

**DECATUR TOWNSHIP FIRE DEPARTMENT
STANDARD OPERATING PROCEDURE**

TABLE OF CONTENTS

Section 1 – Incident Management Procedures

1.01	Incident Command System
1.02	First Responder Authentication Credential (FRAC)

Section 2 – Operations Procedures

2.01	Automatic Fire Alarm Responses

Section 3 – Medical Operations

3.01	EMS Policy – Operational Guidelines
3.02	EMS Policy – Controlled Substances
3.03	EMS Performance Guides – Infection Control Plan

Section 4 –

--	--

Section 5 –

Section 6 - Safety	
6.01	Safety Division – Safety Committee
6.02	Rapid Intervention Teams (RIT)
6.03	Accountability System
6.04	Evacuation of Fire-ground
6.05	Mayday Procedures
6.06	RIT – MAYDAY Protocol Worksheet
6.07	Vehicle Operations
6.08	Vehicle Operations - Driving
6.09	Vehicle Operations - Backing

Section 7 – Education & Training	

Section 8 – Fire Prevention / Code Enforcement	
8.01	Fire Investigations
8.02	Investigator / Code Enforcement Call Out

Section 9 – Administrative Procedures	

DECATUR TOWNSHIP FIRE DEPARTMENT STANDARD OPERATING PROCEDURE	
TITLE: FIRST RESPONDER AUTHENTICATION CREDENTIAL (FRAC)	SECTION: INCIDENT MANAGEMENT
NUMBER: 1.02	EFFECTIVE: MARCH 22, 2010
THIS PROCEDURE SUPERSEDES ALL PREVIOUS GENERAL ORDERS, POLICIES, S.O.P'S & S.O.G'S	

Marion County and Hamilton County Regional First Responder Authentication Credential (FRAC) User Policy

1. INTRODUCTION

The events of September 11, 2001 and Hurricane Katrina prompted the need for a universal credentialing and identification (ID) system among first responders. On August 27, 2004, President Bush issued Homeland Security Presidential Directive 12 (HSPD-12), which mandated that federal agencies issue universal ID cards for federal employees. Two standards, Personal Identity Verification (PIV) I and PIV II, emerged as part of Federal Information Processing Standards (FIPS) 201, which specifies the architecture and technical requirements for a standard Federal employee ID system.

Marion and Hamilton Counties, Indiana received a grant from the Urban Areas Security Initiative (UASI) to create a reliable system of common identification credentials for first responders in these counties. After careful review of other state, regional, and local identification credential practices as well as existing identification systems in use locally, Marion and Hamilton Counties decided to establish a regional identification credentialing system.

First Responders, and their emergency support, must have validated credentials to maximize the effectiveness of the response effort and efficiency of scene management. Electronically validated credentials at an incident will provide trusted and dependable data for scene access.

Specifically, FRAC strengthens the local emergency support response by:

- Efficiently handling multi-jurisdictional issues that may delay response time;
- Providing tracking and accountability for first responders;
- Reducing the time spent by qualified and certified first responders to save untrained individuals who enter into dangerous situations; and
- Providing real-time situational awareness and post-incident reconstruction of events.

FRAC-approved credentials may also be issued at the outer perimeter of an incident scene to those volunteers who can provide proof of qualified or necessary assistance. The FRAC initiative also discourages unauthorized access into or within an incident scene, especially where acts of terror are involved, that could cause additional harm or secondary catastrophe to responders.

1.1 PURPOSE

Interoperability in public safety is a relatively new tradition. While most attention has traditionally been focused on interoperable public safety radio communications, there is now a growing awareness of the need for interoperable identity credentials that provide proof of identity, qualifications and skills. For first responders who deploy outside of their jurisdictional boundaries, an interoperable FRAC provides communication to the incident commander about who they are and what they have been trained to do, so that they can be best utilized during the incident response.

These policies and standards define a consistent and reliable system whereby a regional identification credential can be created and later used to authenticate individuals who require access to an incident. This document focuses on three (3) areas of the First Responder Authentication Credential (FRAC): (1) Card Management (Registration, Issuance, Maintenance, Renewal, Termination, and Replacement), (2) Incident Scene Management, and (3) Technical Specifications. These policies and standards have been developed as much as possible in accordance with HSPD 12 and FIPS 201 while being limited by funding and by Federal standards written exclusively for Federal agencies.

1.2 SCOPE

FRAC has been developed for Marion and Hamilton Counties, Indiana with the intention of becoming a regional system for Indiana Homeland Security District 5. This document identifies the following groups who may need to be identified/credentialed at an incident: Law Enforcement, Fire/HazMat, Emergency Medical Services (EMS), Public Health, City-County Government Employees (including additional ESFs), Elected Officials, Private Sector/Contractors, and Volunteers. The policies and standards described in this document address authentication of responder identity, card management process, incident scene management, and the technical specifications of the card. This document does not specify access control policies or requirements.

1.3 APPROACH

Hamilton and Marion Counties, Indiana have developed a standardized common identification credential system for their First Responders and additional emergency support. In addition to the FRAC, each agency with First Responders may continue to issue its own credentials based upon their standards and requirements, or as mandated by law.

In Hamilton and Marion Counties' FRAC system, emergency responders are divided into three (3) security levels: (1) Level 1 First Responders, (2) Levels 2-3 Emergency Support. These levels correspond with the Federal Emergency Management Agency's four phases of disaster management: (1) Mitigation (including prevention), (2) Preparedness, (3) Response, and (4) Recovery.

SECURITY LEVEL	SECURITY LEVEL NAME	SECURITY DESCRIPTION
1	Level 1 First Responders	This is the highest security level of responder with the most significant amount of identity proofing and vetting. These personnel are crucial for saving life, preventing further disaster, and preventing the worsening of an incident.
2	Level 2 Emergency Support	This is the highest security level for emergency support that may not be required immediately after an incident, but may have crucial roles once an incident is stabilized.
3	Level 3 Emergency Support	This security level is for temporary, supportive personnel, and is optional depending on the needs of the incident.

1.3.1 LEVEL 1 – FIRST RESPONDERS

Level 1 cards have smart card-based credentials and 2D barcodes for interoperability. These cards provide the highest level of security and assurance based on the sponsoring agency’s process for registering, proofing, and vetting of the applicant’s qualifications and certifications. The sponsoring agency is responsible for all components (Registration, Issuance, Maintenance, Renewal, Termination, and Replacement) of their own First Responders’ card management process. Law Enforcement, Fire, HazMat, and Emergency Medical Services (EMS) are Level 1 First Responders.

1.3.2 LEVEL 2 – EMERGENCY SUPPORT

Level 2 cards have contactless smart card-based credentials and 2D barcodes for interoperability. These cards provide a medium level of security and assurance based on either the sponsoring agency’s process for registering, proofing, and vetting or based on identification provided at the incident. The sponsoring agency is responsible for all components (Registering, Issuance, Maintenance, Renewal, Termination, and Replacement) of their own card management process. Emergency Management Agencies (EMA), public health, city-county government employees, and elected officials are Level 2 Emergency Support and may be have cards pre-issued or issued, as needed, at the incident.

1.3.3 LEVEL 3 – EMERGENCY SUPPORT, TEMPORARY

Level 3 cards are temporary ID cards which have 2D barcodes for interoperability. Level 3 cards provide the lowest level of security and assurance based on their temporary use for a single incident. These cards shall only be printed on one side and in grayscale with no laminate. Agencies in Level 1 or 2 must sponsor candidates for a Level 3 card.

Credible volunteer agencies such as the American Red Cross or Medical Reserve Corps are likely sponsors of volunteers at an incident. Level 3 card candidates must present 2 forms of ID, one of which must be government-issued based on items from I9, Column A. These cards are temporary ID cards which are issued and later revoked by an authorized person at an incident. Private sector employees, contractors, and volunteers are Level 3 Emergency Support.

1.4 QUALIFICATIONS

The security provided by this identification credentialing system relies on several factors beyond the scope of these policies and standards. Marion and Hamilton Counties are aware that the overall performance of this system is dependent on:

- Assurance that all jurisdictional sponsors correctly identify applicants and vet each applicant with appropriate background checks as required for jurisdictional employment.
- Protection and safeguard provided by the FRAC holder to protect the credential itself.
- Prompt notification of any changes in a FRAC holder status, e.g., employment termination, suspension, certifications, etc.

1.5 PRIVACY REQUIREMENTS

In accordance with HSPD 12 requirements to protect personal privacy, Marion and Hamilton Counties' FRAC system will comply with all privacy controls specified in Federal, and State privacy laws and policies as applicable for each agency.

Adherence to the control objectives and the purpose of the FIPS 201 standard shall be enforced, namely "to enhance security, increase Government efficiency, reduce identity fraud, and protect personal privacy" [HSPD-12]. Cards shall not be issued if inconsistent with these control objectives or in violation of any policies and procedures of the sponsoring agencies.

2. CARD MANAGEMENT BY SECURITY LEVEL

The registration, issuance, maintenance, renewal, termination, and replacement card procedures for Security Levels 1, 2, and 3 are discussed in the following sections. Each procedure may vary depending on the security level assigned to the cardholder.

2.1 LEVEL 1: FIRST RESPONDERS (LAW ENFORCEMENT, FIRE/HAZMAT, EMERGENCY MEDICAL SERVICE (EMS)) AND LEVEL 2: EMERGENCY SUPPORT (EMERGENCY MANAGEMENT AGENCY (EMA), PUBLIC HEALTH, CITY-COUNTY GOVERNMENT EMPLOYEES (INCLUDING ADDITIONAL ESFS), AND ELECTED OFFICIALS)

The following card management sections apply to both Level 1 First Responders and Level 2 Emergency Support resources.

2.1.1 REGISTRATION (SPONSORING, PROOFING, VETTING)

Agencies involved in providing response resources to incidents shall have their potential cardholders credentialed using standardized procedures. Since these differ in how they register cardholders based on their existing internal procedures, these agencies will be responsible for sponsoring, proofing, and vetting of all persons to whom cards will be issued. Professional licenses and/or standards may dictate some of the registration process. At a minimum, agencies

shall require two forms of identity source documents in original forms. A list of acceptable documents can be found in Form I-9, OMB No. 1115-0136, "Employment Eligibility Verification." One of these documents shall be a valid State or Federal government-issued picture identification (ID). These documents are required for legal employment in the United States.

The sponsoring agency may require the potential cardholder to complete the "Personnel Questionnaire" form (see Appendix D) in lieu of pre-loaded cardholder data. All fields on this form are mandatory except the medical and certification, as applicable, sections.

The registration process shall adhere to the principle of separation of duties to ensure that no single individual has the capability to issue a credential without the cooperation of another authorized person. This is mandatory for Security Level 1 and 2 cards, but optional for Level 3 cards.

Even with Level 1 or Level 2 credentialing, a cardholder may be denied access to an incident.

2.1.2 ISSUANCE

The issuance process shall only be performed when the registration process has been successfully completed according to the processes and standards of the sponsoring agency. At the time of issuance, verification that the individual to whom the credential is to be issued is the same as the intended applicant as approved by the sponsoring agency.

First responder agencies may keep the process of card issuance within their own agency. These agencies may only permit authorized and trained personnel to issue cards. Only approved permanent and mobile kits purchased through the vendor are permitted to process and print cards.

Level 1 and 2 cards should be laminated with a holographic laminate on the front side. Back side lamination is optional and to be determined by the issuing agency.

2.1.3 MAINTENANCE

Managing the card lifecycle is one of the fundamental elements of a secure identity management credentialing system. Card data and associated credentials may need to be invalidated prior to the expiration date of the card. The cardholder may retire, change jobs, and change employment, thus requiring invalidation of a previously active card. The card may be damaged, lost, or stolen, thus requiring a replacement.

If a cardholder has additional licenses or certifications that need to be added to his/her personnel data, he or she should go to his/her agency contact and ask that these credentials be added to the credentialing system.

2.1.4 RENEWAL

Renewal is the process by which a credential is replaced without the need to repeat the full registration process. The sponsoring agency will verify that the cardholder is in good standing with active credentials before authorizing the renewal of a credential. Each agency will be responsible for determining the process by which cards will be renewed such as 6 weeks prior to reaching the 5 year expiration date. Renewal cards shall only be valid for an additional 5 years. If a card needs to be reissued, the card shall keep the original date of expiration. A note

shall be added in the “Notes Section” of the database that the card was reissued on xx/xx/xxxx. Any changes to one’s personal changes should be made on the “Change Form to Personnel Questionnaire” (See Appendix E).

The expired card must be collected and destroyed following normal termination procedures. These cards shall be shredded using capable office shredders. If no shredder is available, the sponsoring agency shall give cards to their respective county EMA for destruction.

2.1.5 TERMINATION

The termination process is used to permanently destroy or invalidate the use of a credential, including stored data, so that the card cannot be used again. A card shall be terminated under one or more of the following circumstances:

- Cardholder separates (voluntarily or involuntarily and including retirement or death) from the sponsoring agency.
- Cardholder has a change in employee status.
- Cardholder is determined to hold a fraudulent identity.
- Or as determined by the sponsoring agency.

The designated representative at the sponsoring agency shall collect and destroy the card. The card also shall be revoked so that all databases reflect the change in status from active to inactive. Any personally identifiable information that has been collected specific for the card shall be stored or disposed of in accordance with the privacy standards and best practices of the sponsoring agency.

2.1.6 REPLACEMENT CARDS

A cardholder shall contact his/her designated agency representative within 24 hours if the current card has been compromised, lost, stolen, or damaged. A replacement card also may be reissued, at the agency’s discretion, if the cardholder has an employee status or lifestyle change. A replacement card shall be issued in accordance with the policies in this document. If a card needs to be reissued, the card shall keep the original date of expiration. A note shall be added in the “Notes Section” of the database that the card was reissued on xx/xx/xxxx. Any changes to one’s personal changes should be made on the “Change Form to Personnel Questionnaire” (See Appendix E).

Cards that have been found shall be returned to the Emergency Management Agency’s address on the back of the card.

Marion County EMA:
47 South State Avenue
Indianapolis, IN 46201
317.327.3900

Hamilton County EMA:
18100 Cumberland Road
Noblesville, IN 46060
317.770.3381

3. INCIDENT SCENE MANAGEMENT

A primary reason for the implementation of a regional credentialing and identification system is for scene management involving multidisciplinary responders and authorized personnel. Granting access based on the identity and vetted attributed of first responders and authorized

others is essential for managing a disaster or emergency scene. An identification card with valid credentials allows first responders to secure the scene, authorize entry and exit from the scene, and manage personnel within the scene. A pre-issued identification card with trusted credentials provides fast and reliable electronic verification of personnel records and attributes.

The minimum credentialing staffing levels at an incident is six personnel from any of the following disciplines: law enforcement, fire service, or EMS. These personnel are expected to appear at an incident, bring or utilize an enrollment kit with scanners, and scan and/or issue identification cards.

3.1 LEVEL 1 FIRST RESPONDERS & LEVEL 2 EMERGENCY SUPPORT

The following incident scene management sections only apply to Level 1 First Responders and Level 2 Emergency Support personnel.

3.1.1 INCIDENT SCENE ACCESS

First responders who arrive at an incident scene will manage the scene, including the perimeter, until additional authorized personnel either arrives or assumes command. As additional first responders arrive at the scene, they will present their regional credentialing identification card to gain access to the scene. The handheld readers can be used offline to read the credentials at various access points within the scene. These devices are operational without any network connectivity as long as they have been recently synchronized with the network. Scenes may have multiple access points, including a staging area, where personnel gain access to the scene or are redirected for additional credentialing procedures.

Even with Level 1 or Level 2 credentialing, a cardholder may be denied access to an incident.

3.1.2 INCIDENT SCENE ISSUANCE

Responders who do not have pre-issued credentials shall be redirected to a designated area for on-site credentialing. The sponsoring agency shall require an identifying badge/ID, uniform, or marked vehicle in order to sponsor the responder. The registrar at the scene shall enter all the necessary personnel information from the responder in order to complete the registration process and issue a card. The registrar shall also use the document imager to scan all hard copy certifications if a responder presents them at the scene.

DECATUR TOWNSHIP FIRE DEPARTMENT STANDARD OPERATING PROCEDURE	
TITLE: AUTOMATIC FIRE ALARM RESPONSES	SECTION: OPERATIONS PROCEDURES
NUMBER: 2.01	EFFECTIVE: JANUARY 01, 2010
THIS PROCEDURE SUPERSEDES ALL PREVIOUS GENERAL ORDERS, POLICIES, S.O.P'S & S.O.G'S	

PURPOSE: To develop a standard operating procedure for Decatur Township Fire Department, when responding to an automatic fire alarm in occupied and unoccupied structures.

PROCEDURES:

Upon arriving at the scene of the automatic alarm, the alarm can be silenced but not reset until the problem has been identified by the incident commander. The incident commander shall not take the advice or statement from anyone else that the problem has been identified and fixed. The incident commander shall rely on their companies or a specialized individual that has the appropriate training to make that determination. Once the problem is identified the incident commander may have the alarm reset and if the building was vacated then they may have the building reoccupied and returned to its normal status.

If the building is unoccupied then the building’s “Knox Box” should be utilized as the primary means of access to gain entry into a building. If the building does not possess such a box then forced entry may be needed to gain access into the building.

Every effort should be made to attempt to get a company or building representative on the scene prior to forcing entry into a building but only a reasonable amount of time should be allowed to pass before forced entry is made.

If circumstances warrant forcible entry, the incident commander shall request the police department to respond to the scene and a minimum of one company shall remain on the scene until their arrival. Upon their arrival the responding police officer will generate an incident report of how forced entry was gained and description and amount of the damage. Also, photographs are recommended and all the information including the police case number shall be listed in RMS.

If forced entry is used, it is the responsibility of the incident commander that every effort is made to gain access into the building with the least amount of damage.

If an alarm cannot be reset in a high life safety building including but not limited to: schools, nursing homes, and group homes then at minimum, one company will remain on the scene and Fire Prevention will be contacted. The company left on the scene will remain on the scene until Fire Prevention has released them, or the incident commander is completely satisfied with the arrangements that have been provided in order to get the alarm to a ready status.

Fire Prevention shall be called if the following occurs:

1. Intentional False reporting such as but not limited to: pulling of a pull station or making a false 911 call.

2. If multiple responses are made to an alarm within a short period of time.
3. If incident commander would have issues with the owner or occupant and feel uncomfortable with the situation.
4. Any time that the incident commander might warrant a situation that a Fire Prevention Car is needed.

DECATUR TOWNSHIP FIRE DEPARTMENT STANDARD OPERATING PROCEDURE	
TITLE: EMS POLICY – OPERATIONAL GUIDELINES	SECTION: MEDICAL OPERATIONS
NUMBER: 3.01	EFFECTIVE: DECEMBER 01, 2009
THIS PROCEDURE SUPERSEDES ALL PREVIOUS GENERAL ORDERS, POLICIES, S.O.P'S & S.O.G'S	

PURPOSE: This section covers operating procedures for EMS Activities.

ON STATION:

Medical supplies and equipment shall be checked at the start of each shift. All defibrillators (AED and monitor) checks shall be documented on the daily apparatus check sheet. Crews shall ensure that the vehicle, medical supplies and equipment are accounted for, clean, not expired, and ready for service.

RESPONDING:

The Marion County acceptable Standard of Care suggests that responding EMS personnel be in the vehicle and responding within sixty (60) seconds of being dispatched. Exceptions will be considered for overnight responses and if there are extenuating circumstances.

All vehicles shall be driven in a safe and courteous manner with the highest regard for personnel and public safety.

If you “come upon” an accident after you have been dispatched to an emergency or while transporting a patient to the hospital, you should continue with your initial assignment and report the accident to control (description of cars and number). If you cannot safely go around the accident, inform control of your status and render care.

AT THE SCENE:

At a minimum take the following equipment to the patient: oxygen, suction, AED/defibrillator, ePCR, radio, and tech box.

If you are told the scene is not safe, stage out of site of the dispatched location and wait for notification from control the scene is safe

If you feel your life may be in danger immediately take protective measures and leave the scene. Immediately call for law enforcement and be prepared to give control an accurate description of your situation.

TRANSPORTATION:

Prior to departure, personnel shall account for equipment, and remove any and all supplies and "trash" from the emergency scene.

Seat belts and safety restraints are to be used for all patients, family members and crew members.

HOSPITALS:

Patients have the right to be transported to the hospital of their choice as long as their medical condition is stable. Critical patients should be transported to the closest appropriate facility for stabilization. Critical trauma patients must be transported to a trauma center (Wishard or Methodist Hospital or Riley if a child).

With the exception of Methodist, Wishard, Community East and St. Francis Beech Grove, crews should notify the ER of your transport.

ELECTRONIC PATIENT CARE REPORT (ePCR):

The ePCR is a legal document. Therefore, special care should be used to ensure a proper description of the run is completed. The following guidelines apply when completing an ePCR:

- Your documentation should be objective. You should describe what is seen but avoid making assumptions about what has taken place.
- Streets names must be spelled out, not abbreviated.
- If the patient is under (18) years of age, be sure the guarantor is documented in the proper location.
- A patient signature is required for each patient transported. If the patient is unable to sign any available family member may sign for the patient. If you are unable to obtain the above signatures the following items must be obtained:
 - 1.) Your signature on the ePCR,
 - 2.) A signature from the receiving facility staff, and;
 - 3.) A copy of the hospital face sheet.
- Comments are a critical component for the ePCR. All words should be spelled correctly, proper sentence structure must be used (punctuation and capitalizing) and medical terminology and abbreviations used in the correct way.
- Comments must be written for each patient providing a summary of why we were called, what was found, any treatment and the results. For BLS patients this should two or three sentences. However for ALS patients additional comments may be required to fully explain your treatments and outcomes.

REFUSAL OF TRANSPORT:

Only a competent person may refuse care and transportation. The patient must have the risk and benefits adequately explained and the ePCR must support the facts that the patient is competent to understand the risks and makes an informed refusal.

If the patient refuses transportation document the following factors to support the patient's competence:

- Alert and oriented
- Does not appear intoxicated
- Vital signs are not abnormal
- History and physical exam does not suggest life-threatening illness or injury

"Assist a Person" or "Lifting Assistance" runs shall be treated as a "Person Down" or as a "Fall". A complete evaluation will be performed and an ePCR completed. Evaluate for injuries and insure that the fall is not the result of a serious medical condition. Obtain an SOR or transport if appropriate.

"MVA Checkouts" shall have the following minimal history and exam completed and documented:

- Location inside the vehicle
- What type of restraints were used or deployed
- Describe the damage to the vehicle
- Was the patient ambulatory at the scene?
- Denies: loss of consciousness, neck, back, chest and abdominal pain
- Complete sets of vital signs
- Level of consciousness, GCS
- No evidence head, spinal, chest, abdomen or extremity trauma
- Clear and equal breath sounds
- Normal gait

For any SOR document who the patient was left with and can they call 911 for help if needed.

Law enforcement **CANNOT** sign an SOR for the patient. They can only be a witness for the SOR. If the arrested/detained patient cannot sign the SOR, document the reason why in the comments section and have the police officer sign the "witness section."

PERSONAL PROPERTY OF THE PATIENT:

Deliver any personal property transported with the patient to the ER staff.

Please note on the ePCR where personal items were left and to whom (name) it was given.

Should the patient's personal property be left on the ambulance and you are unable to return to the hospital, label the items with the name, address, and telephone number of the patient and take items to Headquarters.

CRIME SCENES:

Crime scenes should be preserved for the coroner and/or police officials for analysis. The following guidelines should be followed:

Do not touch or disturb weapons on the scene.

When removing the patient try to avoid moving anything else surrounding the patient.

If objects have to be moved from the area, have police officials move them unless otherwise directed.

TRANSPORT OF PRISONERS OR ID'S TO THE HOSPITAL:

A Law Enforcement Officer should accompany a prisoner or ID patient either in the transporting ambulance or by following behind the ambulance.

MEDICAL LEGALITIES:

The following should be observed for all patient contacts and all patient records:

Decatur Township Fire Department personnel shall protect and maintain the confidentiality of each patient's medical and personal information which may be obtained in the course of and, as a result of the provision of medical care.

The use of patient's medical information and documentation shall be limited only to the following purposes:

- To provide permanent documentation of the course of the patient's illness and medical treatment.
- To communicate between the physician and other professionals contributing to the patient care.
- To provide continuity of patient care for subsequent admissions or treatment.
- To provide a basis for review, study, and evaluation of patient care processes.
- To provide data for third parties concerned with the patient including other physicians/hospitals, insurance companies, or prepaid agencies, attorneys and governmental agencies.
- To provide data to assist in protecting the legal interest of the patient, hospital and its employees and/or medical staff.
- To provide clinical data for research, study and education.
- To provide statistical data for administrative decision making and planning.

RELEASE OF MEDICAL INFORMATION BY PERSONNEL:

Personnel shall neither obtain nor divulge information contained in the patient's records, except only as it relates to the personnel's direct role of delivering care to that individual patient.

HANDLING OF DISAGREEMENTS:

It shall be this Department's policy to err on the side of the patient and provide the highest level of care available. Disputes between personnel shall NOT be discussed in the presence of the patient or his/her family members either on-scene or at the hospital. Any disagreements may be discussed at the completion of the run. When conflicts cannot be resolved between two crews, Incident Reports should be prepared by all parties concerned and the matter pursued through the chain of command.

OFFICER INTERVENTION:

Officers present on EMS responses who witness what they believe to be an inappropriate or incomplete evaluation of the patient condition or overall situation may and should be compelled to intervene. While many officers will not represent the highest medical authority on the scene, they are entrusted with ensuring scene decorum and appropriate interaction with the public. Their years of experience and knowledge are invaluable, and their input shall not be casually disregarded. The on-scene personnel are to be approached discretely by the Officer regarding his/her concerns, and the most appropriate, patient-directed disposition of the response shall be the goal. All medical interventions are at the discretion of the transporting Paramedic.

DECATUR TOWNSHIP FIRE DEPARTMENT STANDARD OPERATING PROCEDURE	
TITLE: EMS POLICY – CONTROLLED SUBSTANCES	SECTION: MEDICAL OPERATIONS
NUMBER: 3.02	EFFECTIVE: DECEMBER 01, 2009
THIS PROCEDURE SUPERSEDES ALL PREVIOUS GENERAL ORDERS, POLICIES, S.O.P'S & S.O.G'S	

PURPOSE: To ensure the security and appropriate use of narcotics and specified controlled substances carried by Paramedic vehicles operated by the Department.

REFERENCE:

U.S. Drug Abuse Regulation and Control Act USC Title 21 Chapter 13 836 IAC 2-2-2(a) (4)

GUIDELINES:

Indiana Administrative Code (836 IAC 2-2-2 (a) (4)) states that “All scheduled medications shall be stored in a locked container within a locked compartment. Medications stored shall be approved in writing by the medical director or issuing pharmacy.”

The Department provides approved containers and locking compartments on each of its ALS transporting and non-transporting vehicles. Keys for the locked compartment and container are unique for each vehicle. Preventing unauthorized access to scheduled substances is the responsibility of the Paramedic assigned to each vehicle on a shift-to-shift basis.

The on hand count of fentanyl and versed should remain at 20 mg or 2 syringes. Notify the EMS Chief as soon as possible for replacement narcotics.

SECURITY:

Keys to the scheduled substances compartments and containers are to be in the possession of the on-duty Paramedic at all times and are NOT to be left in or on the vehicle. It is unacceptable to leave the keys hanging on hooks, inserted in the secure compartment’s locking mechanism, hung on door or drawer handles, attached to the vehicle ignition key ring, or stored in the glove compartment, consoles, cabinets, seats, or tech kits of the vehicle when it is unattended.

When the Paramedic is away from the apparatus, the controlled substances keys shall not remain with the vehicle. This does not mean that the Paramedic necessarily has to have the keys physically on his/her person at all times. For example, when engaged in physical fitness activity, the keys may be kept on the portable radio antenna. When sleeping, showering, exercising, etc., the keys should be placed with/attached to any item or article (e.g. clothing) that will always accompany the Paramedic on an emergency response.

At shift change each day or when relieved by another Paramedic during a shift, the Paramedic who is preparing to go off duty shall transfer the keys to the Paramedic coming on duty. This transfer of keys shall take place when the two Paramedics meet face-to-face to verify drug counts and sign over the scheduled drugs on the **“Controlled Substances Log”** form.

If no relief Paramedic is scheduled or his/her arrival for duty is delayed for any reason, the keys shall be given to the highest-ranking House Officer or senior firefighter present. The officer/senior firefighter and paramedic will both sign the **“Controlled Substances Log”**, verifying the count. The paramedic will also document the transfer of keys on the form. The officer shall either carry the keys on his/her person or secure them in a locked, restricted access area on station. Verification of the correct count and the transfer of keys must occur in the same manner at each shift change between the Paramedics and/or House Officers/Senior Firefighter.

USE AND DOCUMENTATION:

When patient care warrants the administration of one or more of the controlled substances, either by protocol or by on-line physician order, the following procedure shall be followed:

- The Paramedic providing care to the patient shall retrieve the necessary drug/medication from the secured compartment;
- The Paramedic shall administer the precise dosage to the specific patient. (NOTE: When receiving a verbal order for drug administration, be sure to repeat the dose order back to the physician or his/her designee for clarification);
- Any empty syringes and/or unused medication will be disposed of under the observation of a hospital staff member after the transfer of care. It is preferred that unused medication is wasted in front of a witness as opposed to handed over for further use. Appropriate signatures must be obtained.
- Once the patient has been stabilized and/or turned over to the hospital staff, the use of any and all controlled substances shall be documented on the **“Proof of Use of Narcotics”** sheet. Information on this form shall include:
 - Date of Administration
 - Patient’s Name
 - Time Medication Given
 - Amount Given (in mg)
 - Amount Wasted (in mg) **[NOTE: Waste to be witnessed by Hospital Staff]**
 - Ordering Physician’s Signature
 - Paramedic’s Signature
 - Total Amount Used (in mg)
 - New Balance of Medication Remaining in Secured Container (in mg);
- The product count on the **“Controlled Substances Log”** shall be changed to reflect the new remaining balance (in mg). This notation shall be initialed by the Paramedic who administered the medication);

- The Paramedic shall also obtain the signature of the ordering physician on the **“Patient Care Report”** (run sheet) in the patient’s physician box.

Discrepancies and/or medication errors are to be documented in writing immediately and reported via the chain of command to the EMS Chief. The EMS Chief shall inform the Medical Director of any discrepancies and/or medication errors within twenty-four (24) hours of the event.

DECATUR TOWNSHIP FIRE DEPARTMENT STANDARD OPERATING PROCEDURE	
TITLE: EMS PERFORMANCE GUIDES – INFECTION CONTROL PLAN	SECTION: MEDICAL OPERATIONS
NUMBER: 3.03	EFFECTIVE: DECEMBER 01, 2009
THIS PROCEDURE SUPERSEDES ALL PREVIOUS GENERAL ORDERS, POLICIES, S.O.P'S & S.O.G'S	

In accordance with the OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030, IC 16-41-10, and PL 212-2003 the following exposure control plan has been developed.

EXPOSURE DETERMINATION:

OSHA requires employers to perform an exposure determination concerning which employees may incur occupational exposure to blood or other potentially infectious materials. The exposure determination is made without regard to the use of personal protective equipment (PPE). This exposure determination is required to list all job classifications in which all employees may be expected to incur such occupational exposure, regardless of frequency. The Decatur Township Fire Department (DTFD) following job classifications are in this category.

- FIREFIGHTER/EMERGENCY MEDICAL TECHNICIAN
- FIREFIGHTER/ADVANCED EMT (A-EMT)
- FIREFIGHTER/PARAMEDIC (EMT-P)
- CIVILIAN EMPLOYEE

In addition, if the employer has job classifications in which some employees may have occupational exposure then listings of those classifications are required. Not all employees in these classifications would be expected to incur exposure to blood or other potentially infectious materials, tasks, or procedures that would cause these employees to have occupational exposure. The job classifications and associated tasks/procedures for these categories include, but are not limited to the following.

Job Classification	Task/Procedures
FIREFIGHTER /EMT-B FIREFIGHTER /FR FIREFIGHTER	<ul style="list-style-type: none"> - Removing trapped, injured person from a burning structure. - Structural Firefighting - Assisting an injured Firefighter - Rescues, Extrications, Water/ice Operations - HAZMAT Operations - CPR - Bandaging and Splinting - Control of bleeding - Childbirth - Control of airway, suctioning - All EMS care provider tasks
FIREFIGHTER/PARAMEDIC	<ul style="list-style-type: none"> - All task/procedures of a Firefighter/EMT-B - Any and all ALS/BLS medical procedures

IMPLEMENTATION SCHEDULE AND METHODOLOGY:

OSHA also requires that this plan also include a schedule and method of implementation for the various requirements of the standard.

COMPLIANCE METHODS:

Body Substance Isolation precautions will be observed on this department in order to prevent contact with blood or other potentially infectious materials. All blood or other potentially infectious material will be considered infectious regardless of the perceived status of the source individual.

Engineering and work practice controls will be utilized to eliminate or minimize exposure to personnel on this department. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be utilized. On this department, the following engineering controls will be utilized.

- Sharps Containers
- Recapping of needles is prohibited (Unless it's the only option.)

The above controls will be examined and maintained on a regular schedule. The schedule for reviewing the effectiveness of the controls is as follows.

THE OFFICER IN CHARGE OR ACTING OFFICER IS RESPONSIBLE FOR INSURING THE EFFECTIVENESS ON A DAILY BASIS.

HANDWASHING:

Hand washing facilities are also available to the employee who incurs exposure to blood or other potentially infectious materials. On this department hand-washing facilities will be located at every fire station. Hand washing shall not occur in eating areas or dining rooms. When hand washing is not readily available use an antiseptic cleanser in conjunction with a clean paper towel. As soon as is reasonable hand washing at an appropriate facility will follow. **THE OFFICER IN CHARGE OR THE ACTING OFFICER IS RESPONSIBLE FOR INSURING THE MATERIALS ARE AVAILABLE FOR USE AND COMPLIANCE OF SUBORDINATES.**

After removal of personal protective gloves, employees shall wash their hands and any other potentially contaminated skin area immediately or as soon as feasible with soap and water.

If employees incur an exposure to their skin or mucous membranes then those areas shall be washed or flushed with water as appropriate as soon as feasible, following the contact.

NEEDLES:

Contaminated needles and other contaminated sharps will not be bent, recapped, removed, sheared or purposely broken. An exception to this is if the procedure would require that the

contaminated needle be recapped or removed, and no other alternative is feasible, and the action is required by the medical procedure. If such action is required then the recapping or removal must be done by the use of a mechanical device or a one-handed technique. On this department, recapping or removal is only permitted if no other method is possible. All sharps will be disposed of in an approved sharps container.

CONTAINERS AND SHARPS:

Sharps that are reusable are not to be used on this department. Contaminated sharps are to be placed immediately, or as soon as possible, after use into appropriate sharps containers. On this department sharps containers are puncture resistant, labeled with a biohazard label, and are leak proof. Appropriate sharps containers will be placed on every apparatus and will be the responsibility of the officer in charge or his/her designee. It will be checked daily and as needed replaced. Dispose of the sharps container in the same manner of all biohazard waste.

WORK AREA RESTRICTIONS:

In work areas where there is a reasonable likelihood of exposure to blood or other potentially infectious materials, employees are not to eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses. Food and beverages are not to be kept in shelves, cabinets, or on counter tops or bench tops where blood or other potentially infectious materials are present.

Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited.

All procedures will be conducted in a manner, which will minimize splashing, spraying, splattering, and generation of droplets of blood or other potentially infectious materials. Methods, which will be employed on this department to accomplish this goal, are...

- IV/vena puncture, use barriers (chuck towels) beneath IV site whenever possible.
- Prior to any vena puncture have 4X4 gauze dressing or other absorbent dressing of adequate quantity ready to control arterial bleeding.
- When possible turn wound away from self or others when examining or bandaging to prevent accidental spraying of arterial bleeding.
- Have adequate absorbent dressing material when bandaging a wound
- Unless absolutely necessary don't remove dressing material put in place prior to arrival. Add to the dressing with additional dressing material.

CONTAMINATED EQUIPMENT:

Equipment, which has become contaminated with blood or other potentially infectious materials, shall be examined prior to servicing or shipping and shall be decontaminated as necessary unless the decontamination of the equipment is not feasible. Any equipment, which is designed for single use, shall not be cleaned for reuse. It should be disposed of in an appropriate manner. Any other equipment that cannot be cleaned in a safe and appropriate manner should

be placed in a properly marked bio-waste bag and reported at once. Storage of the hazard should be in a predetermined, safe, and secure location within the fire station.

Each EMS vehicle will carry Citrus II Hospital Germicidal Deodorizing Cleaner which is approved by and registered with the US EPA and registered as bactericidal, virucidal, tuberculocidal, fungicidal, disinfectant and cleaner to decontaminate reusable equipment before returning them to service or transporting them to another location for further cleaning.

All EMS equipment (i.e. blood pressure cuffs, stethoscopes, cot, back boards & pulse oximeter) and ambulance (i.e. floor, walls, seats and ceiling) shall be disinfected after all runs.

PERSONAL PROTECTIVE EQUIPMENT:

All personal protective equipment used on this department will be provided without cost to employees. Personal protective equipment will be chosen based on the anticipated exposure to blood or other potentially infectious materials to pass through or reach the employees' clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time, which the protective equipment will be used.

Impervious gowns

Mask with wraparound visor

Latex free gloves

HEPA Filter Mask

NFPA 1999 EMS Coat & Pants

All personal protective equipment will be cleaned, laundered, and disposed of by the employer at no cost to the employees. The employer at no cost to employees will make all repairs and replacements.

All garments, which are penetrated by blood, shall be removed immediately or as soon as feasible. All reusable PPE will be removed and bagged separately for decontamination.

GLOVES:

Gloves shall be worn where it is reasonably anticipated that employees will have hand contact with blood or other potentially infectious materials, non-intact skin, and mucous membranes. Gloves will be available on all apparatus that may be responsible for responding to an incident requiring protection. It will be the responsibility of the officer in charge or his/her designee to ensure that ample supply of gloves is available. At the beginning of each workday the location/s should be checked to ensure an ample supply of gloves are available. This supply should be rechecked after every run and re-supplied as needed. Gloves will be worn on all EMS runs and at any other time when contact with body fluids may result.

Disposable gloves used on this department are not to be washed or decontaminated for re-use and are to be replaced as soon as practical when they become contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised.

MASK AND EYE PROTECTION:

Mask in combination with eye protection devices, such as goggles or safety glasses with solid side shield, or chin length face shields, are required to be worn whenever splashes, spray, splatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can reasonably be anticipated. Situations on this department, which would require such protection, include but are not limited to, the following:

TRAUMA:	BURNS	BLOOD DRAWS
- Gun Shot Wounds	ARTERIAL BLEEDS	EXTRICATION INCIDENTS
- Knife Wounds	INTUBATION	
- Motor Vehicle Accident	IV INSERTION	

OUTER GARMENTS:

The OSHA standard also requires appropriate protective clothing to be used, such as gowns, aprons, clinic jackets, or similar outer garments. On this department the following situations require that such protective clothing be utilized, include but are not limited to:

TRAUMA:	BURNS	BLOOD DRAWS
- Gun Shot Wounds	ARTERIAL BLEEDS	RESCUE INCIDENTS
- Knife Wounds	INTUBATION	
- Motor Vehicle Accident	IV INSERTION	

On this department, when a caregiver on an incident where a patient or a potential patient has or may have exposed body fluids, Personal Protection Equipment must be utilized.

On this department equipment will be cleaned and decontaminated after every run. IT WILL BE THE RESPONSIBILITY OF THE OFFICER OR HIS/HER DESIGNEE TO INSURE THAT THIS IS DONE PROPERLY.

Appropriate precautions should be taken to avoid contamination to personnel cleaning and decontaminating equipment. This includes use of personal protective equipment.

Decontamination will be accomplished by utilizing the following materials:

- Bleach 1:10 solution
- Citrus II Hospital Germicidal Deodorizing Cleaner

HAND WASHING (field)

- Antiseptic Gel (SD Alcohol 70%) by Chester Labs

All contaminated work surfaces will be decontaminated after completion of procedures/incident and immediately or as soon as feasible after any spill of blood or other potentially infectious materials, as well as the beginning or end of the work shift if the surface may have become contaminated since the last cleaning.

All bins, pails, cans, and similar receptacles shall be inspected and decontaminated daily and as needed. It will be the officer in charge or his/her designee responsibility to insure it is done and that proper precautions are utilized.

Any broken glassware, which may be contaminated, will not be picked up directly with the hands. Mechanical means of retrieval in such a manner as not to involve direct hand contact.

REGULATED WASTE DISPOSAL:

All contaminated sharps shall be discarded as soon as feasible, in sharps containers, which are located on every EMS apparatus in every fire station.

Regulated waste other than sharps shall be placed in appropriate containers. Large, well marked; biohazard bags will be used on this department. The bags will be stored at every fire station and will be carried on every EMS apparatus. It will be the responsibility of the officer in charge or his/her designee to insure compliance.

All personal protective and disposable equipment used shall be disposed of into a biohazard bag before leaving the incident. The biohazard bag shall then be disposed of at the hospital the patient was transported to.

LAUNDRY PROCEDURES:

Laundry contaminated with blood or other potentially infectious materials will be handled as little as possible. Such laundry will be placed in appropriately marked bags at the location where it was used. Such laundry will not be sorted or rinsed in the area of use.

All employees who handle contaminated laundry will utilize personal protective equipment to prevent contact with blood or other potentially infectious materials.

Only laundry designed to be reused, will be cleaned to do so. Reusable personal protective equipment will be transported to designated laundry decontamination location (Perry / Decatur Gear washer) to be decontaminated. Personnel will utilize the facility to decontaminate the PPE. Personnel will follow established procedures and take appropriate precautions including the use of PPE while handling contaminated clothing.

HEPATITIS B VACCINE:

All employees who have been identified as having exposure to blood or other potentially infectious materials will be offered the Hepatitis B vaccine, at no cost to the employee. The vaccine will be offered within 10 working days of their initial assignment to work involving the potentially infectious materials unless the employee has previously had the vaccine or who wishes to submit to antibody testing which shows the employee to have sufficient immunity.

Employee who declines the Hepatitis B vaccine will sign a waiver.

Employees who initially decline the vaccine but who later wish to have it may then have the vaccine provided at no cost.

The Fire Department Safety Officer will ensure that the vaccine is offered and if refused the waiver is signed. He/she will also track this record for the employee. Currently, Concentra Medical Centers and Public Safety Medical Services offer the vaccine to department personnel.

POST-EXPOSURE EVALUATION AND FOLLOW-UP:

The Deputy Chief of EMS has been appointed to act as the Infection Control Officer who is responsible for maintaining communication among the fire department, the fire department physician, the health care facility, appropriate city, county, or state health officials, and other health care professionals.

When notified of an exposure incident, the infection control officer shall ensure the notification, verification, treatment, and follow-up of members. The infection control officer also ensures that proper documentation of the exposure incident is recorded as specified on State Form 51467 (9-03) in addition to departmental incident and first report forms.

When the employee incurs an exposure incident, it should be reported to the Infection Control Officer.

All employees who incur an exposure incident will be offered post-exposure evaluation and follow-up in accordance with the OSHA standard.

This follow-up will include the following:

- A.) Documentation of the route of exposure and the circumstances related to the incident using State Form 51467 and the departmental incident forms.
- B.) If possible, the identification of the source individual and, if possible, the status of the source individual. The blood of the source individual will be tested for Infectious Disease infectivity per IC 16-41-10, and PL 212-2003.
- C.) Results of testing of the source individual will be made available to the exposed employee with the exposed employee informed about the applicable laws and regulations concerning disclosure of the identity and infectivity of the source individual.
- D.) The employee will be offered the option of having their blood collected for testing of the employee's HIV/HBV serological status. The blood sample will be preserved for at least 90 days to allow the employee to decide if the blood should be tested for HIV serological status. However, if the employee decides prior to that time that testing will be conducted then the appropriate action can be taken and the blood sample discarded.
- E.) The employee will be offered post exposure prophylaxis in accordance with the current recommendations of the U.S. Public Health Service.
- F.) The employee will be given appropriate counseling concerning precautions to take during the period after the exposure incident. The employee will also be given information on what potential illnesses to be alert for and to report any related experiences to appropriate personnel.

G.) The Infection Control Officer has been designated to assure that the policy outlined here is effectively carried out as well as to maintain records related to this policy.

H.) The Infection Control Officer will maintain the Sharp Injury Log for needle and sharp injuries.

INTERACTION WITH HEALTH CARE PROFESSIONALS:

A written opinion shall be obtained from the health care professional that evaluates employees of this facility. Written opinions will be obtained in the following instances:

- 1.) When the employee is sent to obtain the Hepatitis B Vaccine.
- 2.) Whenever the employee is sent to a health care professional following an exposure incident.

Health care professionals shall be instructed to limit their opinions to:

- 1.) Whether the Hepatitis B Vaccine is indicated and if the employee has received the vaccine, or for evaluation following an incident.
- 2.) That the employee has been informed of the results of the evaluation and
- 3.) That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials. The written opinion to the employer is NOT to reference any personal medical information.

TRAINING:

Training for all employees will be conducted prior to initial assignment to tasks where occupational exposure may occur. Training will be conducted utilizing videotapes, written material, lecture, and practical exercises.

Training for employees will include but not be limited to the following explanation of:

- 1.) The OSHA standard for bloodborne pathogens and IC 16-41-10, and PL 212-2003.
- 2.) Epidemiology and symptomatology of bloodborne diseases.
- 3.) Modes of transmission of bloodborne pathogens.
- 4.) This exposure control plan, i.e. lines of responsibility, how the plan will be implemented.
- 5.) Procedures which might cause exposure to blood or other potentially infectious materials at this facility.
- 6.) Control methods, which will be used on this department to control exposure to blood or other potentially infectious materials.
- 7.) Personal protective equipment available
- 8.) Post exposure reporting, evaluation, and follow-up using State Form 51467.
- 9.) Signs and labels used on this department.
- 10.) Hepatitis B Vaccine program with this department.

Both written and practical testing will follow training. All personnel will receive annual refresher and update training. The outline for the training material is to be located in every fire station and up-dated not less than annually. It will be the responsibility of the Company Officer to ensure its availability and access.

RECORD KEEPING:

Medical records shall include the member's name, HBV vaccination status including dates, results of examinations, medical testing and post exposure evaluation and follow up, and any health care professional's written opinion and information provided by the health care professional.

Medical records shall be confidential and maintained for the duration of membership and for 30 years afterwards.

Training records shall be kept accurate for 3 years and include the training dates, content or summary of the trainings, names and qualifications of the trainer, names and job titles of trainees.

Medical and training records shall be available to members upon request.

BODY FLUID EXPOSURE CHECKLIST:

Name of employee exposed: _____

Date and time of exposure: _____

The employee notified the Shift Officer of the Exposure. _____

The Shift Officer contacted the Infection Control Officer. _____

The employee was reminded to cleanse the area exposed and change uniform if contaminated. _____

The physician was given the letter requesting his/her assistance and a copy of the OSHA rule 1910.1030, IC 16-41-10, and PL 212-2003. _____

The physician either indicated that the exposure required further follow-up or signed the letter indicating the exposure does not increase the employee's risk of contracting a bloodborne pathogen. _____

The source patient's blood was drawn for analysis. _____

The employee was coached on the need for confidentiality. _____

The employee has gone to Concentra Medical Centers for evaluation, testing, treatment, counseling.

The employee has completed the body fluid exposure Incident report and State Form 51467.

A body fluid exposure report form copy mailed or faxed to:

Indiana State Dept. of Health
2 N. Meridian Street, 5K
Indianapolis, IN 46204
Fax: 317-233-9271

The employee completed all applicable Bloodborne Pathogen Exposure packet contents before end of shift.

Signature of Exposed Employee:

Signature of Safety Officer or his Designee:

Date and time completed:

Dear Physician:

You are being presented with this letter as a result of a body fluid exposure sustained by one of our employees.

Attached, you will find a copy of Marion County Protocols pertaining to Exposure as well as information regarding applicable laws (IC 16-41-10, and PL 212-2003). These laws require that we test the source patient for Infectious Diseases. If you feel the exposure places our employee at risk for contracting a bloodborne pathogen, we would deeply appreciate your assistance in completing the testing and our Exposure Control Packet. Decatur Township Fire Department will cover any cost of testing for Infectious Diseases.

If you determine that our employee is at risk to possibly contract a bloodborne pathogen, we will be sending him/her to our workman's compensation Physician for testing, treatment (if needed), and counseling.

If you do not feel that the employee's exposure places him or her at risk of contracting a bloodborne pathogen, please understand that the employee still has the right to pursue the testing; and, according to the OSHA rule, IC 16-41-10, and PL 212-2003, we must make every attempt to accommodate our employee's request.

We truly appreciate your cooperation in this matter.

If you have any questions, please do not hesitate to contact me.

Sincerely,

Charles H. Valentine Jr.
Deputy Chief EMS / Infection Control Officer
Decatur Township Fire Department
5410 S High School Rd
Indianapolis, IN 46221
317-557-2380

I have been informed of the exposure reported by _____ and will comply with the applicable laws and OSHA rules in regards to testing and reporting of Bloodborne Pathogen Exposures.

(Physician Signature)

(Date)

BODY FLUID EXPOSURE-INCIDENT REPORT FORM

EMPLOYEE NAME: _____

DATE AND TIME OF EXPOSURE: _____

LOCATION OF EXPOSURE (i.e.: in ambulance while moving, on station in dirty utility area):

THOROUGH DESCRIPTION OF HOW THE EXPOSURE OCCURRED: _____

WHAT EXPOSURE CONTROL PROCEDURES WERE UTILIZED: _____

WHAT COULD HAVE BEEN DONE TO PREVENT THIS EXPOSURE ? _____

Report submitted by: _____ Date & Time: _____

Report received by: _____ Date & Time: _____

EMPLOYEE REFUSAL OF TREATMENT/TESTING/COUNSELING

OSHA 1910.1030, IC 16-41-10, PL 212-2003, and the possibility of contracting a bloodborne pathogen following this exposure have been explained to me. I understand that evaluation, treatment, testing, and counseling are available at my convenience at Concentra Medical Centers. I also understand that the Decatur Township Fire Department will be responsible for the cost of any treatment, evaluation, testing, or counseling that I receive as a result of this exposure. Furthermore, I am aware that all information pertaining to any treatment, evaluation, testing, or counseling that I receive will be kept strictly confidential according to the Decatur Township Fire Department Exposure Control Plan.

Understanding the above information, I decline to be treated, evaluated, tested, or counseled for the exposure at this time.

Signature: _____ Date: _____

Printed Name: _____

Date of Exposure: _____

Signature of Witness: _____ Date: _____

Printed Name: _____

DECATUR TOWNSHIP FIRE DEPARTMENT STANDARD OPERATING PROCEDURE	
TITLE: RAPID INTERVENTION TEAMS	SECTION: SAFETY
NUMBER: 6.02	EFFECTIVE: DECEMBER 01, 2009
THIS PROCEDURE SUPERSEDES ALL PREVIOUS GENERAL ORDERS, POLICIES, S.O.P'S & S.O.G'S	

PURPOSE: To establish procedures for having Rapid Intervention Teams in place at the scene of working fire suppression operations in accordance with the OSHA Title 29 CFR 1910.134; Two In, Two Out , and NFPA 1500.

The RIT presence on the fire-ground is the firefighter's 911 system. When a firefighter needs emergency assistance while operating on the fire-ground one or more RITs will be utilized to solve the firefighter's problem. In a best-case scenario, firefighters in the immediate area of the distressed firefighter will be able to quickly solve the problem – but that isn't always the case and is dependent on the firefighter's problem and the fire conditions in the structure.

Firefighter rescue involves assisting and/or removing a firefighter from a troubled location or situation on the fire-ground. The rescue may be as simple as guiding the firefighter to the outside (safety) or as complicated as extricating the firefighter from a collapse or entanglement, securing his air supply with a new source, and removing him from the structure.

This procedure outlines the following:

- RIT Dispatch Protocols
- Establishing / Assuming the RIT Sector
- Initial RIT Sector Actions on **MAYDAY** Transmission
- RIT Tools and Equipment
- RIT Staging
- Pro-active Actions of the RIT Sector
- RIT Benchmarks
- Fire-ground Communications during RIT Operations

RIT DISPATCH PROTOCOLS:

There is a staggered RIT response based on the type and size of the incident.

A.) Report of Fire (1 Apparatus):

There will be a RIT apparatus included on all "report of fire" incidents.

- Private Dwelling: The third (3) arriving Engine Company will establish the RIT Sector unless otherwise directed by Command.
- Multi Dwelling: (Bldgs., Apts., Commercial, etc.) The fourth (4) arriving Engine Company will establish the RIT Sector unless otherwise directed by Command.

B.) Working Fire: Multi Dwelling (Bldgs., Apts., Commercial, etc.) (1 Additional Apparatus):

When a Multi Dwelling (Bldgs., Apts., Commercial, etc.) incident is marked “Working” by on-scene units, when Fire Control has enough information (multiple calls, confirmation from caller, etc.) to consider the response a working incident, or when the call is upgraded while units are enroute:

An additional Ladder will be included in the “Working” Companies response intended for RIT.

C.) Fire-ground MAYDAY (2 Additional Apparatus, 1 Chief, 1 Transport Ambulance):

When a **MAYDAY** is transmitted on the fire-ground there will be an additional RIT response dispatched to the scene. These units will report to the RIT Sector upon arrival.

For all occupancy types the response will be as follows:

- (1) Battalion Chief (designated RIT Chief)
- (1) Engine Company
- (1) Ladder Company
- (1) Transporting Ambulance

NOTE: These units will be dispatched and the run type changed to “**MAYDAY Declared**” which will be verbalized as such by the Locution System.

Additional units can be requested by the RIT Chief at any time.

ESTABLISHING / ASSUMING THE RIT SECTOR:

There will be a RIT Sector established on every “Working Fire” incident.

The RIT Sector will be established by the officer in charge of the first-arriving RIT. This officer will remain in control of the RIT Sector until one of the following units assumes control:

A.) Incident Commander (or his designee):

In the event of a **MAYDAY** transmission prior to the arrival of the Safety Officer the Incident Commander (or his designee) will assume control of the RIT Sector and manage the **MAYDAY** as the **RIT LEADER** until the Safety Officer and/or RIT Chief arrives on scene.

B.) Safety Officer:

During normal fire-ground operations the Safety Officer will assume control of the RIT Sector upon arrival. In the event of a **MAYDAY** during fire-ground operations the Safety Officer will manage the **MAYDAY** as the **RIT LEADER** until the RIT Chief arrives.

Upon the arrival of the Safety Officer during a working **MAYDAY**, the Safety Officer will assume control of the RIT Sector as the **RIT LEADER** and the Incident Commander (or his designee) will return to the Command Post.

C.) RIT Chief:

The RIT Chief will assume control of the RIT Sector as the **RIT LEADER** upon arrival and manage the **MAYDAY** with the assistance of the Safety Officer.

NOTE: Once a **MAYDAY** has occurred, the officer in charge of the RIT Sector shall be identified as **RIT LEADER** for the duration of the **MAYDAY** Incident.

INITIAL RIT SECTOR ACTIONS ON MAYDAY TRANSMISSION:

DEFINITION: MAYDAY TRIANGLE: The MAYDAY Triangle consists of the following three elements:

- RIT Leader: Officer in command of the MAYDAY (Safety Officer, RIT Chief, etc.)
- MAYDAY Firefighter: Firefighter in distress that has called a MAYDAY
- RIT: Team of personnel sent to rescue and/or assist the MAYDAY firefighter

If the Safety Officer is not on scene when the **MAYDAY** is transmitted then Command will deploy the RIT and manage the RIT Triangle. The Safety Officer will assume control of the RIT sector as the **RIT LEADER** upon arrival and manage the **MAYDAY** triangle.

If the Safety Officer is on scene, Command will deploy the RIT and then hand off the **MAYDAY** to the Safety Officer. The RIT Chief will assume the RIT sector, **RIT LEADER** role upon arrival.

Command must initiate the following actions upon the transmission of a **MAYDAY**:

- Immediately deploy RIT
- Acknowledge MAYDAY
- Confirm/request LUNAR information from MAYDAY firefighter

Actions of the RIT Sector (one of the following: BC, or his designee, Safety Officer, RIT Chief):

- Confirm/request LUNAR information from MAYDAY firefighter
- Location, Unit #, Name, Assignment, Reason for MAYDAY
- Manage the RIT Triangle (RIT Leader, MAYDAY Firefighter(s), Rapid Intervention Team(s)).
- Manage the **MAYDAY** (additional teams, benchmarks...)

RIT TOOLS AND EQUIPMENT:

The following tools and equipment are considered standard equipment for each RIT. These tools should be collected and staged with each RIT.

- RIT Air Pack

- RIT Tag Line
- Portable Radio (one per member)
- Flashlights (one per member)
- Thermal Camera
- Selection of tools (tool selection and quantity decided by the Officer of the team)

Depending on the actual situation there may be additional tools required to complete the rescue. These tools should be requested through the RIT LEADER as needed.

RIT STAGING:

RIT staging is divided into two separate areas – staging for the RIT that is ready to deploy and staging for the additional RIT under the RIT Sector.

A.) RIT Staging Area for the RIT ready to deploy:

This is a dynamic location on the fire-ground that is determined by the RIT Officer. The RIT that is monitoring the fire-ground ready to deploy to a MAYDAY must be constantly sizing-up the fire-ground and the activities of the companies inside.

The RIT should stage at the location most likely to be used in the event of a MAYDAY. This location will change based on the information gathered during the fire-ground operation.

The RIT Officer (and at least one RIT member) should complete an initial 360 of the structure to evaluate fire location(s) and conditions and then periodic 360's of the structure to evaluate for changing fire conditions and entry / exit locations of working companies.

B.) RIT Staging Area for additional RIT, "Working" Incident at Multi Dwelling fires:

1.) Multi Dwelling: (Bldgs., Apts., Commercial, etc.):

There will be additional RIT Ladder on scene once the incident is marked a "Working". The team will report to the RIT Sector and should be staged on the opposite side of the structure from the initial RIT.

PROACTIVE ACTIONS OF THE RIT SECTOR:

Some of these teams may be used to perform proactive RIT actions as determined by the Incident Commander or Safety Officer.

The number one function and priority of the RIT is to search for, locate, and rescue a firefighter needing assistance. NO action can take the RIT away from this primary function.

Proactive RIT actions on the fire-ground may include laddering for secondary egress locations, forcing entry for secondary egress locations, removing hazards that may lead to a firefighter MAYDAY situation, or other actions that could help prevent a firefighter emergency on the fire-ground.

These actions may be accomplished by the RIT, but **NO ACTIONS SHOULD PREVENT THE RIT SECTOR FROM BEING ABLE TO DEPLOY A TEAM IMMEDIATELY UPON HEARING A MAYDAY TRANSMISSION!**

RIT BENCHMARKS:

Benchmarks provide both information updates and a timeline of the RIT operation to the RIT LEADER. Most benchmarks indicate a specific event during the RIT operation that is expected to take place (usually in a specific order). The use of benchmarks significantly reduces the amount of radio traffic that must be given.

A.) In the event that a **MAYDAY** is transmitted and a RIT deploys the following benchmarks must be given:

1.) RIT Unit #, entry location, and # of personnel (example: E71 entering A side, 4 members)

2.) **MAYDAY** firefighter(s) located

3.) **MAYDAY** firefighter(s) name confirmation,

The NAME of the MAYDAY firefighter should be confirmed and transmitted to the RIT LEADER. If additional firefighters are still missing and have not been found then this must also be relayed at this time.

4.) RIT air supply secured

5.) Beginning extraction and planned exit location

6.) **MAYDAY** firefighter out of the structure

7.) PAR REPORT: RIT Unit # out of structure with PAR, MAYDAY Firefighter removed.

8.) **MAYDAY** Terminated, MAYDAY firefighter(s) and RIT Sector Par,

This benchmark is given by the RIT LEADER when all MAYDAY firefighter(s) have been removed and all RITs are out of the structure. The results of the PAR should be communicated to the Incident Commander.

Additional Information:

The RIT Officer must notify the RIT LEADER of any changes in status or in the event of a delay during removal.

FIRE-GROUND COMMUNICATIONS DURING RIT OPERATIONS:

Communications during a RIT operation will have a direct impact on the success or failure of the operation.

NOTE: EFFECTIVE November 28, 2009:

Dispatch will start assigning only the odd group numbers for any incident that is assigned an Ops group. The even number group will automatically be associated with the same incident.

This will accommodate having 2 groups assigned. EXAMPLE: If you are assigned Ops 1 you will have Ops 1 and 2 available to you for the incident.

When a **MAYDAY** is transmitted on the fire-ground all personnel — other than the Incident Commander, MAYDAY firefighter(s) and the RIT Sector — should transmit **EMERGENCY TRAFFIC ONLY** Until Command has established the second Ops group for Fire-ground operations.

When a second Ops group has been assigned by Command due to a “**Declared MAYDAY**”, all companies not assigned to the **MAYDAY** shall switch to the additional Ops group and remain on that group unless otherwise instructed by Command.

If a second Ops group is not established, Face-to-face communication should be used for all non-emergency communication that needs to take place.

DECATUR TOWNSHIP FIRE DEPARTMENT STANDARD OPERATING PROCEDURE	
TITLE: ACCOUNTABILITY SYSTEM	SECTION: SAFETY
NUMBER: 6.03	EFFECTIVE: NOVEMBER 1, 2009
THIS PROCEDURE SUPERSEDES ALL PREVIOUS GENERAL ORDERS, POLICIES, S.O.P'S & S.O.G'S	

PURPOSE: Establish a standard system to identify and account for all personnel working at an emergency incident. Order of Arrival assignments and timely communication of crew movements will give Incident Command (IC) and support staff the ability to track, locate, rescue, and account for all firefighters in the event one or more become missing or distressed.

In the event you become lost, trapped, disoriented, discover an injured firefighter, are unable to account for a member of your crew, or experience some other situation where you require emergency assistance during fire-ground operations, transmit a MAYDAY following the MAYDAY Procedure, SOP No. 6.05.

Accountability System Components

ACCOUNTABILITY OFFICER

The Accountability Officer is responsible for tracking personnel at an emergency incident. The Accountability Officer will utilize the Accountability System to assist the IC in tracking sectors, company assignments, and movement of personnel at emergency incidents. The On Scene Safety Car will perform these duties until one is designated by Command.

**APPARATUS RIDING POSITION IDENTIFIER
PERSONAL PORTABLE RADIOS**

Each riding position on an apparatus is assigned a portable radio, with a radio designation/identifier assigned to the corresponding position on the apparatus.

- Adam (A) - Company Officer
- Baker (B) - Firefighter behind Officer
- Charlie (C) - Firefighter behind Engineer
- David (D) - Engineer

PERSONAL IDENTIFICATION TAG (PIT): White plastic Velcro tag that bares employee’s name and rank.

PASSPORT: Velcro holder of Personal Identification Tags (PIT). Each apparatus is issued one (1) RED passport. Mounted on the Officer’s side (Engines, Aerial, Tanker, and Rescue), Tech side on Ambulances and one (1) GREEN passport as a back-up. The GREEN passport holder will be kept on the Accountability Board in the Shift Commanders / Company Officers office.

- Red Passport: Mounted on the officer’s side of the apparatus. Tech side on ambulances.
- Green Passport: Used to build a replacement passport in the event the red passport is lost or destroyed. (Advise Safety Chief of missing passport)

ACCOUNTABILITY BOARD

Board kept in the Shift Commanders / Company Officers office for all employees to store reserve Personal Identification Tags (PIT), green passports and helmet inserts.

PHOTO IDENTIFICATION CARD (PIC):

Each employee shall be issued one (1) Photo Identification Card (PIC). The PIC card has the DTFD employee picture ID on it and additional important information. The PIC card will be located in the inside pocket of the firefighter's fire turnout gear, or a secure pocket for DTFD ambulance personnel.

USE OF ACCOUNTABILITY SYSTEM

Each member of DTFD is issued three (3) PITs:

(On duty):

- PIT placement on passports shall reflect Apparatus Riding Position Identifier. (Adam first, Baker second, Charlie third, David fourth)
- One is attached to the red apparatus passport mounted on the Officers side (Engines, Aerial, Tanker, Rescue), Tech side on Ambulances, showing all working personnel on that apparatus.

(Off duty):

- PITs of relieved personnel are to be stored in helmet shield insert area for firefighters. EMS only personnel shall be responsible for storing PIT while off duty.
(Note): When relieving an employee on an apparatus, change out the helmet shield insert and Personal Identification Tag on the red passport, thereby removing that employee from the Accountability System.
- One PIT is held in reserve on the Accountability Board for use when other tags have been lost or left at another station, and for building a green, replacement passport.

(Note): Any PITs inadvertently left at firehouses should be returned to that employee or to the Safety Chief.

Shift Commanders / Company Officers should purge the Accountability Board on an as needed basis. Employees should retrieve their own PITs left at firehouses.

ALL PERSONNEL ARE RESPONSIBLE FOR:

- Proper use of Helmet Shield Inserts and PITs.
- Having the correct radio according to the Apparatus Riding Position Identifier, (radios shall be marked with an A, B, C, or D), and that the radio has a charged battery.
- Proper Apparatus Riding Position Identifier placement of their PITs on passports when on duty and ready for response. (A first, B second, C third, D fourth)
- Removing their PITs from passports when not available for response (i.e. details, meetings).
- Reporting lost PITs, Safety Chief should be notified for replacement.
- Officers at all times are responsible for the accuracy of the apparatus passport.
- Replacement cost for lost Helmet Shield Inserts, PITs, and PICs.

HELMET COLORS

- White: Chief Officer
- Red: Company Officer
- Black: Firefighter

HELMET SHIELDS

Helmet Shields shall display rank written in the top bar of shield with "Decatur Twp." in the bottom bar. They will be the following colors:

- Chiefs: White shield, red background, gold letters
- Captains: White shield, red background, white letters
- Lieutenants: Black shield, red background, white letters
- Privates: Black shield, white background, black letters

HELMET INSERTS

Helmet shield inserts denote individual company assignments:

- Battalion Chief: Gold background with red number (7)
- Safety Officer: Yellow background with black letters (SAFETY)
- Engine Company: Red background with white numbers (71, 72, 74 etc.)
- Ladder Company: Black background with white numbers (71)
- Acting Officer (Private catching the seat): White background with number matching apparatus insert, (red-engine, black-ladder)

Helmet inserts shall be attached to the helmet shield by Velcro. It is the responsibility of the Firefighter and Company Officer to see that the insert properly reflects the firefighter's assignment and position on the apparatus. If an insert is missing it should be located or reported to the Safety Chief.

(Note): Any inserts found or accidentally taken from a firehouse can be returned to the Shift Commander, Company Officer or Safety Chief.

MAINTAINING COMPANY UNITY

- Free lancing is not permitted on any Incident.
- All personnel shall work within their assigned company. Companies may break into task teams (split crews) consisting of at least 2 personnel.
- Personnel shall work within a minimum work group of two (Buddy System).
- Company and team unity are maintained when personnel have direct voice, line of sight, or touch, of team personnel.
- All crews shall mobilize as one unit and leave the hot zone as one unit.
- If a portable radio fails or any component of an SCBA fails, that crew shall leave the area using, as a minimum, the buddy system of two.
- Crews will maintain company unity throughout the incident.
- Crews shall report to rehab as a unit until reassigned or released.
- If companies are to be relieved on scene, they shall report as a complete crew to the Accountability Officer or designee. Companies being relieved shall confirm PAR, exchange helmet inserts and PITs with their relief personnel, and leave the scene. The incoming crew will then be able to receive initial assignment from Command.

LEVEL OF ACCOUNTABILITY

Level One Accountability

- Level One Accountability is used on all incidents yet determined as working, (level 1 staging), and is maintained with Order of Arrival and apparatus/crew position communicated to Command. During Level One Accountability all red apparatus passports remain on the apparatus.

Level Two Accountability

- Level Two Accountability is used on all working incidents, or when recommended by Command, Safety, or the Accountability Officer. Companies shall give their order of arrival, report their operating location, (i.e., side, floor level, exposure structure, etc.) and any critical changes thereafter. The incident commander or designee shall maintain accountability of all units as they arrive on scene.
- Upon arrival, the Accountability Officer or designee will collect the red apparatus passports of the Initial Alarm or Box Alarm assignments and communicate face to face with Command for an accountability update and transfer of accountability duties. All companies and ambulance crews assigned beyond Initial or Box Alarms, including RIT teams, are to bring their red apparatus passport to the Accountability Officer at the Incident Command post.

PERSONNEL ACCOUNTABILITY REPORT

A Personnel Accountability Report will be utilized as needed at any given incident. Command, Safety, a Sector Officer, or Accountability Officer may ask for and manage a PAR when an incident is switched from offensive to defensive, when all personnel are not accounted for, when a sudden event occurs, i.e., flashover, back draft, collapse, or anytime deemed necessary. All radio traffic shall be minimized to emergency traffic only. All company officers will personally verify the accountability of their assigned personnel and be prepared to relay this information, as requested, preferably by face to face or via radio. If PAR is not obtained, Command shall announce over the air, "attention all personnel operating on the fire-ground", have (give name) report immediately to command." Command will immediately initiate a plan for search and rescue by activating the RIT and requesting a MAYDAY Response.

Prior to completion of all Level 2 accountability incidents a PAR will be given by the Accountability Officer to the IC, who then notifies fire control as needed for the PAR benchmark.

Company Officers are responsible for securing their company's passports from the Accountability Officer before leaving the scene of an incident.

DECATUR TOWNSHIP FIRE DEPARTMENT STANDARD OPERATING PROCEDURE	
TITLE: EVACUATION OF FIREGROUND	SECTION: SAFETY
NUMBER: 6.04	EFFECTIVE: DECEMBER 01, 2009
THIS PROCEDURE SUPERSEDES ALL PREVIOUS GENERAL ORDERS, POLICIES, S.O.P'S & S.O.G'S	

PURPOSE: To establish procedures for the safe and efficient evacuation of firefighting personnel involved in interior fire suppression operations.

Proper risk management should be exercised at all incidents. Interior firefighting operations should be abandoned for the following reasons:

1. Extent of the fire prohibits control
2. Structure is unsafe to operate in or around
3. Fire conditions make the building untenable
4. Hazards exist that jeopardize operations and personnel
5. Loss of water/Insufficient fire flow
6. Incident Command / Officers Discretion

Conditions that all firefighters should be aware of that may necessitate emergency evacuation include but are not limited to:

1. Structural collapse
2. Backdraft
3. Flashover
4. Explosion
5. Uncontrolled fire extension

When such conditions exist and emergency procedures are required, command must provide for the following:

1. Evacuation
2. Regrouping
3. Personnel Accountability Report (PAR)
4. Communications
5. Tactical changes
6. Redeployment

Our primary concern is the welfare of our personnel when a hazard, which may affect their safety, becomes apparent. There needs to be a structured method of evacuation in place to protect firefighters who are placed in jeopardy by the adverse affects of these conditions. This will provide for the rapid and effective notification of personnel involved and will accurately account for the safety of those personnel.

Declaring an emergency depends on the following circumstances:

1. Imminent danger of the hazard
2. Type and extent of the hazard
3. Perception of the area affected by the hazard

Declaring an emergency should be initiated when the hazard appears imminent.

Any member has the authority to declare an emergency when it is felt that a notable danger to firefighters is apparent.

Hazards noted of a less than imminent danger should be handled by a consultation of Command, Group Officers, Safety Officers, Company Officers, or an outside agency with jurisdictional authority. These officers or specialists should make a determination as to the nature and possible effect of the suspected hazard and advise command so that a proper course of action can be taken.

Emergency Traffic:

When an imminent hazard has been realized the emergency traffic process should be initiated. The initiator should:

1. Advise unit designation and advise command with “emergency traffic clear the air”
2. Example: “Command from Engine 71A, emergency traffic clear the air”
3. All other fire-ground traffic should be held until notification of emergency is complete.

The initiator should then:

1. Describe the apparent hazard
2. Order an evacuation of a particular area or group
3. Order an immediate evacuation of the entire structure

Command will then initiate the evacuation procedures. The signal to evacuate the area will be threefold and will begin simultaneously:

1. Command will notify fire control of the exact evacuation orders. The control operator will precede the evacuation announcement with a high/low alert 2 tone, followed by the “Emergency evacuation has been ordered” message to evacuate the designated areas. This will be done on all talk-groups being used on the incident.
2. Group and Company Officers should face-to-face notify and begin evacuation of all firefighters in their respective areas.

If a full structural evacuation is ordered:

3. Air horns on all apparatus on scene will be sounded continuously for 10 seconds followed by a 3 second pause. The sounding and pausing sequence will be repeated at least three times or until the incident commander is assured that all personnel have exited the structure.

Members operating on fire-ground should vacate the structure immediately. Tools and equipment may be left behind if practical.

Upon receipt of the emergency traffic order, Company and Group Officers shall assemble personnel assigned to them and promptly exit to a safe location where the Company Officer will account for the company members. Group officers will then account for all evacuated units.

Command will then begin a Personnel Accountability Report, (PAR) for each unit in the evacuated area. Command will then match all reporting units against the accountability system to insure evacuation. When all affected units and members are accounted for, the evacuation process is complete. If a member or members are unaccounted for, the Rapid Intervention Team (SOP 6.02) will be deployed and that standard operating procedure will be put into effect.

If all personnel are accounted for, a more specific determination as to the reality and extent of the hazard, can be made and efforts to redeploy or redirect attack forces can be determined. Building evacuations generally involve a shift from offensive to defensive strategies. In such cases, Command must develop a corresponding operational plan and must communicate that plan to all operating elements.

1. Command must notify all units and Group Officers that a shift in strategy has occurred.
2. Fire control should use the high/low Alert 2 tone to notify companies that a shift has been made from offensive to defensive modes.

Command may have the Safety Officer or a designee use barrier tape or some visible means to cordon off collapse zone area if necessary. All Group Officers should be briefed on the changes in tactical deployments and reasons for evacuation.

Defensive withdrawal:

A defensive withdrawal may be ordered if changing fire conditions warrant the change from offensive to defensive tactics. This may be done with the sounding of the high/low Alert 2 tone and a verbal message from Control that a "Defensive withdrawal has been ordered".

DECATUR TOWNSHIP FIRE DEPARTMENT STANDARD OPERATING PROCEDURE	
TITLE: MAYDAY PROCEDURES	SECTION: SAFETY
NUMBER: 6.05	EFFECTIVE: DECEMBER 01, 2009
THIS PROCEDURE SUPERSEDES ALL PREVIOUS GENERAL ORDERS, POLICIES, S.O.P'S & S.O.G'S	

PURPOSE: This procedure outlines the steps to be followed in the event a firefighter emergency arises.

The “**MAYDAY**” signal may be given by any fire department member who may be lost/disoriented/trapped or in imminent danger and in need of immediate assistance.

MAYDAY PROCEDURES:

- 1.) The signal for a missing/lost/trapped firefighter shall be any or all of the following:
 - Radio or verbal transmission of “**MAYDAY, MAYDAY, MAYDAY**”
 - Radio emergency status button activation with no reset contact
 - PASS device alarm status activation with no reset contact
 - Incomplete PAR report

MAYDAY FIREFIGHTER ACTIONS:

In the event that you become lost, trapped, disoriented, discover an injured firefighter, are unable to account for a member of your crew, or experience some other situation where you require emergency assistance during fire-ground operations, transmit a **MAYDAY** using these steps:

- 1.) Transmit a fire-ground **MAYDAY** over your radio by stating:
 - **MAYDAY, MAYDAY, MAYDAY**
 - Give your LUNAR: Location, Unit #, Name, Assignment, Reason for the MAYDAY
- 2.) Manually Activate Your **PASS** Device
- 3.) Emergency Status Radio Button

If your MAYDAY is not acknowledged, repeat the MAYDAY and attempt to activate the Emergency Button on your radio. If the MAYDAY has been acknowledged then this may not be required.

- 4.) Keep Command and/or RIT Sector updated

As you attempt to solve your problem make sure to keep the RIT sector and/or Command updated on progress and needs. In the event that you — or somebody else on the fire-ground

— solve your problem then advise the RIT sector immediately and update them on your location and status.

* All other firefighters must maintain radio discipline and transmit only Emergency Traffic.

* All Company Officer must perform an accountability check of their crew and advise Command ONLY IF A MEMBER IS MISSING.

RIT SECTOR ACTIONS: (May be initiated by Command)

In the event of a **MAYDAY** transmission prior to the arrival of the Safety Officer the Incident Commander (or his designee) will assume control of the RIT Sector and manage the **MAYDAY** as the **RIT LEADER** until the Safety Officer and/or RIT Chief arrives on scene.

The Safety Officer will assume control of the RIT Sector upon arrival and manage the **MAYDAY** RIT Triangle as the **RIT LEADER** until the RIT Chief arrives.

If the Safety Officer is on scene then Command will deploy the RIT and then hand off the **MAYDAY** to the Safety Officer. The RIT Chief will assume the RIT sector upon arrival.

NOTE: Once a **MAYDAY** has occurred, the officer in charge of the RIT Sector shall be identified as **RIT LEADER** for the duration of the **MAYDAY** Incident.

Command must initiate the following actions upon the transmission of a **MAYDAY**:

- Immediately deploy RIT
- Acknowledge MAYDAY
- Confirm/request LUNAR information from MAYDAY firefighter

FIREFIGHTER SURVIVAL – MANAGING YOUR MAYDAY:

The most important point regarding firefighter survival is that prevention is the key! If you can prevent the situation from developing then it won't ever become an emergency. If, however, you can't prevent the situation—*or the events were out of your control to begin with*—previous hands-on training with different firefighter survival skills just may save your life.

DEVELOP A SURVIVAL ATTITUDE:

Unexpected events may occur on the fire-ground that places you in a life or death situation with little or no time to react. Things can go terribly wrong on the fire-ground, take every opportunity to prepare for, and train for, the emergency before it happens.

DECATUR TOWNSHIP FIRE DEPARTMENT

RIT / MAYDAY PROTOCOL WORKSHEET

Companies Assigned to RIT Sector					
RIT / EMS Sector Officer(s)					
Type of Emergency Declared					
MAYDAY		MISSING		TRAPPED	
Number of FF's Missing:			Unit ID#		
Last Known Location:					
Name(s):					
Protocols					
1. Deploy RIT		6. Progress Reports			
2. Notify Fire Control		a.	d.		
3. LUNAR		b.	e.		
4. RIT LEADER		c.	f.		
MAYDAY Declared / RIT Activated					
Time RIT Deployed	Number of RIT FF's / Unit ID# / Entry Location				
Time FF Located	Where was Firefighter(s) Located Inside the Structure				
Is FF Trapped	Time Air Supply Established		Time Removing Firefighter		
Planned Removal Location			Time Firefighter Removed	Code (700/701) FF	
PAR Report: Number of RIT FF's / Unit ID# / MAYDAY FF				Time MAYDAY Terminated	

**DECATUR TOWNSHIP FIRE DEPARTMENT
STANDARD OPERATING PROCEDURE**

TITLE: VEHICLE OPERATIONS / DRIVING

SECTION: SAFETY

NUMBER: 6.08

EFFECTIVE: DECEMBER 1, 2009

THIS PROCEDURE SUPERSEDES ALL PREVIOUS GENERAL ORDERS, POLICIES, S.O.P'S & S.O.G'S

I. PURPOSE

The purpose of this procedure is to protect the safety of department and community members. This standard operating procedure establishes the process for achieving safety when employees drive DTFD apparatus and vehicles.

II. RESPONSIBILITY

It is the responsibility of the Company Officer or Acting Officer to supervise the operation of the vehicle at all times. The Company Officer or Acting Officer must ensure that the vehicle is driven in a safe manner at all times with regard to vehicle speed, roadway maneuvering and starting and stopping of the vehicle.

It is the responsibility of the driver to ensure that all components of the vehicle are in working condition.

The driver must ensure that all safety and mechanical systems are in operating condition and report any issues found to the Company Officer.

All employees must thoroughly learn, understand and implement these procedures.

All employees must remain informed and proficient of these procedures.

III. PROCEDURE

All employees must obtain a valid Indiana drivers license to operate any Decatur Township Fire Department vehicle. Any employee operating a DTFD vehicle without a valid Indiana driver's license will be subject to discipline in accordance to General Order 8.01.

Prior to driving an emergency vehicle, the driver must visually ensure that all occupants are properly seated secured and all compartment doors are closed.

Disengage the transmission retarder when weather conditions dictate.

NON-EMERGENCY OPERATIONS:

Vehicle operators shall obey all state laws and traffic regulations.

The Company Officer or Acting Officer shall confirm that all occupants are in a proper seat and safety restraints are in place before the vehicle is in motion.

Drive the emergency vehicle with due regard for the safety of persons and property.

EMERGENCY OPERATIONS:

The Company Officer or Acting Officer shall confirm that all occupants are in a proper seat and safety restraints are in place before the vehicle is in motion.

The driver shall ensure that all safety and warning devices have been activated and are operating before the vehicle is in motion.

Drive the emergency vehicle with due regard for the safety of persons and property.

Proceed with due regard and slow the vehicles rate of travel when:

- Approaching intersections, even when you have the right-of-way.
- Adverse weather conditions are present (rain, snow, etc.)
- Abnormally heavy traffic or congestion is present.
- Visibility is reduced (night, fog, etc.)
- Road conditions warrant (narrow road, winding road, construction, etc.)

STOP COMPLETELY:

- At All Stop Signs. Proceed only when the driver can account for oncoming traffic in lanes yielding the right-of-way.
- At RED or YELLOW traffic signals.
- For school buses displaying flashing warning lights during boarding or un-boarding of passengers.
- At intersections when “Blind” conditions prevail. Proceed only when the driver can account for oncoming traffic in lanes yielding the right-of-way.

At intersections when two different emergency vehicles responding on an emergency arrive at the same time, the emergency vehicle that has the right-of-way by virtue of the traffic control device proceeds first.

At intersections with a stop sign, the emergency vehicle that does not need to complete a turn proceeds first.

Every effort should be made to pass traffic only on the left. It is extremely dangerous to pass on the right.

Exercise extreme caution when forced with a situation where you must drive in the direction of oncoming traffic. This exercise should be used as a last resort and should only be conducted until you have cleared the obstruction in your direction of travel.

Passing another emergency vehicle is not recommended. Should passing become necessary, permission must be obtained from the vehicle being passed via radio communications.

Maintain an adequate clear distance between responding emergency apparatus. A minimum of 100 feet of separation should be maintained at all times. This distance may need to be increased for adverse weather and driving conditions.

Safe arrival shall always have priority over unnecessary speed and reckless driving enroute to an emergency incident.

Unless designated to do so, emergency vehicles shall not be taken off road.

VEHICLE PARKING:

Emergency vehicles and personnel operating on any roadway must adhere to the DTFD Highway Operations Standard Operating Guideline.

Drivers must consider the dangers that moving vehicles pose on personnel working on the scene.

On the scene of an emergency incident, vehicles should be strategically located so as to provide maximum protection to members on the scene. Visual warning devices must remain on to alert oncoming traffic.

When possible, move the emergency vehicle to a driveway out of the way of traffic. (This practice should be used on small or single vehicle medical responses.)

**DECATUR TOWNSHIP FIRE DEPARTMENT
STANDARD OPERATING PROCEDURE**

TITLE: VEHICLE OPERATIONS / BACKING

SECTION: SAFETY

NUMBER: 6.09

EFFECTIVE: DECEMBER 1, 2009

THIS PROCEDURE SUPERSEDES ALL PREVIOUS GENERAL ORDERS, POLICIES, S.O.P'S & S.O.G'S

I. PURPOSE

The purpose of this procedure is to protect the safety of personnel when department vehicles are backing up or performing other maneuvers that require the use of a spotter to promote safety and prevent vehicular damage.

II. RESPONSIBILITY

It is the responsibility of the Company Officer or Acting Officer to supervise the operation of the vehicle at all times.

In the absence of the Company Officer or Acting Officer (EMS Units), it is the responsibility of the driver to ensure safe operation of the vehicle.

It is the responsibility of the driver to ensure that all components of the vehicle are in working condition.

The driver must ensure that all safety and mechanical systems are in operating condition and report any issues found to the Company Officer.

All employees must thoroughly learn, understand and implement these procedures.

All employees must remain informed and proficient of these procedures.

III. PROCEDURE

Backing of department vehicles should be avoided whenever possible. Where backing is unavoidable, spotter(s) shall be used.

It is the responsibility of the Company Officer or Acting Officer to assign a spotter or spotters whenever backing is required.

Back the emergency vehicle with due regard for the safety of persons and property.

The spotter will remain visible to the driver at all times. Anytime the driver loses sight of the spotter, the apparatus will be stopped immediately until the spotter is visible and the communication to continue has been re-established.

When vehicles must be backed, the vehicle's visual warning devices shall be operating.

SIGNALS:

Straight Back: One hand above the head with palm toward face, waving back. (Left or right hand optional). Other hand at your side.

Turn: Both arms pointing the same direction with index fingers extended.

Stop: Both arms raised and crossed with hands in fist.

NIGHT BACKING:

Signals are the same. Prior to backing the vehicle, the spotter must confirm that the spotlights on the rear of the vehicle are illuminated. If the spotter uses a flashlight, make sure it is not directed toward the vehicle's mirrors.

BACKING WITH SPOTTER:

- Activate the vehicles emergency lights.
- Lead spotter will be located at the left rear corner of the vehicle (driver side).
- If a second spotter is utilized, position the second spotter in view of the lead spotter.
- The second spotter must remain in the view of the driver at all times.
- The driver watches the lead spotter. (Left rear, drivers side)

BACKING WITH DRIVER ONLY:

Backing without a spotter should be avoided whenever possible. It is understood that situations arise where backing with a spotter is unavoidable. (EMS Units)

Back the emergency vehicle with due regard for the safety of persons and property.

- Activate the vehicles emergency lights.
- The driver must dismount the vehicle and survey the entire perimeter of the vehicle.
- While backing the driver will closely observe mirrors on both sides of the vehicle.

DECATUR TOWNSHIP FIRE DEPARTMENT STANDARD OPERATING PROCEDURE	
TITLE: FIRE INVESTIGATIONS	SECTION: FIRE PREVENTION / CODE ENFORCEMENT
NUMBER: 8.01	EFFECTIVE: DECEMBER 01, 2009
THIS PROCEDURE SUPERSEDES ALL PREVIOUS GENERAL ORDERS, POLICIES, S.O.P'S & S.O.G'S	

PURPOSE: To establish a guideline for Code Enforcement Division personnel to follow when operating in their normal daily operations and while on the fire-ground.

ORGANIZATION AND AUTHORITY:

“A fire department shall investigate and determine the cause and circumstances surrounding each fire occurring within the territory served by the fire department. The fire department shall begin the investigation when the fire occurs.” I.C. 36-8-17-7

The Decatur Township Fire Department operates under the command of the Chief of Fire whom is appointed by the Township Trustee. The Chief of Fire then has an appointed designee responsible for all fire investigations, a Fire Marshal. The unit shall operate in a joint effort with the Indianapolis Metropolitan Police Department Investigators and serve under their corresponding chain of command.

All Fire Investigators will be cross trained in, but not limited to: General Orders, Standard Operating Procedures, criminal law, criminal investigation procedures, and fire cause and origin procedures.

RESPONSIBILITY:

All members of the Fire Investigation Unit are accountable for General Orders, Standard Operating Procedures, rules and regulations, training bulletins, and other applicable directives of the Decatur Township Fire Department.

The Fire Marshal will ensure all members adhere to established policies. The Fire Marshal will oversee the operations of the division while providing liaison and support between the Chief of Fire and any other outside assisting agencies such as Department of Homeland Security, Indianapolis Metropolitan Police Department, Indiana State Fire Marshal’s Office, and other assisting fire departments.

All disciplinary actions will be reviewed by the Fire Marshal and forwarded to the Chief of Fire for further action.

Personnel will adhere to policies and procedures specifically in areas of emergency driving, grooming standards, firearm policies, use of force, arrest procedures, evidence handling, uniform, fire safety issues, hazardous materials response, as well as any other areas concerning fire suppression and investigation procedures.

RESPONSE BY THE FIRE INVESTIGATION UNIT:

It shall be the responsibility of the Fire Investigation Unit to investigate:

1. All fires deemed suspicious in nature
2. Fires resulting in injury or death
3. All second and third alarm fires
4. Fires with undetermined cause and origin
5. Fires as a result of children playing with a heat source

The Fire Investigations Unit will respond to and assist law enforcement personnel in all post blast scenes.

All responses involving a criminal investigation will require a team effort of at least 2 investigators and/or the assistance of IMPD personnel. At no time shall any investigator conduct on the scene activities, interviews, or any other officer safety concerns alone while conducting criminal investigations.

IFD communications will dispatch Fire Investigation Units to the scene either as automatic or at the request of the Incident Commander or company level officer in charge at the incident.

Investigators responding to runs will acknowledge themselves preferably by MDT to IFD communications.

Fire Investigators will remain on the scene with the assistance of operations personnel until the run is complete and the units are no longer needed.

Any fire resulting in death or serious injury the investigator shall request the assistance of IMPD Fire Investigation Unit, IMPD Homicide, IMPD Family Advocacy Center, and Indiana State Fire Marshal's Office.

All investigators shall follow any current Marion County Standard Operating Procedure, Guideline, or Directive that might involve their job function.

The use of canine accelerant detection may be used by investigators if circumstances arise and investigators shall follow proper procedures for contacting them for their assistance.

DUTIES:

The duties of the Fire Marshal / Division Commander include:

1. Review all cases of investigations and shall be kept informed of all fire incidents and their progress in the investigation.
2. Review all case files and approve by indication of a signature.
3. Attend all departmental staff meetings and prepare an agenda to be presented.
4. Establish equipment and training needs and submit budget proposals to the Chief of Fire.
5. Prepare goals and objectives for the year including but not limited to the following: statistics, want and needs, budget concerns and timelines of events.

6. Prepare lectures and information for presentations at civic group meetings, neighborhood crime watch meetings, and/or any function requested to do such.
7. Schedule and conduct office meetings with members of the staff.
8. Coordinate functions between the unit and other outside agencies such as the State Fire Marshal's Office, IMPD, other fire departments, ATF, FBI.
9. Prepare any information deemed necessary by the Chief of Fire.
10. Enforce all rules and regulations of the department.
11. Conduct debriefing sessions after any incident deemed necessary.

The duties of the Investigators:

1. Investigate all fires requested as such
2. Conduct investigations in a professional manner
3. Investigators will be assigned office duties in addition to the dispatched fire and will be responsible for fire investigations to which they are dispatched to
4. Investigators will prepare a complete case file on each fire/run they are dispatched to include the following but not limited to:
 - a. Cause and origin supported with conclusions as required by state law
 - b. Diagram of the incident
 - c. All owner, suspect and witness information
 - d. Fire RMS report
 - e. All statements of witnesses and suspects
 - f. All photographs on a CD-Rom
 - g. Any other noted deemed important by the investigator
5. Fire Investigators will complete the unit report and appropriate run related pages in Fire RMS program.
6. Any evidence collected at the scene will be transported to the IMPD property room and a case report will be generated and a copy of the case report will be included in the case file.
7. Investigators will appear and answer to any subpoena, to any deposition or court hearing and will testify to the events of the incident in accordance to law and will dress in department approved uniform.
8. Investigators will attend all trainings set forth and approved by the commander
9. Attend various support organization meetings such as: Marion County Arson Task Force and the Indiana Arson Investigations Association
10. Investigators will attend and/or prepare presentations to civic groups, crime watch organizations, and insurance meetings when assigned to do such by the commander
11. Have protected equipment deemed necessary while performing job functions on the scene
12. Follow chain of command at all times

EQUIPMENT:

All investigators are expected to maintain equipment issued to them in a ready status at all times.

Equipment issued to investigators:

1. Full set of turnout gear
2. Hand lantern light

3. All forms necessary to perform job functions and present case files
4. Digital camera
5. Tape recorder/batteries
6. Evidence collection equipment
7. Hand tools: scoop shovel, brooms, axe, etc.
8. EMS bag
9. Fire scene tape

DRESS CODE:

All Investigators are to dress during normal business hours in approved department uniform. At times Investigators will be called out on incidents. Fire Investigators may dress casually according to the weather but must have some form of department identification or logo to distinguish them from the general public. Investigators when dressing casually will keep in mind of their appearance to the public.

FIRE INVESTIGATOR QUALIFICATIONS:

1. Must be an employee of the Decatur Township Fire Department
2. Must be in good physical condition
3. Must pass the department yearly medical physical
4. Must be able to wear breathing apparatus in close and confined spaces and pass the required yearly OSHA respirator clearance
5. Must have a minimum of 5 years of on the job related experience
6. Must be NFPA Firefighter I/II
7. Must be NFPA Fire Investigator I
8. Must be in good standing with all other department required training

DEFINITIONS:

IMPD – Indianapolis Metropolitan Police Department
DHS – Department of Homeland Security
IFD – Indianapolis Fire Department
MDT – Mobile Data Terminal
ATF – Alcohol Tobacco and Firearms
FBI – Federal Bureau of Investigations
RMS – Records Management Systems
OSHA – Occupational Safety and Health Administration
NFPA – National Fire Protection Agency

DECATUR TOWNSHIP FIRE DEPARTMENT STANDARD OPERATING PROCEDURE	
TITLE: INVESTIGATOR / CODE ENFORCEMENT CALL OUT	SECTION: FIRE PREVENTION / CODE ENFORCEMENT
NUMBER: 8.02	EFFECTIVE: DECEMBER 01, 2009
THIS PROCEDURE SUPERSEDES ALL PREVIOUS GENERAL ORDERS, POLICIES, S.O.P'S & S.O.G'S	

PURPOSE: To establish departmental procedures regarding calling for a Fire Investigator or Code Enforcement.

PROCEDURE:

A Fire Investigator shall be requested if one or more of the following exist.

1. All fire deemed suspicious in nature
2. Fire resulting in injury or death to either civilians or firefighters
3. All second or higher alarm fires
4. Fires with an undetermined origin and cause
5. Any fire involving a juvenile or children playing with a heat source
6. Any fire with a possible suspect on the scene; this would include vehicle fires (see below)
7. Any burned person meeting the criteria involving I.C. 35-47-7-3 (also see General Order 9.03)
8. Any situation that the officer in charge (OIC) might deem necessary

The Company Officer may determine the origin and cause if they feel an Investigator is not needed. An example of this would be a fire in a kitchen that might have started on the stove. But if any conditions exist that there is more involved to even that type of fire then request an investigator. The officer will need to make a descriptive narrative in RMS because these reports are still viewed by other people such as insurance companies.

An Investigator shall be started on vehicle fires that appear to have been incendiary (set) in nature. If it is obvious that the fire is accidental, an investigator does not need to be started. The officer will need to make a descriptive narrative in RMS because these reports are still viewed by other people such as insurance companies.

Code Enforcement shall be requesting when one or more of the following situations exist.

1. Multiple responses or alarms to the same location
2. Any situation involving a serious threat to life and safety
3. Trash, brush, or fires where there is difficulty with compliance by the resident or occupant
4. Serious violations that the officer in charge (OIC) might deem necessary

A Company Officer may call an Investigator or Code Enforcement officer directly by phone if any questions arise while on scene.

Company Officers must contact Control in order to have an Investigator or Code Enforcement started to the scene.

Company Officers should notify an Investigator or Code Enforcement officer by email for Incidents that occur that might not warrant calling out an Investigator at that time, but may need to be followed up on.