



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive



National Ambulance Service (NAS)

Ambulance Operations Procedure

Emergency Calls from/to other Ambulance Service Control Centres

Document reference number	<i>NASCC038</i>	Document developed by	NEOC Managers
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Revision date	31st December 2019	Responsibility for review and audit	NEOC Managers

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1.0 Policy

- 1.1 It is the policy of the National Ambulance Service (NAS) to work in partnership with other agencies to provide safe and effective systems of work and communications so as to enhance service to patients.

2.0 PURPOSE

- 2.1 To reduce the response time to life threatening emergencies.
- 2.2 To ensure in so far as possible that the nearest available resource is dispatched to the call.
- 2.3 To provide NEOC staff with clear and unambiguous procedures to follow when dealing with a call where an emergency response from a neighbouring division would be timelier.
- 2.4 To provide enhanced communication processes and resource awareness between the National Ambulance Service National Emergency Operations Centre (NEOC) and other Ambulance Services with a view to responding more effectively to patient needs.

3.0 SCOPE

- 3.1 This Procedure applies to all Managers, Supervisor and Staff in the NAS.

4.0 LEGISLATION/OTHER RELATED POLICIES

- 4.1 NASCC032 – Call answering and address verification.

5.0 ROLES AND RESPONSIBILITIES

- 5.1 It is the responsibility of each NEOC Manager to ensure that each Supervisor and Staff member is aware of and understands this Procedure.
- 5.2 It is the responsibility of each Manager, Supervisor and Staff member to adhere to this Procedure.
- 5.3 It is the responsibility of the Education and Competency Assurance Team to ensure appropriate safety briefings are included in any related training material.

6.0 PROCEDURE

6.1 On receipt of an emergency call from the Emergency Call Answering Service (ECAS) operator i.e. **call currently within the geographical area of another control centre e.g. NIAS**, then the following procedures should be followed;

- 6.1.1 The call taker will process the call as per MPDS procedure.
- 6.1.2 The dispatcher will activate the closest available resource.
- 6.1.3 Contact the ambulance control centre in that division and establish if they have a resource to respond.
- 6.1.4 If the relevant division has a resource available to respond – establish an ETA for both resources.
- 6.1.5 If the closest resource being dispatched is by a neighbouring control centre – pass full details of the call to them.
- 6.1.6 On confirmation of activation by the relevant division, stand down the initial resource.

6.2 On receipt of an emergency call from another control centre **e.g. NIAS**, control then the following procedures should be followed;

- 6.2.1 Process an emergency call as normal and obtain dispatch code from requesting control centre.
- 6.2.2 Establish with the dispatcher if there is a resource available for allocation.
- 6.2.3 Inform requesting control of our ETA to the emergency call and agree which resource is nearest to the call.

6.2.4 Should the resource be accepted, request the following information from the requesting control centre;

- Phone number of caller
- Address (patient location)
- Exact location of the emergency (directions/geographical landmark)
- Name of patient
- Age
- Gender
- Chief complaint
- Conscious/Breathing
- Dispatch code
- Include any warnings that may have been receive.

6.2.5 The dispatcher will activate a resource as per procedure and confirm this to the requesting control.

6.2.6 Where there is disagreement between two control centres, the matter should be referred immediately to the Duty Supervisor or Duty NEOC Manager.

6.2.7 If the resource is declined, the call taker is to record the location the resource was offered from and that it was declined, then close the call.

7.0 IMPLEMENTATION PLAN

7.1 This Procedure will be circulated electronically to all Managers, Supervisors and Staff.

7.2 This procedure will be available in electronic format and paper format in the control room for ease of retrieval and reference.

8.0 Revision History: (This captures any changes that are made to a SOP when it has been revised. This may be placed at the back or close to the front of the document according to local preference.)

No	Revision No	Date	Section Amended	Approved by
1.	3	24-07-14	General review and update to bring in line with current practices	Sean Brady
		22/01/2017	<ul style="list-style-type: none"> • Title change • 2.4, change to NEOC • 7.1, change wording of ECAS, removal of NIAS. 	

9.0 Appendices:

Appendix I –

Document Control


- Document Control No. 1 Peer Review Policy, Procedure, Protocol or Guidance
- Document Control No. 2 Key stakeholders Review of Policy, Procedure, Protocol or Guidance Reviewer Statement
- Document Control No. 3 Signature Sheet

10.0 Signatures of Approval



National Control Operations Manager
On Behalf of the National Ambulance Service

Date: 3rd January 2017



National Ambulance Service Director
On Behalf of the National Ambulance Service

Date: 3rd January 2017

Document Control No. 1 (to be attached to Master Copy)

NASCC038 Emergency Calls from/to other Ambulance service Control Centres

Reviewer: The purpose of this statement is to ensure that a Policy, Procedure, Protocol or Guideline (PPPG) proposed for implementation in the HSE is circulated to a peer reviewer (internal or external), in advance of approval of the PPPG. You are asked to sign this form to confirm to the committee developing this Policy or Procedure or Protocol or Guideline that you have reviewed and agreed the content and recommend the approval of the following Policy, Procedure, Protocol or Guideline:

Title of Policy, Procedure, Protocol or Guideline:

NASCC038 Emergency Calls from/to other Ambulance service Control Centres

I acknowledge the following:

- I have been provided with a copy of the Policy, Procedure, Protocol or Guideline described above.
- I have read Policy, Procedure, Protocol or Guideline document.
- I agree with the Policy, Procedure, Protocol or Guideline and recommend its approval by the committee developing the PPPG.

Name

Signature (Block Capitals)

Date

Please return this completed form to:

Name: Niamh Murphy

Contact Details: Corporate Office

National Ambulance Service

Rivers Building

Tallaght Cross

Dublin 24

email niamhf.murphy1@hse.ie

Key Stakeholders Review of Policy, Procedure, Protocol or Guidance Reviewer Statement

Reviewer: The purpose of this statement is to ensure that a Policy, Procedure, Protocol or Guideline (PPPG) proposed for implementation in the HSE is circulated to Managers of Employees who have a stake in the PPPG, in advance of approval of the PPPG. You are asked to sign this form to confirm to the committee developing this Policy or Procedure or Protocol or Guideline that you have seen and agree to the following Policy, Procedure, Protocol or Guideline:

Title of Policy, Procedure, Protocol or Guideline:

NASCC038 Emergency Calls from/to other Ambulance service Control Centres

I acknowledge the following:

- I have been provided with a copy of the Policy, Procedure, Protocol or Guideline described above.
- I have read Policy, Procedure, Protocol or Guideline document.
- I agree with the Policy, Procedure, Protocol or Guideline and recommend its approval by the committee developing the PPPG.

Name

Signature (Block Capitals)

Date

Please return this completed form to:

Name: Niamh Murphy

Contact Details: Corporate Office

National Ambulance Service

Rivers Building

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Dublin 24

email niamhf.murphy1@hse.ie

