

**Hennepin County EMS Council
Communication Policy
Adopted by the EMS Council 10/13/2005
Amended 10/11/2007
Amended 4/9/2009
Amended 10/13/2016
Amended 10/1/2026**

I. Purpose & Applicability

The purpose of this policy is to establish standards in Hennepin County for EMS and partner agencies regarding interagency communication, communication of patient information and medical control, and the recording of communications. This policy applies only to “Unscheduled Requests” originating in Hennepin County. All terms used in this policy shall follow the definitions in Ordinance 9, Section V, unless stated otherwise.

II. Authority

Hennepin County Ordinance 9, Section VII, Subsection 5:

“The EMS Council shall establish a Communication Policy which all EMS Providers shall follow, unless the policy conflicts with policies established by the Statewide Emergency Communications Board (SECB) or the Metropolitan Emergency Services Board (MESB).” If a conflict exists, SECB and MESB policies should be followed.

III. Policy Requirements

(A) Communication Technology

EMS Providers will independently determine which communication technology and process to implement to communicate with hospitals and for patient information and medical control. 800 MHz ARMER radio is the preferred technology for requests for medical control. Zipit is the preferred technology for MRCC to provide patient information from EMS to hospitals.

(B) Call Processing Method

Call processing shall be conducted using a nationally recognized call processing system, or a method reviewed and approved by the Hennepin County EMS Council.

(C) Call Processing for 911 Requests Received

Unscheduled Requests that are received via a medium other than direct voice-to-voice communication should be call processed within a reasonable amount of time, according to the Communications Plan Flowchart (Attachment #1).
Unscheduled Requests transferred from a Primary PSAP, discharges, and appointments are excluded from the Flowchart guidelines.

(D) Recording Communications

1. All communications originating in Hennepin County related to Unscheduled Requests for service shall be recorded. These may include, but are not limited to:
 - a. communications between ambulance and dispatch
 - b. communications between ambulance and hospital
 - c. communications between ambulance and MRCC
 - d. communications between dispatch and hospital
 - e. communications between dispatch and MRCC
 - f. communications between MRCC and hospital
 - g. shared EMS radio talk groups
2. If resources allow, use of the call management system for recording communications related to Unscheduled Requests for service outside of Hennepin County may be allowed, but it is not required.
3. Shared talk group recordings will be accessible to EMS Medical Directors of EMS Providers with a PSA in Hennepin County and their designees.
4. The Health Authority/Hennepin County Public Health (HCPH) may review any recording associated with Unscheduled Requests for service originating within Hennepin County. Requests for information or complaints submitted to HCPH regarding Pre-Arranged Transfers or Unscheduled Requests originating outside Hennepin County will be referred to the EMS Provider for the PSA where the request originated.

(E) Patient Information Report Format

For a routine patient report, EMS crews will provide the following information in the order given. The crew may provide the report on scene or immediately upon departure from the scene.

1. **Initial hail to MRCC**
 - a. Agency/Unit ID

- b. Declaration of Routine Patient information
- c. Intended hospital destination (if applicable, include specific department e.g. Acute Psychiatric Services (APS)/Crisis, Labor and Delivery (L&D))
- d. Patient acuity (Red/Yellow/Green)
 - Red Medical or Red Trauma (Critical patient, requires immediate treatment/transport)

Note: Use Alerts for Cardiac Arrest, ECMO, Red Medical, Sepsis, STEMI, Stroke, Trauma/TTA
 - Yellow (Stable, needs a bed, requires observation)
 - Green (Triage appropriate)
- e. Estimated Time of Arrival (ETA) – only in initial hail for short ETAs under 5 minutes

2. After Acknowledgement by MRCC:

- a. Agency/Unit ID
- b. Age
- c. Gender
- d. Chief Complaint
- e. Patient name (Red patients only and if practicable)
- f. Date of Birth (Red patients only and if practicable)
- g. **Only for Red Patients** (when appropriate)
 - i. Full set of Vital signs
 - ii. Response to treatment
 - iii. Mechanism of injury
 - iv. GCS
 - v. EKG findings
 - vi. ROSC
 - vii. Last known well
 - viii. Blood glucose
- h. **Other pertinent information – All patients (if appropriate)**
 - i. Hold Status (if in custody)
 - ii. Security needed
 - iii. Isolation needed

- iv. Transfer (provide patient initials)
- v. ETA – if not in initial hail

g. On Emergency Department handoff – All Patients

- i. All pertinent paperwork, including hold status
- ii. Deliver MIST report
 - a. Mechanism or Medical Complaint
 - b. Injuries or Illness Identified
 - c. Signs and Symptoms
 - d. Treatments

(F) Request for Medical Control Consultation

For requests for medical control, EMS crews will provide the following information in the order given, after being connected to the medical control physician.

1. Initial hail to West MRCC:

- a. Agency/Unit ID
- b. Declaration of medical control request
- c. Intended medical control hospital

2. Connect to medical control hospital

- a. By Radio – move to the hospital medical control talkgroup when prompted by MRCC
- b. By Phone – MRCC will transfer you to hospital medical control
If utilizing EMS IVR, select medical control hospital and medical control option

3. Information for Medical Control

- a. Ask for physician last name if not provided
- b. Give patient report to the medical control physician
- c. Request orders wanted from the medical control physician

(G) System Medical Director Communication Guidelines

System Medical Directors (SMDs) are EMS Medical Directors or Associate/Assistant EMS Medical Directors for a 911 EMS Provider with a PSA in Hennepin County. An SMD may be requested to: 1) provide consultation by

phone, radio, or online about an incident or scene; or 2) respond to an incident or scene.

Each SMD is expected to:

1. Ensure that West MRCC has their current contact information (cellular number and email address)
2. Maintain connectivity with the Zipit confirm application
3. If the initial SMD does not respond after 2 attempts, or within 5 minutes, West MRCC will page via Zipit to the All SMD list.
4. Notify West MRCC to respond to a page for consultation or scene response.
5. West MRCC will send a second Zipit page to the All SMD group to notify the group that the request has been assigned to an SMD.
6. All subsequent communications for an established incident should involve only the assigned SMD who initially responded.
7. West MRCC will connect the assigned SMD to the EMS personnel and provide pertinent information.

(H) Requests for a System Medical Director Consultation or Scene Response

To request an SMD phone/radio/online consultation:

1. Each EMS Provider shall follow its own policy for notification/activation of its own SMD(s) when an issue or question related to an incident or scene warrants a phone/radio/online consultation.
2. If an EMS Provider's SMD is not available to provide a consultation, the EMS personnel will contact West MRCC to request a Zipit page to the All SMD group.
3. When an SMD takes the request, West MRCC will assign that SMD to the incident.
4. The assigned SMD will be connected to EMS personnel via West MRCC to receive more information regarding the request.

To request an SMD physical response to an incident or scene:

1. Each EMS Provider shall follow its own policy for notification/activation of its SMD(s) when a situation warrants an EMS medical director on scene.
2. If an EMS Provider's SMD is not available to respond to an incident or scene, the EMS Provider's personnel will contact West MRCC to request an all-page to the SMD group.
3. When an SMD takes the request, West MRCC will assign that SMD to the scene response. *(continued, next page)*

4. The assigned SMD will be connected to EMS personnel via West MRCC to receive more information regarding the request.

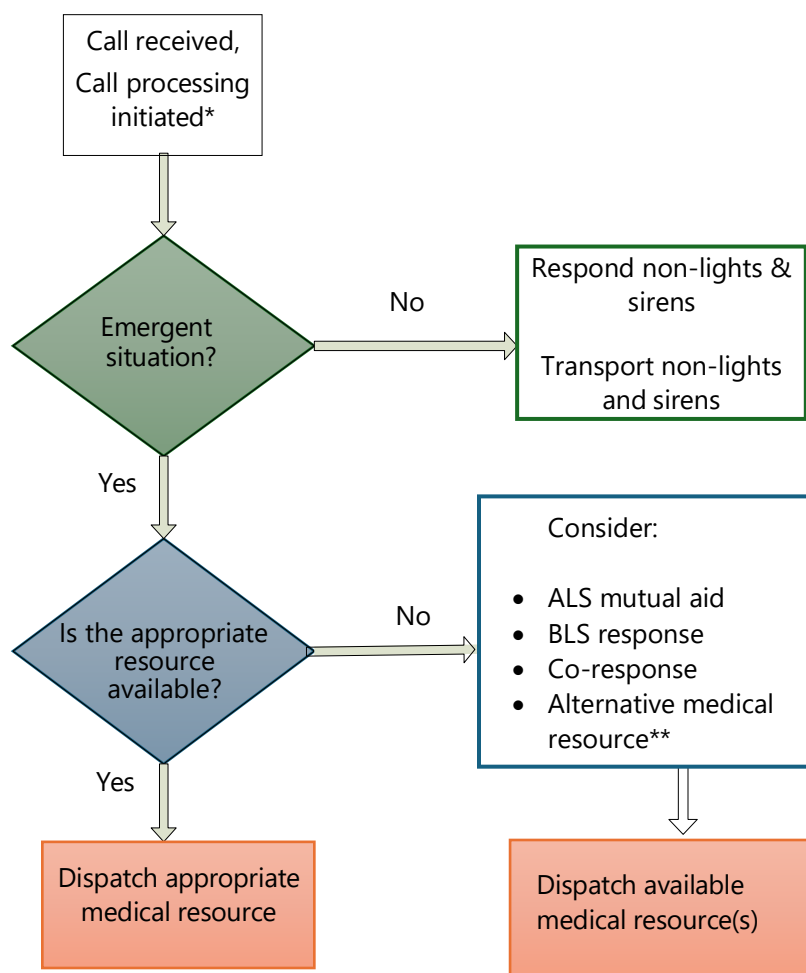
See next page for 911 Call Intake and Response Guideline

Hennepin County EMS Council Communications Policy

911 Call Intake and Response Guideline

Legislation/Regulations

- Hennepin County Ordinance 9, Section VII, Subd. 2-3
- MN Statute Chapter 144E



*Call processing must be conducted using a nationally-recognized call processing system or a method approved by the Hennepin County EMS Council and following the EMS Provider's protocols.

** As defined by and if allowed by Minn. Stat. Chapter 144E and Hennepin County Ordinance 9

END of Hennepin EMS Council Communications Policy
Amended 10-1-2026