15 Components of the EMTS System

- 1. <u>Integration of Health Services</u>. Includes activities to improve patient care through collaborative efforts among health related agencies, facilities and organizations within the region. The desired outcome of this component is to improve the system by encouraging groups involved in EMTS to work with other entities (e.g. health related, state, local and private agencies and institutions) to share expertise, to evaluate and make recommendations, and mutually address and solve problems within the region.
- 2. <u>EMTS Research.</u> Is used to determine the effectiveness and efficiency of the EMTS system through scientific investigation. A continuous and comprehensive effort to validate current EMTS system practices in an effort to improve patient care, determine the appropriate allocation of resources and prevent injury and illness and ultimately death and disability.
- 3. <u>Legislation and Regulation</u>. Includes issues related to legislation, regulation and policy that affects all components of the EMTS system. This component defines the level of authority and responsibility for system planning, implementation and evaluation.
- 4. <u>System Finance</u>. Defines the financial resources necessary to develop and maintain a quality EMTS system.
- 5. <u>Human Resource</u>. The acquisition of knowledge and skills, recruitment and retention of providers are priorities for a quality EMTS system.
- 6. <u>Education Systems</u>. Includes the education and training of all providers within the EMTS system. Includes efforts to coordinate and evaluation of programs to ensure they meet the needs of the EMTS system.
- 7. <u>Public Access</u>. Includes all means by which users can access the system (911). Includes providing pre-arrival instructions provided by emergency medical dispatchers.
- 8. <u>Evaluation</u>. A process of assessing the attributes (system integration and components) of the EMTS system to ensure that continual improvement can be designed and implemented.
- Communications System. The efficient transfer of information by voice and data
 occurring between dispatch centers, EMTS providers, physicians, facilities, public
 safety agencies and patients seeking care through emergency medical dispatch.
 Includes EMTS system communications interoperability within and outside the region
 for multi-casualty incidents.
- 10. <u>Medical Direction</u>. Supervision and direction of patient care within the EMTS system by qualified and authorized physicians. It includes the medical communities involvement in maintaining quality of care through accepted standards of medical practice and through innovation.
- 11. <u>Clinical Care</u>. Clinical methods, technologies and delivery systems utilized in providing EMTS in and out of the hospital. Includes emerging community health services, rescue services and mass casualty management.
- 12. <u>Mass Casualty</u>. Defines the responsibility and authority for planning, coordination and infrastructure for all medical care during incidents where the normal capacity to respond is exceeded.

- 13. <u>Public Education</u>. Includes the public's involvement in learning experiences to promote and encourage good health and reducing morbidity and mortality.
- 14. **Prevention**. Solutions designed to prevent injury and illness in the community.
- 15. <u>Information Systems.</u> Is the collection of data as a tool to monitor and evaluate the EMTS system. Information systems are key to providing a means of improving the effectiveness and integration of healthcare delivery.