

# Standards of Excellence



EMS Agency Name: \_\_\_\_\_

EMS Agency Number: \_\_\_\_\_

EMS Agency Address: \_\_\_\_\_

Agency Representative Completing Survey: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Contact Telephone Number: \_\_\_\_\_

Name of local government official agency contact: \_\_\_\_\_

Date of Survey Completion: \_\_\_\_\_

Signature of agency leader: \_\_\_\_\_

**Contents**

<b>Section</b>	<b>Subject / Area</b>	<b>Page</b>
	<b>Introduction</b>	3
<b>Section 1</b>	<b>General Information</b>	4-5
<b>Section 2</b>	<b>EMS Leadership and Management</b>	5-7
<b>Section 3</b>	<b>Emergency Medical Dispatch</b>	7
<b>Section 4</b>	<b>Clinical Measures</b>	8
<b>Section 5</b>	<b>Operational Medical Direction</b>	8
<b>Section 6</b>	<b>Life Safety</b>	9
<b>Section 7</b>	<b>Community Support and Involvement</b>	10-11
<b>Section 8</b>	<b>Recruitment and Retention</b>	11-12
<b>Section 9</b>	<b>Performance and Risk</b>	13
<b>Section 10</b>	<b>List of Evidence Requirements for SOE Site Visit</b>	14-16

**Introduction:**

The purpose of this document is to identify and recognize EMS agencies that strive to operate above the standards and requirements of the Virginia EMS Regulations (12VAC5-31). The evaluation consists of criteria that are important to measure in order to ensure an EMS agency operates and performs at a consistently high level. The individual should check the “yes” boxes for those which are pertinent to the agency, or are documents that the agency uses in its operations. “No” boxes should be checked for those items that the agency does not have. Items that are marked with an “E” in the “Evidence” column are documents that will be required to be presented when the survey is submitted, and should be presented in the order listed in the survey, as well as in Section 10 of this survey.

**General Information:** Provides information about geography, type of service delivered by the EMS Agency, and staffing.

**EMS Leadership and Management:** This section addresses agency operational and financial policies and procedures, performance evaluation for personnel, training programs, preceptorship programs, and maintenance of records.

**Emergency Medical Dispatch:** This section addresses the manner in which calls for service are made, how those calls are taken, and any formal dispatch processes that exist.

**Clinical Measures:** Addresses clinical protocols, and the quality assurance/quality improvement processes that the agency uses related to clinical care, as well as how changes to clinical protocols are made.

**Operational Medical Direction:** Addresses the level of interaction of the agency Operational Medical Director (OMD) in the activities of the agency, from both an operational and clinical perspective.

**Life Safety:** Addresses what measures the agency has in place to develop a culture of provider health and safety, injury prevention, as well as any procedures in place to ensure the safety of on scene personnel.

**Community Support and Involvement:** Addresses the relationship with local government, and any benefits or services that local government provides. It also addresses the interaction and involvement the agency has with the community, and partnerships that may exist between the agency and its community. Finally, this section addresses any processes the agency uses to generate revenue to pay for operational costs.

**Recruitment and Retention:** Addresses any structured recruitment programs that the agency has in place, agency expectations for new members, agency orientation programs, retention programs, incentives that the agency offers to members.

**Performance and Risk:** Addresses response time standards, unit placement, and resource management models. It also addresses vehicle and equipment maintenance, repair, and replacement, as well as any risks that are specific to the agency service area.

**Section 1 – General Agency Information**

**General Information:** Provides information about geography, type of service delivered by the EMS Agency, and staffing.

<b>Agency Demographics</b>			
<b>Agency Geographic Area</b>			
	Yes	No	Evidence
System is Urban*			
System is Rural*			
<b>EMS Agency Service Provision</b>			
System is EMS Only			
System is Fire based EMS			
System is First Responder, Non-Transport			
System is Hospital Based EMS			
EMS Provided By Private (for profit) Ambulance			
System is Other (Specify: _____)			
<b>EMS Agency Response Level</b>			
System is First Response only			
System is single tiered - BLS only			
System is single tiered - ALS only			
System is tiered response – BLS/ALS			
System is tiered response – BLS/QRV ALS			
Does the system include fire or law enforcement first responders?			
System is Other (Specify: _____)			

\*Urban is defined by the US Census Bureau as population of 50,000 or more. Rural encompasses all population, housing, and territory not included within an urban area.

**Section 1 – General Agency Information (Continued)**

<b>Agency Demographics (Continued)</b>			
	YES	NO	Evidence
Does the agency have a minimum staffing policy for a BLS Ambulance?			
Does the agency have a minimum staffing policy for an ALS ambulance?			
Does the agency have a minimum staffing policy for a QRV?			
Does the agency have a minimum staffing policy for a rescue vehicle?			
Does the agency have a minimum staffing policy for an Other (specify) type of vehicle?			
Has the agency adopted minimum staffing goals? (see EMS Workforce Retention Tool Kit Book 4)			
<b>General Agency Information Total</b>			
<b>Mostly “No”: Agency should seek to ensure their primary service area has 24 hour coverage.</b>			

**Section 2 – EMS Leadership and Management**

**EMS Leadership and Management:** This section addresses agency operational and financial policies and procedures, performance evaluation for personnel, training programs, preceptorship programs, and maintenance of records.

<b>Agency Policy and Procedures</b>			
	YES	NO	Evidence
Does the agency have a documented set of Standard Operating Procedures/Guidelines (SOP)?			E
Is a copy of the SOP document easily accessible by every member?			
Has the agency SOP document been reviewed and revised in the last five years?			E
Does the agency have Human Resources (HR) policies?			E
Were the HR policies reviewed and revised in the last five years?			E
Does the agency have a dedicated position that maintains & secures HR records?			E
Does the agency have training program/materials that relates to handling HR functions?			E
Is there a Performance Improvement Program for personnel who do not meet policy standards?			E
Does the agency have a formal, written disciplinary review process that is followed prior to dismissing personnel from the organization?			E
<b>Mostly “Yes”: Agency has structured, and easily defensible policies and procedures. Mostly “No”: Agency should consider adopting/revising policies and procedures for operations and/or HR.</b>			

**Section 2 – EMS Leadership and Management (Continued)**

<b>Training &amp; Development</b>			
	YES	NO	Evidence
Is there an established training program to maintain provider skills and competencies?			E
Is there a dedicated training officer position in the agency?			E
Does the agency have a clinical preceptor program?			E
Does the agency have a Personal Development Plan for the Executive Officer (Chief) position?			E
Does the agency have a Personal Development Plan for all personnel?			E
Does the agency provide officers with leadership and management classes?			
Does the agency have succession policies to ensure continuity of leadership?			E
Is an officer appointed to maintain the training records for your personnel?			E
Are the medical records for agency personnel kept separate from the agency personnel files?			E
Are checks and balances in place to ensure files are current and accurate?			E
Are all records maintained by the agency stored to ensure safety from water and fire damage and unauthorized disclosure?			E
<b>Mostly “Yes”: agency has policies and programs in place to ensure structured operations and management. Mostly “No”: Agency should adopt structured policies and programs to ensure proper operation and management of agency.</b>			
<b>Financial Management</b>			
Does the agency develop and approve an annual operating budget?			E
Does the agency have IRS 501(c)3 designation? (If applicable)			E
Is the agency registered as a charitable organization with the State Corporation Commission? (If applicable)			E
Does the agency file appropriate tax reporting documents with the IRS and State Corporation Commission annually? (If applicable)			E
Does the agency have a financial audit performed on an annual basis?			E
Does the agency have policies in place to ensure checks and balances of financial transactions?			E
<b>All “Yes”: agency has structured financial management program. Any “No”: agency should ensure adoption of annual budget, and proper tax reporting.</b>			

**Section 2 – EMS Leadership and Management (Continued)**

<b>Strategic Planning</b>			
Does the agency have a formal, long-term strategic plan?			E
Was the plan developed by the agency Board of Directors or similar?			E
Does the plan include a mission statement?			E
Have the plans and mission statement for the agency been reviewed in the last five years?			E
Are the activities the agency is engaged in and the services provided consistent with the mission of the organization?			
Is the agency strategic plan documented and made available to agency personnel, and the public?			
<b>EMS Leadership and Management Total</b>			
<b>Mostly “Yes”: Agency has demonstrated a reasonable degree of corporate governance. Mostly “No”: Agency should develop strategic and operational plans, including development of a mission statement for the organization.</b>			

**Section 3 – Emergency Medical Dispatch**

**Emergency Medical Dispatch:** This section addresses the manner in which calls for service are made, how those calls are taken, and any formal dispatch processes that may be in place.

<b>Emergency Medical Dispatch</b>			
	YES	NO	Evidence
Does the agency employ emergency medical dispatchers?			
Is the agency a Public Safety Answering Point (PSAP)? – (if “no”, please go to the next section)			
If no, how are the agency’s incoming calls answered?			
Does the PSAP hold any formal EMD accreditations?			E
Are there policies and procedures for the receipt and dispatch of calls?			E
Does the PSAP use a recognized software system for call processing?			
Are the call takers professionally trained in EMD?			
Does the PSAP/System provide Dispatch Life Support (DLS) pre-arrival instructions?			E
Is there a technology link between CAD and agency vehicles?			
Is there a technology link between CAD / Vehicle and PCR to auto populate call information?			
Is there a recognized QA / QI protocol for incoming calls?			E
<b>Emergency Medical Dispatch Total</b>			
<b>Mostly “Yes”: Agency has a structured dispatch program, including integration of software and technology. Mostly “No”: Agency should consider developing a formal EMD program, or creation of partnerships/collaborations with local PSAP’s.</b>			

**Section 4 – Clinical Measures**

**Clinical Measures:** Addresses clinical protocols, and the quality assurance/quality improvement processes that the agency uses related to clinical care, as well as how changes to clinical protocols are made.

<b>Clinical Measures</b>			
	YES	NO	Evidence
Does the agency use the regional EMS council clinical protocols?			
Is there a dedicated individual responsible for the agency QA/QI program?			E
Does a diverse group of agency personnel participate in the agency QA/QI process?			E
Does hospital or medical facility personnel contribute to the QA/QI process?			E
Does the agency share the results of QI review with personnel?			E
Does the agency participate in the regional EMS council performance improvement evaluation?			
<b>Clinical Measures Total</b>			
<b>Mostly “Yes”:</b> Agency has a structured clinical program, with continuous QA/QI activities. <b>Mostly “No”:</b> Agency should have formalized and structured clinical program, with continuous QA/QI activities.			

**Section 5 – Operational Medical Direction**

**Operational Medical Direction:** Addresses the level of interaction of the agency Operational Medical Director (OMD) in the activities of the agency, from both an operational and clinical perspective.

<b>Operational Medical Direction</b>			
	YES	NO	Evidence
Is the agency OMD engaged in the activities of the agency beyond EMS regulatory requirements?			E
Does the agency OMD provide oversight for EMS provider education?			E
Is the agency OMD involved with protocol compliance?			E
Is the agency OMD involved in the disciplinary process as it related to clinical care?			E
<b>Operational Medical Direction Subtotal</b>			
<b>Mostly “Yes”:</b> OMD is actively engaged in the operations of the agency. <b>Mostly “No”:</b> The agency OMD should be closely involved in the operations of the agency, especially in terms of oversight of clinical care.			

**Section 6 – Life Safety**

**Life Safety:** Addresses what measures the agency has in place to develop a culture of provider health and safety, injury prevention, as well as any procedures in place to ensure the safety of personnel on scene.

<b>Life Safety</b>			
	YES	NO	Evidence
Does the agency promote healthy lifestyles?			
Are agency personnel encouraged to stay fit?			
Does the agency require members to sign the Provider Safety Pledge?			
Has the leader of the agency signed the Agency Safety Pledge?			
Does the agency provide exercise equipment for personnel use?			E
Does the agency offer education on nutrition and stress management?			
Is the agency an advocate for the use of Critical Incident Stress Management or similar program?			
Does the agency have a designated Safety Officer?			E
Does the agency provide education to personnel on body mechanics and proper lifting techniques?			
<b>Is there an agency policy for reporting personnel injuries?</b>			E
<b>Does the agency provide universal precautions training?</b>			
<b>Does the agency have established equipment decontamination protocols?</b>			E
Does the agency document completion of annual infection control training?			E
Does the agency require personnel to attend and complete class in hazardous materials awareness courses?			
Are Material Safety Data Sheets (MSDS) accessible to agency personnel?			E
<b>Life Safety Subtotal</b>			
<b>Mostly “Yes”:</b> Agency is developing a culture of provider health and safety. <b>Mostly “No”:</b> Agency should seriously examine policies and procedures related to provider health and safety. <b>Any “no” of a bold face question:</b> immediate corrective action is strongly recommended.			

**Section 7 – Community Support and Involvement**

**Community Support and Involvement:** Addresses the relationship with local government, and any benefits or services that local government provides. It also addresses the interaction and involvement the agency has with the community, and partnerships that may exist between the agency and it’s community. Finally, this section addresses any processes the agency uses to generate revenue to pay for operational costs.

<b>Local Government Interaction</b>			
	YES	NO	Evidence
Do agency representatives attend local government meetings on a regular basis?			E
Does the agency meet with local government officials at least once a year to present organizational status reports?			E
Does the agency have a good working relationship with the local government?			
Does local government provide funding and/or subsidies?			E
Does local government provide staffing?			E
Does local government provide in-kind services? (i.e., vehicle maintenance, etc.)			E
<b>Mostly “Yes”: Agency has positive interaction and engagement with local government. Mostly “No”: Agency should strive to improve interaction and engagement with local government in order to explore funding, staffing, and/or service opportunities/requirements.</b>			
<b>Community Interaction</b>			
Does the agency provide community outreach programs such as CPR, child car seat installation or injury prevention?			
Does the agency hold open houses (or similar) for community education about EMS?			
Does the agency have a customer service survey?			E
Does the agency provide dedicated medical coverage for community events?			
Is the community aware that the agency has volunteer EMS providers? (If applicable)			
Is the community aware that the agency accepts donations? (If applicable)			E
Is there community representation on the agency board of directors (or similar)?			E
Has the agency established a professional working relationship with local media outlets?			
Does the agency have partnerships with local businesses?			E
Does the agency have partnerships with civic organizations?			E
Does the agency receive support from local medical facilities?			
<b>Mostly “Yes”: Agency has a positive interaction with the community they serve. Mostly “No”: Agency should make efforts to improve their interaction with their community.</b>			

**Section 7 – Community Support and Involvement (Continued)**

<b>Agency Funding</b>			
	YES	NO	Evidence
Does the agency undertake fundraising activities?			
Does the agency have adequate funding to cover expenses?			
Is the agency billing for service?			
<b>Community Support and Involvement Total</b>			
<b>Mostly “Yes”: Agency is generating revenue to meet and/or exceed expenses. Mostly “No”: Agency should incorporate fundraising/revenue generating activities to meet financial needs.</b>			

**Section 8 – Recruitment and Retention**

**Recruitment and Retention:** Addresses any structured recruitment programs that the agency has in place, agency expectations for new members, agency orientation programs, retention programs, incentives that the agency offers to it’s members.

<b>Selection Process</b>			
	YES	NO	Evidence
Does the agency have a recruitment officer who handles/tracks all new members?			E
Does the agency conduct recruitment campaigns to attract new members?			
How does the agency determine the number of members needed to meet call demand?			
Does the agency identify potential recruits in the community?			
How often does the agency do recruitment campaigns?			
Does the agency membership reflect the diversity of the community?			
Is the agency recruitment process tailored to parties of various backgrounds, skill sets and experience?			
<b>Mostly “Yes”: Agency has structured recruitment program with consideration of community demographics. Mostly “No”: Agency should establish a structured recruitment program in order to increase agency membership, and consider offering the Keeping The Best! training program.</b>			
<b>Agency Expectations</b>			
Does the agency have written job descriptions for each position within the organization?			E
Does the agency document and communicate agency expectations of personnel to new members?			E
Does the agency document and communicate what the agency provides (materials, uniforms, equipment) to new personnel?			E
<b>Mostly “Yes”: Agency clearly communicates expectations to new personnel, and vice versa. Mostly “No”: Agency should clearly communicate expectations to new members, and provide opportunity for new members to communicate expectations.</b>			

**Section 8 – Recruitment and Retention (Continued)**

<b>Agency Orientation</b>			
	YES	NO	Evidence
Does the agency have a new member orientation program?			E
Does the orientation program for new members have a formal evaluation process upon completion?			E
Does the agency have a probationary membership period?			E
<b>Mostly “Yes”: Agency has structured program to orient new personnel with agency operations. Mostly “No”: Agency should develop a program to orient new personnel to agency operations, with formal evaluation.</b>			
<b>Retention</b>			
Does the agency have a documented plan to retain members?			E
Is the agency able to track the annual retention/turnover rate of their personnel?			
Does the agency maintain an age profile of it’s members?			
Does the agency maintain a years of service profile of it’s members?			
Does the agency provide retention incentives (pay for training, uniforms, recognition)?			E
Does the agency have a service award program?			E
Does the agency hold social events for members?			
Does local government provide incentives for personnel retention (lower property tax, vehicle registration fees)?			E
Does the agency encourage personnel participation in the decision making process?			
How does the agency help members reach their personal goals? (provide examples)			E
Does the agency have a mechanism for personnel to make suggestions for improvement?			
Have the agency’s officers taken the Keeping the Best – EMS Workforce Retention Program class?			
Does the agency offer opportunities for formal training related to recruitment and retention for officers of the organization?			E
Does any member of the agency attend meetings of the Virginia Recruitment and Retention Network?			
Does the agency conduct an exit interview when personnel leave your organization?			E
Does the agency track reasons personnel leave the agency?			E
<b>Recruitment and Retention Total</b>			
<b>Mostly “Yes”: Agency has a structured recruitment and retention program, incorporating selection, agency expectations, and orientation. Mostly “No”: Agency should develop a structured recruitment &amp; retention program; agency should consider offering Keeping The Best! training program.</b>			

**Section 9 – Performance and Risk**

**Performance and Risk:** Addresses response time standards, unit placement, and resource management models. It also addresses vehicle and equipment maintenance, repair, and replacement, as well as any risks that are specific to the agency service area.

<b>Performance Standards</b>			
	YES	NO	Evidence
Does the agency meet the Local Emergency Response Time standard?			E
Do transport times affect ability to respond to subsequent calls in the agency service area?			
Does the agency use strategic unit placement based on call volume and/or location? If yes, has this improved agency response time?			E
Does the agency use a fixed station location model?			E
<b>YES: Agency meets performance standards, NO: agency should examine emergency response standards and policies for areas of potential improvement.</b>			
<b>Vehicle and Equipment Maintenance</b>			
Does the agency have a regular vehicle Preventative Maintenance (PM)/repair plan?			E
Does the agency have a regular equipment Preventative Maintenance (PM)/repair plan?			E
<b>YES: the agency has a structured program in place for the proper care, repair, and replacement of vehicles and equipment. NO: The agency should implement a structured program for the proper care, repair, and replacement of vehicles and equipment.</b>			
<b>Agency Service Area Specific Risks</b>			
Does the agency have specific risks in it's service area that may cause increases in call volume or severity?			E
<b>Performance and Risk Totals</b>			
<b>Mostly "Yes": Agency has plans in place to address potential of specific risks. Mostly "No": Agency should develop plans to address potential of specific risks.</b>			

## **Section 10 – List of Evidence Requirements for SOE Site Visit**

### Section 2 Documents

Documented set of Standard Operating Procedures (SOP).  
Proof of review/revision of the SOP in the last five years.  
Documented set of Human Resources (HR) policies.  
Proof of review/revision of the HR policies in the last five years.  
Identification of dedicated position to maintain HR records.  
Training program related to handling HR functions.  
Performance Improvement program for agency personnel.  
Formal, written disciplinary review process.  
Established training program to maintain skills and competencies.  
Identification of dedicated training officer position.  
Documented clinical preceptor program.  
Personal Development Plan for Executive Officer, as well as for personnel.  
Proof that medical files are kept separate from agency personnel files.  
Check and balance policy to ensure accuracy of files.  
Policy to protect files from damage and/or unauthorized disclosure.  
Proof of an annual operating budget.  
Proof of 501(c)3 designation by the Internal Revenue Service.  
Proof of registration with the State Corporation Commission.  
Proof of appropriate filing of tax documents.  
Proof of an agency strategic plan.  
Proof of development of the plan by agency board of directors.  
Proof of review/revision of the strategic plan in the last five years.

### Section 3 Documents

Proof of formal EMD accreditation.  
Dispatch policies and procedures.  
Proof of use of pre-arrival instructions.  
QA/QI protocol for incoming calls.

### Section 4 Documents

Identification of individual responsible for agency QA/QI program.  
Roster of agency QA/QI committee.  
Proof of medical facility participation in agency QA/QI program.  
Proof of agency sharing results of QI review with personnel.

## **Section 10 – List of Evidence Requirements for SOE Site Visit (Continued)**

### Section 5 Documents

Proof of exercise equipment available to agency members.  
Identification of agency Safety Officer.  
Proof of policy for reporting personnel injuries.  
Proof of agency equipment decontamination protocols.  
Documented completion of annual infection control training.  
Proof of availability of Material Safety Data Sheets.

### Section 6 Documents

Proof of agency Operational Medical Director (OMD) involvement in agency activities.  
Proof of OMD oversight for provider education.  
Proof of OMD involvement with protocol compliance.  
Proof of OMD involvement – with disciplinary process related to clinical care.

### Section 7 Documents

Proof of agency participation in local government meetings.  
Proof of meeting with local government to present agency status reports.  
Proof of funding and/or subsidies local government provides.  
Proof of staffing provided by local government.  
Proof of in-kind services that local government provides.  
Documented customer service survey.  
Proof of community awareness that agency has volunteer personnel.  
Proof of community awareness that agency accepts donations.  
Proof of agency partnerships with local businesses.  
Proof of agency partnerships with civic organizations.

### Section 8 Documents

Identification of agency recruitment officer.  
Written job descriptions for each position within the agency.  
Documented examples of agency expectations of new personnel.  
Documented examples of what the agency provides to new personnel.  
New member orientation documents.  
Personnel formal evaluation process documents.  
Policy related to probationary membership period.  
Documented retention plan for agency personnel.  
Examples of agency retention incentives for members.  
Agency service award program documents.  
Examples of incentives provided by local government.  
Examples of how the agency helps their members reach personal goals.

**Section 10 – List of Evidence Requirements for SOE Site Visit (Continued)**

Section 8 Documents (Continued)

Proof of formal exit interview for personnel who leave the agency.  
Proof that agency tracks the reasons why personnel leave the agency.

Section 9 Documents

Proof of agency response time standard policy.  
Agency resource deployment scheme.  
Documented fixed location model.  
Vehicle preventative maintenance/repair plan.  
Equipment preventative maintenance/repair plan.  
Documentation of specific risks in agency service area, with plan to respond to those events.