Mobile Data Terminals / Status Changes

Supersedes: 06-17-14 Effective: 11-10-19

- 1. Safety: The use of a Mobile Data Terminal (herein after referred to as MDT) by the operator of a department vehicle in motion is secondary to the safe operation of the vehicle and crew safety.
- 2. Confidentiality: The Next-Gen 9-1-1 system gives personnel access to caller information, both listed and unlisted. This information is entrusted for use solely to assist public safety agencies with emergencies. Appropriate use and confidentiality of this information must be ensured at all times. The MDT screen should be cleared prior to leaving the vehicle unattended or turned in such a way so as to prevent civilians riding in the vehicle from viewing confidential information.
- 3. Equipment Inspection: Personnel reporting for duty shall inspect the MDT for signs of damage and ensure it is functioning properly as part of the daily vehicle inspection. Damaged, missing or improperly functioning equipment shall be immediately reported to the Dispatch Operations Supervisor.
- 4. Log ON / Log OFF

<u>Log ON</u>: The primary operator (driver) of a vehicle equipped with a functioning MDT is responsible for logging the unit on the MDT as soon after the shift change is complete as possible. The LOG ON "mask" shall be filled in completely and include the Unit ID, vehicle identification (license plate), crew members, and portable radio numbers. The names of any non-department members assigned to the unit (e.g. observers) shall be included in the "comments" portion of the LOG ON mask.

<u>Change Unit Info</u>: Personnel shall update information if there is a change in crew members, vehicle, or portable radio numbers during the shift. Having up to date information available to Dispatch Operations personnel enhances crew safety in the event of a trouble alarm or similar situation.

<u>Log OFF</u>: Personnel shall not LOG OFF the MDT unless they have no relief; doing so causes the unit to be removed from the dispatcher's screen. Requests to LOG OFF a unit, either for the purposes of a Change Unit Info or when the unit is going out of service for the upcoming shift, shall be made through the dispatcher.

- 5. Message Content: Like other Department electronic medium (i.e. computer network), all messages sent via the Computer Aided Dispatch system (including MDT) are documented and may be reviewed for appropriateness. Messages sent via CAD / MDT shall be in compliance with all Boston Public Health Commission and BEMS policies as they relate to electronic mail.
- 6. Dispatch Format: In order to provide a standardized dispatch format and ensure accurate receipt of the information by response units, the following format shall be used:

Unit ID(s), "respond to a(n)"...

TYPE CODE "at"

Location [Street address, Section of the City], repeat

Common place name if any Remarks pertaining to crew safety "Time Out (at)" [Radio console time]

Example: Ambulance 2, Paramedic 2 respond to an UNCONSCIOUS at 1700 Washington Street / South End, 1-7-0-0 Washington Street / South End at 13:34.

Ambulance 11, respond to an MVA at Columbia Road and Geneva Ave / Dorchester; Columbia Road and Geneva Ave / Dorchester -be advised possible fight in progress; time out 19:27.

7. Dispatch Acknowledgment: To ensure that the dispatch information has been received correctly, response units must acknowledge by voice radio each response in the following format:

Unit ID; Full street address (number and name of the street) or Common Place location; Direction if on MBTA or limited access roadway (e.g. Storrow Drive or Massachusetts Turnpike)

- 8. Self Initiated Assignments: Non-supervisory units shall not assign themselves to an incident or service assignment (LUNCH, HQTRS, VMAINT, etc.) via the MDT. All such requests shall be routed through Dispatch Operations for authorization.
- 9. Premise History/LOI (Location of Interest) Tab: When an incident occurs at an address in which Premise Information is available, the LOI (Location of Interest) information will appear in the call record. Responding units should review the premise history, if available, for an incident location by clicking on the LOI tab or scrolling further down in the incident record.
- 10. Incident History: Incidents are frequently updated (TYPE Code or Incident location changed) or remarks added as more information becomes available. The dispatcher shall notify responding units by radio whenever an incident TYPE Code or incident location has been updated. Assigned units will receive a red flag marker on their terminal indicating "updates available".
- 11. Callbacks / Cancellations Requests: Field personnel must not assume there is no further information available for their incident simply because no callback number is listed in the assigned incident history. It is possible that a duplicate call has been received for the incident, which does contain a callback number or further information. A unit responding to an incident shall not, under any circumstances, make a callback in an effort to speak to the patient or determine the need for EMS. These types of conversations need to be made from Dispatch Operations, so they may be recorded for documentation purposes. Similarly, EMS units should not send CAD messages to other agencies (either their dispatcher or individual unit) requesting they initiate or cancel a response. All such requests shall be made through EMS Dispatch Operations.
- 12. Status Changes. All status changes (arrival/on scene, transport enroute, transport arrive at hospital, clear, etc.) shall be promptly reported to the dispatcher as they occur.

<u>Dispatched</u>: The "D" command should be used after dispatching units to an incident and receiving an acknowledgment from the unit(s).

<u>En Route</u>: Once in the vehicle and physically responding to the incident, the assigned crew shall immediately update their status by pressing the "ENROUTE" button on the mobile data terminal, or by notifying the dispatcher via voice radio.

<u>Dispatch/Enroute ("DE")</u> If the crew is already in the ambulance at the time of their dispatch and begins their response immediately, they may notify the dispatcher by acknowledging the incident location in the standard format and then stating "en route", at which time the dispatcher will use the "DE" (dispatch / enroute) command, as opposed to "D" (dispatch).

<u>Arrival</u>: Upon arrival at the given incident location, responding units shall press the "ARRIVE" button and notify the dispatcher by voice radio. Units who arrive at a given incident location and are then directed to another location (by someone other than the dispatcher) shall notify the dispatcher via radio of the updated location.

<u>Transport Enroute (Hospital)</u>: When transporting a patient to a hospital, the operator shall press the "TRANSPORT" button and a "pick list" of area hospitals will then be displayed. The operator shall select the appropriate hospital abbreviation, note the mileage if necessary, and then submit the form. Transport to hospitals not included on the list requires prior approval by Dispatch Operations.

<u>Transport Arrive</u>: Upon arrival at the receiving facility, the operator shall press the "Transport Arrive" button. Note: When <u>two</u> units are involved in the transport of a single patient (e.g. BLS *and* ALS unit transporting a single patient), the operator of <u>both</u> vehicles should transmit the transport/transport arrive commands for their individual unit.

<u>Clear</u>: When clearing an incident, units shall advise the dispatcher by voice radio. Units may in addition, press the "CLEAR" button and a list of authorized DISPO codes will be displayed; enter the appropriate code, enter comments as necessary, and submit the form.

Relevant comments may be appended to incident history by selecting the "add comments" button. It is important to note that <u>all</u> comments appended to the incident history become a permanent part of the call history. These cannot be deleted and are easily viewed by anyone with access to CAD. The comments also do not eliminate the need to properly document relevant information on the incident PCR.