
EMS Agency Responsibilities

As part of the Genesee County Medical Control and 9-1-1 emergency dispatch systems, EMS agencies:

1. Shall operate in accordance with P.A. 368 of 1978 as revised.
2. Shall ensure that all paramedic level active field employees have American Heart Association (AHA) ACLS or American Red Cross (ARC) Advanced Life Support currency.
3. Shall immediately notify the appropriate 911 center of any need for additional EMS resources at the scene of a call to which that agency has been dispatched. Any additional units will be dispatched by a 911 center according to the GCMCA dispatch protocol.
4. Shall immediately notify the appropriate 911 center and simultaneously dispatch a unit to all Tier 1 calls the company receives via its private line. The unit the agency has dispatched should remain available so 911 can see the unit and determine if it is the closest. Notification of the 911 center must take place by entering the call information into Netviewer, if the 911 center handling the dispatch has Netviewer capability. The minimum information required to be entered into Netviewer includes: the initial caller's name (including facility/business name, if applicable); a valid call back number; patient's age, gender, and chief complaint; and major cross street(s) [if entering roads such as 12,000 Saginaw, an indication of N. (Mt. Morris City) or S. (Grand Blanc) needs to be included]. If 911 determines that a closer unit should be dispatched to the private Tier 1 call, the agency's unit initially dispatched to the call will be cancelled.
5. Shall allow responding Paramedic to board a BLS ambulance. If a patient is in the care of a BLS crew (at a minimum, patient packaged and on a stretcher), the intercepting ALS provider will board the BLS unit and respond in the BLS unit if the patient is in need of ALS care.
6. Shall either permit their personnel to drive a non-transporting ALS unit to a receiving hospital or return a paramedic to his or her non-transporting unit promptly at the completion of the call.
7. Shall carry only latex-free gloves on every licensed EMS unit in service at all times.
8. Shall notify GCMCA and the hospital pharmacy immediately of any missing, lost or stolen drug boxes or contents of the box, and file a written report with the GCMCA within 24 hours of the disappearance of the box or any contents.
9. Must reapply to operate in Genesee County if they have been suspended by the state or GCMCA for more than 30 days.
10. Shall carry 25 GCMCA-approved triage tags on every licensed EMS unit. . These tags should be used for mass casualty incidents. These types of incidents are defined as any situation where the EMS system is overwhelmed. Each agency is required to provide annual training on the use of triage tags.



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11. Must employ at a minimum one state licensed paramedic Instructor Coordinator (IC) if the agency is licensed at the ALS level.
12. Must report any failure of an agency dispatch recording system to the GCMCA. The agency will report both at the time the recording system fails and when the failure has been corrected.
13. Licensed at the BLS or ALS level will be considered to operate under a mutual aid system in Genesee County due to the fact that there are no geographic boundary limitations on EMS agencies unless they change their licensed geographic service to something other than all of Genesee County. Any state-licensed ALS transporting agency that is not licensed in Genesee County could be dispatched into this county through mutual aid under the following circumstances: 1) is dispatched on Tier 1 calls only; and 2) the total number of mutual aid responses per agency cannot exceed 0.3% of the total emergency responses for the county in a calendar year.
14. Shall report efforts to provide positive support to the community beyond its normal course of duties and responsibilities (i.e. – CPR courses, education programs, community service programs, etc.). The agency shall provide a report to the GCMCA as part of their annual relicensure (this item does not apply to agencies that have achieved accreditation through a GCMCA-recognized entity).
15. Shall demonstrate an equipment maintenance program that shall include the following items (as it applies to the agency): stretcher, ECG monitors/defibrillators, AEDs and portable ventilators. The maintenance program should follow the manufacture's recommended guidelines. The agency must submit a copy of their equipment inventory list and inspection report to the GCMCA as part of their annual relicensure.
16. Shall submit detailed information on their existing and proposed communications and recording systems as part of their annual relicensure. Additionally, any proposed changes to communications or recording systems must be submitted to GCMCA 30 days prior to implementation.
17. Shall provide to GCMCA detailed information on structure and organization that shall include at a minimum the following (as it applies to your agency): owner(s), operations manager(s), dispatch coordinator/supervisor(s), quality assurance coordinator and safety officer. Each position shall be listed on an organization chart and submitted to GCMCA at the time of relicensure or whenever staffing or organizational changes occur.
18. Shall follow the state's MEDCOMM requirements.
19. Shall conduct criminal background checks on all EMS providers at the time the agency hires employees and at the time of the employees' relicensure with the state. At a minimum the agency should conduct a background check that utilizes the Michigan State Police's Internet Criminal History Access Tool (ICHAT) and a national search of the U.S. Department of Justice's National Sex Offender Registry. Any felonies identified by the agency must be reported to the state department responsible for EMS oversight. Additionally, agencies must have a policy on criminal background checks for individuals riding in an EMS unit who are not EMS providers.



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20. Shall participate in at least one disaster exercise annually, and report participation as part of their annual relicensure.
21. If an agency receives a complaint on a violation of GCMCA Protocols, they must do one of the following: 1) conduct an internal investigation of the alleged violation. If a protocol is found to have been violated that caused harm to a patient, had the potential to cause harm to a patient or resulted in disciplinary action by the agency, the agency must notify the GCMCA Administrative Offices with the results of the investigation and the action taken by the agency. The case will then be reviewed by the GCMCA PSRO; 2) submit the complaint to the GCMCA Administrative Offices for review by the PSRO.
22. Shall ensure that each life support vehicle that is dispatched and responding to provide medical first response life support, basic life support, or limited advanced life support is equipped with an automated external defibrillator (AED) and that all personnel that will use an AED are properly trained to utilize the device.
23. Shall ensure that an individual riding along for any reason on one of their units must be properly identified.
24. Shall develop and maintain an internal personnel conduct policy that addresses the behavior and appearance of agency personnel while actively working as an EMS provider in Genesee County. A copy of the policy is to be provided to the GCMCA upon completion or whenever the policy is changed.
25. Shall develop an internal continuous quality improvement (CQI) policy that complements the existing activities of the GCMCA. These policies must be provided to GCMCA when developed and/or updated. Development of policies would be optional for MFR agencies. If quality concerns are identified through an agency's internal CQI process they must report those concerns to the GCMCA and action they are taking to correct the issues identified.
26. Shall obtain approval from the GCMCA Medical Director before placing on their rigs and allowing their personnel to use any invasive or monitoring medical equipment that is not on the state's equipment list.
27. Shall ensure that each vehicle is equipped in some form with a copy of the current pain scale as depicted in the Pain Management Protocol for use by EMS personnel in assessing patient pain.
28. Shall ensure that each vehicle is equipped in some form with a copy of the Cincinnati Stroke Scale for use by EMS personnel in assessing patients.
29. Agencies will be responsible for maintaining photocopies of BLS currencies for all licensed personnel providers and ACLS currencies for paramedics, as well as any other certification requirements established by the GCMCA.
30. Shall ensure that each ALS vehicle is equipped with a Broselow Tape.
31. Shall report to the GCMCA within 24 hours any incident, or report of an incident, that results in a negative patient outcome which may have been caused by an error, oversight or negligent action by an agency employee. Failure to report such an incident will be cause for an immediate suspension of the agency's ability to operate in Genesee County by the Medical Director until a hearing can be held according to the GCMCA Due Process & Disciplinary Procedures Protocol.



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32. Shall, carry a 12-lead ECG monitor on all ALS units responding to a call in Genesee County and follow the 12-lead ECG Protocol.
33. Shall notify GCMCA when new providers are added or when current providers leave the organization. These changes must be provided no later than 48 hours following the changes.
34. Shall have a written policy that addresses the maximum consecutive hours a field provider can work. This policy shall not permit any provider to be scheduled to work more than twenty-four (24) hours consecutively. Further, if a provider is scheduled for a shift that is greater than sixteen (16) consecutive hours, then they must be operating from a physical base location as defined in this protocol. All providers must have a minimum of eight (8) hours off between shifts. The policy must be provided to the GCMCA when this protocol takes affect and anytime the policy is changed. If the policy does not list a specific maximum number of hours then the agency must provide an explanation on how their policy ensures well rested providers.
35. Shall respond to GCMCA requests for information and data within 10 days. The GCMCA can give agencies longer to respond if the information requested is extensive.
36. Shall make showering facilities available to all personnel.
37. Shall have at least one vehicle cleaning station available.
38. That are licensed as an MFR agency only, shall conduct annual refresher trainings for all providers on Airway, Trauma, Vitals, and BLS CPR. Basic objectives and criteria for these trainings will be provided by the GCMCA Education Committee and consist of a minimum of one hour of training in each of the four areas identified above. The agency must notify the GCMCA fourteen (14) days in advance of the trainings with the date, time and location of the education program. Oversight and coordination of trainings must be provided by a licensed Instructor Coordinator at or above the MFR level. Evaluators must also be at or above the MFR level. MFR agencies may chose to not provide annual core competency trainings and instead require their providers to be current in the certifications outlined in the EMS Personnel Responsibilities protocol.
39. That have an employee that has not operated as a field provider at their level of licensure for more than one year must ensure that they go through refresher trainings within their agency and as outlined by the GCMCA Education Committee to address skill competency issues before operating in the field.
40. Shall be responsible for purchasing two drug boxes and two A-Packs for every new vehicle that is added to the system if the vehicle being added is licensed at the ALS level. This also applies to any vehicle that is being upgraded from the BLS to the ALS level.
41. Will ensure that all units at the hospital will either turn off the unit until departing the facility or move the unit away from entrances and ventilation units.
42. Will provide responses to requests for information consistent with GCMCA protocols, including all EMS related medical documents. If the agency fails to

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respond by the deadline established in the initial letter, then a certified letter will be sent to the owner or other duly designated individual responsible for the agency giving ten days to provide the requested information. If no response is received after that ten-day period, the agency will be suspended from operating in Genesee County until such time that the information being requested is provided.

43. Must ensure that any backboard left at a hospital be retrieved within 7 days or the security of the boards will no longer be the responsibility of the hospital. Additionally, it is the responsibility of the hospital to ensure that any biohazardous materials are cleaned from backboards and then stored in a clean environment until the agencies that own the boards can retrieve them.
44. Licensed at the MFR level can in some circumstances have their crew members complete a Refusal of Care. If the MFR crew is the first on scene and there is no obvious evidence the patient needs medical care then the MFR crew can obtain a signed refusal and allow other EMS units responding to cancel and return to service. If there is any indication that the patient would benefit from an ALS or BLS evaluation, treatment, and/or transportation, then the MFR crew should not obtain a refusal. This does not eliminate the ALS or BLS provider from also obtaining a signed refusal if they choose to do so.
45. Shall report all motor vehicle accidents involving licensed EMS unit to the GCMCA within thirty (30) days. This requirement is only for accidents that generate a police report. The agency will provide a written report of the incident, the tier of the call (if occurring during a response to a call), and a copy of the police report. This information will be provided to the PSRO for review in an effort to track potential trends in vehicle usage that could result in danger to patients or the general public.
46. Shall report all assaults on EMS personnel while on duty to the GCMCA within 48 hours of the incident and provide a police report once one is available. This information will be provided to the PSRO for review in an effort to track potential trends in assaults on EMS personnel, which will allow the GCMCA to seek policy and educational opportunities to reduce these incidents.
47. The Lucas Device, or other similar, FDA approved devices, are approved for use in Genesee County. If an agency wishes to purchase and utilize these types of devices, their personnel must complete an education program that has been reviewed and approved by the GCMCA Education Committee.
48. Must provide to Genesee County at least one unit twenty-four hours a day, seven days a week at the level of licensure of their agency. This minimum requirement means the agency will have this minimum staffing available to respond to emergency calls through the 911 system by having AVL equipment installed in their units, connected to the 911 center's computer system, and being capable of responding to 911 emergency calls when a request is made by 911. Further, the agency's unit staffing must be at their level of licensure (i.e. MFR, BLS, ALS) and with the type of unit the agency is licensed at (i.e. transporting or non-transporting). An agency may only remove its last unit from 911's AVL/CAD system if it has received and is responding to a private Tier 2 emergency or an emergency call



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where the unit was dispatched by Fenton City 911. The agency must document this reason in the 911 CAD system. If an agency removes its last unit from 911's AVL/CAD system for any other reason they must notify the GCMCA in writing within 24 hours as to the time frame and reason no units were available for 911 emergency response. If Genesee County 911 is in critical status, then an agency cannot take their last unit from 911's AVL/CAD for a private Tier 2 call. The private Tier 2 call must either be held until another of their agency's units becomes available, the system is no longer in critical status, or the agency can turn the call over to 911 for further action.

49. Shall provide education on GCMCA protocol changes to employees within a timely manner of protocol implementation.
50. Shall report to the GCMCA in writing within 24 hours any circumstance that results in non-compliance of equipment or the agency upon inspection by the state.
51. Must submit a hard copy run record to the GCMCA of any call responded to from the 911 system that resulted in a trauma patient being transported out of Genesee County. The run records must be submitted by the 15th of the month following its occurrence.
52. That are interested in creating a community paramedicine program in Genesee County will submit the following items to the GCMCA PSRO for review, then the PSRO will make a recommendation to the Advisory Committee and Board: 1) state's special study application; 2) copy of proposal being submitted to the state
53. That have crews operating out of a base, must meet the following criteria for such a base:
 - Sleeping quarters
 - Restroom facilities
 - Ambulance parking (with signage) within close proximity to the door
 - Clothing standards policy for appropriate multi-gender sleeping concerns
 - Fire extinguisher
 - Smoke alarm
 - Eye wash station
 - Meet MIOSHA requirements
 - Posted instructions outside the building for walk up patients
54. Using the Genesee County 911 dispatcher system, shall ensure that all crews enter the 800 MHz radio number being used during their shift into the NetViewer system prior to going into service.
55. Shall ensure that their personnel are in compliance with GCMCA certification requirements and that certifications are current. If an individual is not compliant they cannot operate as an EMS provider at the level of licensure of the certification requirements until their certifications are current.
56. Will follow GCMCA Education Committee training guidelines and complete all GCMCA-approved mandatory trainings.



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57. Will review any run record involving a Priority 1 transport where the scene time exceeds twenty minutes to ensure proper documentation of the reasons for the scene time length are noted.
 58. Will at a minimum on a monthly basis update their personnel EMS license numbers in their third-party vendor software with the individual's current, accurate license number (this is not their legacy number that starts with 320).
 59. Shall have at least one individual from their agency certified in the National Incident Management System (NIMS) Incident Command System (ICS) 300 and 400, as well as anyone from the agency that may ultimately participate as part of unified incident command at a mass casualty incident.
 60. Other than MFR agencies, will ensure that at least one short form per patient transported to the hospital is completed and submitted to the receiving facility in the manner requested by the facility prior to crews departing the hospital.
 61. Will ensure that EMS crews follow posted speed limits unless responding lights and sirens, and in those cases they will not travel at speeds greater than 10 miles per hour over the posted speed limits and operate with due caution.
 62. Will have an internal chute time policy and provide that to the GCMCA. Compliance data for this policy may be requested from the GCMCA.