

# **EMS Policies and Procedures**

Standard Operating Procedure: 3.15	Effective Date: June 8, 2023
Subject: Observer Policy	Section: Emergency Medical Services
Authorized: Michael Stoner, Assistant Chief	Revision Date: N/A

#### I. <u>PURPOSE</u>

The Department of Fire and EMS (DFEMS) shall maintain a policy that encourages non-Departmental members of the community to ride county insured vehicles as observers. This program shall serve to strengthen community relations and to improve public knowledge and education of the Fire and EMS Services. Approval of observer participants shall be based on the criteria outlined in the following procedure and shall be at the discretion of the Director/ Chief of DFEMS or his designee.

## II. <u>DEFINITIONS</u>

None

#### III. PROCEDURES

#### A. General

- 1. Requests to participate in the observer program shall be directed to the onduty Shift Commander.
- 2. Observer request waiver forms shall be approved or denied by the on-duty Shift Commander and shall be kept on file in the Shift Commander's office for a period of one year.
- 3. The Shift Commander shall give reasonable notice to the station officer when an observer will be in the station to ride, the duration of the stay, and any special information (Govt official, member of the press, etc.) that may be pertinent. An approved ride along may be cancelled or rescheduled due to operational activities that would adversely effect intent of the observer program.
- 4. The station officer shall conduct a brief interview with the observer to cover introductions, unit designations, basic daily activities, alerting procedure, riding position (seated and belted), where the person should position themselves at an emergency scene, and any other information which would be pertinent to the safety of the observer or enhance their experience.

5. All DFEMS personnel shall treat observers with respect and consideration and shall conduct themselves in a professional and courteous manner.

## B. Persons Riding as Observer

- 1. Guidelines for observers (Attachment A) shall be kept on file in each station and shall be given to citizens who inquire about the program.
- 2. Completed applications and waivers (attachment B and C) must be submitted to the Shift Commander seven days prior to the requested observation date to allow for processing and proper notification.
- 3. Requests to ride shall not exceed a 12-hour period.
  - i. The Shift Commander shall instruct persons requesting to ride on the appropriate dress and procedures of the fire station.
  - ii. Observers shall not be permitted to participate at any station without a career supervisor present.
- 4. Persons riding on emergency apparatus shall be required to wear a reflective vest with "FIRE DEPT. OBSERVER" printed across the back.
- 5. Participants are strictly observers and shall have no involvement in DFEMS operations, to include patient care, fire-ground operations, and rescue procedures.
- 6. Observers shall follow instructions of the station officer or senior person on the assigned piece of apparatus.
- 7. Participants shall be asked to complete a short evaluation about the observer program upon completion of their stay.

#### IV. RECISION

This Standard Operating Procedure rescinds all directives regarding Observer Policy or similar content previously issued for personnel of the Carroll County Department of Fire and EMS.



## **Attachment A**

## **Guidelines for Observer Participants**

The Carroll County Department of Fire & EMS (DFEMS) is pleased when citizens of our community express interest in the Fire &EMS Service and our observer program.

In order to facilitate this program, the guidelines listed below have been established. Please review them carefully, as they all are very important.

The DFEMS utilizes a four-shift system (A, B, C, and D Shifts) comprised of 24-hour shifts. Shifts begin at 7:00 a.m. and end at 7:00 a.m. the next day. As a participant you may request the station, day, time of day, and shift when you wish to participate. You may request to ride for a portion of the shift or for a 12-hour tour of duty between the hours of 7:00 a.m. to 7:00 p.m.

The attached waiver form and application must be completed and returned to:

50 Kate Wagner Drive Westminster, Maryland 21157 Attn: On Duty Shift Commander

Applications and waiver forms must be received at least seven days prior to the requested observation date to allow time for processing. If you have any questions, please call 410-667-7457

Upon approval, you may pick up the permit at Carroll County Public Safety Training Center. Bring the permit with you when you report to the designated fire station to observe and present it to the person in charge.

Participants must be appropriately attired. Clothing should present a neat appearance and allow for active mobility. Persons not appropriately dressed shall not be permitted to ride. Participants will be given a fluorescent safety vest marked "FIRE DEPT. OBSERVER" to wear during emergency incidents.

Observers are not permitted to actively participate in any operational functions of the DFEMS (ie. patient care, fire-ground activities,). Participants may occasionally be requested to stay in the vehicle for their personal safety. Participants will not be permitted to interfere in any way with the department's handling of a situation. You may ask questions concerning a specific assignment after it has been completed and you have left the scene. Observers must follow the instructions of DFEMS personnel at all times.

We hope you will enjoy your observer experience.



# **Attachment B**

# **Observer Application**

NAME:				
ADDRESS:				
(number)(street) (city)	(state)	(zip)		
AGE: DATE OF BIRTH:/OCCUPATION:				
NAME OF EMPLOYER OR SCHOOL:				
HOME PHONE: () WORK PHONE: _(_	)			
ARE YOU CURRENTLY UNDER DOCTOR'S CARE? Yes No				
ARE YOU CURRENTLY TAKING PRESCRIPTION MEDICATIONS? Yes	No			
HOW DID YOU HEAR ABOUT THE OBSERVER PROGRAM?				
WHY ARE YOU INTERESTED IN PARTICIPATING IN THE OBSERVER PRO	GRAM?			
REQUESTED STATION OF OBSERVATION				
REQUESTED DATE and TIME OF OBSERVATION:/(date)	TO (time frame			
SIGNATURE OF APPLICANT:	DATE:	//_		
SIGNATURE:				
**************************************	******	******		
Department Use				
DATE RECEIVED:/BY WHOM: ACTION:				



## **Attachment C**

## **Observer Waiver**

In consideration of the Carroll County Department of Fire and EMS granting permission to enter in or upon any premises or vehicles which are under its actual or constructive possession or control, I hereby waive all claims to damage or loss to my person or property which may be caused by any act, or failure to act, of Carroll County, Maryland, its officers, agents and employees. I recognize that entry into and upon premises and vehicles associated with fire suppression and emergency medical services involve numerous risks to my person and property, and that it is impractical and impossible to identify each risk with specificity. I assume the risk of all dangerous conditions in, upon or about the premises or vehicles and waive all notice of the existence of such conditions.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Signed:	Witnessed:
I consent to participation in the observer program	
************	**************
DEPARTME	NTAL USE
Para de la companya d	
Received:(Shift Supervisor Signature)	

[A copy of applicant's driver's license, or other form of identification, shall be attached to this waiver to verify proof of age.]