The International Academies of Emergency Dispatch’s® certified Emergency Communication Nurse System™ (ECNS™) is a comprehensive nurse triage system comprised of over 200 protocols. It is designed to be implemented within an Emergency Medical Services (EMS) communication center and used alongside the IAED’s Medical Priority Dispatch System™ (MPDS®), which was developed over 33 years ago. Not every emergency call needs a lights-and-siren response. In fact, not every call even needs a COLD ambulance response. ECNS, when used with the MPDS Protocol and Priority Dispatch Corp.’s™ internationally recognized gold-standard dispatch and QI software—ProQA® and AQUA®—can provide optimal ALTERNATIVE CARE for vetted low-acuity, or OMEGA, Determinant Codes, giving EMS systems new options to care for patients and their communities. Responses to OMEGA determinates are locally defined based on MPDS-approved codes.

ECNS is considered IAED’s “Fourth Pillar of Care” along with Emergency Medical Dispatch™, Emergency Fire Dispatch™, and Emergency Police Dispatch™. Accreditation as a Center of Excellence is an integral part of superior care standards with current medical accreditation required before a center can use the ECNS protocol. Other prerequisites for ECNS include implementing ProQA dispatch software and AQUA quality improvement software.

The overall ECNS progress is comprehensive, yet simple. First, a call comes into the communication center and ProQA is launched by the Emergency Medical Dispatcher™ (EMD). If, after EMD questioning, the patient is assigned a pre-determined and locally defined “low code” (OMEGA Code), the call is transferred to the Emergency Communication Nurse (ECN) desk. This desk is staffed by an experienced, specially trained, and ECNS-certified Registered Nurse who uses LowCode™ software developed by Priority Solutions Inc. (PSI), which seamlessly integrates with ProQA, to assess the patient. For numerous reasons it is imperative that the ECN be co-located within the communication center. After verifying there are no priority symptoms, additional information is gathered such as co-morbid conditions, medications, and allergies. An ECNS symptom-based protocol is then selected and an additional assessment is conducted.

Based on the caller’s answers, a Recommended Care Level is achieved, which includes tiered response levels from Send an Ambulance Now to Self-Care Instructions. From here, a second-tier disposition is available, which is customer definable. This tier represents resources available in the customer’s community, e.g., urgent care centers, primary care physicians. Users can engage a third-tier disposition called a directory of services, which will identify a specific list of health care resources near the patient.

Priority Solutions Inc.’s LowCode software has been in use for over 14 years throughout the world, and more than 2 million calls have been processed without an untoward incident.
THE ECNS HAS BEEN DESIGNED TO SPECIFICALLY MEET THE FOLLOWING TWO GOALS:

1. Appropriately manage and support caller access to an increasingly burdened health care system by better allocating resources to meet their non-emergent, non-life-threatening health situations

2. Help EMS communication centers, ambulance services, and all EMS providers optimize their resources and outcomes by sending, when necessary, the
   • right personnel, to the
   • right place, at the
   • right time, with the
   • right equipment, using the
   • right resources, to get the
   • right care, in the most clinically appropriate way; thereby facilitating the
   • right cost, to patients, providers, and payers

Software Support for ECNS:
KEY POINTS:

- ECNS currently has user centers in 5 countries on 4 continents
- More than 1,000 clinicians trained throughout the world
- ECNS currently has over 200 protocols—each containing a clinical rationale along with a reference list for additional information

BENEFITS OF ECNS:

- Effective and standardized clinical assessment and assignment of appropriate Recommended Care Levels
- Safely manages the growing demands on health care providers
- Reduces the demand on ambulance transportation services
- Reduces unnecessary ER visits and wait times
- Numerous integration efforts completed with third-party software
- Brings appropriate care closer to patients while being responsive to their needs
- Establishes efficient and effective use of EMS and community provider resources
- ECNS is considered “The Fourth Pillar” of the International Academies of Emergency Dispatch, along with EMD, EFD, and EPD, and is regulated by its Standards Council
- Established Quality Assurance/Quality Improvement process, with the software integration availability of AQUA Evolution
- Data-driven approach with proven safety and efficacy with over 14 years of QA/QI data

- Protocols are symptom based, taking into account gender, age, and previous medical history
- Most ECN calls last about 8-15 minutes
- On average, approximately 8–15% of total call volume qualifies for this system
**GROWING CUSTOMER BASE:**

As shown below, many international organizations utilize ECNS and LowCode.

<table>
<thead>
<tr>
<th>ORGANIZATION</th>
<th>LOCATION</th>
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<tbody>
<tr>
<td>North Shore–LIJ</td>
<td>Syosset, New York, USA</td>
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<td>REMSA</td>
<td>Reno, Nevada, USA</td>
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<td>Salt Lake City Fire</td>
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<td>MetroSafe, LMEMS</td>
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<tr>
<td>Queensland Health/13 Health</td>
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<td>NetCare</td>
<td>South Africa</td>
</tr>
<tr>
<td>Botswana Medical Rescue International</td>
<td>Gaborone, Botswana</td>
</tr>
</tbody>
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**FOR ADDITIONAL INFORMATION, PLEASE CONTACT:**

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Southern Nevada Health District – Community Health Improvement Plan
Access to Healthcare Subcommittee

Healthy Person

Prevention:
- Education
- Resources
- Healthcare Literacy

Social Needs:
- Food Security
- Shelter
- Safety
- Resources

Chronic Care:
- Disease Management
- Rehabilitation
- Long Term Care

Acute Care:
- Self-Care
- EMS
- Clinics/PCP
- Hospitals

Resources:
- Payment
- Transportation
- Providers
- Medications
Navigation Services for a Healthy Community

Nevada 211

Southern Nevada CHIPS

Nurse Call Line

911
What is Southern Nevada CHIPs (Community Health Improvement Program)?

The mission of Southern Nevada CHIPs is to provide “the RIGHT service, to the RIGHT person, at the RIGHT time”. We work to improve the health and wellness of our community by improving health care and social service access and navigation. We provide health and social assessments, resource referrals, insurance enrollment assistance, navigation, and advocacy services to our most vulnerable citizens as identified by community healthcare providers such as first responders and hospital case management and by utilizing developing professionals from schools of social work and nursing, and in the process of including additional schools such as pharmacology, community health sciences, and medicine. In most cases, first responders find these individuals feeling isolated or in some type of crisis and don’t know where to turn for help. Often, these citizens generate many 911 calls for assistance and utilize the hospitals for access to health and human services.

Southern Nevada CHIPs team members undergo orientation and training about the organization, implementation, and services of the local first responding agencies. They experience ride-along time with first response units to experience firsthand the circumstances faced in the field. They spend time in the Fire Alarm Office with the 911 call-takers and dispatchers to learn how the 911 system is being used from time of call to patient care transfer at hospital. Throughout their practicum experience, they are valued for their expertise, passion, and creativity, driving the program to continued growth and success of improving community health through access to existing services.

Southern Nevada CHIPs was founded in 2013 by Las Vegas Fire and Rescue in conjunction with the University of Nevada Las Vegas (UNLV) School of Social Work. Students met their academic practicum requirements by servicing the Southern Nevada CHIPs team as student interns, providing health and human service referral and navigation assistance to users of the 911 system. Client populations served include: homelessness, substance abuse, frail, elderly, impoverished, mental illness, and more.

In May of 2015, Southern Nevada CHIPs transitioned into a nonprofit in order to enable a consistent and seamless service across all fire departments (Clark County, North Las Vegas, Henderson, and Las Vegas) and schools as well as to allow for greater funding opportunities and grant eligibilities. The immediate goals of the organization are to meet the program’s objectives of improving the health and wellness of the community through service access and navigation as indicated through client surveys conducted before and after program intervention as well as analysis of their utilization of emergency services and hospitals. Also, to obtain sufficient funding to hire full-time staff to provide the services year-round versus student-dependency which results in a lapse of services during academic breaks.

Why do we need Southern Nevada CHIPs?

Southern Nevada CHIPs was implemented in order to improve the health and wellness of the community through providing targeted access and navigation services to those identified as vulnerable by healthcare providers. The intended outcomes are an improvement in community health and greater efficiency to service providers as our community is navigated to the most appropriate resource for their needs.

Learn more about Southern Nevada CHIPs at www.snvchips.org

And follow us on Twitter @Las_Vegas_CHIPs and Facebook at facebook.com/LasVegasCHIPs
For Community Assistance

2-1-1
When you need help finding local services such as housing, food, utility assistance, transportation, prescription assistance, childcare, and more.

3-1-1
When you need a police non-emergency response such as disturbance calls to report any types of crime where there is no immediate threat to life or property.

9-1-1
For emergency situations only!! An emergency is any situation that requires immediate assistance from the police, fire department, or an ambulance.
http://www.nevada211.org/
Do you provide health or human services to our community?

Are you in the Nevada 2-1-1 and/or Community Nurse Call Line Directories of Services??

Connect with the people that need your services, GET LISTED!

http://www.nevada211.org/agency-information/  
Sarah McCrea, smccrea@lasvegasnevada.gov