I. Purpose:

To comply with the Virginia Emergency Medical Services Regulation 12 VAC 5-31-610, the following plan is being implemented to ensure an adequate and timely response to emergency medical services in all areas of Prince George County.

II. Scope:

The Designated Emergency Response Areas and the EMS Response Plan are developed for Prince George Fire and Emergency Medical Services (OEMS Agency #296). The agency delivers a range of services varying from BLS care rendered from fire engines, ALS care from first responder units, to BLS and ALS transport units. The department has multiple response points strategically positioned in the County:

Jefferson Park Fire & EMS Station #5 – 4225 Jefferson Park Road
Carson Fire & EMS Sub-Station #3 – 11300 South Crater Road
Prince George Emergency Crew Station #8 – 10800 Prince George Drive
Prince George Fire & EMS Station #1 – 6500 Courthouse Road

III. Policy:

1. The primary response areas are defined as that within Prince George County jurisdictional boundaries, dividing the County roughly in half from the Southwest to the Northeast corner, and can be identified as the “suburban service area” and the “rural service area”. The ‘suburban service area’ begins in the approximate vicinity of Butler Branch and Fairwood Roads at the Dinwiddie County Line, to a line just North of Hair Road at Prince George Drive, to a line North on Prince George Drive to Thweatt Drive, to a line following Thweatt Drive to Pumphouse Road, to a line approximately halfway North on Pumphouse to Golf Course Drive to a line Northeast to a line roughly Northeast to Flowerdew Hundred Road – basically the upper Northwestern section of the County.
The ‘rural service area’ follows the same boundary and represents the Southeastern section of the County. The determination of response districts and appropriate resource response was determined by the County’s Computer-Aided-Dispatch (CAD) per the established EMS response protocols of the Department. In the event there is a failure of the CAD system, hard copies of the response districts and protocols shall be maintained within the County’s Emergency Communications Center. All Emergency Communications Officers shall be familiar with either methodology.

2. The standard for alarm time (from receipt of the call for service in the Emergency Communications Center (ECC) to dispatch or “dispatch time”) in Prince George County will be ninety seconds for high-priority calls for service.

3. The standard for mobilizing units (from dispatch time until the unit is en-route or “turnout time”) in Prince George County will be sixty seconds for high-priority calls for service during the hours of 0700 to 2100 hours and ninety seconds from 2100 to 0700 hours.

4. The unit response time (or “response time”- from dispatch, not from receipt in the ECC) for Prince George County Fire and Emergency Medical Services to have resources on-scene 90% of the time will be as follows:

   a. “Suburban Service Area”
      i. High-Priority Calls for service – 17 minutes
      ii. Low-Priority Calls for service – 19 minutes

   b. “Rural Service Area”
      i. High-Priority Calls for service – 25 minutes
      ii. Low-Priority Calls for service – 29 minutes

5. Prince George County Fire and Emergency Medical Services strive to adequately staff resources to achieve both the mobilization and response standards to medical emergencies within the County. The Emergency Communications Center will dispatch the closest resource to the call for service to meet the established standard and may not rely solely on the pre-determined response points (i.e., floating units or units returning from the hospital are closer to the need than the pre-determined primary response point).
6. In the event Prince George County resources are not immediately available or cannot meet the mobilization or response standard, the Emergency Communications Center will automatically request mutual aid jurisdictions to obtain the appropriate resources. The on-duty Lieutenant will be notified by the Emergency Communications Center of the mutual aid request if they have not already acknowledged the request.

7. Any Prince George County Fire and Emergency Medical Service staffed response point that are unable to respond for EMS calls for service will notify the Emergency Communications Center.

8. Prince George County Fire and Emergency Medical Services will continually document compliance with this policy and will continually verify these unit mobilization and response standards. The Prince George County Emergency Communications Center Computer-Aided-Dispatch (CAD) system records and documentation from Patient Care Records (PCR’s) will serve as the data sources for this compliance/verification.

9. Any exceptions to the established criteria will be reviewed periodically by the appropriate staff of Prince George County Fire and Emergency Medical Services including the Operational Medical Director. This review will identify the cause(s) and possible resolution(s) to improve compliance.

10. Any changes to this policy must be approved by the Director and Operational Medical Director.