

Morgan County Ambulance Service

Emergency Vehicle Operations Policy



Vehicle Policies Overview	1
Seat Belt Policy	2
Emergency, Non-Emergency Response Policy	3 - 6
Accident Alert Status Policy	7
Adverse Road Conditions	8
Requesting Additional Ambulances	9
Regulatory and Statute Compliance	10
Utilizing Non MCAS Personnel as Drivers	11
Use of Warning Device Policy	12
Speed Limitation Policy	13
Intersection Navigation Policy	14
Traveling in Opposing Traffic Lanes	15
Travel in Opposing Direction	16-17
Overtaking (Passing) Traffic in an Emergency Vehicle	18
Railroad Crossing Policy	19
Stopped School Bus	20
Pedestrian Crosswalk	21
Law Enforcement Direction	22
Aggressive Driving	23
Backing	24
Off Road Driving	25
Basic Drivers Training	26
Drivers Training Program	27
Emergency Vehicle Operations Course	28
Driving Record Review	29
Alcohol and Substance Abuse Policy	30
Privately Owned Vehicle Response (POV)	31
Courtesy/Warning Light and Siren Policy for (POV)	32
Responding Emergent in a POV	33
Responding Out of Town in a POV	34
Accident Reporting & Investigation	35-36
Roadway and Roadside Scene Safety Policy	37-38
Vehicle Inspection Policy	39
Fueling and Fluid Checks	40

Adopted March 2008

VEHICLE POLICIES OVERVIEW

This document provides policies and procedures required to support the safe and effective operation of all Morgan County Ambulance Service (MCAS) emergency vehicles. This includes ambulances, command and support units, privately owned vehicles (POVs), and any other vehicles operated by members of MCAS in the performance of their duties.

- **Basic Driving Policies** – Driver qualifications and training; skills maintenance; duties and responsibilities; general traffic laws; reporting safety problems and violations.
- **Emergency Response Policies** – Authorized emergency response, special driver qualifications, applicable traffic laws, MCAS driving policies and use of warning devices.
- **Riding in Emergency Vehicles** – Permitted vehicle drivers, occupants, passenger behavior, and safety in emergency vehicles.
- **Special Safety Considerations** – Scene safety, backing up, parking, operation in high-risk areas.
- **Vehicle Accident Reporting and Investigation** – Accident scene procedures (information gathering, injury assessment, notification, etc.), reporting forms and documentation requirements, post-accident investigation (examination of scene, interviews with participants and witnesses, etc.), report preparation and dissemination.
- **Use of Personal Vehicles** – Authorized use and response, driver behavior, roadway operations, permitted vehicle occupants, reporting safety problems and violations.

SEATBELT POLICY

Purpose:

To establish appropriate and safe behavior regarding the use of safety belts when operating or riding in an emergency vehicle.

Scope:

All personnel

Policy:

All persons operating or riding in MCAS vehicles shall be seated in approved riding positions with seatbelts or safety restraints fastened at all times when the vehicle is in motion. This includes patients positioned (immobilized on long spine board or not) on the cot, bench seat or captains chair.

The driver shall not begin to move the vehicle until all passengers are seated and properly secured. All passengers shall remain seated and secured as long as the vehicle is in motion. Seatbelts shall not be loosened or released while enroute. Seat belt connections shall not be tampered with in an attempt to override the alarms.

Exception:

Ambulance personnel who are providing direct patient care inside a designated ambulance shall be permitted freedom from seat belt use while the vehicle is in motion, **IF IT IS ESSENTIAL TO PROVIDE PATIENT CARE**. When procedures and or patient care needs have been completed, the member shall secure themselves and refasten their seatbelt. Time without the protection of a seat belt should be minimized.

Note– NFPA 1500 allows this exception for the ambulance patient compartment only.

EMERGENCY, NON-EMERGENCY RESPONSE POLICY

Purpose:

To define and prioritize the response of emergency vehicles to ensure maximum safety and to utilize proper resources. To ensure emergency vehicles respond in a mode that corresponds with the priority level of the emergency request. Extreme caution has to be the highest of priorities while operating emergency response vehicles.

Emergency vs. Non-Emergency response

Ambulance responses are classified as either an “Emergency” or a “Non-emergency”. During “Non-Emergency Response”, ambulance personnel shall comply with all traffic laws and rules of the road that apply to all other vehicles. Exceptions to these laws and/or rules will be permitted only during authorized “Emergency Responses”.

An “Emergency Response” creates a risk to emergency personnel and other users of the roadways, as well as to pedestrian traffic. The increased risk must always be balanced against the potential benefits of such a response. An “Emergency Response” should be limited to situations where it can be assumed that a faster response could reduce the risk of death or lessen the chance of serious injury or disability of patients. Responders must use discretion when responding “emergent” based on the nature of the incident and the location of the suspected patient (in time not miles), traffic and weather condition, crew configuration as well as the overall systems status. A “Non-Emergent” response is desired if at all possible to reduce risk, however, an “Emergent” response is acceptable if warranted, at the crew’s discretion.

Response classifications can be changed at any time during the response based on updated information from trained personnel on scene. For example: updated information indicating that an accident has only minor injuries or non- life threatening complaints. This should prompt a downgrade in response. Reports that an accident is actually a non – injury accident or that the patient/patients have left the scene will be immediately downgraded the response to non-emergent. Once this information has been confirmed, EMS response will be completely canceled and the responding units will return to service. Initial reports of minor injuries, minor injury accidents, or persons reporting non-life threatening complaints will be considered as a “Non- Emergent” response.

The decision to transport a patient “Emergent” or “Non-Emergent” from the scene to a hospital, or from hospital to hospital is at the crews discretion based on the instability of the patient or the potential thereof. Transporting a patient from a local hospital to a hospital outside Morgan County in the “Emergent” mode is not an acceptable practice and should be avoided due to the increase in risk.

Examples of Emergency Response: (see accident alert policy)

- Traffic accidents with multiple or unknown injuries
- Reports of injuries consistent with the adopted Trauma Red and Yellow Criteria
- Complaints of respiratory distress or altered levels of consciousness
- Possible cardiac or pulmonary distress or other indications a patient is possibly hemodynamically at risk
- Potentially serious medical conditions
- Mass casualty
- Indications of someone in distress or a potential life threatening situation
- Entrapment
- Reports of heavy bleeding or body dismemberment

Examples of Non-emergency Response:

- Requests for assessments that sound non-life threatening
- Hospice request for patient transport
- Request to respond on accidents with minor injuries
- “Stand by in the area” requests
- Assaults without the suggestion of serious injuries
- Request to respond for an unattended death
- Routine or scheduled transports
- Transport requests for patient’s who are currently at a skilled nursing facility or physician’s office. Exception:
 - Reports of possible MI
 - Possible Stroke
 - Unresponsiveness
 - Shortness of breath or other airway compromise
 - Unstable vital signs
 - Life threatening injuries.
- Helicopter crew transports (unless ambulance crew is not at the LZ and an inbound helicopter’s ETA will precede the arrival of ambulance crews.)

Emergent Driving (no patient on board)

The goal of this policy is to “save lives” and to reduce the risks involved with driving emergent. When responding emergent in an ambulance there’s a high probability for accidents to occur and thus operations should be taken seriously. Responding emergent should be no different than responding under non-emergent conditions other than the lights and sirens are operating and your speed is slightly faster (see below). Responding in the emergent mode with lights and sirens is only intended to make those around you

aware of your presence and to help clear a safe path for you to proceed, thus preventing you from having to wait in traffic. Driving emergent only “asks” for the right-of-way, it

4

does not “guarantee” it. Therefore, all traffic laws must be respected which includes stopping at all controlled intersections, making sure it’s safe to proceed before entering the intersection.

Emergent Driving (with a patient on board)

Driving emergent with a patient on board is totally different than responding emergent without a patient. **This is a very dangerous time, especially for those providing patient care.** The driver must always be aware of the situation in the back and do everything humanly possible to provide a safe and steady transport. Crew members standing unsecured in the patient compartment can easily be thrown, seriously injured and/or killed with the slightest variation in the speed or direction of the ambulance. To reduce the risks, drivers should never exceed the posted speed limit and in fact, maintain a speed 10 mph slower than the posted speed limit when possible, especially when patient care is being performed in the back of the ambulance with unsecured providers.

Driving Tips

Note: Think of the person in the back of the ambulance as someone standing in an open pickup while driving down the road.

- Constant communication between the driver and crew members in the back is imperative, warning them of things like, “left turn coming up”, “railroad tracks coming up”, “BUMP”, sudden stops or anything that might jeopardize their safety. Being unaware and unable to brace themselves makes them extremely vulnerable and at risk for serious injury including death.
- Slowing when approaching intersections 2 blocks prior will help lessen braking pressure, something that is hard to brace for.
- Always turn corners slowly and methodically.
- Always drive in the left or number one lane, to avoid intersection dips which make it difficult to maintain ones balance.
- Keep cab noise to a minimum so that you can hear what’s going on in the back
- Adjust the rearview mirror so that you can occasionally glance up to see the activities in the back
- Drive slow and anticipate stops and turns which will minimize brake pressures

Emergency Driving:

Note: “Non – Emergent” response should always be considered first to optimize safety!

1. Lights and sirens should be used together.
 - a. Use common sense with the sirens. If you can arrive on scene just as fast responding non-emergent, then respond non-emergent (no lights or sirens).

Using sirens on country roads, open highways, or in town in the middle is unnecessary.

5

2. As the driver, never use a cell phone when responding to a call. Cell phone conversations must be directly related to patient care issues or directly pertaining to the call for service. The non-driver should handle all radio and phone traffic whenever possible.
4. Obey all stop signs and traffic lights. As you approach a controlled intersection, come to a complete stop and make sure the traffic is clear before proceeding.
5. When responding to a call with both crew members in the cab, each crew member is responsible for the traffic approaching their side of the vehicle. The only terminology that should be used to clear an intersection is “Clear” and “Traffic” to avoid any misunderstandings i.e. “not clear” vs. “clear”, or “whoa vs. go”.
6. Sirens should be turned off once you’ve entered subdivisions if traffic or open intersections won’t be an issue. This is again a judgment call; however common sense must be used.
7. Once you’ve arrived on scene or at a hospital, turn off all emergency equipment including lights, unless you’re creating a roadway hazard. Parking next to the curb and out of traffic is the standard.
8. Always avoid impeding traffic whenever possible without risking patient care needs.

Non–Emergent Driving

Again operating an ambulance is not the same as driving a car/pickup. Under normal conditions driving an ambulance can be challenging. They’re bigger, heavier, wider and hard to see around. Driving in adverse weather conditions requires even more caution. Extreme caution should be taken when operating ambulances.

1. Obey all traffic laws and maintain a safe distance between the ambulance and vehicles in front you.
2. Use appropriate signals and lighting when merging into traffic, turning corners or driving at dusk or later.
3. Anticipate stopping, ambulances are heavy and will take much longer to get stopped.
4. Keep cab noise to a minimum and NEVER wear head phones or ear plugs.
5. Maintain clear fields of vision by keeping windows and the windshield clean at all times.
6. Never use a cell phone for personal use while driving.
7. The front seat passenger is responsible for all radio and cell phone communication; the driver should maintain a strong focus on driving.

ACCIDENT ALERT STATUS

(During times of inclement weather, extreme road conditions)

Purpose:

To reduce the number of MCAS response vehicles responding to false reporting of accidents, old accidents, accidents where there are no victims, victims without complaints and/or victims who desire no medical assistance, during times of inclement weather.

Note: When MCAS is short on resources and/or manpower due to inclement weather or local call volume, mutual aid response should be denied into mutual aid areas.

Policy:

During times of inclement weather, poor road conditions and/or poor visibility, MCAS supervisors will declare MCAS as on "Accident Alert". Notification will be made to the communication center requesting it be aired that MCAS is on "Accident Alert Status". MCAS will remain on accident alert until further notice.

Definition:

Accident Alert means only that MCAS will modify their response due to adverse weather and or poor road conditions to optimize the safety of the department, other responders and the general public.

During Accident Alert Status MCAS will respond to reports of unknown injury traffic accidents in the "non – emergent" mode, informing dispatch of this upon going enroute. Crews will wait to hear updated reports from first responders or, parties on scene as to the severity of the accident. MCAS will either 1- upgrade their response to "emergent", 2- continue in the "non-emergent" mode or, 3- cancel their response depending upon reports.

Upgrading Response to "Emergent": If the initial dispatch information indicates the possibility of injuries (or while enroute additional information is reported indicating the possibility of injuries other than minor injuries), MCAS will upgrade their response to emergent. MCAS will also upgrade their initial response if the dispatch information indicates mechanisms consistent with the adopted Trauma Red or Yellow protocols (unless it's reported there are no injuries or minor injuries).

Continue Non-Emergent: Unless information indicates the need to upgrade.

Cancel Response: MCAS will cancel their response immediately upon confirming reports of no injuries, 2- no accident found, 3- victims refusing EMS or, 4- victims who've left the scene.

ADVERSE ROAD CONDITIONS

Purpose:

In an attempt lessen the chance of accidents and maximum the safety of emergency responders as well as the general public when road conditions are less the favorable. Extreme caution has to be the highest of priorities while operating emergency response vehicles.

Scope:

All personnel

Policy: Adverse/unfavourable road conditions and or visibility:

Ambulance personnel must always be prepared for the unpredictability of others especially under poor driving conditions. Operating emergency vehicles on roadways that are less the favorable can be very hazardous, challenging and at times extremely difficult. Extreme caution must be taken as well as the crew's undivided attention given to the task at hand.

1. Speed (emergent or routine), should not jeopardize the safety of others.
2. Estimated stopping distances should be exaggerated.
3. Avoid responding emergent on icy roadways if at all possible. Response time reduction of only a few minutes does not outweigh the risks of not arriving at all.
4. If responding emergent, additional caution must be taken when approaching vehicles from behind as their less likely to be aware of your presence. Avoid coming up from behind someone rapidly.
5. Ensure multiple car lengths between you the vehicle you're approaching from behind.
6. DO NOT overtake another vehicle until it's safe to do so. Passing another driver suddenly could be disastrous depending upon their reaction.
7. All precautions should be taken to avoid panic and the unpredictable reactions of other drivers who might be surprised by emergency vehicles.
 - a. Approach and slowly pass moving traffic with extreme caution. Their losing control or making sudden movements may cause others (including responders), to also lose control.
 - b. Approach intersections slowly and with extreme caution thus enabling others to controllably yield.
8. Avoid sandwiching between vehicles of opposing direction unless it's safe to do so. Make sure they've all complete stop prior to proceeding.
9. DO NOT use cell phones, headsets or stereos/radios while traveling on unsafe roadways. Avoid unnecessary radio transmissions and other distractions. Your focus must be on the roadway and other travelers.

Emergency responders becoming victims themselves is bad enough but, the ripple effect of such an incident on our system, could be devastating. All precautions must be taken including decisions on whether to respond, the type of response and the number of vehicles dispatched to respond. Driver awareness and safety must be heightened.

8

REQUESTING ADDITIONAL AMBULANCES

Purpose:

To prevent the unnecessary response of MCAS vehicles

Policy:

MCAS personnel should be the authority when requesting additional units. If, however, a request is made by on scene personnel for an additional ambulance, the subsequent units will respond in the “non-emergent” mode.

Addition units will continue in the “non-emergent” response mode until, or unless they’ve been advised by MCAS personnel to either upgrade their response, or cancel their response.

Situations that constitute additional MCAS response:

- Incapacitation of the first responding unit and/or crew members
- Multiple patients that require transport whose injuries require focused patient care overwhelming available on scene crew members.
- The number of patients exceeds the number of safety restraints within the ambulance.
- There’s a need to transport multiple patients to multiple destinations including helicopter rendezvous sites.
- A situation warrants that multiple units be standing by
- Mass casualty

REGULATORY & STATUTE COMPLIANCE

Scope:

All personnel

The State of Colorado traffic laws include specific provisions for emergency vehicles, while they are engaged in emergency operations. The Morgan County Ambulance Service departmental policies and procedures specify when exceptions will be applied. The departmental driving policies and standard operating procedures may be, in some cases, more restrictive than state traffic laws.

Responding to emergency incidents does not in any manner reduce the responsibility of operating vehicles safely. While prompt response to emergency incidents is an organizational priority, safety is always a higher priority. The responding units must arrive safely at a location before they can deliver the required services. Unsafe operation of an emergency vehicle creates an unacceptable risk to department members, the public, and to the individuals who are in need of assistance.

The motor vehicle laws of Colorado grant specific allowances and exemptions to emergency vehicles when they're responding to emergency incidents and while using the required warning devices. These provisions only apply to officially recognized emergency vehicles responding to emergency incidents in compliance with all of the applicable laws and regulations.

Notwithstanding such allowances and exemptions, the driver of the emergency vehicle is required to operate responsibly at all times. The emergency vehicle driver has a duty to drive with due regard for the safety of all other persons and property. The emergency vehicle driver must never assume another vehicle will yield the right-of-way; it is always the emergency vehicle driver's responsibility to ensure that other drivers have yielded the right-of-way before proceeding. The emergency vehicle driver is responsible for operating in a safe and prudent manner, recognizing that other drivers could be distracted, inattentive, or simply uncooperative. The emergency vehicle driver is not permitted to employ aggressive driving techniques to force another driver to yield the right-of-way at any time.

While responding in an emergency mode, drivers are required to make their presence evident using audible and visual warning devices. Emergency vehicle drivers should also endeavor to make their intentions as clear as possible and their vehicles as visible as possible to other drivers.

UTILIZING NON-MCAS MEMBERS AS DRIVERS

Policy:

While it's acceptable to use local police or fire department members as drivers thus enabling multiple MCAS members to focus on patient care, entrusting driving operations to non-ambulance personnel should be done only as a last resort. Even though these authorities may have emergency vehicle operations training and/or experience, operating an ambulance with patient care being provided by unrestrained personnel is vastly different than operating ones personal vehicle, police car and/or fire truck. Since MCAS personnel function in this capacity on a daily basis, it is advised that MCAS members drive the ambulances whenever possible to minimize the risks involved in transporting patients.

Should the need arise to utilize someone other than MCAS personnel as a driver it remains the responsibility of MCAS personnel to ensure the driver operates the vehicle in a safe manner. This includes giving them instructions and direction as to the expectations of the transport, for example; the type of response ("emergent" vs. "non-emergent"), the speed at which you expect them to drive, the direction of travel, use of communication equipment and any other safety measure you wish to employ.

Persons operating a MCAS vehicle who do not follow the safety instructions will be immediately asked to pull off the roadway and stop. Failing to take authoritarian action is unacceptable and an irresponsible action that could result in serious injuries.

USE OF WARNING DEVICES:

Policy:

Warning lights and audible warning devices shall be used when ambulance vehicles are responding in an “emergency” mode. Both warning lights and audible devices must be operated together in order to meet the legal definition of an emergency vehicle.

Audible warning devices (siren and/or horn) shall be used as necessary to warn other drivers and pedestrians of the approaching emergency vehicle and to request the right-of-way. Exceptions to this will be that audible warning devices should be used in moderation when responding in light traffic, open road situations, interstates or four lane road ways, when traffic is not impeding the response and in the middle of the night or predawn hours etc. Audible warning devices shall not be used when a vehicle is operating in a non-emergency mode.

Warning lights shall be used when an ambulance is stopped on an interstate, highway, county road or when maneuvering or stopped in a location where it creates a traffic hazard. Stopping on a city street does not require use of warning lights unless a traffic hazard has been created. Warning lights will be shut off once on-scene (unless stated above) or at the hospital if the ambulance is not creating a road hazard.

Emergency Vehicle Turn Arouds on the Interstate:

Using “emergency turn arounds” on the interstate can be very dangerous and should be done using the highest caution.

- In non-emergent situations, ambulance personnel should use the warning lights in order to make others aware of your presence. The lights, as well as turn signals should be turned on well in advance of accessing the turn around, followed by a gradual slowing down of the ambulance. (Never suddenly decide to use a turn around you’ve not prepared for).

Note: If fear of distracting oncoming traffic exists, an option to using the emergency warning lights (to warn the traffic approaching from behind), is to use the rear and passenger side scene lights. Manually flashing these lights may work well in gaining the attention of those behind you without risking confusion of those coming towards you in opposing lanes. In either case, giving plenty of notice is essential to its effectiveness.

- In the “non-emergent” setting, once you’ve entered the turn around, the warning lights should be immediately turned off and the ambulance should come to a complete stop before entering the opposing lanes of traffic.
- Ambulances re-entering the interstate traffic lanes shall do so in the number 1, or far left lane and only after ensuring this lane is cleared and traffic has yielded the right of way. Ambulances shall quickly accelerate remaining in this lane until they’ve reached flow of traffic speeds.

- In “emergent” situations, the same applies except the warning lights should remain on at all times.

12

SPEED LIMITATIONS POLICY

Purpose:

To establish practices that address the speed of emergency vehicles to increase the ability of the driver/operator to maintain safe control of the vehicle at all times.

Policy:

The driver shall never exceed a speed that is safe and prudent based on road and weather conditions, or other circumstances, including the design and capabilities of the vehicle. The posted speed limit may be exceeded only when the required warning devices are in use and when weather, traffic, and road conditions are favorable. The posted speed limit shall not be exceeded at any other time.

The maximum speed while responding emergent in an ambulance, under favorable conditions, shall not exceed the posted speed limit by more than 10 mph within the city limits and 15 mph on the paved county roads, highways and interstates.

- Posted “school zone” speed limits should never be exceeded in school zones regardless of response mode.
- When conditions are unfavorable, or patient care is taking place in the back of the ambulance by unrestrained personnel, the operating speed should be a minimum of 10 mph less than the posted speed limit, even when responding “emergent”. Safe speeds shall be determined by the condition of the roadway and the safety of the crew.
- The posted advisory speed for a curve shall be considered the maximum allowable speed, regardless of response condition.
- The posted speed limit will be the maximum speed limit for unpaved roads in normal conditions.

The following pertains to construction zones that limit travel to one lane and are controlled by flaggers.

- When approaching a construction zone, approach the zone if it’s safe to do so by passing the stopped traffic (always on the left), at no more than 10 mph with warning lights and siren activated. Once you arrive at the flagging station, come to a complete stop, turning off the siren. Wait for the flaggers’ instruction to proceed and do so with extreme caution.
 - If you’re being lead by a pilot car, shut the siren off but leave your lights on. DO NOT pass the pilot car.
 - If you’re cleared to proceed without a pilot car, turn the siren back on and proceed, not to exceed the posted “construction” speed limit.

- If, while preceding you're met by the pilot car and/or on-coming traffic, allow them to yield by pulling off either to the right or left. Proceed accordingly with extreme caution. NEVER force your way through a construction zone.

13

INTERSECTION NAVIGATION POLICY

Purpose:

To establish procedures and safety guidelines for MCAS emergency vehicles when negotiating intersections.

Note: More emergency vehicle accidents happen at intersections than anywhere else. Most fatal EMS accidents happen at intersections with 82% of the deaths being suffered by the patient attendants.

Policy:

While operating in the “emergent” or “non-emergent” mode, ambulances shall come to a full and complete stop before entering a negative right-of-way intersection (red light, flashing red light, or stop sign), blind intersection, or any intersection where hazards are present and/or the driver cannot account for all oncoming traffic lanes. Ambulances shall not enter the intersection until all approaching traffic has yielded the right-of-way and it is safe to proceed. The emergency vehicle driver shall ensure that all approaching vehicles in all lanes have yielded the right-of-way before advancing.

If necessary, due to traffic conditions or visual obstructions, the emergency vehicle driver shall cross the intersection in stages, treating each lane as a separate intersection. The driver shall stop the vehicle as necessary, to ensure that each lane may be crossed safely before proceeding.

When passing through an intersection where the emergency vehicle has the right-of-way (by virtue of a green light in the direction of travel, and/or a stop signal or stop sign for cross-traffic), the emergency vehicle shall not exceed the posted speed limit. NEVER assume that oncoming/opposing traffic has stopped. Even when facing a green signal or what appears to be a “clear” route emergency vehicle drivers must visually confirm that oncoming/opposing traffic is stopped when approaching any intersection. EMS personnel must be prepared to stop or take immediate action at all intersection.

TRAVELING IN OPPOSING TRAFFIC LANES

Purpose:

To establish practices that address when an emergency vehicle must travel in an opposing lane.

Policy:

Operating emergency vehicles in opposing traffic lanes is extremely hazardous under all conditions and should only be considered under exceptional circumstances (i.e., if there's no alternate or safe route of travel).

When an emergency vehicle must travel in an opposing traffic lane at a congested intersection, or in a center turn lane to maneuver around slower moving or stopped traffic, the emergency vehicle shall not exceed the posted speed limits. If there's a median separating the emergency vehicle from opposing traffic and the traffic you're overtaking is slow or stopped, the emergency vehicle can proceed into oncoming traffic when safe to do so, but shall not exceed the posted speed limit. (Actual speed will depend on road, traffic, and weather conditions.)

When approaching a controlled intersection (traffic lights or stop signs) in an opposing traffic lane or center turn lane, the emergency vehicle shall come to a full stop before entering the intersection, even if the traffic light is green in the direction of travel.

When traveling on open two lane roads, or highways and when approaching a vehicle from behind (who hasn't seen or heard you and is failing to yield), the ambulance operator should anticipate the need to pass in opposing lanes of travel well in advance of doing so. As you approach, straddle the center line, making the ambulance more visible; by doing so you give the oncoming traffic more of an opportunity of seeing you. Oncoming traffic often times see the approaching emergency vehicle and therefore yield before the vehicle you're overtaking. If, however, oncoming vehicles do not yield to their right for you, DO NOT force them over by passing. Return to your designated lane of travel and wait until it's safe to proceed.

Note: Extreme caution must be used when employing this maneuver. Continuing with the maneuver is only acceptable if the opposing traffic begins to yield to their right.

If the traffic traveling in the same direction as the ambulance hasn't yielded, and it's clear to do so, passing on the left into oncoming lanes of traffic is acceptable. If it's unsafe to pass, the ambulance should remain three to four car lengths behind the vehicle until they've either yielded, or it becomes safe to pass into opposing lanes of traffic.

TRAVEL IN AN OPPOSING ONE-WAY STREET

Purpose:

To establish safe practices that address when an emergency vehicle must travel against the traffic flow on a one-way street.

Policy:

Operating emergency vehicles against the normal flow of traffic is extremely hazardous under all conditions and should only be considered under exceptional circumstances (i.e., if there is no alternate route of travel).

Traveling against the normal flow of traffic on one-way streets shall be limited to short distances unless the roadway has been previously secured. Emergency vehicle operators must proceed slowly and with extreme caution in these situations. Always travel slower than the posted speed limit to ensure safety.

The emergency vehicle operator must anticipate the need to stop when entering an intersection while traveling in an opposing direction on a one-way street as other vehicles are not generally expecting traffic coming from the wrong direction.

Emergency warning lights and sirens must be activated when traveling the wrong direction on a one-way unless the area has been secured.

OVERTAKING TRAFFIC IN AN EMERGENCY VEHICLE

Purpose:

To establish guidelines for safe operations of emergency vehicles when passing or overtaking other vehicles including, but not limited to other emergency response vehicles as well as civilian traffic.

Note: Since vehicles are required by law to pull to the right when yielding to emergency vehicles, passing vehicles on the right (stopped or moving), is strictly prohibited unless all traffic has stopped and there's no other option available to proceed.

Policy:

When overtaking traffic that is moving in the same direction, ambulance personnel shall give other drivers an opportunity to yield the right-of-way before passing. If it's necessary to pass a vehicle that has not yielded the right-of-way, the emergency vehicle shall provide as much clearance as possible and cautiously pass on the left only.

1. Never pass another vehicle on their right; this includes stopped vehicles and vehicles at the intersections. (The only time this would be acceptable, *not advised but acceptable*, is if you have two open lanes ahead of you and the only vehicle you're approaching from behind is stopped in the left turn lane.) You should always anticipate the need to pass and always do so on the left. Slowly enter the oncoming traffic lane, ensuring it's safe to do so. When passing at an intersection, come to a complete stop before entering the intersection. Slowly creep into the intersection making sure it's safe to proceed. If making a right hand turn, keep the vehicle you're passing from behind in sight before turning ("right") in front of them.

Note: Ambulances should travel in the #1 or far left lane at all times when responding "emergent". This should also be the practice when patient care is being provided to prevent extreme rocking associated with intersection design.

Passing other emergency responders:

Unpaved roads or Within city limits:

MCAS ambulances shall not overtake another emergency vehicle traveling in the same direction.

Paved roads or two lane highways:

On paved county roads and or two lane highways passing is not advised unless, ambulance personnel can ensure passing will be a benefit to the patient. If you are

passing, do so only on the left and only if the emergency vehicle operator your overtaking is aware that your about to pass them. NEVER pass at an intersection!!!!

Interstate highways, four lane roads, or one ways:

Passing in the far left lane is permissible and should be done using extreme caution.

If a slower moving emergency vehicle traveling in the number one, or far left lane, fails to yield the right of way by moving into the right lane, ambulance personnel may slowly pass using the number two or far right lane. As a safety precaution, ambulance personnel should contact the dispatch center or, the slower moving vehicles driver by radio to inform them of their desire to pass before passing on the right.

If you're responding "emergent" and are being approached from behind by a faster moving emergency vehicle, ambulance personnel should always yield the right of way.

RAILROAD CROSSING POLICY

Purpose:

To establish safe practices that address when emergency vehicles come to an unguarded railroad grade crossing.

Policy:

The emergency vehicle shall slow, and ensure that it's safe to proceed, before crossing the railway at unguarded railroad grade crossings. Crossing when warning signals are functioning is prohibited (except as noted below). Ambulance vehicles stopped for rail traffic should be positioned a minimum of 100 feet from the tracks.

Ambulances responding to an emergency who find themselves delayed by rail traffic should immediately report the delay to the dispatch center. If the rail traffic is stopped or slow moving, an alternate route may be advisable or request a different unit respond from another direction. Ambulances approaching a crossing blocked by other cars should do so in the on coming lane of traffic, leaving emergency lights on while waiting for the tracks to clear.

Warning devices and crossing gates are generally reliable, but can fail due to the harsh conditions to which they are exposed—these devices are designed to fail in the “safe” mode. When approaching a grade crossing with lowered gates and/or active lights and no apparent rail traffic, the emergency vehicle shall come to a full stop prior to the crossing; before proceeding, the emergency vehicle driver shall visually confirm that no train or other rail vehicle is approaching on the tracks. Complete confirmation may require that members physically dismount the vehicle to visually check the tracks.

It's not always possible to hear an approaching train, due to the Doppler Effect* and the type of locomotives used on some rail lines (particularly electric locomotives). Be aware at all times since otherwise “normal” appearing highway vehicles, equipped with rail wheels, are also used by railroads and may be encountered at grade crossings.

**The “Doppler Effect” is the perceptible change in the frequency and wavelength of a sound wave as it moves relative to an observer.*

STOPPED SCHOOL BUS

Purpose:

To establish safe practices that address when an emergency vehicle encounters a school bus which has stopped and has red lights flashing

Policy:

The emergency vehicle shall not pass a school bus that has stopped with red lights flashing irregardless of direction of travel or number of lanes.

When responding in the emergent mode:

When approaching a bus that has its red lights flashing, the emergency vehicle shall:

- #1 Approach the school bus in opposing lanes of travel (if traffic is backed up)
- #2 Shut down only the siren and come to a complete stop approximately 20 yards from the bus while waiting for the bus activities to conclude.
- #3 Proceed only after the bus driver turns off warning lights. (Ambulance personnel should proceed slowly and with extreme caution past the school bus)

Note: All members must be vigilant for children while approaching and passing the bus. The emergency vehicle operator must be prepared to stop immediately while approaching, passing, and/or leaving the area in which the school bus is stopped.

PEDESTRIAN CROSSWALK

Purpose:

To establish safe practices that address when an emergency vehicle comes to a pedestrian crosswalk.

Policy:

When in the “Emergency Response” mode:

The emergency vehicle shall not exceed the posted speed limit when approaching an occupied pedestrian crosswalk. The emergency vehicle shall slow down and be prepared to stop if the pedestrian does not yield the right-of-way.

When in the “Non-emergency” mode”:

Obey all traffic laws, which in Colorado means you must yield the right of way to pedestrians in cross walks.

LAW ENFORCEMENT DIRECTIONS

Purpose:

To establish safe practices that address when a law enforcement officer gives directions to an emergency vehicle.

Policy:

Emergency vehicle personnel shall comply with the directions of a sworn law enforcement officer. This includes a signal to stop, which direction to travel, where to park, when and where to exit a scene, etc., as long as this order does not put MCAS personnel or their patients in harms way.

Law enforcement officials may direct the specific positioning, or repositioning, of emergency vehicles on an incident scene to maintain traffic flow, reduce bottlenecks, enhance scene safety, and prevent secondary collisions. Compliance with such direction is generally required of emergency vehicle drivers and their supervisors. If a difference of opinion regarding scene safety arises, it should be raised in a cooperative fashion with the ranking law enforcement officer on the scene.

AGGRESSIVE DRIVING

Purpose:

To establish safe vehicle operations for MCAS personnel to ensure their safety and the safety to others

Policy:

Emergency vehicle operators shall not employ aggressive driving techniques or techniques that could be perceived as aggressive. Forcing other drivers to yield the right-of-way, regardless of “emergent” or “non-emergent” response, is strictly prohibited.

Emergency vehicles must be operated with due regard for the safety of civilian traffic, patients, partners, students, observers and other passengers at all times.

Emergency vehicle operators have been cited, fined, and sentenced to imprisonment for causing harm through aggressive driving. Aggressive driving’ will not be tolerated by Morgan County Ambulance.

Complaints from the general public about ambulance personnel operating MCAS vehicles improperly, erratically or without due regard will be investigated to the fullest. Strict and swift disciplinary actions will be taken for any employee suspected of violating this policy.

BACKING POLICY

Purpose:

To establish safe practices to ensure emergency vehicles are safely moved when operating in reverse mode.

Policy:

Before backing an MCAS vehicle, the driver shall ensure that the intended path is clear of hazards, obstructions or pedestrians.

One or more spotters shall be employed as guides in all situations when the driver does not have a clear vision of the path of travel. Spotters should be assigned when backing the vehicle to watch for obstacles and/or approaching traffic.

A spotter is responsible for guiding the driver and ensuring that any potential hazards are avoided. The driver's window should be lowered and standard signals shall be used to communicate with the driver during backing maneuvers; hand signals or voice signals can be employed for this purpose. The spotter shall direct the driver to stop at any time the backing maneuver cannot be completed safely.

The spotter(s) shall be on the ground, to the rear of the vehicle, and shall remain visible to the driver at all times. If the driver loses sight of the spotter(s) at any time, the driver shall immediately stop the vehicle. Cameras or safety devices are not acceptable substitutes for a spotter.

If it is essential to back a vehicle with limited rearward visibility and there's no spotter available, the driver shall stop, dismount, and visually perform a 360-degree check around the vehicle before backing. Emphasis should be on the rear and to both sides. After checking the area, the driver shall slowly back the vehicle with extreme caution being prepared to immediately stop.

Signals

- **Straight Back:** One hand above the head with the palm toward the face making a backward gesture. Other hand at your side. (Left or right hand optional)
- **Turn:** Both arms pointing the same direction with index fingers extended. (Driver will advise the spotter which way the turn will be made. The spotter then assists the driver in backing apparatus. The driver's intentions must be verbally communicated to the spotter.)

- **Stop:** Both arms crossed with hands in fist. Be sure to yell the stop order loud enough that the driver can hear the warning.

Night Backing

Signals will be the same. The side and rear scene lights should be turned on for illumination of the scene.

24

OFF ROAD DRIVING

Purpose:

To establish safe practices that address when an emergency vehicle is driven off designated roadways

Policy:

Ambulance operators have to be aware of the negative actions a vehicle can have when driven off pavement. Vehicles driven on designated gravel roads must be done with extreme caution.

Vehicles that leave the paved surface onto dirt or gravel surfaces shall be considered unstable and speeds must be reduced. Speeds should not exceed 20mph when attempts are being made to return to the pavement.

Vehicles traveling down dirt or gravel roads shall not exceed the posted speed limits for normal driving conditions. Speed should be further reduced if traveling on wet, snow packed, icy, and extremely sandy or washboard surfaces.

Driving ambulances “off road” is prohibited unless the surface is extremely flat, hard, and free of obstacles. The only time this shall be permitted is if it’s the only option available to accessing a patient. Crews must be assured that there’s no risk of ambulance entrapment before they proceed.

Driving “off road” under conditions that could potentially lead to ambulance entrapment is strictly prohibited regardless of patient condition or complaint. Entrapped ambulances present many problems including delays in delivery of patient care, delays in patient transport, and waists valuable resources.

BASIC DRIVER TRAINING

Purpose:

To outline a comprehensive Basic Driver Training Program that must be completed by all MCAS employees upon hire.

Policy:

The MCAS Basic Drivers Training Program shall be completed before a member is authorized to drive MCAS vehicles. The ambulance service shall ensure that the individual is properly licensed and insured and has received training in emergency vehicle operations before they will be permitted to operate an MCAS vehicle. Prior to completing all phases of the drivers training, MCAS personnel are only authorized (as part of their training), to drive in a “non –emergency” mode and without patients aboard. The drivers training program designed by MCAS will include a review of:

- Traffic laws
- Traffic and highway safety
- Basic vehicle dynamics
- Emergent vs. “Non-emergent” driving
- Inspection and maintenance procedures
- Competency course
- Drivers course

Upon completion of the Basic Drivers Training Program members will be authorized to drive MCAS vehicles in the emergency mode.

MCAS may periodically review the performance of each member who is authorized to operate MCAS vehicles. Their authorization to drive may be suspended or revoked as a result of such review and/or additional training may be required to maintain driving status. Members who fail to comply with MCAS driving policies and procedures, or who violate traffic laws while driving MCAS vehicles, may have their driving privileges suspended or revoked.

Annual written driver’s tests will be given to all employees in order to maintain MCAS driving privileges.

DRIVERS TRAINING PROGRAM

Purpose:

To offer a comprehensive and advanced driver training program to members of MCAS. The program was designed by MCAS to provide members with the skills and knowledge necessary to minimize the risks of accidents and limit injuries to themselves, their partners, patients on board and the general public.

Policy:

Department vehicles shall only be operated by individuals who comply with the applicable state driver's license requirements and who've been trained and certified to operate these vehicles by successfully completing the MCAS Training Program.

Exception: Local police and/or firefighters may be utilized to assist in the delivery of MCAS patients to an emergency room by driving the ambulance while MCAS personnel attend to patient care needs. *(See Utilizing Non-MCAS Employees as Drivers Policy on page 10 of this manual)*

The training program will consist of a 12 hour course that has been divided into 3 stages. Stage one will consist of 4 hours of didactic information followed by a written exam. Stage two will consist of an obstacle course set up and monitored by a MCAS driving instructor in order to demonstrate some of the hazards students may encounter as well as allowing them to demonstrate driving competencies. The third and final stage of the training, employees must log 4 hours of non-emergent drive time in an ambulance with a MCAS supervisor before being released to operate MCAS vehicles on their own.

EMERGENCY VEHICLE OPERATOR'S COURSE

Purpose:

To develop a drivers training course that newly hired employees must successfully complete prior to being authorized to operate MCAS vehicles.

Scope:

All MCAS personnel who drive emergency vehicles for the organization

Policy:

As an employee of MCAS and before being authorized to operate a MCAS vehicle in an emergency response mode, the member shall successfully complete an Emergency Vehicle Operation training course designed by MCAS using materials put together from the National Safety Council.

Note: Annual vehicle operations reviews will be a requirement of all employee's of MCAS.

Upon completion of the program, individual must demonstrate an appropriate understanding of the policies, procedures, general operations and handling of ambulances and other considerations that apply to emergency response, before being authorized to operate vehicles in an emergency response mode.

Vehicle Operations Training Format:

Section 1 - Vehicle Inspections

Section 2 – Forward and Reverse Operations

Section 3 - Cornering, Avoiding the Dips

Section 4 - Backing to the Right and Left

Section 5 - Backing with a Backer

Section 6 - The Curb Test

Section 7 - From The Patients and Their Partners Prospective

DRIVING RECORD REVIEW

Purpose:

To establish a policy for reviewing an employee's driving record in order to ensure their eligible to operate MCAS vehicles.

Policy:

MCAS shall obtain and review a copy of candidates driving record from the state Department of Motor Vehicles prior to employment. The Motor Vehicle Record of each authorized driver shall be reviewed periodically (annual reviews recommended) to ensure that the individual maintains safe driving habits.

An individual who has been charged with an offense (on or off duty) that could result in a suspension or revocation of his or her driver's license should notify his or her supervisor within 48 hours of the offense. (Failing to do so will result in an immediate loss of driving privileges and could result in disciplinary actions up to and including termination). Individuals facing felony traffic charges may be suspended from driving privileges for MCAS pending judgment. Depending on the circumstances, MCAS may elect to take action independent of, regardless of, and prior to, the judgment of the courts. Such charges would include:

- Driving while under the influence of alcohol or under the influence of drugs
- Negligent homicide or gross negligence
- Aggravated assault with a motor vehicle
- Reckless driving
- Leaving the scene of an accident
- Road rage or other aggressive driving charges

Being found guilty of one of the above, or plea-bargaining to a lesser charge of one of the above traffic offenses could result in disciplinary action up to and including immediate termination of the employee.

Having MCAS driving privileges suspended will have a greater impact on EMT Basic's since they are not allowed to provide patient care for a vast majority of patients

transported. Therefore an EMT Basic's employment may be terminated due to a driving suspension, whereas an EMT Intermediate and/or Paramedic may only be facing a driving suspension for the same violations.

ALCOHOL & SUBSTANCE ABUSE POLICY

(See Alcohol/Drug /Smoking policy within the MCAS policy section pg 102 for more information)

Purpose:

To eliminate the abusive use of alcohol and illegal drugs through education, rehabilitation, and supervision techniques.

Policy:

Ambulance personnel are not permitted to be on duty, respond to emergency incidents, drive or operate MCAS vehicles, or perform duty-related functions or training while under the influence of alcohol or drugs.

MCAS personnel shall not perform any duty-related functions for a minimum of twelve (12) hours following the consumption of any alcoholic beverages. A longer waiting period may be required to ensure that the individual is free of impairment. A blood alcohol concentration of 0.02 percent or higher, while on duty, shall create the presumption that the member is under the influence of alcohol and disciplinary actions will be taken up to and including termination.

Anyone operating a MCAS vehicle who is involved in an accident that causes measurable property damage, injury or death shall be tested for the presence of alcohol or drugs with the least possible delay.

A MCAS supervisor can require a member to be tested for the presence of drugs or alcohol at any time, upon reasonable suspicion that an employee being under the influence of such substances. Failure or refusing to be subjected to drug and or alcohol testing could result in disciplinary actions up to and including termination. Supervisors who are knowingly negligent in requiring these tests will also be subject to disciplinary action.

PRIVATELY OWNED VEHICLE RESPONSE (POV)

Purpose:

To establish guidelines governing the response for service in privately owned vehicles (POVs).

Policy:

Personnel must follow all laws and regulations for the State of Colorado that apply to non-emergency vehicles, unless the state statute allows POVs to operate as emergency vehicles and the owner/operator has taken the required measures in obtaining approval to do so.

Members of the Morgan County Ambulance Service who are using their private vehicles to respond to calls will be doing so under their own accord, assuming all liability. All vehicles used to respond emergent must be approved by the Director and/or Supervisor. An Emergency Vehicle Authorization Application Form from the State of Colorado must be submitted and approved by the Director and the State of Colorado for each vehicle used as an emergency response vehicle prior to it being put into service.

Authorization to Operate a POV as an Emergency Vehicle

Policy:

- Driver must own and operate a vehicle that complies with all state and local regulations, including, but not limited to; valid insurance & inspection.
- Driver must read, and demonstrate an understanding of, the Department's policies regarding use of "lights & sirens."
- The POV must be in proper mechanical condition and the warning devices in compliance with the applicable laws.
- Driver must wear a seatbelt at all times while operating the vehicle while responding for service.
- Driver must complete the MCAS Emergency Vehicle Operator training prior to using their POV in this manner.

- Driver must submit to a medical examination, skills evaluation, and driving record check upon request of MCAS.

COURTESY/WARNING LIGHT AND SIREN POLICY FOR (POV)

Purpose:

To establish guidelines governing the use of a “Courtesy/Warning Light” in privately owned vehicles (POVs) responding to an incident.

Policy:

To ensure the safety of MCAS members, the authorization for use of a “Courtesy/Warning Light” must be approved by the department.

Installation and use of warning lights and sirens on POV must be in accordance with state laws and regulations.

An authorized driver may use colored warning lights on privately owned vehicles to request the right-of-way when responding to emergency incidents. The use of a courtesy/warning light does not provide any special privileges or exemptions to traffic laws. Other drivers are not required to yield the right-of-way to a vehicle that has a courtesy light or a series of courtesy lights in operation. The only purpose of the warning light is to make others aware of your presence and to request that other drivers yield the right-of-way. The POV driver is required to comply with all traffic laws.

Each vehicle must be equipped, at a minimum, with a signal lamp or a combination of signal lamps capable of displaying flashing, oscillating, or rotating red lights visible in all directions and visible with the naked eye at 100 yards in normal sunlight. In addition to the red light, a white light may also be used in combination with the red light. At least one set of signal lights must be secured on the top of the vehicle. Vehicles must also be equipped with an audible siren that has a 100 watt speaker and drive.

Note: Lights and sirens on POV must be run simultaneously with no exception when the vehicle is in motion and while responding “emergent” to an incident.

RESPONDING EMERGENT IN A PRIVATELY OWNED VEHICLE (POV)

Purpose:

To establish guidelines governing the use of a “Courtesy/Warning Light” in privately owned vehicles (POVs) responding to an incident.

Scope:

All personnel who are authorized to respond to an incident in a POV

Policy:

Responding emergent to calls (either the scene or the station to pick up an ambulance), in anything other than designated Morgan County Ambulance Service vehicle is strictly prohibited within the city limits. The only time an emergent response in a POV is authorized will be if:

1. You are outside city limits responding into the city limits for a call for service. Warning devices will be shut down once you entered the city limits.
2. Responding from one town to another as a back up or primary responder. (Same as # 1)
3. You find yourself stuck in traffic within the city limits that shows no indication of moving anytime soon. If this happens, your emergency equipment should only be used long enough to clear you from the congestion. Once clear, proceed non-emergent.

Emergency lights and sirens will be shut off once in the city limits. Once on scene, if your vehicle presents a traffic hazard, you should turn your emergency lights on until you’ve cleared the scene. Make every effort to park your vehicle so that it isn’t a hazard.

Using the approved emergency equipment for any reason other than responding for service is strictly prohibited; **violators will be subject to immediate termination.**

Morgan County and MCAS assume no responsibility or liability for equipping private vehicles with emergency equipment, damages, and/or the maintenance/fueling of someone's personal vehicle used for an emergency response vehicle. Furthermore, Morgan County and MCAS are not responsible for any injuries caused by the operator using their personal vehicle as an emergency vehicle.

RESPONDING OUT OF TOWN IN A POV

Purpose:

To establish guidelines governing the use of a "Courtesy/Warning Light" in privately owned vehicles (POVs) responding to an incident.

Scope:

All personnel who are authorized to respond to an incident in a POV

Policy:

Responding to calls for service outside the city limits in a POV is prohibited when doing so will require the parking of the POV on the side of a county road, highway or interstate.

Responding to a residence or business outside the city limits in a POV will be done as a last resort. Responders in this situation should rendezvous with responding ambulances somewhere within the city limits whenever possible. Coordination between ambulance personnel and responders in POV's is imperative. If however a rendezvous creates an extraordinary delay in medical response, ambulance personnel should continue to the scene, responders in POV's should continue also but in a non-emergent mode. Once on scene POV may not be stopped or parked anywhere that it could become a potential hazard.

ACCIDENT REPORTING & INVESTIGATION

Purpose:

To provide a standard system of reporting and investigating all department vehicular accidents and near misses. A near miss incident is defined as an incident in which no property damage and no personal injury occurred, but where, given a slight shift in time, position, or other circumstances, damage or injury would or may have occurred.

Policy:

All Department vehicle accidents should be reported to the communications center immediately, followed by supervisor notification.

The report should include the following:

- Unit ID or Vehicle Number
- Exact accident location
- Request for medical assistance if necessary
- If responding to a previous call, request additional units respond to cover the previous assignment
- An estimate of the extent and nature of the injuries and vehicle damage
- Indication of whether the vehicle is drivable
- Remain at the scene until released by law enforcement
- If capable, initiate appropriate medical care
- Contact the Director and on duty supervisors immediately
- Do not discuss the incident with anyone other than police representatives
- Do not move your vehicle unless it is creating a traffic hazard
- Obtain witness names and contact information if possible
- Report immediately to the ER for a urinalysis
- Supervisor must approve a return to duty
- Work comp claims (injuries or not), and incident reports must be filled out by all crew members within 72 hours, and returned to the Director

All departmental related accidents will be investigated to include

- Fact Finding Review
 - Separate interviews with the driver, all crew members and accident witnesses
 - Notes recorded at each interview
- Notification of any applicable City/Town Agencies (e.g., Risk Management, Insurance Adjuster, etc...)
- Department employees involved in the incident should be isolated from the general public, other parties involved in the incident, and the media.

Personnel investigating should attempt to collect the following:

- Photographs/Video of the incident
- Police Report
- Name and badge number of investigating Police Officer
- Applicable City/Town/Department Accident Reports/Forms

35

ROADWAY AND ROADSIDE SCENE SAFETY POLICY

Purpose:

To establish guidelines for protection of personnel and incident victims at all roadway or roadside incident scenes

Policy:

This procedure identifies parking practices for MCAS vehicles that will provide maximum protection and safety for personnel operating in or near moving vehicle traffic. It also identifies several approaches for individual practices to keep MCAS personnel safe while exposed to the hazardous environment created by moving traffic.

It shall be the policy of the MCAS to position emergency vehicles at a vehicle-related incident on any street, road, highway, or interstate in a manner that best protects the incident scene and the work area. Such positioning shall afford protection to MCAS personnel and patients from the hazards of working in or near moving traffic. (Responders should always operate within a protected environment at any vehicle-related roadway incident).

(All personnel should understand and appreciate the high risk that personnel are exposed to when operating in or near moving vehicle traffic). Always consider moving vehicles as a threat to your safety. At every vehicle-related emergency scene, personnel are exposed to passing motorists of varying driving abilities. Approaching vehicles may be driven at speeds from a creeping pace to well beyond the posted speed limit. Some of these vehicle operators may be vision impaired, under the influence of alcohol and/or drugs, or have a medical condition that affects their judgment or abilities. In addition, motorists may be completely oblivious to your presence due to distractions caused by cell phone use, loud music, conversation, inclement weather, and terrain or building obstructions. Approaching motorists will often be looking at the scene and not the

roadway in front of them. Assume that all approaching traffic is out to get you until proven otherwise. Assuming that the situation is not safe and taking extra precautions could ultimately save lives.

Safety Benchmarks

All emergency personnel are at great risk of injury or death while operating in or near moving traffic. There are several specific tactical procedures that should be taken to protect all crew members and emergency service personnel at the incident scene including:

- Never trust approaching traffic
- Avoid turning your back to approaching traffic
- Never spend any more time than what is absolutely necessary on scene.
- Always wear reflective clothing or clothing that is highly visible
- Never step out into a traffic lane until you've made certain visually that it is safe to do so.
- Avoid crossing lanes of traffic on foot whenever possible

36

Emergency Vehicle Benchmarks

Listed below are benchmarks for Safe Parking of emergency vehicles when operating in or near moving traffic.

- Always use the ambulances as a shield of protection when parking at the scene of traffic accidents especially in the snow and ice.
- Always position first-arriving units to protect the scene, patients, and emergency personnel.
- When responding to traffic accidents on the interstate, make every attempt to park as close to the scene as possible. For accidents in the right shoulder, stay to the right. Accidents located in the median, stay to the left lane. Accidents that occur in the opposite directions right shoulder, find the closest turn around and approach the scene so as to put the ambulance on the shoulder closest to the patient. Avoid crossing lanes of traffic on foot when ever possible.
- Initial vehicle placement should provide a work area protected from traffic approaching in at least one direction.
- Angle the vehicle on the roadway with a “block to the left” or a “block to the right” to create a physical barrier between the crash scene and approaching traffic.
- Allow vehicle placement to slow approaching motorists and redirect them around the scene.

Emergency Crew Personnel Benchmarks

Listed below are benchmarks for safe actions of individual personnel when operating in or near moving vehicle traffic.

- Always maintain an acute awareness of the high risk of working in or near moving traffic. Act as if they are out to get you!
- Never trust moving traffic
- Always look before you move
- Always keep an eye on the moving traffic

- Avoid turning your back to moving traffic
- Exit and enter the vehicles from the protected ‘shadow’ side, away from moving traffic.

VEHICLE INSPECTION POLICY

Purpose:

To ensure vehicle and equipment are in working order and that the vehicle is safe and ready to respond.

Policy:

MCAS vehicles shall only be operated when their mechanical condition makes it safe to do so. The following list of vehicle defects has been developed to guide ambulance personnel in making decisions related to the operational safety of MCAS vehicles. If an “out-of-service” condition is discovered, the vehicle shall be placed out of service and the condition of the vehicle shall be reported to the responsible officer. The vehicle shall not be returned to service until the problem condition is resolved by a qualified individual.

The following defects and deficiencies of the driving and crew areas, the vehicles body, and the patient compartment reduce the operational safety and performance of emergency vehicles and shall be considered out-of-service criteria:

- Body mounting that is defective
- Cab mounting that is defective
- Seat belts that are torn or have melted webbing, missing or broken buckles, or loose mountings. Due to the extreme safety-related consequences of a defective seat belt, and the fact that one defective seat belt (unless it is the driver’s seat belt) does not render a vehicle unusable, the authority having jurisdiction shall take any seating position with a defective seat belt out of service
- Cracked or broken windshield that obstructs the driver’s/operator’s view
- Missing or broken rear-view mirrors that obstruct the driver’s/operator’s view
- Windshield wipers that are missing or inoperable
- Steering wheel that has a deficiency
- Oil pressure gauge or engine or transmission temperature gauges that have failed
- Air gauge or audio low air warning device that has failed
- Door latches that are defective

- Defrosters that are defective
- Foot throttle that is defective

The following defects and deficiencies of the chassis, axles, steering and suspension systems, driveline, wheels, and tires reduce the operational safety and performance of the vehicles and shall be considered out-of-service criteria:

- Tires that have cuts in the sidewall that penetrate to the cord
- Tires that are defective
- Tires that have a tread depth of 4/32 in. (3.2 mm) or less
- Suspension components that are defective
- Wheel fasteners that are missing or broken
- Wheels that are defective
- Steering components that are defective
- Driveline components that are defective

38

The following defects and deficiencies of the *engine system* reduce the operational safety and performance of the vehicle and shall be considered “out-of-service” criteria:

- Air filter restriction indicator that shows maximum restriction
- Engine that won’t crank or start
- Engine system that has moderate leakage of oil
- Engine that is overheating
- Oil that contains coolant
- Oil that is diluted with fuel
- A fuel system component that has leakage
- Fuel tank, mountings, or straps that are defective
- Stop-engine light that fails to turn off after engine is started

The following defects and deficiencies of the *low voltage electrical system and the line voltage electrical system* reduce the operational safety and performance of the vehicle and shall be considered “out-of-service” criteria:

- Ignition system that is defective
- Charging system that is defective
- Grounding and bonding of the line voltage electrical system that is defective

The following defects and deficiencies of the *brake system* reduce the operational safety and performance of the vehicle and shall be considered “out-of-service” criteria:

- Brake system components that have leakage of brake fluid
- Friction surfaces, brake shoes, or disc brake pads that have grease or oil on them
- Braking system components that are defective
- Braking operation that is ineffective
- Parking brake operation that is ineffective
- Brake warning light that is activated or brake pedal that falls away or drifts toward the floor when brake pressure is applied

- Brake lining or pads that are worn beyond the brake system manufacturer's minimum specifications
- Rotors and drums that are worn beyond the brake system manufacturer's minimum specifications
- ABS warning indicator that is activated

39

FUELING AND FLUIDS CHECKS

Purpose:

To ensure vehicle and equipment are in working order and that the vehicle is safe and ready to respond.

Policy:

Ambulances are to be fueled when fuel levels reach the $\frac{3}{4}$ full mark. Every effort should be made to fuel at the Morgan County shops on Hwy 144. Other fueling sites are available through out the region depending upon county contracts. Fueling at the county shops requires two fuel cards which will be assigned to and kept in each vehicle for maintenance tracking. Fueling off site requires an account specific card which means Morgan County has to have an established account prior to refueling. Fueling off site requires a receipt even if credit cards are used. The receipts need to be turned in to the ambulance administrative secretary. Fueling anything other than ambulance vehicles is strictly prohibited. Unauthorized use of refueling sites will result in disciplinary actions which may include termination.

Fluid levels need to be checked and maintained by on duty crewmembers at the beginning of every day to include, radiator fluid, engine oil level, transmission fluid and windshield washer fluid. Engine oil levels need to be checked following long distant transfers without exception.

Vehicle or equipment concerns which may need repair need to be reported immediately. This form should be given to the on duty supervisor as soon as possible. All vehicle repairs will be done by the county shop fleet management. Only the on call supervisor will take units in and out of service (notifying dispatch) at the direction of the county shops.

