CONFIDENTIALITY

QA/QI staff have access to a number of confidential performance records. It is important to understand that the Quality Assurance Unit (QAU) produces data that may sometimes be controversial or unpleasant for the recipient. Although comments and the content of the Incident Performance Reports (IPR) are meant to be confidential, calltakers often discuss reviews with their colleagues. However, this does not give ED-Qs a license to share confidential information with others. It is essential for ED-Qs to keep confidential information confidential even when calltakers seem willing to share their own information with others. ED-Qs must not discuss confidential information about any call or any calltaker’s performance with anyone who is not authorized to access the information. Doing so erodes calltaker trust and may create legal problems for the agency or the ED-Q.

Agencies should have mechanisms in place to help ensure that QA/QI records are never left around for others to find. One way to avoid this problem is to distribute electronic copies of the reports instead of printing hard copies. A careless calltaker or ED-Q can accidentally leave a hard copy of a report on a break room table or in another common area of the communication center. Distributing only electronic copies of these reports reduces this possibility and helps maintain confidentiality. If your agency does choose to use hard copies, be sure that employees are aware of the problems that might occur if they leave them in a commonly accessible location.

It is becoming more and more frequent for ED-Qs to be asked to provide a review on specific cases as supportive evidence for other agency inquiries. In these cases, ED-Qs should review and document calltaker compliance without passing judgment, just as they would for any other case. Also like other cases, these special cases must be kept confidential. It should be up to the supervisor to review calls for adherence to communication center rules and procedures. It is not within the roles and responsibilities of an ED-Q to recommend or suggest any level of discipline for an individual calltaker at any time.

Finally, it is important to understand that, in addition to calltaker confidentiality, ED-Qs also have a duty to maintain caller or customer confidentiality. It is important for all communication center personnel to understand the liability issues involved with discussing confidential customer information outside of the communication center. It is perhaps inevitable that calltakers will discuss individual cases among themselves. However, it is essential that these conversations remain within the confines of the communication center.

RECORD RETENTION

Anyone involved in the QA/QI process must understand that the records and reports produced should have a lifespan, meaning there needs to be a finite timeframe records are kept. These records often contain private and confidential personnel information that can affect someone’s career. It is, therefore, critical that each agency have an established, well-documented method for controlling the retention of, and access to, all records within the process.
Be aware that information is only useful if you can find it when you need it. Important records and reports must be filed in a way that makes it easy for you to find them when necessary (now, tomorrow, and next year). It is imperative that you develop a filing system that has an individual QAU file for each calltaker that is separate from the employment file kept by the human resources or personnel department. Only QA/QI records are to be kept in the QAU file. The IAED strongly recommends that these files be primarily stored in an electronic format on a secured drive that can only be accessed by authorized personnel. Shown below is an example of a file structure that a QAU team might use to electronically file QA/QI records. In this example, the name of the primary files (e.g., CLJE9898, DABR1341) corresponds to the calltaker’s agency ID. The subfolders (e.g., Commendations, Monthly IPR 2018) are clearly named to identify their contents.

![Figure 5.2 An example of an electronic QAU filing system.](image)

Exactly how agencies file and sort this information is up to agency policy. However, it is generally easiest to have a main file for each calltaker so that all of that calltaker’s information is grouped together for easy access.

As previously mentioned, the IAED recommends that agencies have a specific document retention policy for any document or report that is used in the QA/QI process. These documents might include, but are not limited to the following:

- Incident Performance Reports (IPR)
- Individual Performance Reports (quarterly, yearly, etc.)
- Field Feedback Reports
- Commendations
- Performance improvement plans (PIPs)
- Documented coaching session reports

As with all other formal documents, calltakers should know how long these records can stay in their QAU file and how they can be viewed or amended. Document retention policies are commonly drafted by the DRC and should always be in concert with existing agency policy. When using AQUA® software, all records remain in the database unless they are purposely archived or deleted. This means that a specific record or report can be run at any time using the date, incident, or calltaker filters. Understanding this concept can dramatically reduce the number of records or reports an agency chooses to store externally from the secured AQUA database. This software capability should be considered as agencies create or edit record retention policies.
Record Tracking

It is important for QA/QI staff to keep track of what records are sent to whom, when the records were sent, and what is expected to be done with the records after they are used. For example, a quarterly Individual Performance Report, a specific Incident Performance Report (IPR), and a copy of a performance improvement plan (PIP) might be sent to a supervisor to review with a calltaker. It is important for the QAU to keep track of who the documents were sent to and when they were sent. It is also important to track who has rights to keep copies of these records (e.g. the calltaker), how and when records should be returned to the QAU (if necessary), and how and when copies of the records need to be destroyed or deleted.

It is important to carefully consider how your agency will track QA/QI records. The IAED recommends agencies produce a documented tracking method that allows QA/QI staff to know where sensitive information has been sent and to provide clear direction to recipients as to how and when the records should be stored, returned, or appropriately destroyed. There are a number of commercially available records management systems and learning management systems that can assist QA/QI staff in keeping tabs on this important information. However, a password protected spreadsheet combined with email tracking might also do the trick. In this age of technology and online document review, it is important for all agencies to define, in policy, how sensitive information is shared, stored, and retained. This is usually managed by a document retention policy which outlines the various processes for different types of documents. It is important that calltakers know where their information is and who has access to it.

![Figure 5.3](image.png) It is important that calltakers know where their information is and who has access to it.

Critical Concepts

The IAED recommends agencies produce a documented tracking method that allows QA/QI staff to know where sensitive information has been sent and to provide clear direction to recipients as to how and when the records should be stored, returned, or appropriately destroyed.

Points to Ponder

- What can you do to help ensure that confidential documents remain confidential?
- Does your agency have clear policies in place concerning record tracking and record retention?
- Does your agency have a clear computer filing system in place?
Quality Improvement Reports

AQUA generates a number of quality improvement reports. Training courses on AQUA software, including a comprehensive understanding of all the reports and how to run them, are available through Priority Dispatch Corp.™ (PDC™). This chapter is designed to briefly introduce you to how each of the reports should be used to have the maximum benefit for decision making and for changing system performance in a positive way.

AQUA reports provide data for individual incidents, individual calltakers, shifts/teams, and for the agency as a whole. The intent of these reports is to provide information about the performances that have been recorded. Although there are deviation levels attached to each performance, the quality improvement (QI) focus should be on performance (what was done correctly and what needs to be done better in the future). When a calltaker reads a question incorrectly, AQUA assigns a deviation for the behavior. Be aware that the level of deviation may vary based on the intent or objective of the question. However, it is not the deviation level that is important, it is the performance (asking a question incorrectly) that needs to be addressed.

Most AQUA reports can be run based on performance or deviation. The deviation reports assist in the accreditation process and can help agencies trend the type or impact of a specific performance. However, it is the performance reports that will really help you pinpoint coaching and training needs. Most AQUA reports are color coded and follow the flow of the incident for easy reading. On the last page of applicable reports are a color key, comments, and a compliance summary designed to help you interpret the results.

Incident Performance Report (IPR)

The Incident Performance Report (IPR) is a detailed report showing calltaker compliance to each aspect of a reviewed case. This report follows the flow of the incident as the calltaker took the call. In addition to showing each individual performance throughout the incident, there is an overall performance summary provided at the end of the report.
This report is generally made available to the calltaker’s shift supervisor on a regular basis and is subsequently reviewed with the calltaker as appropriate. This report can be used to quickly identify problem areas in specific cases or to recognize cases for which the calltaker has done an exceptional job. There are occasions when IPRs are generated as a result of an operational feedback request or by request of an individual calltaker. It is also becoming increasingly common for other professional bodies, such as medical examiners, to request an audio recording and IPR for specific cases as part of their investigation.

Performance Report (Individual/Shift/Agency)

The Performance Report is designed to identify performance trends over a prescribed period of time. It can be run for an individual, a shift, or an entire agency and graphically represents trends for every performance tracked on the Incident Performance Report (IPR). This report is an important trending tool to identify current performance status. It will identify areas of excellent performance as well as areas in need of improvement. The information contained in this report provides a foundation for calltaker recognition, CDE development, and focused review practices. This information may also help generate appropriate Proposals for Change (PFCs) to submit to the IAED. As with any data-driven report, there must be enough information in the database before this report can be considered statistically relevant. One or two cases is not enough to show trends for an individual, let alone trends for an entire shift or agency. Including data from several months-worth of call reviews will paint a clearer picture.

• The Individual Performance Report should be discussed with the individual calltaker on a monthly, quarterly, and annual basis. Both the calltaker’s supervisor and the calltaker should sign a copy of the report and record comments when necessary.

• The Shift Performance Report is used to identify performance trends for an entire shift or team. This report can be used to help supervisors and DRC members identify if there are unique training needs associated with a specific shift or team. This report should be posted monthly in an area where it can be seen by all calltakers on the shift.

• The Agency Performance Report is used to identify overall performance trends for the entire agency. This report will help you plan agency-wide CDE and is useful for strategic planning. This report is typically shared with and monitored by both the DRC and the DSC and should be posted monthly in an area where it can be seen by all calltakers in the agency.
Deviations Report (Individual/Shift/Agency)

The Deviations Report provides the same basic information as the Performance Report, but is color coded to show the deviation level (CRITICAL, MAJOR, MODERATE, MINOR) associated with specific performance items. The Deviations Report can be useful in identifying the potential impact of certain trends. The Shift and Agency Deviations Reports may be useful for agencies who are working toward accreditation as it shows exactly where CRITICAL, MAJOR, MODERATE, and MINOR deviations are occurring. The IAED recommends that the Individual Deviations Report be used only as part of a performance improvement plan (PIP).

QI Report (Individual/Agency)

The QI Report, sometimes referred to as the parking lot report, provides a high level performance summary. It shows the number of cases in each Compliance/Review Level and shows the total number of deviations grouped by deviation level (CRITICAL, MAJOR, MODERATE, MINOR). This report is required by Point 8 of the Twenty Points of Accreditation. The initial Agency QI Report (generated from the first month of using AQUA) is required in partial fulfillment of the ACE requirement for historical data.

Reviewer Comparison Report

The Reviewer Comparison Report is used when an agency has two or more ED-Qs performing case review. It shows a percentage breakdown of reviews grouped by Compliance/Review Level for each ED-Q. The intent of the report is to show inter-rater variability within the QAU. This report should be reviewed and discussed at each QAU meeting. One of the highest goals for the QAU should be to review calls as close to the same way as possible. This helps maintain credibility within the agency.

Field Feedback Report (Local Format)

A Field Feedback Report can be initiated by field responders, the QAU, shift supervisors, or individual calltakers. It is not an AQUA report; local agencies may create their own format based on local needs. A Field Feedback Report is often generated when the dispatch code does not match what was found at the scene or the responders have questions or concerns about the triage of the call. There can be a number of reasons for this and it is up to the QAU to investigate objectively to determine how or why the code was achieved. A Field Feedback Report might also be generated when field providers recognize exemplary performance on the part of a calltaker or the communication center in their management of a difficult incident.

The following steps briefly outline how a Field Feedback Report can be produced and used within an agency:

1. A Field Feedback Report is usually initiated by field responders and sent to the QAU through the locally determined chain of command.
2. The QAU reviews the call related to the incident and, when necessary, the calltaker and her/his supervisor are interviewed about the incident.
CHAPTER 5  RECORDS MANAGEMENT AND QUALITY IMPROVEMENT REPORTS

3. Upon completion of the report (which should be within 14 days of receipt by the QAU), the initiator is contacted, when possible, to advise of the outcome.

4. Copies of the report are held in a separate Field Feedback Report file. Further copies of the report should be made available to the DRC and to the communication center director (or appropriate public safety administrator) when appropriate.

ACE Reports

Agencies in the process of applying to become an IAED Accredited Center of Excellence (ACE) and those that are maintaining their ACE status must be familiar with the AQUA ACE Reports. To complete the Twenty Points of Accreditation, an agency is required to submit an initial QI Report (Point 8), Determinant Drift Reports (Point 9), Incident Performance Reports (Point 10), and a Field Feedback Form (Point 11). However, the ACE reports described below can be useful to any agency that wants to see how they measure up to Academy Standards. These reports can function as a report card for management about how well the agency is performing.

Determinant Drift Report

The Determinant Drift Report shows incidents of over- and under-response. It tells you how well your center is meeting the needs of your customers and how much risk (under-response) and waste (over-response) the calltakers are creating for your agency.

- Risk occurs when the calltaker has under-prioritized the call (assigned a lower priority code than warranted). This puts the customer at risk by assigning an inappropriate level of response (under-response), which may impact the care detrimentally.

- Waste occurs when the calltaker has over-prioritized the call (assigned a higher priority code than warranted). This creates potential waste for the agency by using more resources, or more advanced resources, than necessary to handle the situation. Over-prioritization can also result in unnecessary lights-and-siren responses increasing fuel and vehicle maintenance costs and putting both responders and the general public at risk for increased Emergency Vehicle Collisions (EVCs).

ACE Performance Report

The ACE Performance Report is an agency performance report that summarizes all random case reviews for each calendar month. This report indicates the percentage and number of calls that fall within each Compliance/Review Level: High Compliance, Compliant, Partial Compliance, Low Compliance, and Non-Compliant. This report also provides the Percentage of Deviations for CRITICAL, MAJOR, MODERATE, and MINOR deviations.

To attain and maintain ACE, an agency must maintain performance at or below the accreditation thresholds. These thresholds are available on the IAED website (http://www.emergencydispatch.org/Accreditation).

Objective 4

List several ACE reports available in AQUA® software and explain their use.
ACE Performance Benchmark (Shift/Agency)

The ACE Performance Benchmark provides a graphical representation of the information provided in the ACE Performance Report. It can be generated for a shift or for the entire agency and provides a detailed breakdown of the Percentage of Deviations by performance category (Case Entry, Chief Complaint Selection, Key Questions, Final Coding, Dispatch Life Support, and Customer Service).

This report is very useful for providing an overview of performance trends to oversight committees such as the DRC and DSC. It can also be used to show calltakers a performance snapshot and might be useful in setting certain performance goals.

Master Dispatch Analysis Report (ProQA®)

The Master Dispatch Analysis Report is a ProQA® report that can be used to fulfill the requirements for Point 17 of the Twenty Points of Accreditation (provide the number of occurrences for each dispatch code in a six-month-period). However, even if your agency is not yet working toward ACE, the Master Dispatch Analysis Report is one of the most comprehensive reports offered in ProQA and can be very beneficial in your quality improvement efforts. It provides the following data broken down by individual Chief Complaint:

- The average time in Case Entry & Key Questions
- The number of cases in each Determinant Level as well as the average time to queue
- A comparison of the averages for each specific Chief Complaint with the total averages for all Chief Complaints
- The number of cases for each dispatch code (including suffixes)

If you are unfamiliar with the host of reports included with ProQA, we encourage you to learn more about them by contacting your Priority Dispatch Corp.™ (PDC™) Client Services Representative to schedule a course. They contain a wealth of useful information.

QAU Report Routing Guides

The following QAU Report Routing Guides provide sample recommendations for how specific quality improvement reports might be routed through your agency. Your agency should develop similar routing plans for each of the reports used in your quality improvement efforts.

Shift/Team Performance Report

The Shift/Team Performance Report should be generated monthly and is sent to the communication center manager or their designee (e.g., operations manager, assistant director). The communication center manager (or designee) reviews the report with the applicable shift supervisor and a copy is posted where it can be seen by all members of the shift/team. Additional copies of the report are made available to the DRC and DSC. When applicable, a copy of this report should also be made available to an IAED representative during the accreditation process.

Objective 5

Explain the routing process for Shift/Team Performance Reports, Field Feedback Reports, and Proposals for Change (PFCs).
Remember that the Shift/Team Performance Report should be posted for all to see, but Individual Performance Reports should be kept confidential.

A Determinant Drift Report should accompany the monthly Shift/Team Performance Report and should be distributed to the same people for information and comment.

Route the monthly Shift/Team Performance Report as follows:

1. **The QAU Creates the Report Monthly.** The QAU generates a monthly Shift/Team Performance Report for each shift/team and saves a copy in the appropriate file.

2. **The QAU Routes the Reports to the Communication Center Manager.** The QAU attaches a copy of the monthly Shift/Team Determinant Drift Report to the monthly Shift/Team Performance Report and reviews the reports with the communication center manager.

3. **The Communication Center Manager Reviews with the Shift/Team Supervisors.** The communication center manager reviews the report with shift/team supervisors to point out trends and to discuss areas of strength and areas in need of improvement.

4. **The Communication Center Manager Routes the Originals Back to the QAU.** The QAU keeps copies of the original, completed reports in the QAU files. The QAU coordinates with the communication center manager and shift/team supervisors to monitor performance progress when necessary.

5. **The QAU Routes Copies to the Shift/Team Supervisors for Review with Calltakers as Necessary.** When trends are discovered that show excellent performance or areas in need of improvement, the shift/team supervisor may need copies of the report to review with the calltakers on their shift/team.

6. **The QAU Makes Copies for Distribution.** The QAU routes copies of the monthly Shift/Team Performance Report and the Shift/Team Determinant Drift Report to:
   - The communication center manager
   - The appropriate public safety administrator
   - The DRC
   - The DSC
   - The appropriate bulletin board

**Field Feedback Reports**

A Field Feedback Report can be initiated by field responders, the QAU, shift supervisors, or individual calltakers. It is often initiated when findings at the scene do not match the dispatch code. However, a Field Feedback Report can also be used to help in the case review process, as a result of the quality improvement process, or to provide outcomes for calls that calltakers found difficult to process. Copies of Field Feedback Reports should also be made available to IAED representatives during the accreditation process.
Route Field Feedback Reports as follows:

1. **The Field Responders Create a Report.** Field responders create the original Field Feedback Report and route it to the QAU who saves it in the appropriate file.

2. **The QAU Investigates and Produces an Outcome Report.** The QAU investigation may involve the calltaker, shift supervisor, field responders, and any others deemed appropriate. The resulting Outcome Report is attached to the original Field Feedback Report.

4. **The QAU Routes the Report to the Shift/Team Supervisor for Review with the Calltaker As Needed.** When the Outcome Report determines that the calltaker did something exceptionally well or made a mistake that needs correction, the shift/team supervisor reviews the report with the relevant calltaker.

5. **The Shift Supervisor Routes the Originals Back to the QAU.** The QAU keeps copies of the original, completed reports in the QAU file. The QAU coordinates with the communication center manager and shift/team supervisors to monitor performance progress when necessary.

6. **The QAU Makes Copies for Distribution.** The QAU routes copies of Field Feedback Reports and Outcome Reports to:
   - The communication center manager
   - The appropriate public safety administrator
   - The director of operations
   - The calltaker
   - The initiator of the Field Feedback Report

### Proposal for Change (PFC)

The IAED is always interested in well-thought-out Proposals for Change (PFCs). Without continuous feedback from agencies that use the protocols every day, the protocols could not be made better. However, it is important that PFCs follow a standard routing procedure to help ensure that any changes made will benefit all users worldwide. The IAED forwards all valid PFCs to the Council of Standards and informs individual agencies when decisions have been made. PFCs may be initiated by a calltaker, a supervisor, the QAU, or other interested parties, but must be approved by the agency DSC before submission to the IAED. Often, but not always, PFCs arise from issues identified during case review.

Route Proposals for Change as follows:

1. **The Initiator Fills Out the Form and Collects Data.** The initiator fills out the PFC form and collects supporting data, which is attached to the PFC form. Electronic copies of the PFC form are available on the IAED website (http://www.emergencydispatch.org/Resources).
2. **The Initiator Routes the PFC to the Dispatch Review Committee (DRC).** The initiator submits the completed PFC with all supporting data and documents to the DRC. The DRC saves a copy of the PFC in the QAU file. In some cases, it can be helpful for the DRC to contact an IAED representative to see if a similar proposal has already been considered.

3. **The Dispatch Review Committee (DRC) Considers the PFC for Approval.** The DRC carefully reviews the PFC and supporting data. If the DRC does not approve the PFC, feedback is sent to the initiator explaining why. If the DRC approves the PFC, it is routed to the DSC for approval.

4. **The Dispatch Steering Committee (DSC) Considers the PFC for Approval.** The DSC carefully reviews the PFC and supporting data. If the DSC does not approve the PFC, feedback is sent to the initiator explaining why. If the DSC approves the PFC, it is routed to the IAED. Notification is also provided to both the DRC and the initiator letting them know that the PFC has been approved.

5. **The Dispatch Steering Committee (DSC) Routes the PFC to the IAED for Consideration.** The DSC sends locally approved PFCs, along with all supporting data, to the IAED for consideration.

6. **The IAED Acknowledges That They Received the PFC.** After receiving the PFC, the IAED sends an email acknowledging that the PFC was received. This email includes a log number for the PFC that can be used to facilitate future inquiries.

**Summary**

The case review process produces considerable amounts of data. To be useful, QA/QI data must be shared with those who can use it to improve their own performance and with those who have the responsibility of helping others to improve. At the same time, it is important that this potentially sensitive data be held confidential and secure from those who do not need to see it. As appropriate, QA/QI data is often shared with the following individuals:

- Calltakers
- Shift supervisors
- Trainers
- The communication center director
- Public safety administrators (fire chiefs, medical directors, and police chiefs)
- Members of the Dispatch Review Committee (DRC)
- Members of the Dispatch Steering Committee (DSC)
It is important to understand that the Quality Assurance Unit (QAU) produces data that may sometimes be controversial or unpleasant for the recipient. ED-Qs must not discuss confidential information about any call or any calltaker’s performance with anyone who is not authorized to access the information. Doing so erodes calltaker trust and may create legal problems for the agency or the ED-Q.

Anyone involved in the QA/QI process must understand that the records and reports produced should have a lifespan, meaning there needs to be a finite timeframe records are kept. These records often contain private and confidential personnel information that can affect someone’s career. It is, therefore, critical that each agency have an established, well-documented method for controlling the retention of, and access to, all records within the process. It is important to carefully consider how your agency will track QA/QI records. The IAED recommends agencies produce a documented tracking method that allows QA/QI staff to know where sensitive information has been sent and to provide clear direction to recipients as to how and when the records should be stored, returned, or appropriately destroyed.

AQUA® reports provide data for individual incidents, individual calltakers, shifts/teams, and for the agency as a whole. The intent of these reports is to provide information about the performances that have been recorded. Although there are deviation levels attached to each performance, the quality improvement (QI) focus should be on performance (what was done correctly and what needs to be done better in the future). Most AQUA reports can be run based on performance or deviation.

Agencies in the processes of applying to become an IAED Accredited Center of Excellence (ACE) and those that are maintaining their ACE status must be familiar with the AQUA ACE Reports. To complete the Twenty Points of Accreditation, an agency is required to submit an initial QI Report (Point 8), Determinant Drift Reports (Point 9), Incident Performance Reports (Point 10), and a Field Feedback Form (Point 11).
Self-Assessment

1. QA/QI records and reports should be kept only for a finite timeframe defined by agency policy.
   a. true
   b. false

2. The IAED recommends that QA/QI records and reports be primarily stored as paper copies in a locked filing cabinet.
   a. true
   b. false

3. The IAED recommends that the Individual Deviations Report be used only as part of a performance improvement plan (PIP).
   a. true
   b. false

4. The Reviewer Comparison Report should be reviewed and discussed at each QAU meeting.
   a. true
   b. false

5. When reading the Determinant Drift Report, ________ describes a situation in which the calltaker has over-prioritized the call (assigned a higher priority code than warranted).
   a. ideal
   b. risk
   c. waste
APPENDIX

Reference Materials
ED-Q Resources

Throughout the course, your instructor has mentioned a number of tools that will become available to you once you complete your ED-Q certification. We encourage you to use these tools to expand your knowledge and understanding about quality assurance (QA), quality improvement (QI), and quality management (QM). Many of the concepts and workflows highlighted in class discussions will take practice, review, research, consideration, and collaboration to bring to fruition. The learning doesn’t stop with this course; it is just the beginning.

The resources listed below are intended to assist ED-Qs in their continued development. We have included a number of web links (URLs) that we believe will be helpful. Be aware, however, that the actual web address for any of these resources might change over time. ED-Qs should strive to keep an updated list of these sites available for their use.

The Academy also strongly encourages all ED-Qs to search out and maintain current links to sites, articles, and databases that will assist in performance improvement. Suggested topics include:

- Quality assurance, quality improvement, and quality management theory
- Change management/leadership
- Employee development
- Statistics and analytics
- Strengths-based feedback
- Growth mindset
- Adult learning theory
- Effective communication strategies

**IAED™ Website**

www.emergencydispatch.org

The IAED website provides ED-Qs everything they need to know about Academy processes, tools, and educational opportunities. It also provides links to both recent and historical research, important position papers, information about legislation, and articles relevant to emergency dispatch. Members are encouraged to create a members area account to gain access to additional resources available only to IAED members.

members.emergencydispatch.org

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ED-Q Members Area

edqemergencydispatch.org

The ED-Q Members Area is a member's only website available only to certified ED-Qs. It allows you to download ED-Q related documents and provides links to a number of ED-Q related websites. The ED-Q Members Area also includes an online message board that allows you to ask questions, post comments, and even complete exclusive surveys. This tool helps ED-Qs stay connected to a large, quality-focused community. Many ED-Qs have found the discussions included on this message board to be an excellent source of material for creating specific CDE content. To access this website, you must first register as a member on the IAED website. Once you are certified as an ED-Q, you will be able to use your credentials to access the ED-Q Members Area.

Journal Website

iaedjournal.org

The IAED Journal is an award-winning publication that is available as an online resource with information about Academy protocols and training. The Journal provides information about protocol updates, tips and tricks, continuing dispatch education articles, human interest stories, and more. The Journal is truly an invaluable source for ED-Qs from all disciplines to assist in steadily improving calltaker performance.
Annals of Emergency Dispatch & Response Website

www.aedrjournal.org

Annals of Emergency Dispatch & Response (AEDR) is an official international peer-reviewed journal published by the IAED. The journal provides a unique opportunity for researchers in the fields of emergency dispatch, emergency response, pre-arrival medicine, public safety, public health, and emergency nurse telephone triage to share their work worldwide. The AEDR journal avails a perfect platform to demonstrate the importance of research and development in emergency dispatch, the cornerstone of emergency care.

AEDR accepts and publishes research conducted within the domains of emergency medical dispatch, emergency fire dispatch, emergency police dispatch, emergency response, emergency nurse telephone triage and instructions, and public health and public safety telecommunications. The articles include original research, case reports, editorials, perspectives, concepts (e.g., systems analysis, public health and public safety telecommunications and configurations, methods, etc.), and/or reviews.

AEDR is a content-rich source of continuing dispatch education for both calltakers and ED-Qs.

College of Emergency Dispatch
learn.emergencydispatch.org

The College of Emergency Dispatch is an online education portal designed specifically for certified EMDs, EFDs, EPDs, and ED-Qs. In addition to offering the long-running CDE Advancement Series™ (which focuses on protocol-specific training in all three disciplines), the College also offers shorter “target lessons” that present bite-sized learning on specific topics. Courses based on presentations made at the IAED NAVIGATOR conference and an online version of the Journal of Emergency Dispatch CDE quizzes are also available on the College website.

One advantage of the College is its automatic reporting feature. Any lesson completed on the College with a passing score is automatically reported to the learner’s IAED member account and tracked for recertification. All lessons on the College website are IAED approved and fall under the “Official Academy-Created Educational Product/Program” CDE category (which has no maximum hours limitations). This means that, as the College expands to include the types of topics that are likely to come up during case review, calltakers could conceivably take all their required CDE through the College. This reduces the time and hassle of recertifying and helps ED-Qs and supervisors better track the progress of their staff toward recertification.
Accreditation Website

accreditation.emergencydispatch.org

An agency may request access to the IAED Accreditation website when they are ready to begin the process of becoming an Accredited Center of Excellence (ACE). This website serves as the ACE application submission site. However, it is also a valuable ACE preparation site. It contains downloadable resources, how-to videos, templates, and other helpful tools on preparing the Twenty Points of Accreditation for Medical, Fire, Police, and ECNS agencies.

Priority Dispatch Corp.™ (PDC™) Website

www.prioritydispatch.net

Priority Dispatch Corp.™ (PDC™) is the Academy’s partner responsible for producing and maintaining Priority Dispatch System™ products and software based on IAED standards. The PDC website allows agencies to see dates and locations for available certification and software training courses. Individuals can use this site to register for courses and agencies can use the site to schedule their own course. PDC also offers a host of implementation and consulting services that can be obtained by visiting the site. https://prioritydispatch.net/

PDC™ Contact Information

Priority Dispatch Corp.™ (PDC™)

Address: 110 South Regent Street, Suite 500
Salt Lake City, Utah 84111

Phone: 800-363-9127 Toll free (USA/Canada)
801-363-9127 (International)

Fax: 801-363-9144

Website: www.prioritydispatch.net
Self-Assessment Answer Key

Chapter 1: Introduction to Quality Management

1. conformance to requirements (Phillip Bayard Crosby), degree or grade of excellence
2. the process of measuring and evaluating various aspects of performance against the accepted standards
3. a total system approach to continuously improving products and services
4. an umbrella term that encompasses all of the quality assurance and quality improvement efforts and strategies that an organization employs
5. 1. Ensure that employees understand their duties.
   2. Measure and evaluate employee compliance relevant to their duties.
   3. Thoroughly review the effects of compliance, evaluating effectiveness, accuracy, and safety.
   4. Track individual and system performance over time.
   5. Make the necessary changes and assure subsequent improvements in compliance through continuing education and feedback to both the employee and manager.
6. 1. Routine Review
   2. Identify Issues
   3. Identify Solutions
   4. Take Action
   5. Evaluate Action
   6. Improve Performance

Chapter 2: Roles and Responsibilities

1. The ED-Q’s primary purpose is to objectively and consistently measure system performance through random and focused case reviews. ED-Qs compare current performance to minimum expectations (the ED-Q Performance Standards). In addition to identifying incorrect use of the protocol, ED-Qs should acknowledge and highlight exemplary performance.
2. Members of the QAU are responsible for ongoing random and focused case reviews. They are also responsible for tracking trends that arise in the communication center.
3. The Dispatch Review Committee (DRC) is a middle-management working group responsible for formally reviewing compliance reports generated by the QAU for individuals, shifts, and the entire communication center. The DRC looks at and analyzes both problematic and exemplary cases. The DRC also implements and follows through on all report forms, tracking mechanisms, quality assurance processes, and operational feedback reviews.
4. The purpose of the Dispatch Steering Committee (DSC) is to make final decisions and approve or disapprove policy as recommended by the DRC.

5. a.

6. b.

7. a.

Chapter 3: Case Review

1. A calibration case is a case selected for review by all members of the QAU to maintain ED-Q consistency and accuracy. All members of the QAU are asked to review the case independently followed by a discussion to identify areas of agreement and resolve areas of disagreement.

2. Feedback Time: Urgent (72 hour goal)
   Feedback Method: Individual feedback with Incident Performance Report

3. a.

4. a.

5. b.

6. b.

Chapter 4: Introduction to Performance Management

1. c.

2. a.

3. Although there is an element of truth in the idea that data can be presented or organized in a way that proves anything you want it to prove, manipulating data in this way is not helpful in a performance management system. Truthful accuracy is a critical concept of statistical analysis. ED-Qs have an ethical duty to present the facts in a truthful and accurate manner. Agencies that truly want to build a high performance system must be comfortable that the data generated is accurate, objective, transparent, and truthfully presented.

4. Negativity bias describes a phenomenon in which humans give three times more weight to bad experiences than to good experiences. Calltakers generally put more weight on negative feedback and may not even remember positive comments.

5. b.

6. a.

7. a.

Chapter 5: Records Management and Quality Improvement Reports

1. a.

2 b.

3. a.

4. a.

5. c.
A.8 GLOSSARY

**GLOSSARY**

**accreditation** The granting of official approval of an agency by a standard-setting organization following a formal review.

**Accredited Center of Excellence (ACE)** A communication center accredited by the International Academies of Emergency Dispatch® after achieving the required Twenty Points of Accreditation.

**ACE** See Accredited Center of Excellence.

**Additional Information (AI)** A PDS™ protocol component that contains information necessary to process calls as well as general information pertaining to specific Chief Complaint Protocols.

**AI** See Additional Information.

**ALI** See automatic location identification.

**alternative** Words or phrases in the protocol separated by a slash (/) that are designed to give the calltaker a choice of wording to account for varying situations.

**ANI** See automatic number identification.

**AQUA®** A quality assurance software application designed for use with ProQA® and the Priority Dispatch Systems™. AQUA provides tools for data entry, compliance evaluation, record keeping, and trending.

**automatic location identification** The database technology that allows communication centers to identify the location of a caller based on the caller’s phone number. The effectiveness of this technology is limited to the accuracy of the database.

**automatic number identification** The database technology that displays the phone number used by the caller. The effectiveness of this technology is limited to the accuracy of the database.

**average** A general term for a representative or typical value in a data set (see also mean, median, and mode).

**Axioms** Important statements that serve as the basis of many decision-making processes when using a Priority Dispatch System™. They differ from Rules in that they explain why, rather than how to do things.

**CAD** See computer-aided dispatch.

**calibration cases** A case selected for review by all members of the QAU to maintain ED-Q consistency and accuracy. All members of the QAU are asked to review the case independently followed by a discussion to identify areas of agreement and resolve areas of disagreement.

**Case Entry Protocol** A PDS™ protocol that functions as a primary caller interrogation. It directs calltakers to collect the essential information for initial processing and classifying of the incident.

**Case Exit Protocol** An PDS™ protocol that standardizes call termination and provides important instructions for callers.

**case review** An objective measurement of calltaker performance and compliance to the accepted standard.

**CC** See Chief Complaint.

**CDE** See continuing dispatch education.

**CEI** See Critical ED Information.

**certification** The granting of official approval to an individual by a standard-setting organization following a formal process.

**change leadership** The act of driving change through vision, inspiration, and empowerment.

**change management** A systematic effort to keep the change process under control using tools and techniques to minimize distractions and unintended or undesired impacts.

**Chief Complaint (CC)** The primary reason the caller is seeking help.

**Chief Complaint Protocols** Problem-specific PDS™ Protocols. Chief Complaint Protocols function as a secondary interrogation and contain Key Questions, Determinant Descriptors, Post-Dispatch Instructions, Critical ED Information, Dispatch Life Support Links, and Additional Information.

**clarifier** Words in the protocol contained within parentheses or brackets that are designed to be used only when the caller does not understand the original wording of a question or instruction.

**COLD** Routine driving response mode not using lights-and-siren.
**compliance** Adherence to protocol directives and standards.

**College of Emergency Dispatch** An online education portal designed specifically for certified EMDs, EFDs, EPDs, and ED-Qs.

**computer-aided dispatch (CAD)** Technology that uses computers to facilitate calltaking and dispatch operations.

**continuing dispatch education (CDE)** Training designed to keep calltakers up-to-date with current standards of practice.

**Critical ED Information (CEI)** Important information for calltakers that is not designed to be read to the caller.

**data set** A collection of related facts often collected in a database.

**De Luca’s Law** “Emergency Dispatchers will follow all protocols per se, avoiding freelance questioning or information unless it enhances, not replaces, the written protocol questions and scripts.”

**DEs** See **Description Essentials**.

**Description Essentials (DEs)** A list of details that should be obtained when getting a description of weapons, persons, vehicles, boats (vessels), explosive devices, suspicious packages, or suspect/caller characteristics.

**descriptive statistics** Statistical techniques used to describe, summarize, or graphically represent data.

**Determinant Codes** Alphanumeric response codes assigned by combining the Chief Complaint Protocol number, the Determinant Level letter, the Determinant Descriptor number, and the Determinant Suffix letter.

**Determinant Descriptors** Brief descriptions of specific situations to which local agencies can assign specific preplanned response configurations.

**Determinant Levels** A categorization of Determinant Descriptors for each Chief Complaint that reflects the general priority of the incident (OMEGA, ALPHA, BRAVO, CHARLIE, DELTA, and ECHO).

**Determinant Suffix** A code letter added at the end of a Determinant Code (when appropriate) to delineate the type of problem for specific response and safety purposes.

**dispatch definitions** Statements of the precise meaning of a PDS™ term.

**Dispatch Life Support (DLS) Instructions** A general term referring to Post-Dispatch Instructions, Pre-Arrival Instructions, and Case Exit Instructions.

**Dispatch Life Support (DLS) Links** Navigational components of the PDS™ that link identified situations with appropriate Pre-Arrival or Case Exit Instructions based on information collected from the caller.

**Dispatch Review Committee (DRC)** A working group responsible for reviewing the compliance reports generated by the Quality Assurance Unit (QAU) and recommending appropriate action.

**Dispatch Steering Committee (DSC)** The group responsible for making final decisions and approving or disapproving policy recommendations made by the Dispatch Review Committee (DRC).

**DLS Instructions** See **Dispatch Life Support Instructions**.

**DLS Links** See **Dispatch Life Support Links**.

**DRC** See **Dispatch Review Committee**.

**DSC** See **Dispatch Steering Committee**.

**ECCS** See **Emotional Content and Cooperation Score**.

**ED-Q™** See **Emergency Dispatch Quality Assurance Specialist**.

**EFD™** See **Emergency Fire Dispatcher™**.

**EMD™** See **Emergency Medical Dispatcher™**.

**Emergency Dispatch Quality Assurance Specialist (ED-Q™)** Certified professionals who objectively measure system performance through random and focused case review.

**Emergency Fire Dispatcher™ (EFD™)** A title reserved for IAEFD-certified personnel trained in using the FPDS® to process fire-rescue emergency calls.

**Emergency Medical Dispatcher™ (EMD™)** A title reserved for IAEMD-certified personnel trained in using the MPDS® to process medical emergency calls.

**Emergency Police Dispatcher™ (EPD™)** A title reserved for IAEPD-certified personnel trained in using the PPDS® to process police emergency calls.

**Emergency Vehicle Collision (EVC)** A term used to identify vehicle collisions that directly involve an emergency unit.
Emotional Content and Cooperation Score (ECCS) A scale used to quantify the level of emotion and cooperation of the caller.

EPD™ See Emergency Police Dispatcher™.

EVC See Emergency Vehicle Collision.

Fire Priority Dispatch System™ (FPDS®) A unified system for emergency fire dispatching, which includes a Case Entry Protocol, Chief Compliant Protocols, prioritized Determinant Codes, Post-Dispatch Instructions, Pre-Arrival Instructions, and a Case Exit Protocol. The system is maintained by the IAED College of Fellows.

focused A case review selection process in which cases are specifically selected for review based on agency-identified criteria or IAED™ recommendations.

focused sample A collection of data elements that has been selected based on specific criteria.

FPDS® See Fire Priority Dispatch System™.

freelance question Any question that is not written in the protocol or that does not provide an acceptable clarification or enhancement to a question explicitly listed in the protocol.

growth mindset A belief that abilities, skills, and intelligence can be developed.

horizontal dispatch A dispatch configuration method in which separate individuals perform the calltaking and dispatching functions for each incident.

HOT Lights-and-siren emergency driving mode.

IAED™ See International Academies of Emergency Dispatch®.

IAED™ See International Academy of Emergency Fire Dispatch®.

IAEMD™ See International Academy of Emergency Medical Dispatch®.

IAEPD™ See International Academy of Emergency Police Dispatch®.

inferential statistics Statistical techniques used to make predictions about an entire data set based on random samples.

International Academies of Emergency Dispatch® (IAED™) A not-for-profit academic and standards organization made up of the International Academy of Emergency Medical Dispatch®, the International Academy of Emergency Fire Dispatch®, and the International Academy of Emergency Police Dispatch®.

International Academy of Emergency Fire Dispatch® (IAEFD™) A not-for-profit academic and standards organization responsible for researching and setting standards for Emergency Fire Dispatch. The IAEFD certifies EFDs, accredits fire dispatch centers, and continually evaluates, improves, and maintains the Fire Priority Dispatch System™ through the College of Fellows.

International Academy of Emergency Medical Dispatch® (IAEMD™) A not-for-profit academic and standards organization responsible for researching and setting standards for Emergency Medical Dispatch. The IAEMD certifies EMDs, accredits medical dispatch centers, and continually evaluates, improves, and maintains the Medical Priority Dispatch System™ through the College of Fellows.

International Academy of Emergency Police Dispatch® (IAEPD™) A not-for-profit academic and standards organization responsible for researching and setting standards for Emergency Police Dispatch. The IAEPD certifies EPDs, accredits police dispatch centers, and continually evaluates, improves, and maintains the Police Priority Dispatch System™ through the College of Fellows.


key performance indicator (KPI) A measureable value that demonstrates how well an emergency communication center is performing on a day-to-day basis.

Key Questions (KQs) Questions on Chief Complaint Protocols designed to elicit critical incident-specific information from callers.

KPI See key performance indicator.

KQs See Key Questions.

Laws General dispatch principles often presented in an interesting and catchy form.

leading question A question that provides a probable answer to a question.
mean A statistical average calculated by dividing the sum of the values in a data set by their number.

median A statistical average determined by finding the middle value in a data set so that an equal number of elements fall above and below the value.

Medical Priority Dispatch System™ (MPDS®) A unified system for emergency medical dispatching, which includes a Case Entry Protocol, Chief Complaint Protocols, prioritized Determinant Codes, Post-Dispatch Instructions, Pre-Arrival Instructions, and a Case Exit Protocol. The system was created by Dr. Jeff Clawson and is now maintained by the IAED College of Fellows.

mode A statistical average determined by finding the most frequently occurring value in a data set.

MPDS® See Medical Priority Dispatch System™.

negativity bias A phenomenon in which humans give three times more weight to bad experiences than to good experiences.

outcome bias An error made in evaluating the quality of a decision based on the outcome without considering the limited information available at the time the decision was made.

PAIs See Pre-Arrival Instructions.

PDIs See Post-Dispatch Instructions.

PDS™ See Priority Dispatch System™.

performance improvement plan (PIP) A specific plan developed between an employee and the training department to address a performance improvement need. The purpose of a PIP is supportive and educational—not disciplinary.

performance management (PM) A continuous process, involving both management and employees, aimed at creating and maintaining a high performance system and enabling employees to perform at their best.

PIQs See Pre-Instruction Qualifiers.

Police Priority Dispatch System™ (PPDS®) A unified system for emergency police dispatching, which includes a Case Entry Protocol, Chief Complaint Protocols, prioritized Determinant Codes, Post-Dispatch Instructions, Pre-Arrival Instructions, and a Case Exit Protocol. The system is maintained by the IAED College of Fellows.

Post-Dispatch Instructions (PDIs) Case-specific advice and warnings relayed by trained calltakers after dispatching field responders.

PPDS® See Police Priority Dispatch System™.

PQQs See Pre-Question Qualifiers.

Pre-Arrival Instructions (PAIs) Scripted instructions given by trained calltakers that help provide necessary assistance to victims and help control the situation prior to the arrival of field responders.

Pre-Instruction Qualifiers (PIQs) Parenthetical qualifiers that indicate the conditions of use for certain PDS™ instructions.

Pre-Question Qualifiers (PQQs) Parenthetical qualifiers that indicate the conditions of use for certain PDS™ questions.

Priority Dispatch System™ (PDS™) A generic term referring to the Medical Priority Dispatch System™ (MPDS®), the Fire Priority Dispatch System™ (FPDS®), and/or the Police Priority Dispatch System™ (PPDS®).

ProQA® An expert system software tool containing the Priority Dispatch System Protocols. ProQA leads the calltaker through Case Entry, Chief Complaint selection, Key Questions, case prioritization and dispatch, and Dispatch Life Support Instructions. It also provides Critical Calltaker Information when appropriate. Data collected by ProQA can be printed in reports or exported to AQUA® for case review.

protocol A standardized system of processing emergency calls utilizing structured interrogation, pre-scripted instructions, and prioritized Determinant Codes.

QA See quality assurance.

QAU See Quality Assurance Unit.

QI See quality improvement.

QM See quality management.

quality (1) Conformance to requirements (Phillip Bayard Crosby); (2) Degree or grade of excellence.

quality assurance (QA) The process of measuring and evaluating various aspects of performance against the accepted standards.
Quality Assurance Unit (QAU) All of the ED-Qs in an organization.

quality improvement (QI) A total system approach to continuously improving products and services.

quality management (QM) An umbrella term that encompasses all of the quality assurance and quality improvement efforts and strategies that an organization employs.

random A case review selection process in which every case in the database has an equal chance of being selected without bias or pattern.

random sample A collection of data elements selected in a way that ensures that every element in the data set has an equal chance of being selected without bias or pattern.

range The difference between the highest and lowest values within a data set.

repetitive persistence A technique used to calm emotional callers by using repeated phrases in a firm, even tone. The phrase must contain both an action and a reason for the action.

Rules Definitive action statements designed to guide the actions of calltakers.

sample size The number of data elements used to represent a larger data set.

SHUNT A protocol connection that helps in identifying and categorizing the Chief Complaint when a nondescript complaint is initially provided by the caller.

standard An acknowledged measure of comparison for determination of quality or value.

strengths-based feedback A form of feedback that focuses on an employee's personality strengths as opposed to mistakes and weaknesses.

suffix See Determinant Suffix.

trend A general movement or tendency in past performance that can be used to predict future performance.

trend analysis The process of collecting information to identify developing patterns.

vertical dispatch A dispatch configuration method utilizing the same individual to perform the calltaking and dispatching functions for each incident.

wake-effect collision A vehicle collision caused by the passage of an emergency vehicle that does not directly involve the emergency vehicle.
Strengths-Based Feedback

Performance Recognition
Scenario + Strength + Action + Outcome = Strengths-Based Feedback

Performance Improvement
Future Forward Intro + Scenario (+ Strength) + Correct Action + Education/Reason = Strengths-Based Feedback
VIA Classification of Character Strengths and Virtues

**Virtue of Wisdom**
- **Creativity**: Original, adaptive, ingenuity, seeing and doing things in different ways.
- **Curiosity**: Interest, novelty-seeking, exploration, openness to experience.
- **Judgment**: Critical thinking, thinking through all sides, not jumping to conclusions.
- **Love of Learning**: Mastering new skills & topics, systematically adding to knowledge.
- **Perspective**: Wisdom, providing wise counsel, taking the big picture view.

**Virtue of Courage**
- **Bravery**: Valor, not shrinking from threat or challenge, facing fears, speaking up for what's right.
- **Perseverance**: Persistence, industry, finishing what one starts, overcoming obstacles.
- **Honesty**: Authenticity, being true to oneself, sincerity without pretense, integrity.
- **Zest**: Vitality, enthusiasm for life, vigor, energy, not doing things half-heartedly.

**Virtue of Humanity**
- **Love**: Both loving and being loved, valuing close relations with others, genuine warmth.
- **Kindness**: Generosity, nurturance, care, compassion, altruism, doing for others.
- **Social Intelligence**: Aware of the motives and feelings of oneself and others, knows what makes others sick.

**Virtue of Justice**
- **Teamwork**: Citizenship, social responsibility, loyalty, contributing to a group effort.
- **Fairness**: Adhering to principles of justice, not allowing feelings to bias decisions about others.
- **Leadership**: Organizing group activities to get things done, positively influencing others.

**Virtue of Temperance**
- **Forgiveness**: Mercy, accepting others' shortcomings, giving people a second chance, letting go of hurt.
- **Humility**: Modesty, letting one's accomplishments speak for themselves.
- **Prudence**: Careful about one's choices, cautious, not taking undue risks.
- **Self-Regulation**: Self-control, disciplined, managing impulses, emotions, and vices.

**Virtue of Transcendence**
- **Appreciation of Beauty & Excellence**: Awe and wonder for beauty, admiration for skill and moral greatness.
- **Gratitude**: Thankful for the good, expressing thanks, feeling blessed.
- **Hope**: Optimism, positive future-mindedness, expecting the best & working to achieve it.
- **Humor**: Playfulness, bringing smiles to others, lighthearted – seeing the lighter side.
- **Spirituality**: Connecting with the sacred, purpose, meaning, faith, religiousness.
ED-Q Course Evaluation Form

We would like to know your impression of the course you just completed. Your feedback is vital and appreciated. The comments you supply help us ensure consistent quality and continuing improvement for our training. Thank you for your time.

Instructor’s name: __________________________ Course Dates: _________ Course #: __________

City & State/Province where course was taught: _____________________________________________

Please rate each item using the scale provided on the right.

<table>
<thead>
<tr>
<th>Item Description</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. How well did the instructor manage class time (start/end on time, provide appropriate breaks, etc.)?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>2. How well did the instructor act professionally and respectfully?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>3. How well did the course prepare you to evaluate an emergency call?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>4. How well did the course materials (PowerPoint slides, course manuals, etc.) increase your understanding of the course content?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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<tr>
<td>5. How well did the instructor demonstrate knowledge of the course material?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>6. How well did the instructor provide feedback on your performance?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>7. Would you recommend this instructor to others?</td>
<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please see other side for additional items.

**If you prefer to submit this form directly to the Academy, please mail it to: IAED, ATTN: Member Services, 110 South Regent Street, Suite 800, Salt Lake City, UT 84111 or email to: cert@emergencydispatch.org**
8. What could the instructor have done differently to improve the quality of the course?

9. What could be done to improve the materials used in this course?

10. What did you like most about this course and why?

**If you prefer to submit this form directly to the Academy, please mail it to:
IAED, ATTN: Member Services, 110 South Regent Street, Suite 800, Salt Lake City, UT 84111
or email to: cert@emergencydispatch.org**
EMD-Q CERTIFICATION APPLICATION

To receive your EMD-Q Certification Card, please submit this signed and completed application.

WORLD HEADQUARTERS:
110 South Regent Street, 8th Floor
Salt Lake City, Utah 84111, USA
800-960-6236 (USA); 801-359-6916 (Int’l/Local)
801-359-0996 (Fax); www.emergencydispatch.org

Mark “a” for TRUE and “b” for FALSE.

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
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I authorize the release of the results of my certification exam to my employer, prospective employer, and/or the person or entity to whom the cost of certification is invoiced. I hereby affirm that the exam answers are my own work and that all information is correct, and I acknowledge that if a violation is discovered, my application may be rejected or certification revoked. I also agree to abide by the Academy’s Code of Ethics and Code of Conduct and to respect all IAED or PDC intellectual property rights, including copyrights, patents, and trademarks regarding course materials, software, and/or protocols.

Signature of Applicant: ____________________________ Date Signed: ________________

YOU MUST SIGN HERE TO COMPLETE APPLICATION
ED-Q Course Evaluation Form

We would like to know your impression of the course you just completed. Your feedback is vital and appreciated. The comments you supply help us ensure consistent quality and continuing improvement for our training. Thank you for your time.

Instructor’s name: __________________________ Course Dates: _________  Course #: __________

City & State/Province where course was taught: _____________________________________________

Please rate each item using the scale provided on the right.

1. How well did the instructor manage class time (start/end on time, provide appropriate breaks, etc.)?  
   1 2 3 4 5

2. How well did the instructor act professionally and respectfully?  
   1 2 3 4 5

3. How well did the course prepare you to evaluate an emergency call?  
   1 2 3 4 5

4. How well did the course materials (PowerPoint slides, course manuals, etc.) increase your understanding of the course content?  
   1 2 3 4 5

5. How well did the instructor demonstrate knowledge of the course material?  
   1 2 3 4 5

6. How well did the instructor provide feedback on your performance?  
   1 2 3 4 5

7. Would you recommend this instructor to others? Yes No

Please see other side for additional items.

**If you prefer to submit this form directly to the Academy, please mail it to: IAED, ATTN: Member Services, 110 South Regent Street, Suite 800, Salt Lake City, UT 84111 or email to: cert@emergencydispatch.org **
8. What could the instructor have done differently to improve the quality of the course?

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10. What did you like most about this course and why?

**If you prefer to submit this form directly to the Academy, please mail it to:
IAED, ATTN: Member Services, 110 South Regent Street, Suite 800, Salt Lake City, UT 84111
or email to: cert@emergencydispatch.org **

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EFD-Q CERTIFICATION APPLICATION
To receive your EFD-Q Certification Card, please submit this signed and completed application.

WORLD HEADQUARTERS:
110 South Regent Street, 8th Floor
Salt Lake City, Utah 84111, USA

© 2018 IAED

Course Number (ESSENTIAL):

Previously Certified by the Academy? □ Yes □ No; (if yes) Certification Number:

☐ F
☐ M Last Name First Name M.I.

Home Mailing Address (☐ Check here if you would prefer to have mailings sent to your HOME ADDRESS.)

City/Town State/Province Postal Code

Country Home Phone Number

Email Address

Agency Name (place of employment) Job Title

Agency Mailing Address

City/Town State/Province Postal Code

Country Agency Phone Number

☐ Check here if you do not want the above information to appear on the ED-Q Member Website.

Please clearly mark your exam answers below and check ALL of the following boxes for verification:

☐ I am at least 18 years of age.  ☐ I have read and understood the current ED-Q performance standards.

Mark "a" for TRUE and "b" for FALSE.


I authorize the release of the results of my certification exam to my employer, prospective employer, and/or the person or entity to whom the cost of certification is invoiced. I hereby affirm that the exam answers are my own work and that all information is correct, and I acknowledge that if a violation is discovered, my application may be rejected or certification revoked. I also agree to abide by the Academy’s Code of Ethics and Code of Conduct and to respect all IAED or PDC intellectual property rights, including copyrights, patents, and trademarks regarding course materials, software, and/or protocols.

Signature of Applicant: ___________________________ Date Signed: ________________

YOU MUST SIGN HERE TO COMPLETE APPLICATION
**ED-Q Course Evaluation Form**

We would like to know your impression of the course you just completed. Your feedback is vital and appreciated. The comments you supply help us ensure consistent quality and continuing improvement for our training. Thank you for your time.

Instructor’s name: __________________________ Course Dates: _________  Course #: __________

City & State/Province where course was taught: _____________________________________________

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<td>performance?</td>
<td></td>
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<tr>
<td>7. Would you recommend this instructor to others?</td>
<td>Yes No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please see other side for additional items.

**If you prefer to submit this form directly to the Academy, please mail it to: IAED, ATTN: Member Services, 110 South Regent Street, Suite 800, Salt Lake City, UT 84111 or email to: cert@emergencydispatch.org**
8. What could the instructor have done differently to improve the quality of the course?

9. What could be done to improve the materials used in this course?

10. What did you like most about this course and why?
EPD-Q CERTIFICATION APPLICATION
To receive your EPD-Q Certification Card, please submit this signed and completed application.

WORLD HEADQUARTERS:
110 South Regent Street, 8th Floor
Salt Lake City, Utah 84111, USA

Course Number (ESSENTIAL):________________________

Previously Certified by the Academy? □ Yes □ No; (if yes) Certification Number:________________________

☐ F
☐ M  Last Name    First Name    M.I.

Home Mailing Address ( □ Check here if you would prefer to have mailings sent to your HOME ADDRESS.)

City/Town    State/Province    Postal Code

Email Address

Agency Name (place of employment)    Job Title

Agency Mailing Address

City/Town    State/Province    Postal Code

Country    Agency Phone Number

☐ Check here if you do not want the above information to appear on the ED-Q Member Website.

Please clearly mark your exam answers below and check ALL of the following boxes for verification:

☐ I am at least 18 years of age.   ☐ I have read and understood the current ED-Q performance standards.

Mark “a” for TRUE and “b” for FALSE.

1. a b c d
2. a b c d
3. a b c d
4. a b c d
5. a b c d
6. a b c d
7. a b c d
8. a b c d
9. a b c d
10. a b c d

I authorize the release of the results of my certification exam to my employer, prospective employer, and/or the person or entity to whom the cost of certification is invoiced. I hereby affirm that the exam answers are my own work and that all information is correct, and I acknowledge that if a violation is discovered, my application may be rejected or certification revoked. I also agree to abide by the Academy’s Code of Ethics and Code of Conduct and to respect all IAED or PDC intellectual property rights, including copyrights, patents, and trademarks regarding course materials, software, and/or protocols.

Signature of Applicant: ___________________________   Date Signed: _________________