

FIREMANAGER UPDATES AND NEW FORMS

2018 Mid-Year Progress Report



UPDATES TO *MY INFO*

MY INFO

- **You are the only one who can see your own information!**
- Several sections have been updated in the My Info tab that give the user enhanced flexibility
- Personnel can edit this information by going to the My Info tab.
- To view your My Info information, go to the Reports tab, click on Individual Member, and expand the Member Attributes sections.

MY INFO- DRIVER'S INFORMATION

- Users can take a picture of their Drivers License and DOT Medical Card (when applicable) and upload them right to their profile by clicking the Add File link.
- Users can also see their driving status for all Lineboro apparatus.

Driver's Information & Status

Drivers License State:

Maryland

Drivers License Number:

Drivers License:

Add File

Drivers License Expiration:

exp

DOT Physical Expiration (If EVOD):

exp

DOT Card:

Add File

3 Column

Ambulance 79:

LS 7:

Duty 7:

Utility 7:

Brush 76:

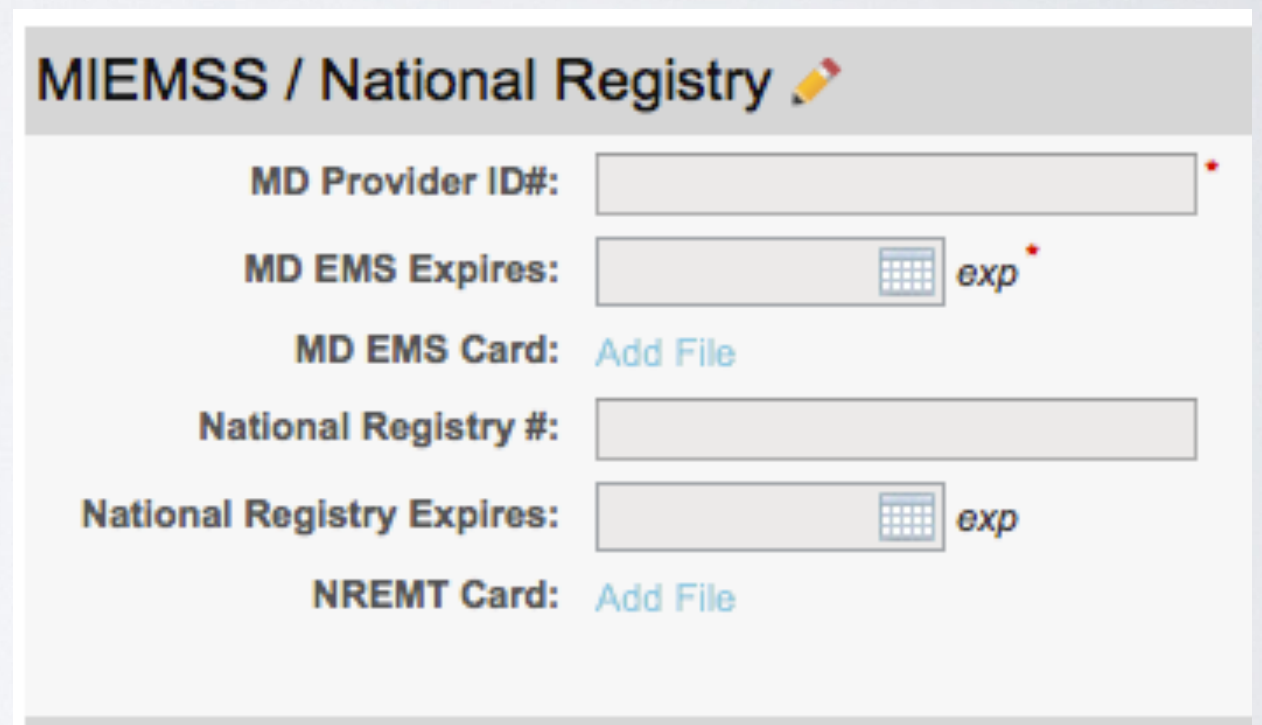
Engine 72:

Engine 73:

Tanker 7:

MY INFO- MIEMSS / NATIONAL REGISTRY

- Users can upload, or take a picture of, their MIEMSS and NREMT cards and upload them right to their profile by clicking the Add File link.



The screenshot shows a web form titled "MIEMSS / National Registry" with a pencil icon. The form contains several input fields and links:

- MD Provider ID#:** A text input field with a red asterisk.
- MD EMS Expires:** A date input field with a calendar icon and the text "exp" and a red asterisk.
- MD EMS Card:** A link labeled "Add File".
- National Registry #:** A text input field.
- National Registry Expires:** A date input field with a calendar icon and the text "exp".
- NREMT Card:** A link labeled "Add File".

MY INFO- CERTIFICATIONS

Certifications 3 Column

CPR Expires: <input type="text"/> exp	ACLS Expires: <input type="text"/> exp	PALS Expires: <input type="text"/> exp
CPR Provider: <input type="text"/>	ACLS Provider: <input type="text"/>	PALS Provider: <input type="text"/>
CPR Card: Add File	ACLS Card: Add File	PALS Card: Add File

- Users can upload or take a picture of their CPR, ACLS, and PALS cards (when applicable) and upload them right to their profile by clicking the Add File link.

UPDATING YOUR *MY INFO*

- Personnel with access to FireManager, including all paid personnel, are asked to go into the My Info tab and update all outdated or blank information.
- Updates should be entered by July 31st.

NEW AND UPDATED FORMS

FORMS

- Numerous forms are available for employees to communicate information pertaining to unit checks, inventory levels, and other vital operational information.
- Employees can submit forms, modify certain forms, and run reports on forms to see a trend or history pertaining to a certain item.
- Certain forms are required, while others only need to be submitted on an “as-needed” basis.

FORMS

NEW / UPDATED

- The Forms dropdown menu has been modified to only show the forms most employees use on a regular basis.
- Several forms have been enhanced to include the ability to upload files directly into the forms. Some members are already using this feature.
- New forms have been added to streamline daily operations and improve communication.
- The forms will only work as well as the people who are using them. To be successful will require everyone's input.

FORMS

The following forms need to be submitted **DAILY**:

Form Number	Form Name
161	Controlled Substances Daily Check (ALS complete at EACH shift change)
181	LS 7- Daily Check
191	M 79- Daily Check

FORMS

The following forms need to be submitted **WEEKLY**:

Form Number	Form Name	Day
163	Controlled Substances Monthly Check	Monday (1st Monday only)
192	M 79- Weekly Check	Monday
182	LS 7- Weekly Check	Tuesday
722	E 72- Weekly Check	Tuesday
251	Oxygen Supply Inventory	Wednesday
732	E 73- Weekly Check	Wednesday
752	TT 7- Weekly Check	Thursday
772	U 7- Weekly Check	Thursday
762	B 76- Weekly Check	Friday
782	D 7- Weekly Check	Friday

 = New Form

FORMS

The following forms for **Issues, Maintenance, and Supplies** need to be submitted **AS NEEDED**:

Form Number	Form Name
200	Supply and Medication Request
310	EMS Equipment Maintenance Request
320	EMS Vehicle Maintenance Request
330	EMS MDT Error Reporting
370	Fire Vehicle Maintenance Request

 = New Form

FORMS

The following forms for **Personnel Needs and Matters** need to be submitted **AS NEEDED**:

Form Number	Form Name
410	Training Completion Verification
421	Time Clock Exception Form (To be used when Time Clock is down)
450	Employee Uniform Clothing Request
N/A	VIDEO LARYNGOSCOPY PROCEDURE FORM

 = New Form

UPDATED FORMS- WEEKLY CHECKS

Body Damage

New Body Damage Present:

Describe Damage:

If new damage is present, please take a picture and attach it to this form. Up to three pictures can be attached.

Damage Photos: [Add File](#)
Limit: 3

- The Body Damage section has been modified to allow members to take pictures as a means of documenting new body damage that is noticed during weekly inspections. In addition to describing the damage, employees can add up to three images as well.
- This is available on the weekly check form for **all** apparatus.

UPDATED FORMS- EMS VEHICLE & EQUIPMENT MAINTENANCE

Problem Description

Please Describe Problem (in as much detail as possible):

If possible, attach images of problem here: [Add File](#)
Limit: 5

- The Problem Description section of the EMS Equipment and EMS Vehicle Maintenance Forms have been modified to allow members to take pictures as a means of documenting issues being reported. Up to five images can be added per submission.

NEW FORMS- EMS MDT ERROR REPORTING

EMS MDT Error Reporting	
Please use this form to document an error relating to the use of the MDT in Medic 79. Errors documented here will be escalated through the appropriate chain as necessary.	
Problem Description	
Please Describe Problem (in as much detail as possible):	<div></div>
Corrective Action	
Please Describe Corrective Actions Taken (in as much detail as possible):	<div></div>

- Providers who discover errors when using the MDT, functional, data, or otherwise, should document those findings on the Form 330. Submissions will be forwarded through the chain of command to the appropriate Officer.

NEW FORMS- TRAINING COMPLETION

Provider Name		
Name: <input type="text"/>		
Training Verification Certificates:		
BLS Courses	ALS Courses	Misc. Courses
BLS: <input type="checkbox"/> BLS Protocol Update <input type="checkbox"/> BLS Healthcare Provider <input type="checkbox"/> Other	ALS: <input type="checkbox"/> ALS Protocol Update <input type="checkbox"/> ACLS <input type="checkbox"/> PALS <input type="checkbox"/> Other	Misc: <input type="checkbox"/> BBP Update <input type="checkbox"/> Other
Other: <input type="text"/>	Other: <input type="text"/>	Other: <input type="text"/>
Attachment		
Attach certificates (PDF, picture, scanned document) here. You may add up to four separate attachments.		Add attachment(s) here: Add File Limit: 4

- Providers who receive certificates for completing training, required or not, can submit a copy of that verification via Form 410, up to four certifications at a time.
- Indicate the certification(s) being submitted.
- Attach PDF versions or pictures of certifications, up to four per submission.

QUESTIONS?

See an EMS Officer

Matthew Burgan, EMS 7
mburgan@LineboroVFD.org
410-365-2610
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