



People You Know.
Extraordinary Care.

POLICY:	400.17 AGENCY COORDINATOR		
APPROVAL:	VICE PRESIDENT OF PROFESSIONAL SERVICES; MANAGER OF EMS;		
EFFECTIVE DATE: 2/20/2024			ORIGINAL EFFECTIVE DATE: 08/16
DEPARTMENT SPECIFIC		EMERGENCY MEDICAL SERVICES	

I. PURPOSE:

To identify the responsibilities and qualifications of the Emergency Medical Services (EMS)/Emergency Medical Dispatcher (EMD) Agency Coordinator.

II. POLICY:

Each providing agency shall designate a Morris Hospital EMS/EMD Agency Coordinator (EMSC) who will function as a liaison between the provider, the Morris Hospital EMS System office, and other members of the System. Ideally, the individual will function at the level comparable to, or above the level of service, which they provide to the community.

A. RESPONSIBILITIES OF THE EMS/EMD DEPARTMENT COORDINATOR:

1. Communicate to all Chiefs/Chief Executive Officers (CEOs) and pre-hospital providers/EMDs the changes and updates in System activities and/or policies.
2. Maintain current records on all pre-hospital providers. These records will include proof of valid licensure as required by Ill. Adm. Code § 515.170, as well as current American Heart Association BLS (CPR) Healthcare Provider, American Heart Association Advanced Cardiovascular Life Support provider, American Heart Association/American Academy of Pediatrics Pediatric Advanced Life Support provider (Employer Responsibility).
3. Be familiar with the MHEMSS policies & procedures; know where and how to reference them; disseminate updates accordingly to their EMS Personnel; ensure all training necessary for compliance is provided to every Agency Vehicle Service Provider.
4. Forward required EMS/EMD information to the Morris Hospital EMS System office.
 - a. Monthly quality assurance statistics (electronic or paper data as appropriate)
 - b. Annual report
 - c. Personnel changes
 - d. Equipment changes (All equipment must be approved by the Morris Hospital EMS System prior to being placed on any licensed BLS/ALS transport and non-transport vehicles)
 - e. EMD centers must submit card set changes to the system office for approval prior to implementation.
 - f. Pending litigation
 - g. Changes in service
 - h. Exposures
 - i. In house CE rosters
 - j. Narcotic discrepancies (ALS only)
 - k. Monthly controlled substance inventory sheets (ALS only)

