



## Ambulance Radio Communications Procedure

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## 1 Scope

- 1.1. This procedure explains the process through which South East Coast Ambulance Service NHS Foundation Trust (the Trust) will use radio communications within normal daily operations.
- 1.2. The procedure will also explain how the radio system will be utilised to maintain staff welfare at incidents or monitor situations of potential risk.
- 1.3. This procedure presumes that all users have been fully trained in the use of radio equipment currently in use at the Trust. In addition, the users will be familiar with radio terminology.
- 1.4. Failure of the Trust to demonstrate robust compliance with these procedures could lead to removal of the licence by the Department of Health to operate on the provided radio network.
- 1.5. This procedure is designed to facilitate use of any system provided to the Trust for operational use by the Department of Health, although some operational practices may vary depending on the system in use at the time.

## 2 Procedure

### 2.1. Normal Radio Operations

- 2.2. When commencing the start of a shift, all operational staff must ensure they have the correct number of terminals, each with a fully charged battery and that all are switched on with volume levels set to an appropriate level for the individual user to ensure no important information is missed. A radio check should be completed as part of the shift sign on process as soon as possible. If no radio check has been completed within 5 minutes of the start of a shift, the Resource Dispatcher will contact the crew and complete a radio check. Consistent lack of radio checks will be escalated to the Duty Operational Team Leader.
- 2.3. For general use, the Trust will operate the radio network in what is known as individual call (Point to Point). This means that only the EOC and the specific terminal that has either requested speech or acknowledges a speech request will be able to hear the conversation. All other terminals on the talk group will be silent.



- 2.3.1. A routine request to speak will place a data call into a queue to be answered by the RD. The Control Room Operator Positions (CROPS) will display to the RD all calls in time order. The RD will select the call sign and the CROPS will generate a point to point voice call to that call sign. All radios associated with the call sign will “alert”, any handset may be used to answer the call.
- 2.3.2. Group calls can be made when there is a need to pass an urgent message to resources within a specific TG or TG’s. Messages such as hospital delays, road closures, SMP levels, specialist resource availability and incident related issues are examples of its use. All Category 1 and Grade 1 back up incidents must be broadcast via a group call. This ensures situational awareness to potential available resources is maintained including those who are not currently booked onto the CAD such as Response Capable Managers (RCMs).
- 2.3.3. Group calls are also the standard form of radio communications during major incidents, significant incidents and when specified for planned events.
- 2.3.4. When using group call, RD’s should be aware of the sensitive nature of certain information, which will very likely be heard by members of the public and other organisations. In accordance with Information Governance and Data protection legislation, the use of personal information must be kept to a minimum. General broadcasts must be kept short and concise in line with radio etiquette.
- 2.3.5. Location information must never be specific. Road names therefore cannot be provided. Alternatives such as shop names or similar must also be avoided. General location information can be provided, and it is beneficial to field operational resources if these can be as specific as possible, for example: Kennington, Ashford; Kemptown, Brighton; or Woodbridge, Guildford. General broadcasts must be repeated once.
- 2.3.6. Handheld terminals are configured to alert when an incident is assigned to the call sign on the CAD. Crews are expected to return to their vehicles immediately when an alert goes off and acknowledge the incident on the MDT. If no incident appears on the MDT, the crew must press the priority button on the handheld or base unit to speak to the RD immediately.
- 2.3.7. Priority requests to speak enable crews to notify the RD that they have an urgent message to pass. It will be answered only second in priority to emergency button activation. It should only be used for situations when an urgent communication with EOC is required. Examples include significant deterioration in patient condition, urgent scene updates requiring dispatch of additional resources and/or other agencies.



2.3.8. Operational staff will normally operate on the talk group associated with the dispatch desk in which they are working. If working or moved to another dispatch desk and requested to change TG, the operational staff must confirm if the RD wants all units changed to the new TG or just one unit to monitor both TG's.

2.3.9. Direct Mode of Operation (DMO) should be used only where conditions necessitate, e.g. when entering on foot a tunnel where there is no radio signal coverage. If possible, the RD should be informed. Terminals should be returned to Trunked Mode of Operation (TMO) once coverage becomes available. If the vehicle radio still has signal coverage, it should be set to Gateway mode before users leave the vehicle and switch their hand portable terminals DMO.

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#### 2.4. Use of Radio whilst Driving

2.4.1. In line with legal requirements, drivers of vehicles that operate a radio system whilst driving must only do so when it is safe. All messages passed should be brief to avoid unnecessary distraction. It is the driver's responsibility to ensure a good driving standard, and failure to do so could leave the driver open to prosecution for dangerous or careless driving.

#### 2.5. Telephony via Radio Network

2.5.1. Terminals are configured to access the telephone network on a number of predetermined telephone numbers. Most of these are related to specialist hospital units and other Trust business numbers. General telephone communication is not available via handholds. The CROPS has the functionality to make outbound calls via predetermined numbers or general telephone numbers using the dial pad.

2.5.2. Operational Resources should use the telephony function to pass ASHICE calls to receiving hospitals. If after two attempts, they are unable to contact the hospital priority line or encounter technical difficulties then they should contact EOC using the "Priority" Request to Speak button. EOC should take details of the ASHICE and pass it through to the receiving hospital by telephone.

#### 2.6. Terminal Security

2.6.1. The Trust is governed by a strict licence agreement over its use and management of users and terminals of the radio network.

2.6.2. All staff are required to exercise due care and attention to safeguard all terminals against theft, loss, or damage. Staff have responsibility to take care of all equipment in their care during their period of duty. Any equipment that is misused, damaged intentionally or neglected will be dealt with under the Trust's disciplinary policy.



- 2.6.3. The Trust is required to have robust security arrangements for the handling and safe storage of all terminals. When on duty all mobile terminals will be worn in a protective case as supplied using carrier clips provided. Terminals are not to be left unattended in vehicles at any time during shift.
- 2.6.4. At the end of shift where there is an oncoming crew Local security procedures must be followed regarding storage of handhelds.
- 2.6.5. Any terminal lost on duty or found missing at commencement of shift must be reported to the Operational Support Desk (OSD), DTL and Operational Commander or Tactical Commander immediately. While still switched on, terminals can be tracked and recovered. The person identifying the loss must also report via the Trust Datix online incident report process, (DIF1)
- 2.6.6. Any Trust vehicle going to be stored in off Trust facilities, i.e. at repair at an outside contractor must have hand held terminals removed, fixed terminals stunned, and the vehicle locked when unattended. Fleet services must inform OSD of all vehicles going to outside contractors to enable radios to be stunned.
- 2.6.7. RCMs with personal issue handsets must ensure the terminal is kept securely and must not be left unattended in vehicles either at work or home. There is an understanding that family members and partners are insured and permitted to drive lease cars but must not use any terminal.
- 2.6.8. Hand portable terminals in front-line vehicles are linked to the vehicle call sign must not be moved to other vehicles, even on a temporary basis.
- 2.6.9. Terminals must not be lent to any person outside the Trust without the express permission of the Specialist Operations Communication Coordinator (SOCC). The only exception would be in a major incident where terminals are issued to a medical team, or medical incident officer as part of the communication and command structure of the scene management.
- 2.7. **Crew Safety**
- 2.7.1. All terminals have an emergency button (crew down button) that is only to be used for situations where the crew are facing imminent danger.
- 2.7.2. The emergency button located at the top of the handset between the antenna and navi-knob must be pressed for a minimum of 2 seconds to activate an alert, the handset will then vibrate/audible alert as well as show on the screen the activation has been successful.
- 2.7.3. If the button is pressed by mistake, a priority request for speech request should be selected and the RD informed of the error.



- 2.7.4. The RD acknowledging the emergency button is responsible for dealing with the activation. The DTL must be informed and arrange for the Police to be informed immediately using agreed local police force terminology for crews in danger.
- 2.7.5. The duty Operational Commander should be informed and activated to the Crew's location immediately.
- 2.7.6. If the RD is able to determine from the transmission that the activation was definitely in error, the crew should be contacted immediately for clarification. If there is any doubt the process in 2.7.3. and 2.7.4 should be followed.
- 2.8. **Ambient Listening**
- 2.8.1. Ambient listening should be used where there is concern for the welfare or safety of a crew. For example, after the activation of the emergency button to extend the listening time as to the situation at scene. It is difficult to be prescriptive exactly when this function should be used but all uses must be justified on their individual merits, to ensure welfare of staff.
- 2.8.2. Ambient listening can be used to follow up potential miss-use of a terminal, where a radio may have been acquired by foul means. This would be purely in the interest of gathering evidence to support any prosecution for the theft or inappropriate use.
- 2.8.3. Where a terminal is not supposed to be in use, but is causing disruption to the network, ambient listening can be used in an attempt to confirm its location.
- 2.8.4. When appropriate use of the ambient listening facility is required, the Emergency Operation Centre Manager (EOCM) or Dispatch Team Leader (DTL) should direct activation of this facility.
- 2.8.5. All use of ambient listening must be recorded in the incident CAD comments and the operation crew is informed that the event has been recorded via ambient listening.
- 2.8.6. Occasions of inappropriate use of this facility may be contrary to Section 2 of the Human Rights Act and may lead to court proceedings.
- 2.8.7. EOCMs and DTLs will uphold the highest standards of professionalism in relation to this facility and will ensure its use is only invoked where appropriate and in accordance with this procedure. Any use of ambient listening outside this procedure must be documented via the Trust's Datix online reporting system, (DIF1).



- 2.8.8. Control staff must be aware that the CROPS system has the ability to ambient listen to any airwave device within Secamb via the handset ISSI number. The Trust will be issued with a universal pin number to enable DTLs and EOCMs to ambient listen.
- 2.8.9. The talk mode automatically places itself into open mode (selected), this will display as a red box with a blue banner. The user must remember to change back to monitor mode.
- 2.9. **Major Incident**
  - 2.9.1. Each EOC area is allocated dedicated major incident TGs. In the event of a significant incident, potential or actual major incident the EOCM will allocate a dedicated RD to set up the major incident TG. Crews responding to the incident will be notified of the TG to be used.
  - 2.9.2. The TG will be used to manage the initial response to the incident, and to maintain communication with the scene and the EOC throughout the duration of the incident.
  - 2.9.3. The Major Incident Dispatcher should request all assigned resources to change their handsets to the relevant Major Incident talk group. The vehicle base set should remain on the resource's local TG.
  - 2.9.4. Further local scene command TG's can be set up following arrival of the Hart Forward Command Vehicle. Communications and command facilities will be provided from scene. The decision on how to manage communications will depend on the size of the incident and will be made in liaison with the Operational Tactical Commander at scene, and the EOC Tactical.
- 2.10. **Inter-Operability**
  - 2.10.1. Interoperability TGs are provided to enable emergency services and partner agencies to communicate via radio at the scene of an incident.
  - 2.10.2. Interoperability can be requested by the Tactical Commander where the operational effectiveness of the emergency responders may be enhanced by inter-agency communications.
  - 2.10.3. Interoperability will be facilitated by the relevant Police force on allocated TGs in accordance with the Multi-Agency Standard Operation Procedure.
  - 2.10.4. The EOC managing the incident will monitor the TG for recording purposes only.



- 2.10.5. All TGs in use must be monitored by EOC for recording purposes and future requirement for post incident debrief, investigation or public enquiry.
- 2.10.6. Local testing of inter-operability TG's will occur on a regular basis at a time locally agreed with other stakeholders.
- 2.11. **National Ambulance Talk Group**
  - 2.11.1. A talk group is provided for national resilience for every ambulance control room in England to communicate.
  - 2.11.2. The EOC's are responsible for monitoring this TG via a dedicated desk top radio and via the CROPS terminals. The national TG's will be pre-selected and automatically monitored.
  - 2.11.3. A monthly test will be carried out on the TG by a nominated ambulance Trust.
  - 2.11.4. This is a separate TG to the Trust hailing TG.
- 2.12. **Events**
  - 2.12.1. Special events where dedicated Trust resources are attending will be managed on dedicated events TGs. These will be notified as part of the operational instructions for the event.
  - 2.12.2. The EOC within the area of the event will monitor the TG for recording purposes only. If direct contact with EOC is required, the route to do this will be in the operational instruction.
- 2.13. **Business Continuity**
  - 2.13.1. There is significant resilience built into the radio network at national, regional, and local level. Business Continuity Incident (BCI) plans within the Trust are available for dealing with failure and should be referred to for detailed arrangements.
  - 2.13.2. In the event of a total network failure, the Trust will utilise mobile telephones allocated to every vehicle for voice communications details of which are held in the Trust's CAD System.
- 2.14. **Technical and Troubleshooting Arrangements**
  - 2.14.1. All technical difficulties with any airwave terminal equipment will be reported to the OSD which will operate as a first line help desk. For specific EOC equipment failures and network issues, EOC Critical systems must also be informed.





2.14.2. The terminal will lock after 3 PIN entry attempts. STOP after the second attempt if the PIN fails, if any terminal is found locked it must be reported to the OSD desk.

2.15. **Radio Etiquette**

2.15.1. Correct voice procedure is essential for the accurate dissemination of information and when asking for and receiving radio transmissions. Incorrect use causes confusion, mistrust in equipment and ultimately compromises the safety of patients and staff.

2.15.2. The network is not to be used to carry out general or casual conversations. Transmissions of personal messages and familiarity such as first names should not be used. Use of full call signs and phonetic alphabet will be used in order to distinguish different units and reduce error or confusion.

2.15.3. The following guidelines form part of professional conduct, all users need to be aware recordings can be used for audit, training, and investigations. This also applies externally for legal purposes such as Coroners Court and inquests. There are basic rules which, when followed, assist in providing good discipline for radio use:

2.15.4. A – Accuracy (Formulate your message prior to transmitting).

2.15.5. B – Brevity (Keep the transmission concise and do not 'chat').

2.15.6. C – Clarity (Ensure your transmission is comprehensive utilising RSVP).

2.15.7. R – Rhythm (Use normal speech rhythm).

2.15.8. S – Speed (Do not speak too quickly. Speak at a normal conversation speed or slower when using phonetics).

2.15.9. V – Volume (Do not shout or speak softly).

2.15.10. P – Pitch (Use normal conversation pitch. High pitched transmissions can cause alarm).

2.16. **Radio Terminology**

2.16.1. Transmissions will be kept to the minimum and should only contain professional and recognised terminology and codes.

2.16.2. When receiving a transmission, the term "Received", or "Roger" should be used to acknowledge receipt.



- 2.16.3. When opening a transmission, the message should be preceded by the relevant call sign. "SECAmb to call sign" or "call sign to SECAmb control".
- 2.16.4. When closing a transmission, "Over" should be used when expecting a response or, "SECAmb Out" when no response is required.
- 2.16.5. When it is necessary to transmit a long message ensure that frequent breaks are used. No transmission should last for more than 20 seconds and breaks should be used at natural intervals. When a break is used, the question, "Received so far?" may be used to inform the recipient that there is further information to come. The recipient should acknowledge appropriately.
- 2.16.6. All radio users must ensure professional dialogue is maintained at all times. At no time will it be acceptable for anyone to use abusive, threatening, bullying nature or foul language over the radio. This will be dealt with in the same way as if the conversation was over any other medium or face to face. Trust disciplinary procedures will apply as appropriate. A data information form (DIF1) must be completed for any issues relating to radio etiquette, that requires escalation.
- 2.16.7. RD's must ensure they consider the medium by which information is being passed, and where the information is sensitive or potentially distressing, consider how that is delivered.
- 2.16.8. Although the radio network provides a secure encrypted form of communication all staff are reminded that security can be compromised when passing information. Therefore, it may be appropriate to ensure that the recipients are "free to speak" prior to passing sensitive information. Additionally, when Operational crews are with members of the public or other persons not authorised to hear the transmission, they should request the RD to "wait before talking" to give time for the receiver to move to a more secure location.
- 2.16.9. The network is a shared system and is subject to capacity restrictions at peak times. Different types of messages are prioritised through the system, by type, and by user. There may be times where voice communication is delayed due to network capacity.
- 2.16.10. The Trust is charged for the airtime used on the network, very much like mobile telephone usage. This underpins the need for all communications to be concise and well structured.
- 2.16.11. Failure of any user to follow this procedure may lead to their individual ability to use the network being removed. This would affect the ability of someone to carry out their role if it is a requirement of their post.

2.17. **Training**



- 2.17.1. Only staff within the Trust that have been trained and completed a written and practical assessment provided by the Learning & Development department or an approved Airwave Radio Trainer can use a radio terminal. The Learning & Development team will maintain an up to date record of all trained users.
- 2.17.2. Third-party ambulance providers such as St. John Ambulance and British Red Cross may retain and operate trust radios under licence. They may also use their own trainers provided they have been trained by the Trust.
- 2.17.3. In EOC, only staff that have successfully completed a CROPS course provided by an approved CROPS trainer can utilise the equipment and network.

### **3 Responsibilities**

- 3.1. The Chief Executive Officer has overall responsibility for the Trust having arrangements to meet its obligations for the Ambulance Radio Programme and Licensing requirements, therefore the adherence to, and delivery of, this procedure.
- 3.2. The Chief Executive Officer delegates day to day responsibility to the Executive Director of Operations. They must ensure the procedure is effectively adopted to facilitate the appropriate deployment and utilisation of resources.
- 3.3. The Executive Director of Operations will devolve accountability to the Operating Unit Managers in Field Operations and Emergency Operations Centres (EOC).
- 3.4. All staff with a role in the Trust where they will need to operate equipment on the radio network must be familiar with the contents of this procedure and its application in operational scenarios.
- 3.5. The Specialist Operations Communication Coordinator (SOCC) is accountable for the authorisation, training and security arrangements for any terminals lent to private or voluntary providers in support of core operations.
- 3.6. The Head of Integrated Care Training & Development is accountable for arranging training of EOC staff to complete the CROPS course which is provided by an approved CROPS trainer in order that they can utilise the equipment and network.



#### **4 Audit and Review**

- 4.1.1. The SOCC will attend monthly meeting chaired by the Department of Health ARP Service Relationship Manager (SRM) with the radio network providers to review system availability and fault report standards. The SCM will be supported at this meeting with an operational and emergency preparedness representative.
- 4.1.2. The SOCC will produce an annual report for the OGWG detailing any incidents adversely affecting the use of the network.
- 4.1.3. RD's will be audited for compliance of the procedure, this will be the responsibility of the EOC training team and Dispatch Team Leaders.
- 4.1.4. Serious or continual breaches by any user will be managed through the Trust's disciplinary or capability policy.
- 4.1.5. This document will be reviewed in its entirety every three years or sooner if new legislation, codes of practice or national standards are introduced, or if feedback from employees indicates that the policy is not working effectively.
- 4.1.6. All changes made to this procedure will go through the governance route for development and approval as set out in the Policy on Policies.



## 5 Equality Analysis

- 5.1. The Trust believes in fairness and equality, and values diversity in its role as both a provider of services and as an employer. The Trust aims to provide accessible services that respect the needs of each individual and exclude no-one. It is committed to comply with the Human Rights Act and to meeting the Equality Act 2010, which identifies the following nine protected characteristics: Age, Disability, Race, Religion and Belief, Gender Reassignment, Sexual Orientation, Sex, Marriage and Civil Partnership and Pregnancy and Maternity.
- 5.2. Compliance with the Public Sector Equality Duty: If a contractor carries out functions of a public nature, then for the duration of the contract, the contractor or supplier would itself be considered a public authority and have the duty to comply with the equalities duties when carrying out those functions.

## 6 Glossary

- 6.1. Emergency Operations Centre (EOC) - The location from where all emergency, urgent and routine calls for ambulance assistance are taken from members of the public, doctors and other healthcare professionals are received. The EOCs are responsible for the passing by voice radio, mobile data, or telephone all patient related information to operational staff who will be attending an incident.
- 6.2. Control Room Operator Positions (CROPS)– The computer system which links the Resource Dispatcher (RD) in the EOC with the field operations crews is via radio network.
- 6.3. Trunk Mode Operation (TMO) - The setting for a terminal to operate in point to point operation.
- 6.4. Direct Mode Operation (DMO) - The setting for a terminal to operate in back to back mode within certain vicinity.
- 6.5. Point to point - Is a method of communicating on Airwave between EOC and a terminal or call sign. It is a call from the EOC directly to one resource group or individual where no one else can hear the conversation.

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- 6.6. Request to Speak (RQS) – A status (data) message sent from a radio to a CROPS terminal to request the RD to make a routine voice call back to the radio user.
- 6.7. Priority Request to Speak (PRQS) – A status (data) message sent from a radio to a CROPS terminal to request the RD to make a priority (urgent) voice call back to the radio user.
- 6.8. Resource Group - A group of radios on one vehicle that will work collectively as the vehicle call sign. The group is used because one ambulance, for example, would have a fixed terminal in the vehicle cab and each of the two crew members has a hand held terminal.
- 6.9. Talk Group (TG) - Is a collection of resource groups within a defined area. The Trust operates 14 primary dispatch TGs. Every primary dispatch TG also has a secondary TG for redundancy in case of any failures.
- 6.10. Group Call - Is where a message from EOC is simultaneously broadcast to all resource groups and individuals within a TG or selection of TGs. It can also be used at times of business continuity caused by failure of any part of the EOC critical systems or to broadcast the same message across multiple resources at the same time.
- 6.11. Gateway mode – This is a process by which the vehicle terminal can be used to boost the coverage and hand held terminals in the local area.
- 6.12. The Ambient Listening Facility - Enables the EOC to activate a terminal in possession of operational staff and listen in to the immediate environment without the knowledge of the user, dependent upon certain criteria as detailed later in section 4.5 of this document.
- 6.13. Hailing TG – This is provided for any other emergency service user of the network or ambulance resources from other trusts to use in the event they need to communicate with the Trust or require assistance whilst travelling through the Trust's operational area. The Hailing TG will be monitored at all times by EOC. All ambulance trusts have Hailing TG's and staff should familiarise themselves with those TG's available in a neighbouring trust areas.
- 6.14. Computer Aided Dispatch (CAD) - This system logs all incident details and supports the mobilisation and monitoring of all incidents and resources.
- 6.15. Mobile Data Terminal (MDT) - The vehicle located units that receive all incident related and response post actions that must be carried out by the crew. The MDT network is interfaced with the Airwave network to provide a link for mobilisation alerts.
- 6.16. Datix data information form – (DIF1) – The Trust's internal on line incident reporting system, used for reporting failures in process or events that require investigation.

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- 6.17. Surge Management Plan – The Trust’s escalation procedure for the management and actions during periods of high demand.