TITLE
USE OF EMS MOBILE DATA TERMINALS

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Provincial: Emergency Medical Services

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NOTE: The first appearance of terms in bold in the body of this document (except titles) are defined terms – please refer to the Definitions section.

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OBJECTIVES

• To define and standardize the use of Mobile Data Terminals (MDT) for all EMS staff who are dispatched by one of the provincial EMS Dispatch, Communications and Deployment Centres.

PRINCIPLES

• MDTs are an integral part of providing Emergency Medical Service (EMS). EMS recognizes that to be effective, MDT use must be standardized including but not limited to; aligning the terminology and identifying when to use unit statuses. It is the responsibility of EMS staff to familiarize themselves with the standardized use of MDTs. Standardized use helps to ensure EMS staff and patient safety, enables EMS data to be collected in a consistent manner and enhances communication between EMS Operations Supervisor (or designate) and Emergency Communications Officers (ECOs).

• Users are encouraged to access the Mobile for Public Safety (MPS) User Manual for further definition and description of the features or capabilities offered by the solution.

APPLICABILITY

Compliance with this document is required by all Alberta Health Services employees, members of the medical and midwifery staffs, Students, Volunteers, and other persons acting on behalf of Alberta Health Services (including contracted service providers as necessary).
ELEMENTS

1. MDT Use during EMS Shifts (Logon / Logoff & Available Statuses)

   1.1 Available Mobile (AM): Immediately upon shift commencement the EMS Crew will logon to their MDT, ensure their MDT is working and that it displays Available Mobile (AM). During the sign-on, the EMS Crew is responsible for entering all required fields including the phone number of the assigned phone that will be carried for the duration of the shift.

   1.2 Available at Station (AS): Any time the EMS Crew is assembled at a station, the EMS Crew will status Available at Station (AS).

   1.3 Available for Call Out (AC): Any time the EMS Crew is unassembled and available, or in “flex” status, the EMS Crew will status Available Call Out (AC). This status informs the ECO of Core/Flex crews that may take longer to assemble and respond.

   1.4 Available Health Integration (AH): During the course of regular duties, the EMS Crew will status Available Health Integration (AH) when providing general support at a Health Care Facility. This status informs the ECO of crews that may take longer to prepare to respond. This status is distinct from a request for Health Care Assist event.

   1.5 The EMS Crew’s current status is displayed in the bottom left corner of the MDT screen (next to the Unit ID).

   1.6 When the EMS Crew is unable to logon to their MDT, or it becomes inoperable at any time during their shift, they will notify the IT service desk.

   1.7 At the conclusion of their shift, the EMS Crew will logoff using the ‘Sign Off’ button.

2. MDT Use During Routine Events

   2.1 When dispatched to an Emergency event, the EMS Crew will adhere to the following procedure:

      a) En Route (EN): All EMS Crew members will safely assemble to the Emergency Response Vehicle and prepare to respond. Once the vehicle is responding (wheels turning), the EMS Crew will status En Route (EN).

      b) Arrive (AR): Upon arrival curb-side of the EMS unit to the patient’s location, the EMS Crew will status Arrive (AR).

      c) Transport Status (TR): Once the patient is provided with initial medical care, moved into the ambulance and is ready for transport, the EMS Crew will status Transport (TR). The EMS Crew will select their transportation...
destination from the MDT screen and will remain in this status until they reach their destination.

d) **Transport Arrive (TA):** Once the EMS Crew reach their destination they will select **Transport Arrive (TA).** Upon selecting this status, the EMS Crew will be presented with a selection of destination-specific statuses. The EMS Crew should not define a status progression upon arrival at the destination; wait until the appropriate status can be applied.

   (i) **Transfer of Care (TC):** When patient care has been transferred to the receiving facility or when a patient is assessed but refuses care and/or transport; the crew will select **Transfer of Care (TC).** While patient documentation is being completed. Crews should not remain in **Transfer of Care (TC)** status for greater than 15 minutes as this status is indicative for the ECO to anticipate units clearing from events and to make better deployment decisions using forward-looking information.

   (ii) **Destination Standby (DS):** The **DS** status is similar to **TC** status and is used in anticipation of a unit returning to service while still ‘recommendable’ in the **Computer Aided Dispatch (CAD).** This status is most appropriately used in rural environments where it will be quicker for the local unit to respond to another local event than for another EMS resource to respond from the next closest community. When an EMS Crew has transported to a destination in a suburban or rural community, is response-capable, and would likely be quickest to arrive to a local event (should it arise while still assigned to an event), the EMS Crew will select **Destination Standby (DS).**

   (iii) **Offload Delay (OD):** When an EMS Crew has been notified by the receiving site that handover will be delayed significantly beyond the target hospital interval, an EMS Crew member will select **Offload Delay (OD).**

e) **Clear (CL/AM):** After all required duties associated with the event are complete, the EMS Crew will select **Clear (CL/AM)** on their MDT as well as radio dispatch to confirm their status.

2.2 When dispatched to an Inter-Facility Transfer (IFT) event the EMS Crew will adhere to the following processes:

a) The same procedure outlined in section 2.1 (a) through (e) will apply.

b) For wait-and-return workflows the EMS Crew will request dispatch assign the return leg of the IFT after clearing the initial event. Where the EMS Crew is not able to readily access their MDT, the EMS Crew can ask Dispatch to **Clear (CL/AM)** the event and assign the return leg.
Upon completing a one-way long distance transfer, the EMS Crew will communicate their availability to dispatch as per standard practice. This will ensure consideration is given to any patients requiring transport from the destination community.

d) If no return trip is required, the unit will be assigned for coverage – which will typically be the EMS Crew’s base station. The EMS Crew will select Moving (MV) status until such time they are assigned to an event or arrive at their assigned station.

2.3 The EMS Crew is responsible for reviewing event comments to ascertain the nature of the event including information captured by the ECO that might contribute to situational awareness.

2.4 The EMS Crew will document additional information using Add Comments in the MDT event record when appropriate. This information should pertain to the operational nature of the event or response. Patient and treatment information should only be captured using the ePCR.

3. MDT Use for Routing and Navigation

3.1 The EMS Crew is responsible for reviewing the address information provided by the MDT and the event comments to determine the event location.

3.2 When navigation directions are provided rather than a verified address, the EMS Crew will navigate using the driving directions or supplemental information provided in the event remarks. Comments including “ACTUAL ADD” or an address that includes “!!! SEE NOTES ADDRESS VERIFICATION STILL IN PROGRESS” are indicators of a potentially difficult-to-find patient and the crew should read the notes regarding the actual location; routing to the pin may not be accurate.

3.3 Where the EMS Crew is satisfied with the description of the event address, the EMS Crew will use the Route to Event function on the event info page to generate the fastest route to the event. This route can be declined for an alternate path, provided the EMS Crew has the ability to arrive at the event as quickly and safely as possible.

3.4 Locating a patient is a mutual responsibility shared by the EMS Crew and the ECO. If MDT instruction is unclear, the EMS Crew will contact the ECO for additional information or to assist in problem solving when appropriate.

3.5 Where a deficit in the map is identified, please provide this feedback to dispatch who will submit a request to have the issue corrected.

4. MDT Use When Moving Between Stations [System Status Management (SSM)]

4.1 Moving (MV): When the EMS Crew is requested/paged to relocate to another station they are to select Moving (MV) status on their MDT indicating they are moving between stations. This is to occur in a timely manner.
4.2 The EMS Crew should proceed immediately and directly to their assigned cross-cover location.

4.3 The EMS Crew will select **Available at Station (AS)** or **Available Mobile (AM)** upon arrival at their assigned deployment location.

4.4 If tasked to an event, refer to 2.1.e. On clearing from an event while on cross-coverage, the EMS Crew will communicate with dispatch to determine if coverage is still required.

4.5 When cross coverage is no longer required, the EMS Crew will apply the same procedure while returning including the use of **Moving (MV)** status.

5. **MDT Use to Indicate Out of Service**

5.1 The EMS Crew is required to discuss any utilization of an **Out of Service (OS)** code with an immediate EMS Operations Supervisor (or designate). If appropriate, the EMS Operations Supervisor (or designate) will communicate the nature of the **Out of Service (OS)** to dispatch.

5.2 The EMS Crew cannot request to be placed in an **Out of Service (OS)** status by contacting dispatch directly. This must be arranged by an EMS Operations Supervisor (or designate).

5.3 The EMS Crew will confirm that the **Out of Service (OS)** status has been applied by viewing the lower banner of their MDT.

5.4 Once the EMS Crew is ready to resume regular response capabilities, they will press the **'In Service'** button on their MDT. The EMS Crew will confirm the status by viewing their MDT status bar.

6. **MDT Use to Indicate Arrived Dangerous Status**

6.1 **Arrived Dangerous (AD):** The EMS Crew will select **Arrive Danger (AD)** status once they have arrived at the staging area for the event. When directed by dispatch, this is a **Dispatch-Advised Staged Event**.

6.2 The EMS Crew will park a safe but reasonable distance from the event and not within view of the event or participants. If visible, the EMS Crew may run the risk of being drawn into the event by bystanders.

6.3 When the EMS Crew determines from the information provided that they are going to enact a **Crew-Initiated Staged Event**, the EMS Crew will select **Arrive Danger (AD)** on their MDT. It is the EMS Crew’s responsibility to communicate the decision to stage to dispatch. The EMS Crew must identify the staged location on their MDT using **Event Comments**.

6.4 The EMS Crew will use good and sound judgement when electing to initiate a staged event.
6.5 When the scene is determined to be safe, the EMS Crew will proceed directly to the scene and select the Arrive (AR) status upon arrival.

7. **MDT Use of the Emergency Button**

7.1 If the EMS Crew is in imminent danger and are not able to flee on foot or drive away, they will immediately press the Emergency (EMERG) button. A confirmation button will appear, and after being pressed, dispatch will be immediately notified of the unit’s GPS location (not the callers address). Dispatch will attempt to reach the crew on the radio for further information while dispatching Police and an EMS Operations Supervisor (or designate) to the unit’s location.

7.2 This Emergency status can only be deactivated by dispatch once contact has been made to either the EMS Crew or an EMS Operations Supervisor (or designate) on scene.

8. **MDT Use for Newton’s Cradle Transfers**

8.1 When the EMS Crew is assigned to a Newton’s Cradle Transfer (NCTX), the following workflow elements should be considered:

   a) The workflow outlined in sections 2.1 and 2.2 will apply.
   b) The EMS Crew transporting the initial leg will treat the meeting point as the transport destination and use Transport Arrive (TA) status upon arrival.
   c) The EMS Crew receiving the patient and transporting the second or subsequent legs will treat the meeting point as the scene location and use Arrive (AR) status.
   d) Both EMS Crews are responsible to adhering to standard practice pertaining to NCTX.

9. **MDT Use to Re-Status or Accidental Status Progression**

9.1 Any time a status needs to be reapplied, or a status is applied accidentally, when using a MDT, the EMS Crew will select the appropriate status. For example, a unit arrives on scene and determines it is not at the correct location; re-apply the En route (EN) status and select Arrive (AR) when next arrived.

9.2 When a re-status occurs during an event, the EMS Crew will add an event comment to explain the re-status.
DEFINITIONS

**Computer Aided Dispatch (CAD)** means an Incident Management system that provides call-center and communications center operators with tools that they need to field calls, create and update incidents, and manage an organization’s critical resources by providing real-time interaction of crucial data.

**Core/Flex** means a staff scheduling and deployment model predominately utilized in rural Alberta; based on 24 hours capture of crew for either one or more consecutive days.

**Crew-Initiated Staged Event** means that the front-line EMS Crew has assessed a risk to themselves or others from the information provided and have determined a need for a scene to be cleared by others, (i.e. Police, Fire, etc).

**Dispatch-Advised Staged Event** means that a dispatcher has determined a risk to staff or others that fall outside the parameters for a Mandatory Staged Event.

**EMS Crew** means to refer to the EMS staff; this may mean one or more persons, who are assigned to active duty and as part of their duty, are responsible to operate an emergency response vehicle.

**EMS Dispatch, Communications and Deployment Centers** means under the mandate of the Emergency Health Services Act, responsible to receive community requests for EMS and inter-facility transport requests from health care sites along with the deployment and dispatching of all ground and fixed wing EMS resources in Alberta through three AHS dispatch centers and three contracted satellite dispatch centers.

**Emergency Communication Officer (ECO)** means an officer who answers; call evaluates, and delivers emergency communications from a caller to the appropriate party following approved guidelines from Alberta Health Services (AHS) Medical Direction and International Academy of Emergency Medical Dispatch.

**Emergency Response Vehicles** means an EMS Vehicle including, but not limited to, Ambulances and paramedic response units that are equipped with Emergency Warning Devices and used or intended to be used for providing emergency medical services.

**Note:** The term, “ambulance,” will be used in this policy to describe emergency response vehicles.

**Mobile Data Terminal (MDT)** means a computer mounted in the cab of an emergency response vehicle that is used to communicate event information between EMS Dispatch and Operations staff.

**Newton’s Cradle Transfers (NCTX)** means the act of transferring care from one EMS crew to another EMS crew in transit (i.e. EMS crew #1 leaves Edmonton and meets EMS crew #2 in Red Deer where they transfer patient care; EMS crew #2 then transports the patient to a Calgary medical facility)

**Supervisor** means a leadership role in EMS that reports directly to a Manager. This position is responsible and accountable for providing frontline direction and leadership towards the
activities of EMS in support of the vision, mission and business plan of Alberta Health Services. A supervisor can be from either a direct delivery service or a contracted provider.

**System Status Management (SSM)** means the process of preparing the system for the best possible response to the next EMS call. This is achieved by strategically deploying resources to high priority posts.

**REFERENCES**

- Alberta Health Services Governance Documents:
  - CAD Data Standard - Unit Statuses (#GV-DCD-065)
- Non-Alberta Health Services Documents:
  - Provincial MDT Blended Delivery Program
  - Provincial MDT User Guide