
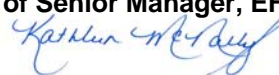


Program Document No.: 12013.00		Subject: TMR Communications Between MFR Agencies and EHS MCC	Type: Policy
Effective Date:	March 9, 2005	Revision Date 01:	
Approval Date:	March 9, 2005	Revision Date 02:	
Review Date:	February	Revision Date 03:	
Replaces:	None	Revision Date 04:	
Signature of Director, EHS Provincial Programs: 		Signature of Senior Manager, EHS MFR Services: 	

1.0 Purpose:

- 1.1 This policy describes the protocols and manner of radio communications between MFR agencies in the field and the EHS Medical Communications Centre.

2.0 Definitions:

- 2.1 MFR - Medical First Responder(s)
- 2.2 EHS - Emergency Health Services
- 2.3 TMRS - Trunked Mobile Radio System
- 2.4 FRCO - First Response Communications Officer

3.0 Policy:

- 3.1 **General:** All radio communications with the EHS Medical Communications Centre will occur using the Trunked Mobile Radio System (TMRS) on the appropriate regional talkgroup (i.e. EHS-W, EHS-C, EHS-N, or EHS-E). These talkgroups will be monitored full-time at the EHS Medical Communications Centre FRCO console; therefore, no operations communications should occur on these talkgroups. These talkgroups are **not** monitored full-time by the volunteer MFR agencies.

- 3.1.1 The call sign for the EHS Medical Communications Centre shall be **"Ambulance Dispatch"**.
- 3.1.2 Each MFR agency shall use their Fire or Service name on the TMR when communicating with the EHS Medical Communications Centre.
- 3.1.3 When initiating radio contact with another party, always state the call sign of the party being called first, followed by the call sign of the party making the call. (i.e. *"Ambulance Dispatch, this is Brookfield 306, over."*)

PDN: 12013.00	Subject: TMR Communications between MFR Agencies and EHS MCC
Effective Date: March 9, 2005	Revised: Yes _____ No _____ (please check one)

3.2 **Appropriate information to communicate to EHS Medical Communications**

Centre: The FRCO monitors all four EHS MFR talkgroups, makes MFR notification decisions and handles many other tasks which can be time consuming. For these reasons, communications with the FRCO must be limited to essential information and all unnecessary traffic avoided.

- 3.2.1 When requested by your dispatcher to respond to a medical emergency, always acknowledge to your dispatcher that your agency is responding and confirm any additional information.
- 3.2.2 Establish contact with EHS Medical Communications Centre on the appropriate EHS regional talkgroup and acknowledge that your agency is responding. (i.e. *"Ambulance Dispatch, this is Brookfield 306. We are responding to the medical call at 123 Main Street, Brookfield."*) The FRCO may not immediately acknowledge the transmission as s/he may be busy with other traffic or tasks, however the radio transmission is recorded on the voice recorder and the FRCO can replay the transmission if necessary.
- 3.2.3 Should additional patient or location information be required, make a TMR call to EHS Medical Communications Centre and request the information.
- 3.2.4 When the responding agency arrives "on-scene", use the TMR stating *"Ambulance Dispatch", "Brookfield unit 306 is on scene."* There should be no further communication on this talkgroup from this incident until the responders are ready to provide any pertinent patient information.
- 3.2.5 After the scene and patient status are determined, a designated **Incident Commander or Incident Communications Officer** should voice call *"Ambulance Dispatch, this is Brookfield 301, over."* Wait for acknowledgement from the FRCO then provide the information to her/him as promptly and concisely as possible. (i.e. *"We have a three-vehicle collision on Highway 102. There are three casualties requiring transport, with one having a critical injury indicating air transport."*)
- 3.2.6 Vital information is only to be provided to the FRCO if there will be an impact on patient outcome or ambulance response. The FRCO will in turn relay any pertinent information to the responding ambulance crew(s).
- 3.2.7 There should be no other radio traffic with this incident on the EHS talkgroup unless initiated by the FRCO, or unless patient status changes substantially.

PDN: 12013.00	Subject: TMR Communications between MFR Agencies and EHS MCC
Effective Date: March 9, 2005	Revised: Yes _____ No _____ (please check one)

3.2.8 As patients are removed from the incident scene, the EHS ambulance crew(s) communicate with EHS Medical Communications Centre to advise of their status. There is no need for the MFR agency to provide similar redundant information to the EHS Medical Communications Centre or to their own dispatcher.