

EMS Operations Committee  
Agenda  
May 10, 2016  
1900 hours  
DTCI Large Conference Room, First Floor  
801 Sycolin Road

1. Call to order
2. Roll Call
3. Approve April meeting minutes (attached)
4. Chairman's Report
  - a. Executive Committee April packet
  - b. Venue for EMSOC meetings
5. OMD- Dr. John Morgan
6. Reports
  - a. LCFR– DC Jose Salazar
    - i. EMS Billing – Danielle Brosan
    - ii. EMS Training – Bill Toon
  - b. Committee reports
    - i. Communications Committee – Chief Bennett
    - ii. Training Committee-Chief Mino/Chief Aycock
    - iii. SWP Committee-Chief Krone
    - iv. Ambulance Standards Committee
  - c. EMS Council –Leo Kelly
    - i. EMS Council Minutes
    - ii. ALS Committee Minutes
7. Old Business
  - a. Physio Lease Option Update
  - b. Medication Security
  - c. Heavy Rescue Service Delivery Workgroup
  - d. Bariatric Response Capabilities
  - e. Rules of Order (Hall)
8. New Business
  - a. Roles and Responsibilities of Non-OEMS Certified Personnel Riding on Ambulances
  - b. BLS Precepting Manual
  - c. Ambulance Driver Release Manual
  - d. Bio-hazard pick ups

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9. Action Items

- a. Social Media DRAFT SWP
- b. Use of Personal Electronic Devices DRAFT SWP
- c. Awards and Recognition DRAFT SWP

10. Stakeholders Comments

11. Committee Member Comments

12. Announcements

**EMS Operations Committee Minutes**  
**April 12, 2016**  
**DTCI- Large Conference Room**  
**801 Sycolin Road**  
**1900 Hours**

Co. 4	<b>Absent</b>
Co. 6	Kevin Piatt
Co. 9	Derrick Bennett
Co. 12	Andrew O'Connell
Co. 13	Anthony Mino
Co. 14	Earl Hall
Co. 15	Alfred Pacifico
Co. 17	Rodney Krone
EMS Council	Jay J. Brown
LCFR	AC Johnson, AC Tobia, DC Salazar, Bill Toon, Mary Maguire and Christine Langley-Obaugh
OMD	Dr. John Morgan
StoneSprings	<b>Absent</b>
Reston Hospital	Keith Morrison
Inova Loudoun	Jamie Stephens

1. Call to order

Chief Bennett, Vice Chairman, called the meeting to order at 1903 hours.

2. Roll Call

3. Approve March meeting minutes

A motion to approve the March 8, 2016 minutes was made by Chief Krone. The motion was seconded by Chief O'Connell. All are in favor with no opposition or abstentions. Motion carried.

4. Chairman's Report

Chief Bennett deferred to Chief Tobia who advised that the Action Report from the March EC meeting would be sent out shortly. Chief Tobia stated that the SWP template has now been finalized and the majority can be found on the forward facing Loudoun.gov website under the Executive Committee Policies and Procedures folder. The approved SWP's will be reformatted into the adopted format and numbering schematic. The Response to Active Violence Incidents SWP will not be posted as they will be considered an Official Use only policy. After Active Directory, the SWP will be posted to the intranet behind the firewall. Should anyone desire a copy, please feel free to send an email request to Chief Salazar. In response to a question from Chief Bennett, Chief Tobia stated that the old FRG will be

removed and the SWP will appear. In addition, the SWP will reference which FRG it is replacing. The old FRG's will continue to be archived. Eventually, Chief Tobia stated that all documents will be placed on the intranet for operational security purposes.

Chief Tobia reinforced distributing and communicating the *Operational Messages* that are sent out on a weekly basis by Chief Johnson. Chief Tobia asked all to forward the messages to company members. Chief Johnson highlights the good work done by all of our system members in these messages. Chief Bennett recommended the possibility of stacking the weekly operational messages into a quarterly PDF to be archived so that they can be accessed by members at a later date if deemed necessary.

5. OMD-Dr. John Morgan

Dr. Morgan advised that it has been a late flu season so volumes have been impacted. Several facilities have been busier than others in trying to shift around appropriately in the interest of delivering good patient care. Dr. Morgan thanks everyone for all of their hard work.

6. Reports

a. LCFR- DC Jose Salazar

Chief Bennett posed a question regarding the BOS approval of the full-time OMD. Chief Salazar emphasized that the BOS has approved the full-time OMD as well as the QA/QI Manager. The OMD will be a RFP process and Chief Salazar stated they are working with procurement now to put that together. Chief Salazar stated the hope is to be up and running by July 1<sup>st</sup>. Chief Salazar stated that the QA/QI Manager still has to go through classification through Human Resources.

Chief Salazar reminded everyone that the annual drill at National Airport will be on April 30<sup>th</sup>. Chief Salazar stated there is a need for resources.

Chief Salazar mentioned the ambulance re-stock form is still in the process of being developed. As soon as materials management reviews and approves one item, the forms should be finalized. Again, the form includes items that are available at the hospitals. The EZIO needles will be replaced when used, not when they are expiring. Chief Salazar clarified if they are used on a call, then they are replaced and come from the hospitals. Chief Salazar stated the only thing used on a call that you would receive from logistics is the CPAP mask.

Chief Salazar stated that we may need to absorb costs when patients are flown out and do not go to a facility. Discussion ensued. Hospital representatives seemed to suggest that this issue could be worked through once identified. Chief Salazar stated he would seek additional clarification regarding this issue.

Chief Salazar also spoke about the re-stocking form for medications. Chief Salazar indicated that this form would be implemented by hospitals effective May 2<sup>nd</sup>. Pharmacies have been contacted at Lansdowne, Reston and StoneSpring and Chief Salazar reported that they were on board. Chief Salazar emphasized that this re-stocking form is an accountability method that is being put into place. All medications used in the region will be listed on this form. More information will follow.

Regarding ballistic gear, 50 vests will be sought through a grant and a meeting will be held next week with the committee to decide deployment of the vests. The vests will most likely be in Chief's vehicles and with Safety and EMS Supervisors among others. Chief Salazar stated the SWP is in place. Chief Salazar stated an additional RTF drill will be held in July or August, similar to the one held last summer absent the classroom portion. The drill will encompass law enforcement and will provide opportunities to work with various agencies.

Chief Salazar announced that an EMS Transformation Summit will be held next week in Arlington. Many leaders in the EMS industry will be speaking about the future of EMS. Please take a look at the NAEMT website for additional information.

Chief Salazar also mentioned EMS on the Hill which will be held next Wednesday. This is a wonderful opportunity to view the federal legislation process and speak to representatives. One issue that is upcoming, MITSA may change to Health and Human Services from the Department of Transportation. Should this occur, additional funding sources may result.

A question was raised regarding possible changes to Schedule II and Schedule III narcotics, however, Dr. Morgan advised he had not heard of any updates but believes the Bill remains in process.

Chief Bennett asked Chief Salazar about ImageTrend training or access. Chief Salazar stated the elite platform was going to go live on July 1<sup>st</sup> because CAD was going to live in May, however, with CAD being delayed, the implementation of the elite platform will be delayed. Chief Salazar stated that before they go live with ImageTrend, dedicated training will take place. Chief Salazar also reported that the State cutoff date was moved to January 1<sup>st</sup> of 2017.

i. EMS Billing- Danielle Brosan

Mary Maguire attended for EMS Billing and informed the EMSOC that first and second quarter checks had been distributed. Mary advised that they are in the process of working on 3<sup>rd</sup> quarter. An inquiry arose regarding whether or not the distributions included Medicare reimbursements. Mary Maguire confirmed that

they did not include Medicare reimbursements and adjustments will be made throughout the year. Mary explained that it is based on the actual revenue received divided by the total number of calls to obtain the per call value. The first quarter as viewed by the distribution amounts was considerably low according to Mary. Mary stated that they do anticipate the next quarter to be a little higher. Once Medicare reimbursements come in, Mary stated they will be dialed into the third quarter and it will be shown as revenue received during the third quarter. For planning purposes, Chief Tobia advised that it may be helpful to access the number of transports per year and estimate low for budgeting.

As an example, Mary explained if we receive \$100,000 and 1,000 (billed) calls were run, we divide the 1,000 into the \$100,000 revenue and then it is divided out based on the percentage that each one gets. Mary reiterated this process is outlined in the ordinance. It does not have anything to do with the level of service provided. Discussion ensued regarding whether or not that was an impact for stations that run more ALS calls versus BLS. Chief Tobia advised it also depends on how the unit is staffed. Mary stated she believes that differences will be seen in distribution amounts as we move forward. Mary stated billing amounts are \$770 (billed amount, not paid amount) \$660 and \$467. Chief Piatt complimented Mary and her Division stating they are doing a great job.

JJ Brown inquired regarding funds received through EMS billing as he believed they were not to offset funds approved for the budget of each individual company. Mary Maguire answered affirmatively stating those funds through EMS billing are over and on top of the other funds received. Chief Tobia stated the revenue book in this program will not be used to diminish the amount of annual contribution given by the County for support of the Volunteer Companies. If, for example, the EMS Program nets 2 million dollars, it was not intended to then take the 6.3 million and reduce it to 4.3 million dollars.

ii. EMS Training-Bill Toon

Currently, Dr. Toon advised that there is an EMR class that started April 1<sup>st</sup> with nine students. The EMT class has 29 students and they take their Unit II exam tonight. The EMT Intermediate class has 10 and they are due to finish mid-June. The EMT I to P class has been completed by 10 students. An additional 3 students are incomplete at this time.

Regarding field internships, Bill Toon reported that feedback was received and additional changes have occurred. Bill stated that this is looked at as an opportunity to go from the ED to the Field experience with the overall goal being 10 contacts. Bill reiterated this was to allow students to obtain ambulance experience. Ideally,

Bill also emphasized that they would like the internship to take place while the student is in class.

Bill reminded the EMSOC that this will remain a working document and therefore additional changes in the future will most likely occur. Also, hospital familiarization will remain in the document so that it can be better defined. Bill stated that they are moving forward and will speak with individual companies to ensure internship experiences are successful.

b. Committee Reports

i. Communications Committee (Chief Bennett)

CAD implementation has been delayed. Chief Bennett stated there were several issues that have not been completely resolved (one by Motorola). Chief Bennett also stated there was going to be a radio update going out earlier this year, however, due to the delay and other jurisdictions making changes to templates and rules off cycle, the radio update will also be delayed until later this year.

Chief Bennett communicated that the committee is also working on the radio true-up relative to an old FRG. Answers are being sought regarding the policy. Chief Bennett stated to come up to the base standard, 4 on engines, 5 on trucks, we are over 100 radios short. At approximately \$5,000 per portable, it becomes an issue.

Future items will go hand and hand with the new CAD, according to Chief Bennett.

ii. Training Committee (Chief Aycock/Chief Mino)

Chief Mino stated last fall the EMS version of Training Enrollment and Wait Lists SWP was approved. Following, the Fire version was approved. Feedback was received and another look at the SWP was requested. Chief Mino reported that at last week's training committee meeting, a line by line review of the fire version of the SWP was examined. Chief Mino indicated they continue to discuss how to fill slots in a class, particularly during the second round. Chief Mino stated that the SWP is likely to come back through the EMSOC as well.

Chief Piatt inquired whether or not consideration had been given to filling slots based on length of service, an interview or a pre-test? Chief Salazar stated historically speaking, they have left that up to the agency to decide.

Chief Bennett stated we may need to look at the financial considerations regarding the wait list cap. Discussion ensued regarding a wait list of ten. Bill Toon reminded the EMSOC that all ten on the wait list for the last class did get absorbed. Without a wait list of ten, the class may have started with a class less than 30 students, according to Bill Toon. Bill Toon emphasized that classes that are filled are desired. Bill Toon stated that it may mean additional flexibility is needed regarding deadlines. Lastly, Bill stated that information sessions separate from the first day of class will continue.

Chief Mino asked about the possibility of scheduling an EMS Officer I class. Chief Salazar stated that the intent is to still have a pilot program here, possibly May/June. Chief Salazar stated he should know more after Friday.

iii. SWP Committee (Chief Krone)

Chief Krone stated the SWP Committee met on April 5<sup>th</sup>. Several draft SWP's have been included in the EMSOC packet for review.

Chief Tobia stated that the main focus of the SWP Ad-Hoc Committee is to look at our existing policies and procedures, our SOP's and our FRG's; to retire those that should be retired; and merge the ones that should be merged. Chief Tobia indicated that there will always be new SWP's coming forward directly to the Executive Committee as EC initiated items: for example, the *Social Media* and *Use of Personal Electronic Devices* SWP's. Chief Tobia clarified those SWP drafts did not come from the Ad-Hoc Committee, but rather, a desire from Chief Brower to have a policy in place. Those draft SWP's will go directly to the three sub-committees, get worked on through the governance structure and then be brought back to the Executive Committee. Chief Tobia shared that when the SWP Ad-Hoc Committee brings SWP's to the EC for consideration, the expectation is that the stakeholder members of those serving on the SWP Ad-Hoc Committee have already vetted the proposed changes through their individual stakeholder groups. Chief Tobia stated that the idea would then be for those SWP's to not go back out through the entire system governance structure because of the make-up of the SWP Ad-Hoc Committee. Chief Tobia reiterated that the EC could exercise its prerogative at any point and stated that they would like a SWP to go back out or they can say we have reviewed it and we agree with the proposal set forth and adopt it straightaway. Chief Tobia asked for the EMSOC to recognize that representatives on the SWP Ad-Hoc Committee is playing a critical role in participating in that process and the expectation is that they bring back things to members of the EMSOC to advise they are under consideration.

For example, Chief Tobia stated that one SWP that is presently under consideration is *Use of Seatbelts* which could potentially have significant impact on our system whereby large numbers of people riding on the outside of apparatus for a social event will be examined. Chief Tobia summarized by stating that there will be differences in how SWP's are routed through the governance structure.

c. EMS Council

JJ Brown addressed the EMSOC and advised that the EMS Council minutes are included in the packet. JJ stated that the Council is expecting a report back from an Ad-Hoc Committee regarding recommendations for training equipment that will be purchased from Four for Life funds. Additional information will be forthcoming.

7. Old Business

a. Physio Lease Option

Chief Salazar stated that a meeting with Physio to review options took place several weeks ago. Three quotes will be presented to include the following options: Lifepak 15's, Lifepak 12's, LUCAS devices and AED's; Lifepak 15's and Lifepak 12's; or Lifepak's and AED's only. Once the three quotes are obtained, the quotes will be reviewed with procurement and options for funding can be discussed.

Chief Salazar stated the next new device will be on the Hospital side as opposed to the EMS side. Chief Salazar stated one of the advantages in participating in the lease program includes upgrades. Chief Salazar advised that Code Stat 10 will be included as well as an asset management software program. Chief Salazar confirmed that the quotes will take into consideration any training needed.

b. Ambulance Standards Committee

The committee will be meeting on May 4<sup>th</sup> at 1900 at 801 Sycolin Road.

c. Medication Security

Chief Salazar stated we are awaiting funding.

d. Heavy Rescue Service Delivery Workgroup

Chief Tobia stated the committee has not convened as of yet.

e. Rules of Order

Chief Bennett reported that Chief Andrews has received the Rules of Order from Chief Hall and is in the process of reviewing them.

f. Bariatric Response Capabilities

Chief Salazar believes that the companies that have any bariatric capabilities should come together, so that the system recognizes the resources available and ensures purchases are not redundant. Captain Rundgren will represent LCFR, according to Chief Salazar. In addition, representatives will be needed from 13 and 15.

8. New Business

a. Social Media Draft SWP

Chief Bennett advised to send comments regarding the draft SWP to Chief Tobia. Chief Tobia stated that if a number of concerns are brought forward in reference to this SWP that are unresolvable by the May EC meeting, then the SWP will not be voted on, however, it is desired.

Chief Tobia stated both policies, Social Media and Use of Personal Electronic Devices, are not meant to restrict individual companies from having websites or social media platforms. Chief Tobia stated that there is no guiding system wide document today that exists that can guide system members. Without a document, we are subject to legal exposure, reputation issues and risk according to Chief Tobia. Chief Tobia stated that the draft is intended to be a starting point to have a discussion about the bigger issue of how do we ensure that we protect our collective reputations across the system. Chief Tobia stated that Matt Shultz, former Chief in the System, wrote a Bachelor's Degree paper on this issue. Feedback has been received and there is an intent to change some of the language in the SWP. Chief Tobia stated there is a perfectly legitimate business appropriate reason for people to have access to the internet via their personal devices (ex. Mapping). Business appropriate reasons will not present a problem and the policy will be amended to ensure that that availability exists. Chief Tobia stated we are not independent silo organizations, but rather every one of us is an instrumentality of County Government. Chief Tobia emphasized that anyone who is a member of an organization listed in Chapter 258 is an instrumentality of the County and as a result we have an obligation to ensure the provision of the safety of our collective reputations. Chief Tobia stated training opportunities will be available once a policy has been decided. Chief Tobia reiterated that a system approach to this issue is essential.

b. Use of Personal Electronic Devices Draft SWP

Chief Tobia advised that members should not be using their personal devices to take photographs. Chief Tobia stated organizations may wish to give consideration to placing a digital camera on our vehicles which would then become the official or company camera that is used for the purpose of gathering information. Photographs

can then be sent to the PIO to be vetted for HIPAA compliance and then eventually, deleted off of the camera.

Chief Tobia reiterated that the period of time that one is on a call, everything that occurs on the phone during that period of time is, in fact, discoverable. Chief Tobia also explained if, as soon as the call was over, one was texting or posting something to a social media site, that is FOIAable and that electronic tracking can be followed. Chief Tobia stated that none of us perceive that any of us will betray confidentiality. Chief Tobia stated this is not intended to restrict off duty members from standing in areas where the public is allowed to stand and take pictures of calls. Those off duty members should not use their affiliation to gain access to restricted areas. Chief Tobia explained that this example is outside of the scope of these policies.

Chief Tobia stated that we have an unparalleled access to people's lives, property, security and that metadata that can be captured from those photographs is extraordinarily real.

Please forward comments to Chief Tobia.

c. Awards and Recognition Draft SWP

Chief Johnson reminded the EMSOC that a System Wide Awards Committee was established by the EC on May 20, 2015 and on June 30, 2015, members of the committee were selected. Chief Johnson informed the EMSOC that the committee has been meeting at least monthly since August, 2015.

Chief Johnson reiterated that it was important to recognize people for the good work they do, thus the need for the Awards and Recognition SWP. Chief Johnson stated that the SWP does not take away from any individual company that holds annual awards banquets. Chief Johnson informed the EMSOC that a procedure has been developed which consists of an on-line form to make the process of nominating someone simple. Chief Johnson advised the committee that there were numerous categories, some familiar while others have been added such as Civilian of the Year. Chief Johnson stated that the goal is to have one Spring Awards Ceremony.

Chief Johnson submitted that several awards were expanded to include the recognition of Volunteers such as HAZMAT Tech, Honor Guard and Swift Water Tech. Program completion award recognitions from outside agencies such as Center for Public Safety on Excellence, National Honor Guard Academy, Officer Development School and Command School will result in the receipt of bars. Chief Johnson reiterated that there were no changes to the Valor Awards. The Valor Awards are mentioned in the SWP simply to show that the system participates in the Chamber of Commerce annual ceremony.

The Systems Wide Awards Committee will remain in place and will be receiving the nominations and will determine award winner recommendations based on criteria outlined. Once the recommendations have been secured, the Systems Wide Award Committee will forward the names to the System Chief for final determination.

Discussion ensued. Chief Johnson emphasized anyone, volunteer or career personnel, could be nominated for the awards as no delineation exists. Chief Tobia clarified that some awards are specific, such as the Alex Keepers Award. Chief Johnson and Chief Tobia explained that those specific awards would be categorized under agency specific awards. Chief Johnson asked all to provide comments to him via email.

#### 9. Action Items

##### a. Volunteer Physicals SWP

Chief Bennett asked if anyone had questions before a motion was brought forward.

Chief Piatt addressed the EMSOC regarding the stress test. Chief Piatt stated that he believed it was an injustice to members by not requiring the stress test. Chief Piatt requested then, based on his company's recommendation that a stress test be mandatory. Chief Tobia clarified that Chief Piatt would like NFPA 1582 to be the guiding standard.

A discussion regarding policy versus procedure ensued.

Chief Piatt stated he would like all members to undergo a NFPA 1582 physical. Chief Bennett stated on Chief Piatt's behalf the following motion: a recommendation for the Volunteer Physical SWP to move forward with an amendment to remove OSHA physicals from the policy. Chief Krone seconded the motion.

Discussion ensued. A physician in attendance stated he was in agreement that everyone receive an NFPA 1582 physical. He also stated, however, that we should not be relying heavily on the stress test. The physician indicated that 100 out of 2,000 stress tests per year are abnormal in which 1 has some coronary disease. The IAFF and other work group are actually indicating that we probably do not need to be doing stress tests, however, the physician believes in them because they are determining physical conditioning. The physician indicated that it appears that there is difficulty reaching the 12 and they are finding other things such as hypertensive response. The physician continued to speak regarding EMS roles versus IDLH roles.

Discussion also ensued regarding time frames if an abnormality surfaces. Chief Tobia stated that an incumbent could receive one of five responses. Chief Tobia asserted that at the end of the day the occupational provider will be responsible for clearing the member if they have removed them from service completely. Chief Tobia

clarified that there is not a one year requirement for that. Chief Tobia also stated that the member could go on interim where they are allowed to continue providing service pending documentation. Chief Tobia explained that candidates will have to wait one year. Typically, weight and blood pressure tend to be the issues that keep a candidate from getting cleared.

Chief Hall stated the motion on the table is a new proposal and he would like an opportunity to take it back to his company. Chief Mino agreed.

Chief Krone stated all of his members undergo a NFPA 1582.

Discussion also ensued regarding inhalers, insulin, SCBA masks and EMS only providers.

Chief Bennett recommended that perhaps the EMSOC may wish to consider voting on the SWP as it is now with a recommendation to send it to the Health and Wellness Committee. Chief Piatt retracted his motion. Chief Mino moved that the EMSOC accept the Volunteer Physical SWP as written and move it forward to the EC. The motion was seconded by Chief Piatt. The motion carried 7-0-0-1.

Chief Bennett stressed that the EMSOC would like to see the Health and Wellness Committee along with OHC coordinate and bring forward a stepped 1582.

#### 10. Stakeholder Comments

Jamie Stephens advised he was able to attend the Valor Awards last week for the first time and offered congratulations to all award winners.

Kevin Morrison advised that construction will begin Monday on two Code rooms, 4 and 5. The rooms will take 6-8 weeks to finish.

#### 11. Committee Member Comments

Chief Piatt spoke about a release program for EMT AIC's. One document that Chief Piatt will provide will be a driver release document and it would be recommended that it be standardized. Chief Piatt will forward the program information to Christine and it will be forwarded out to the EMSOC.

Chief Salazar reminded everyone that EMS Week is 5/15-5/21. A proclamation will be read at the 5/3 BOS meeting. Chief Tobia asked that all plan to attend.

Dr. Morgan informed the EMSOC that Sharon Moore, a nurse at Cornwall, passed away recently and services will be held on Monday at 1pm.

Chief Piatt announced Ron Wise's passing. Information on services will be forthcoming.

EMS Award information has been included in the EMSOC packet. Chief Bennett stressed the importance of nominations.

12. Announcements

4/26: Airway Management at the Healthplex

5/3: BOS Proclamation

5/14: Pediatric ER 10<sup>th</sup> Anniversary Open House 1-4

5/16: EMS Week (Reston Hospital: Cookout)

5/21: Public Safety Education Day at Lansdowne

Adjourn: With no other business to discuss, the meeting is adjourned at 2147.

**Respectfully submitted:**

**Christine Langley-Obaugh, M.Ed., CVA**

**Executive Liaison**

**Date of Meeting: May 10, 2016**

**6bii**

**Loudoun County Combined Fire-Rescue System  
TRAINING COMMITTEE  
INFORMATION ITEM FOR EMSOC**

**SUBJECT: Update**

**STAFF CONTACT(S): Tony Mino, Chief and Cheryl Aycock, Rescue Chief**

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The Training Committee completed its review of the SWP that addresses enrollment in fire and EMS training classes. One significant change that we are considering is how to fill slots in a class: first come, first serve basis; percentage allocations; or round-robin allocations. We are writing up each of these processes in detail so that each can be reviewed by EMSOC. When the document is available for review (probably in June), it is imperative that each Chief and Training Officer carefully review the processes as outlined and provide me or Cheryl with feedback.



# Ashburn Volunteer Fire and Rescue Department



## BLS Precepting Manual

Version date: January 2016

Recruit Name: \_\_\_\_\_

## Fire and Rescue BLS Precepting Manual

### Contract

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Recruit

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EMS Sgt

The AVFRD BLS Precepting Manual is intended to serve as your guide to becoming an aide-in-charge on BLS ambulances and your training and development as a member of AVFRD in the Loudoun County Fire Rescue system.

You are required to have in your possession a copy your BLS Precepting Manual at all times during your training period. Be prepared to show it to your preceptors, Assistant Rescue Chief, EMS Captain, EMS Sgt, and/or station officer upon request.

I acknowledge I have been issued a copy of the AVFRD BLS Precepting Manual and I was briefed regarding the requirements of the program.

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Recruit Signature

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Date

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EMS Sgt Signature

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Date

# AVFRD BLS Precepting Program

## I. Purpose

The purpose of this program is to provide guidelines to ensure that all members of Ashburn Fire and Rescue follow a uniform plan for the training of new EMTs.

## II. Goal

The goal of this program is to provide new EMTs with direction and consistent training during the process of being released to practice EMS in the field. The AVFRD BLS Precepting Program will utilize AVFRD preceptors and duty crew EMS Sergeants. The preceptor will be responsible for the instruction of topics covered on the skills sheets and for overseeing the training that each student receives during drills and in-station training. The EMS Sergeant will be responsible for overseeing this process and making recommendations to the Rescue Chief regarding the recruit's progress.

## III. Operational Procedures

### A. Training Program

The EMS Sergeant will be responsible for overseeing training and completion of the manual by the recruit. Upon completion of Phase I, completion of the "Radio Usage Skill Sheet," and verbal approval of the EMS Sgt, the recruit shall begin their field evaluations.

### B. Observation and Documentation

In order to create a clear understanding of the AVFRD BLS Precepting Program and to facilitate efficient training, each recruit will be issued an AVFRD BLS Precepting Manual. This manual shall be in the recruit's possession at all times while actively precepting. This manual should be kept in a 3-ring style binder and organized in an appropriate fashion. Upon completion of this process all documentation and evaluation forms will be submitted to the Recruit Training Staff and placed in the recruit's personnel file.

### C. EMS Sergeants and BLS Preceptors

Each shift will have at least one EMS Sergeant (Sgt). The EMS Sgt will be assigned by the Assistant Rescue Chief. Each shift will have at least one preceptor that has been released by the Assistant Rescue Chief. The recruit has the ability to run with preceptors on his/her shift and preceptors on other shifts including utilization of career staff during the day. Running with multiple

preceptors is strongly encouraged to provide a variety of experienced feedback to the recruit.

#### D. Preceptor Roles and Responsibilities

The BLS preceptor's function is to produce an EMT-B who is able to work independently and in a safe, productive manner as an aide-in-charge (AIC) on a BLS transport unit. The preceptor has two primary roles: that of the unit AIC and that of a trainer. The preceptor must have the skills necessary to become a reliable evaluator of the recruit's performance. He or she is required to communicate with the recruit's EMS Sergeant and assist in preparing monthly written evaluations. In conjunction with the EMS Sgt, the preceptors are charged with the responsibility of recommending an extension of the training period (see below), if it becomes necessary. This recommendation should be submitted in writing to the Assistant Rescue Chief.

#### E. Time Frame

The initial precepting period will be 3 months in duration. Shorter precepting periods may be approved by the Assistant Rescue Chief if the number and quality of calls and prior experience warrant an acceleration of the process. Following the initial precepting period, the EMS Sgt and preceptor(s) must either make a recommendation for release or request an extension. If an extension is requested, the EMS Sgt must present a plan for improvement that will give the recruit the best opportunity to succeed. The improvement plan must contain a timeline that does not exceed 2 months in duration.

#### F. Release Procedure

The EMS Sgt must send a request for meeting of a Precepting Review Board in writing (e-mail is acceptable) along with the "Checklist" on page 3 to the Assistant Rescue Chief. The Assistant Rescue Chief will organize a meeting of five (5) preceptors (may include EMS Sgt) and the recruit. The recruit should bring the contents of this manual to the meeting. This manual, evaluations, completed PPCRs, and verbal comments from the EMS Sgt and preceptors will be reviewed. Upon successful completion of the BLS Precepting Program and release by the Precepting Review Board, the Loudoun County EMS Provider Demographics and Release Form will be filled out by the Assistant Rescue Chief and submitted to the Loudoun County BLS Committee.

## Introduction and Instructions

The purpose of this program is to help recruits make a smooth transition from doing practical's in a classroom setting, to applying the skills on the street. In short, the goal is to prepare the recruit to operate as the aide-in-charge as part of a two-person BLS ambulance crew. The recruit will be evaluated on the decision to use and apply specific equipment, when necessary, and the ability to do so in a quick and efficient manner. In situations where the wrong decision is made, the preceptor will help guide the recruit in the right direction by assisting with patient care or stepping in when things are not going well. The patient is our first priority. Our overall goal is to get those without a lot of experience on an ambulance accustomed to working in this environment. Showing the recruit more refined methods for achieving their goals is highly encouraged, as long as they follow proper Loudoun County Protocols and Virginia state EMT-B curriculum. Your comments are valued; your commitment to helping prepare the new recruits for a long and productive career will be recognized by those we serve.

The recruit shall be assigned a preceptor by the crew EMS Sergeant. In the event the primary preceptor is not available due to staffing reasons, alternate preceptors may be utilized.

The recruit should primarily concentrate on patient care, though upon completing the necessary prerequisites, the recruit will also be allowed to ride in the aide's seat on the ambulance and be the one to use the radio to mark en route, on the air etc. Prior to letting the recruit ride in the aide's seat, Phase I shall be completed and the use of the radio system skill sheet (Phase II) shall be completed (see attached skills sheet). The preceptor or EMS Sgt shall set up an ALS orientation with the most accessible volunteer ALS provider. The ALS provider shall go over specified tasks and skills (skill sheet) with the recruit, and sign off on the skills sheet along with a preceptor who was present and the EMS Sgt.

Skills Sheets- Skills sheets will be filled out by a preceptor and signed off by the EMS Sgt. The skills sheets are filled out by using a comment based approach. The recruit's ability to apply all equipment used will be documented thoroughly in the specified space for that category. If time allows and/or the need exists you may utilize the Loudoun County Skill Sheets, for additional training.

Call Log- The recruit is responsible for completing the BLS Call Log for each call that has been evaluated by a preceptor. Request for release will not be accepted unless this log is complete.

Field Evaluations- This section is to be completed by the preceptor and/or EMS Sgt as an evaluation of the recruit on actual calls. The forms are for comments related to specific areas during a call, as well as overall impressions. Preceptors, please comment on both the strengths and weaknesses. This is to help the recruit sharpen their skills. Please keep in mind that patient care always comes first, and don't let the recruit perform

any tasks that may be detrimental to the patient care or outcome. The preceptor/aide-in-charge is ultimately responsible for proper patient care and making sure the PPCR is completed fully. Copies of the PPCR's completed by the recruit need to be kept for reference, ensuring pertinent personal information (such as name and birth date) are blacked out to conform to HIPAA (Health Insurance Portability and Privacy Act) rules and regulations. The YELLOW copy of the PPCR already has this information eliminated. A recruit may not sign as the aide-in-charge on the PPCR until they have received confirmation of successfully completing the State requirements of the EMT-B testing. Throughout the precepting period, the preceptor will co-sign all PPCRs that are written by the recruit. It is at the discretion of the preceptor if the recruit will write the PPCR for the actual aide-in-charge who will then sign it, or if the recruit writes a separate PPCR for practice. This "practice PPCR" should be attached to a Field Evaluation Form to document the call.

The goal is to have the recruit complete 15 calls during their evaluation period. This requirement may be altered at the discretion of the Chief or Assistant Rescue Chief. In the event the candidate is at a slow station, the EMS Sgt or preceptor shall have the option to stage simulated calls on which the recruit will be evaluated. During simulated calls, a training channel should be requested from ECC or channel 6-O should be utilized so the recruit may practice radio communications. In this case the recruit will still be responsible for a PPCR and a field evaluation will be filled out based on the performance of the recruit. It should be noted on the evaluation that the call was simulated.

At any time during the precepting period, if the recruit's cumulative performance is unsatisfactory, the EMS Sgt should contact the Assistant Rescue Chief who, in conjunction with the EMS Sgt, will determine the next steps to take.

Each recruit is responsible for maintaining their BLS Precepting Manual in good order. During the course of the precepting period, the EMS Sgt should forward copies of the Recruit Monthly Evaluation Forms and the Phase I, II, and III Completion Forms to the Assistant Rescue Chief. All other documents (Manual Contract, Check Sheet, Skill Sheets, Field Evaluation Forms, and copies of PPCR's, which are to be copied onto a 8.5" x 11" paper) within the manual will be the responsibility of the recruit to turn in at the time of the request for release.

## Check List

Phase I	Date Completed
./ Manual Contract	_____
./ EMS Council Forms A & B	_____
./ Attendant in Charge Duties	_____
./ Unit/Equipment Familiarization	_____
./ Patient and Passenger Safety	_____
./ Stocking and Restocking Procedures	_____
./ Decontamination and Exposures	_____

Phase II	
./ Documentation, CAD, PPCR, NIFRS	_____
./ Hospital Familiarization	_____
./ Radio Usage	_____
./ Apparatus Positioning	_____

Phase III	
./ Rehabilitation	_____
./ ALS Assistance	_____
./ Triage and Resource Management	_____

Field Evaluations	
./ Call Log	_____

Program Start Date: \_\_\_\_\_

Program End Date: \_\_\_\_\_

I recommend Recruit \_\_\_\_\_ for release as a BLS  
Attendant-In-Charge.

_____ EMS Sgt	_____ Date
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I DO NOT recommend Recruit \_\_\_\_\_ for release as a  
BLS Aide-In-Charge.

_____ EMS Sgt	_____ Date
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Date Released as Aide-in-Charge: \_\_\_\_\_

Approved By: \_\_\_\_\_ (Assistant Rescue Chief)

# Phase I

# SkillSheets

This section includes the ten skill sheets that must be completed during the evaluation period. Each sheet includes a main topic and skills associated with that topic that recruits must be taught and demonstrate. Each sheet also includes a comments section for the preceptor to record their comments on the recruit's performance. Skill sheets will be filled out by the preceptor and signed off by the EMS Sgt. The skill sheets are filled out by using a comment based approach. The recruit's ability to apply all equipment used will be documented thoroughly in the specified space for that category.

## Skill Sheet 1 : Aide in Charge Duties

The recruit needs to understand the duties of being the officer in charge of the unit. Other than patient care, there is the aspect of filing and recording of paperwork, and also to understand the process of peer review.

- a. Understand the importance of verifying the address of an emergency incident.
- b. Demonstrate the ability to utilize the ADC maps and the station map books in order to communicate directions to the driver.
- c. Describe when it may be necessary to initiate CISM and how to go about doing so.
- d. Show knowledge of the proper radio traffic for responding, on scene, etc.
- e. Understand the difference between the channels for communication with the different hospitals and how to request a patch to the two main or LHC hospitals.
- f. Be able to give a good, concise radio or phone report to the ER.
- g. Understand the difference between reports to a nurse vs. needing direction from a doctor.
- h. Demonstrate knowledge of the protocol for requesting a helicopter (refer to ALS Policy # 8).
- i. Describe the different situations that warrant a helicopter.
- j. Understand the importance of obtaining Medical Control authorization.
- k. Describe how to request ALS support to a call.
- l. Describe the procedure on how to cancel a medic unit.
- m. Describe the process to request additional manpower.
- n. Describe when to call for additional manpower, and the type of response that is needed
- o. Discuss when law enforcement is needed, when it is automatically dispatched, and the basic control of a scene between fire rescue and law enforcement.
- p. Demonstrate the ability to manage the care and transportation of an actual emergency incident, as the Aide-in-Charge with little or no direction.

Comments: \_\_\_\_\_  
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Preceptor: \_\_\_\_\_ EMS Sgt: \_\_\_\_\_

Recruit: \_\_\_\_\_ Date: \_\_\_\_\_

## Skill Sheet 2: Unit Familiarization

The recruit will learn the inventory of the unit they will be riding for the duration of the BLS Precepting Program.

- a. Specify how to turn on and change on board and portable oxygen cylinders and at what psi cylinders are to be changed.
- b. Demonstrate how to use the on board and portable suction units.
- c. Instruct candidate when and how to access the ALS Drug bag and Narcotics Box.
- d. Ability to locate any piece of equipment inside or outside of the ambulance without hesitation.
- e. Proper usage of the cot to include the Trendelenburg feature, raising and lowering, loading/unloading, collapsing the front of the cot, and how to sit a patient up on the cot.
- f. Proper use of the stair chair, including actual use on stairs.
- g. Show familiarity with the Breslow Kit and its ALS uses as well as the BLS uses.
- h. Ability to do a unit check at the beginning of a shift
- i. Knows what batteries need to be changed and charged at the beginning of each shift.

Comments: \_\_\_\_\_  
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Preceptor: \_\_\_\_\_ EMS Sgt: \_\_\_\_\_

Recruit: \_\_\_\_\_ Date: \_\_\_\_\_

## Skill Sheet 3: Patient and Passenger Safety

The recruit will demonstrate knowledge of passenger safety procedures.

- a. Demonstrate how to properly secure an infant within the ambulance.
- b. Demonstrate how to properly secure a child within the ambulance.
- c. Demonstrate how to properly secure an adult on a cot.
- d. Demonstrate how load and unload a cot into the ambulance. Realizing there are numerous manufactures of this equipment in the county. Discuss some of the known problems associated with not being familiar with the operation of your equipment.
- e. Demonstrate how to properly secure an adult as a passenger in the front and rear of the ambulance.
- f. Demonstrate how to properly secure a back boarded patient onto a bench seat.
- g. Discuss situations in which it may be best to have a passenger (i.e. Mom, Dad, etc) ride in the front of the ambulance.

Comments: \_\_\_\_\_  
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Preceptor: \_\_\_\_\_ EMS Sgt: \_\_\_\_\_

Recruit: \_\_\_\_\_ Date: \_\_\_\_\_

## Skill Sheet 4: Stocking and Restocking Procedures

The recruit will demonstrate knowledge of ambulance stocking and restocking procedures.

- a. Identify equipment that can be replaced at Loudoun County Hospital ERs
- b. Identify equipment that needs to be restocked from station supplies
- c. Show knowledge of proper procedures in restocking equipment used on patient's taken to hospitals other than LHC ER's
- d. Identify where supplies for restocking are found in the emergency rooms
- e. Show knowledge of proper procedures in restocking equipment used on a fly-out and other non-transport situations

Comments: \_\_\_\_\_  
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Preceptor: \_\_\_\_\_ EMS Sgt: \_\_\_\_\_

Recruit: \_\_\_\_\_ Date: \_\_\_\_\_

## Skill Sheet 5: Exposures and Decontamination

The recruit will describe or show knowledge of proper cleaning and decontamination procedures for the ambulance. Refer to the Blood Borne Pathogens and TB exposure plan for guidance.

- a. Explain the process to follow if an exposure or injury occurs during a call or on duty.
- b. Describe what would be considered a true exposure.
- c. Effective cleaning procedures in station and at the hospital.
- d. Effective decontamination procedures in station and at the hospital.
- e. Differentiate between true biohazard waste and simple trash.
- f. Disposal of biohazard waste, to include sharps containers.
- g. Understand the process for disposal of red bags/biohazard boxes.
- h. Understand decon/cleaning procedures for personal uniforms.
- i. Understand decon/cleaning procedures for turn out gear.

Comments: \_\_\_\_\_  
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Preceptor: \_\_\_\_\_ EMS Sgt: \_\_\_\_\_

Recruit: \_\_\_\_\_ Date: \_\_\_\_\_

## Phase I Completion Form

Date: \_\_\_\_\_

To: Assistant Rescue Chief

From: \_\_\_\_\_  
(EMS Sgt)

Subject: Phase I Skills completion for \_\_\_\_\_  
(Recruit Name)

I have reviewed the recruit's BLS Precepting Manual and found that all sections of the Phase I skills have been completed. This recruit has demonstrated the skills and knowledge necessary to move on to the Phase II skills and has my full endorsement.

EMS Sergeant: \_\_\_\_\_

Assistant Rescue Chief: \_\_\_\_\_

Please forward a copy of this Phase Completion Form to the Assistant Rescue Chief.

# Phase II

## Skill Sheet 6: Documentation, CAD, PPCR, NFRS

The candidate needs to become familiar with the pre-hospital care reports (PPCR), CAD system and PPCR data entry program. (The recruits do not receive a formal in-service on the PPCR data entry program during recruit training.)

- a. Demonstrate the ability to properly complete a pre-hospital care report.
- b. Demonstrate the proper procedures for obtaining a waiver.
- c. Discuss what “Informed Refusal” involves when obtaining a waiver.
- d. Demonstrate when it is okay to obtain a waiver vs. when a patient needs to be transported.
- e. Show knowledge of when a call sheet needs to be filled out or not.
- f. Show understanding of when and where a doctor’s signature is required on the call sheet.
- g. Know how to use the “worksheets” different stations provide during a call.
- h. Know how to enter a call in the Log Book
- i. Know where to find blank PPCR’s to refill the clip board
- j. Know where to file completed call sheets
- k. Demonstrate ability to enter PPCR’s into the computer.
- l. Know how to use CAD to look up previous calls.
- m. Demonstrate the ability to use NFIRS.
- n. Memorize the most commonly used medical abbreviations for documentation on the PPCR’s.
- o. Describe what happens to all four parts of a PPCR
- p. Describe the understanding of the Peer Review process and what is accomplished at a review session.

Comments: \_\_\_\_\_  
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Preceptor: \_\_\_\_\_ EMS Sgt: \_\_\_\_\_

Recruit: \_\_\_\_\_ Date: \_\_\_\_\_

## Skill Sheet 7: Hospital Familiarization

The recruit will be able to show knowledge of the local hospitals and travel routes.

Refer to BLS protocols and maps for guidance.

(This information is not taught in EMT class and must be explained to the recruit. Ensure they are able to remember the stations that call Lansdowne ER and Cornwall ER for Medical Direction.)

- a. Demonstrate knowledge of procedures and protocols that are needed to determine the hospital best suited for different types of patients.
- b. Demonstrate knowledge in the difference between LHC Cornwall vs. LHC Lansdowne.
- c. Know the locations of both hospitals.
- d. Know which hospitals your station uses primarily (i.e. Winchester, Fair Oaks, and Reston) and door access codes for each.
- e. Know where supplies are kept and how to access them at each hospital for re-stocking.
- f. Know where the backboards and other equipment are kept that need to be returned to the station.
- g. Know the cut off point for East and West stations for the hospitals.
- h. Describe the locations for the nearest specialty resource hospitals such as trauma, burns, and pediatrics.
- i. Describe and review surrounding hospitals and be familiar with directions to them (refer to driving directions on the next page for guidance).
- j. Know the proper procedures for transporting to hospitals other than LHC at Lansdowne and Cornwall.
- k. Know the Helicopter Utilization Policy and basic helicopter operations.

Comments: \_\_\_\_\_  
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Preceptor: \_\_\_\_\_ EMS Sgt: \_\_\_\_\_

Recruit: \_\_\_\_\_ Date: \_\_\_\_\_



5. Fair Oaks Hospital

ER 703/391-3644

Patch 703/777-0335

East on Rt. 50  
Left on Rugby Rd  
Right onto Alder Woods Dr  
Left onto Joseph Siewick Dr into the hospital  
Left into the Emergency Ambulance Entrance

6. Reston Hospital

ER 703/689-9039

Patch 703/777-0335

Dulles Toll Rd. (East)  
Exit # 11 North on to Fairfax County PKWY  
Right on to Sunset Hills Rd.  
Left on to Town Center PKWY  
Left on to Town Center Dr.  
Left into the Emergency Room/ Ambulance Entrance

## Skill Sheet 8: Radio Usage

The recruit is to understand and demonstrate use of communication equipment found on the ambulance. Refer to the 800 MHz radio user guide and for guidance. (This information is not taught as part of their recruit training. Some individuals are not familiar with the 800 MHz radio system and therefore it must be explained and demonstrated thoroughly to the recruits.)

- a. Discuss the phonetic alphabet.
- b. Show familiarity with the 800 MHz portable radio.
- c. Show familiarity with the 800 MHz mobile radio.
- d. Show knowledge of how to switch to different channels/zones on both the portable and mobile radios.
- e. Show knowledge of the different zones within Loudoun County's dispatch system.
- f. Discuss the purpose and use of the radio channels utilized for notifying the ER's. Discuss the procedure for contacting dispatch for a channel to the ER's.
- g. Discuss the purpose and use of the recorded phone lines. Discuss the procedure for contacting dispatch for a phone patch to the ER's. Recruits should memorize the phone patch number: (703) 777-0335.
- h. Understand how to contact the various Fairfax Co. Hospitals using Zone 9 on the radio.
- i. Describe the PROPER procedure for activation of the Emergency Activation Button, what to communicate if there is a true emergency, and how to RESET the EA upon accidental activation (coordinate any actual activations with ECC supervisor).
- j. Understand how to call for assistance from law enforcement and other resources, and the terminology used. (Signal Codes - 1, 2, & 3)
- k. Know the various pre-alert tones and what they mean.
- l. Show knowledge of the low band radio and when it should be used.

Comments: \_\_\_\_\_  
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Preceptor: \_\_\_\_\_ EMS Sgt: \_\_\_\_\_

Recruit: \_\_\_\_\_ Date: \_\_\_\_\_

## Skill Sheet 9: Apparatus Positioning

The recruit will be able to show knowledge of the local hospitals and travel routes.  
Refer to AVFRD SOPs and EVOC Manual for guidance.

- a. Explain and demonstrate using a white board appropriate positioning of the ambulance on the scene of a structure fire
- b. Explain and demonstrate safe staging procedures and when they might be used.
- c. Explain and demonstrate using a white board appropriate positioning of the ambulance on the scene of an auto accident (to include different road types such as divided highway, major road, etc.)
- d. Explain appropriate positioning of the ambulance on the scene of a medical emergency

Comments: \_\_\_\_\_  
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Preceptor: \_\_\_\_\_

EMS Sgt: \_\_\_\_\_

Recruit: \_\_\_\_\_

Date: \_\_\_\_\_

## Phase II Completion Form

Date: \_\_\_\_\_

To: Assistant Rescue Chief

From: \_\_\_\_\_  
(EMS Sgt)

Subject: Phase II Skills completion for \_\_\_\_\_  
(Recruit Name)

I have reviewed the recruit's BLS Ambulance Operations Manual and found that all sections of the Phase II skills have been completed. This recruit has demonstrated the skills and knowledge necessary to move on to the Phase III skills and has my full endorsement.

EMS Sgt: \_\_\_\_\_

Assistant Rescue Chief.: \_\_\_\_\_

Date: \_\_\_\_\_

Please forward a copy of this Phase Completion Form to the Assistant Rescue Chief.

# Phase III

## Skill Sheet 10: Rehabilitation

The recruit needs to understand the importance of setting up a rehab group at a fire scene, or any other type of long duration incident (please refer to NOVA manuals Single Family Dwelling 5.26. and 5.3.8, Town House Fires 5.2.5 and 5.3.10, and High Rise Fires 8.8-8.9.2 for guidance).

- a. Discuss/demonstrate how to establish a rehab group and the goals of such.
  - Fluid replacement
  - Assessment for fatigue
  - Assessment of vitals every 10 minutes post exit of an IDLH area
  - Assure people are resting during rehab with air packs and turnout gear removed
  - Signs of incomplete rehab (compensated shock – Pulse < 100 with a good or high BP that does not lower after 10 minutes of rest)
  - When to request ALS
  - When it is necessary to hold personnel in rehab
  - Procedures to release personnel
  - Proper documentation of personnel and their vitals

Comments: \_\_\_\_\_  
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Preceptor: \_\_\_\_\_ EMS Sgt: \_\_\_\_\_

Recruit: \_\_\_\_\_ Date: \_\_\_\_\_

## Skill Sheet 11: ALS Assistance

The recruit will need to show proficiency in their ability to work with an EMT-Enhanced, EMT-Intermediate, or a Paramedic. If none are available in your station, every effort needs to be made to set up a day that the recruit can meet with a volunteer ALS provider.

- a. Must be able to locate and identify the needed equipment that is required to set up and start an I.V.
- b. Must be able to “spike” an I.V. bag with the drop set that the medic requests and “bleed” the line.
- c. Must be able to comfortably assist a medic with starting an I.V., including blood tubes (i.e. sequence to fill them, safety measures during filling, equipment used during filling), and setting up the glucometer..
- d. Must be able to identify the difference between the various types of I.V. fluids that are carried on the Medic units, checking fluids for expiration date and clarity.
- e. Demonstrate the ability to properly attach ECG electrodes to a patient upon the medics’ request.
- f. Show ability to use a LP-12 in the AED mode, as well as the ability to use the LP-12 in the cardiac monitoring function to assist the medic with things such as automatic BP, printing a strip, or changing leads.
- g. Must know what pieces of equipment require batteries and the difference between the types of batteries, as well as the charging of batteries.
- h. Describe the process for taking care of a LP 1000 with a low battery indication.
- i. Show the ability to locate the ET kit and the needed equipment for intubations.
- j. Show the ability to set up a nebulizer.
- k. Know how to use the Autovent with mask or ET tube in place of a BVM (if applicable)
- l. Know how to set up the LP12 adjuncts (automatic blood pressure cuff and pulse oximeter) and when it is appropriate to do so.
- m. Be able to assist with properly setting up CPAP.

Comments: \_\_\_\_\_  
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 \_\_\_\_\_

ALS Provider: \_\_\_\_\_

Preceptor: \_\_\_\_\_ EMS Sgt: \_\_\_\_\_

Recruit: \_\_\_\_\_ Date: \_\_\_\_\_

## Skill Sheet 12: Triage and Resource Management

The recruit needs to know the process of Triage, how to request a helicopter, and request additional resources. Refer to the protocols and the Northern Virginia Mass Casualty Plan for guidance.

- a. Show knowledge of the S.T.A.R.T. Triage system procedures and how to fill out a triage tag. Fill out a Triage tag after a simulated call in station or after an actual call. Include with PPCR submissions.
- b. Describe the role of the EMT as a first arriving unit to a mass casualty incident, as well as a later arriving unit.
- c. Describe the different situations an ALS provider can be used on a call, such as pain management, etc.
- d. Provide recruit a brief overview of what Med Comm is.

Comments: \_\_\_\_\_

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Preceptor: \_\_\_\_\_ EMS Sgt: \_\_\_\_\_

Recruit: \_\_\_\_\_ Date: \_\_\_\_\_

## Phase III Completion Form

Date: \_\_\_\_\_

To: Assistant Rescue Chief

From: \_\_\_\_\_  
(EMS Sgt)

Subject: Phase III skills completion for \_\_\_\_\_  
(Recruit Name)

I have reviewed the recruit's BLS Ambulance Operations Manual and found that all sections of the Phase III skills have been completed.

EMS Sgt: \_\_\_\_\_

Assistant Rescue Chief.: \_\_\_\_\_

Date: \_\_\_\_\_

Please forward a copy of this Phase Completion Form to the Assistant Rescue Chief.

# Field Evaluations

## Field Evaluations

In order to begin riding for your field evaluations you must have completed the Virginia EMT-B certification program, BLS Protocols, AED/Combi-tube class and have a current CPR certification. Your goal is to be evaluated on at least 15 emergency calls. The majority of the calls should be BLS; if you run an ALS assist call you may still be evaluated on the BLS skills you performed and the PPCR for which you were responsible. ALS assist calls and treatment waiver calls should make up no more than 50% of the total number of calls submitted.

This section is to be completed by the preceptor as an evaluation of the recruit on actual calls. The forms are for comments related to specific areas during a call, as well as overall impressions. Field Evaluation Forms may be filled out electronically and printed as a hard copy. This is strongly encouraged so that evaluations are legible and space is optimized. Electronic versions of the form can be found on AVFRD work stations or on avfrd.net. Please keep in mind that patient care always comes first, and don't let the recruit perform any tasks that may be detrimental to the patient or his/her outcome. The preceptor is ultimately responsible for proper patient care and making sure the PPCR is completed. Copies of the PPCR's completed by the recruit need to be kept for reference, ensuring pertinent personal information (such as name and birth date) are blacked out to conform to HIPAA (Health Insurance Portability and Privacy Act).

If the recruit is unable to obtain a satisfactory number of BLS calls to be precepted on while running on his/her assigned duty crew, the following options are available:

- The recruit may precept at another station in Loudoun County upon approval of the Assistant Rescue Chief. The ARC will contact the desired department and establish a contact for the recruit. The recruit must precept with an approved preceptor from the desired department.
- Simulation calls may be run in station or at an alternative site. The nature of calls should be varied to demonstrate the recruit's BLS skills in different situations (trauma, medical, etc.) A Field Evaluation Form and PCR Worksheet should be filled out upon completion. The preceptor should make note of the "simulation" call nature. Simulations should reflect all aspects of an actual call including: radio usage, scene size up, assessment, treatment, transport, and hospital communication.
- Precept on a different duty crew in addition to assigned duty crew. This is encouraged to get a different perspective on the EMS experience. Precepting recruits will have priority on his/her assigned duty crew.

The BLS Call Log (end of this section) should be filled out for every call or call simulation to document skills performed on each call.

CANDIDATE'S NAME:	EVALUATOR'S NAME:
NATURE OF CALL:	AFFILIATION: Ashburn Volunteer Fire and Rescue
INCIDENT #:	DATE:

CATEGORY	COMMENTS	PERFORMANCE & KNOWLEDGE
<b>SCENE / PT ASSESSMENT</b>		
SCENE CONTROL / RESOURCES		EXCELLENT
PT ASSESSMENT		
TRAIGE / CARE DECISION		SATISFACTORY
PROTOCOLS FOLLOWED		
TEAM MANAGEMENT		NEEDS IMPROVEMENT
<b>SKILLS</b>		
AIRWAY		EXCELLENT
SPLINTING / KED / BACKBOARDING		SATISFACTORY
MED ADMINISTRATION		NEEDS IMPROVEMENT
<b>COMMUNICATION / PAPERWORK</b>		
RADIO USE		EXCELLENT
HOSPITAL COMMUNICATION		
PCR COMPLETION		SATISFACTORY
PPCR AND NIFRS USE		
MAPS AND DIRECTIONS		NEEDS IMPROVEMENT

- Rating Scale for each sub-category: E=Excellent, S=Satisfactory, N=Needs improvement
- Also "check" the Excellent, Satisfactory, Needs Improvement under "Knowledge & Knowledge"

CANDIDATE'S SIGNATURE: \_\_\_\_\_

PRECEPTOR'S SIGNATURE: \_\_\_\_\_

PRECEPTOR'S COMMENTS:

EMS SERGEANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## BLS Precepting Manual and Field Evaluation Completion Form

Date: \_\_\_\_\_

To: Assistant Rescue Chief

From: \_\_\_\_\_  
(EMS Sgt)

Subject: Field Evaluation completion for \_\_\_\_\_  
(Recruit Name)

I have reviewed the precepting member's book and found that all sections of Phases I, II and III skills were completed. This member has successfully precepted on 15 or more calls and has demonstrated the skills, knowledge and leadership necessary to become a released operational member.

EMS Sgt: \_\_\_\_\_ Date: \_\_\_\_\_

Please forward a copy of this Phase Completion Form to the Assistant Rescue Chief.

# ADDITIONAL

# FORMS

MAKE COPIES AS NEEDED

## Recruit Monthly Evaluation

To be completed by the preceptor and EMS Sgt

1. What area is the recruit most confident in, and what area does the recruit excel in their skills? \_\_\_\_\_  
\_\_\_\_\_  
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2. What area does the recruit need more practice in? \_\_\_\_\_  
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3. What actions have been taken to improve the recruit's weak area? \_\_\_\_\_  
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4. Evaluate the recruit's ability to communicate on the radio and ability to document the call using a PPCR \_\_\_\_\_  
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5. Mentor's summary of the recruit's performance to date\_\_\_\_\_

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Recruit Signature:\_\_\_\_\_

Date:\_\_\_\_\_

Preceptor Signature:\_\_\_\_\_

Date:\_\_\_\_\_

EMS Sgt:\_\_\_\_\_

Date:\_\_\_\_\_

Please forward a copy of this evaluation to the Assistant Rescue Chief.

CANDIDATE'S NAME:		EVALUATOR'S NAME:	
NATURE OF CALL:		AFFILIATION: Ashburn Volunteer Fire and Rescue	
INCIDENT #:		DATE:	
CATEGORY	COMMENTS		PERFORMANCE & KNOWLEDGE
<b>SCENE / PT ASSESSMENT</b>			
SCENE CONTROL / RESOURCES			EXCELLENT
PT ASSESSMENT			
TRAIGE / CARE DECISION			SATISFACTORY
PROTOCOLS FOLLOWED			
TEAM MANAGEMENT			NEEDS IMPROVEMENT
<b>SKILLS</b>			
AIRWAY			EXCELLENT
SPLINTING / KED / BACKBOARDING			SATISFACTORY
MED ADMINISTRATION			NEEDS IMPROVEMENT
<b>COMMUNICATION / PAPERWORK</b>			
RADIO USE			EXCELLENT
HOSPITAL COMMUNICATION			
PCR COMPLETION			SATISFACTORY
PPCR AND NIFRS USE			
MAPS AND DIRECTIONS			NEEDS IMPROVEMENT

- Rating Scale for each sub-category: E=Excellent, S=Satisfactory, N=Needs improvement
- Also "check" the Excellent, Satisfactory, Needs Improvement under "Knowledge & Knowledge"

CANDIDATE'S SIGNATURE: \_\_\_\_\_

PRECEPTOR'S SIGNATURE: \_\_\_\_\_

PRECEPTOR'S COMMENTS:

EMS SERGEANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

# Ambulance Driver Release Manual

Version 6.3  
Date: November 2015



# Phase I

# Ambulance Driver Release

This section must be completed prior to being released as an ambulance driver and/or allowing the recruit to ride in the front seat of the ambulance during their precepting period.



### Skill Sheet 1-1: Driver Duties

- Understand the importance of checking out the ambulance at the beginning of each shift, and the checksheet to use.
- Understand how to fill out a repair request form and where it is submitted.
- Know how to call a unit in and out of service.
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Comments:

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Preceptor

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Recruit

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EMS Sergeant

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Date



**Skill Sheet 1-2: Unit Familiarization**

- The recruit will learn the inventory of the unit they will be riding for the duration of the BLS Precepting Program.
  - This is to include BOTH the 2008 and 2015 model layouts.
- Specify how to turn on and change on board and portable oxygen cylinders and at what psi cylinders are to be changed. This should include placing a regulator on an O2 bottle that does not already have a built in regulator.
- Demonstrate how to use the on-board and portable suction units.
- Ability to locate any piece of equipment inside or outside of the ambulance without hesitation.
- Proper usage of the cot to include understanding all the moving parts
- Proper use of the stair chair, including actual use on stairs.
- Show familiarity with the pediatric airway kit and its ALS uses as well as the BLS uses.
- Ability to do a unit check at the beginning of a shift.
- Knows what batteries need to be changed and charged at the beginning of each shift.

Comments:

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Preceptor

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Recruit

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**EMS Sergeant**

\_\_\_\_\_  
**Date**



**Skill Sheet 1-3: Common Mechanical Issues**

- Air dump issues – know how to troubleshoot when the box is listing to one side, and where the compressor switch is in the ambulance.
  - The recruit should understand that the air dump works on a reservoir system and that the compressor fills a reservoir, which fills the bladders.
- How to fill out service requests.
- Placing a unit OOS – What needs to be done if a unit is placed OOS for a mechanical reason.
- What equipment needs to be removed when the unit goes OOS to the garage or offsite: Meds, Lifepak, Toughbook. Who needs to remove them?

Comments:

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Preceptor

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Recruit

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**EMS Sergeant**

\_\_\_\_\_  
**Date**



**Skill Sheet 1-4: Patient and Passenger Safety**

- Demonstrate knowledge of passenger safety procedures.
- Demonstrate how to properly secure an infant within the ambulance.
- Demonstrate how to properly secure a child within the ambulance.
- Demonstrate how to properly secure an adult on a cot.
- Demonstrate how load and unload a cot into the ambulance. Realizing there are numerous manufactures of this equipment in the county, discuss some of the known problems associated with not being familiar with the operation of your equipment.
- Demonstrate how to properly secure an adult as a passenger in the front and rear of the ambulance.
- Demonstrate how to properly secure a backboarded patient onto a bench seat.
- Discuss situations in which it may be best to have a passenger (i.e. Mom, Dad, boyfriend, etc.) ride in the front of the ambulance.

Comments:

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Preceptor

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Recruit

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**EMS Sergeant**

\_\_\_\_\_  
**Date**



**Skill Sheet 1-5: Stocking and Restocking Procedures**

- Demonstrate knowledge of ambulance stocking and restocking procedures.
- Identify equipment that can be replaced at Loudoun County hospital ERs.
- Identify equipment that needs to be restocked from station supplies.
- Show knowledge of proper procedures in restocking equipment used on patients taken to hospitals other than Loudoun County ERs.
- Identify where supplies for restocking are found in the emergency rooms.
- Show knowledge of proper procedures in restocking equipment used on a fly-out and other non-transport situations.

Comments:

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Preceptor

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Recruit

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EMS Sergeant

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Date



### Skill Sheet 1-6: Exposures and Decontamination

- o Describe or show knowledge of proper cleaning and decontamination procedures for the ambulance. Refer to the Blood Borne Pathogens and TB exposure plan for guidance.
- o Explain the process to follow if an exposure or injury occurs during a call or on duty.
- o Describe what would be considered a true exposure.
- o Effective cleaning procedures in station and at the hospital.
- o Effective decontamination procedures in station and at the hospital.
- o Differentiate between true biohazard waste and simple trash.
- o Disposal of biohazard waste, to include sharps containers.
- o Understand the process for disposal of red bags/biohazard boxes.
- o Understand decon/cleaning procedures for personal uniforms.
- o Understand decon/cleaning procedures for turn out gear.

Comments:

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Preceptor

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Recruit

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EMS Sergeant

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Date



### Skill Sheet 1-7: Hospital Familiarization

- The recruit will be able to show knowledge of the local hospitals and travel routes on Skill Sheet 1-7A.
- Demonstrate knowledge of procedures and protocols that are needed to determine the hospital best suited for different types of patients.
  - Driver candidates should be familiar with the Destination Determination and Major Trauma protocols.
- Demonstrate knowledge in the difference between LHC Cornwall, LHC Lansdowne, IHP Ashburn, and HCA StoneSpring.
- Know the locations of all four hospital facilities in Loudoun County.
- Know which hospitals your station uses primarily (Lansdowne, Cornwall, StoneSpring, Reston, Ashburn) and how to access each.
- Know where supplies are kept and how to access them at each hospital for re-stocking.
- Know where the backboards and other equipment are kept that need to be returned to the station.
- Know the general boundary lines that determine to which hospital to transport.
- Describe the locations for the nearest specialty resource hospitals such as trauma, burns, and pediatrics.
- Describe and review surrounding hospitals and be familiar with directions to them (refer to driving directions on the next page for guidance).
- Know the proper procedures for transporting to hospitals other than Lansdowne, Cornwall, Ashburn, and StoneSpring.
- Know the helicopter policy and basic helicopter operations.

Comments:

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Preceptor

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Recruit

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EMS Sergeant

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Date



**Skill Sheet 1-7A: Directions to Hospitals**

The recruit must write directions to the following hospitals from Claiborne Parkway/Route 7.

Inova Loudoun Hospital Center Lansdowne:

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Inova Loudoun Hospital Center Cornwall:

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HCA StoneSpring Emergency Center:

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Inova HealthPlex Ashburn:

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HCA Reston Hospital Center:

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Inova Fairfax Hospital:

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Inova Fair Oaks Hospital:

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### Skill Sheet 1-8: Radio Usage

- Show familiarity with the mobile radio.
- Show familiarity with the portable radio
- Know the phonetic alphabet.
- Show knowledge of how to switch to different channels/zones on both the portable and mobile radios.
- Show knowledge of the different zones within Loudoun County's dispatch system.
- Understand the purpose of and reasoning behind the channel groupings on the 6 and 61 channels and what the TAC numbers mean. *(Meadowood Incident findings explain this)*
- Discuss the purpose and use of the radio channels utilized for notifying the ERs. Discuss the procedure for contacting dispatch for a channel to the ERs.
- Discuss the purpose and use of the recorded phone lines. Discuss the procedure for contacting dispatch for a phone patch to the ERs. Recruits should know the phone patch number: (703) 777-0335, as well as the standard dispatch number: (703) 777-0637.
- Describe the PROPER procedure for activation of the Emergency Activation Button, what to communicate if there is a true emergency, and how to RESET the EA upon accidental activation.
- Discuss how to call for additional resources such as engine companies or ALS.
- Understand how to call for assistance from law enforcement and other resources, and the terminology used. (Signal Codes - 1, 2, & 3)
- Understand what information needs to be given to Dispatch when an ALS provider boards a BLS unit during transport.

Comments:

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Preceptor

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Recruit

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EMS Sergeant

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Date

### Skill Sheet 1-8A: Radio Reference



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Phonetic Alphabet		6 Tactical and 69 Hospital Channels	
A	N	6A	69A
B	O	6B	69B
C	P	6C	69C
D	Q	6D	69D
E	R	6E	69E
F	S	6F	69F
G	T	6G	69G
H	U	6H	69H
I	V	6I	69I
J	W	6J	69J
K	X	6K	69K
L	Y	6L	69L
M	Z	6M	69M
		6N	69N
		6O	69O
		6P	69P



### Skill Sheet 1-9: Apparatus Positioning

- Explain and demonstrate using a white board appropriate positioning of the ambulance on the scene of a structure fire.
- Explain how to give a proper scene size up:
  - Single family home structure fire
  - Fire alarm at Wingler House
  - Auto accident in an intersection
  - Auto accident not in an intersection
- Explain and demonstrate safe staging procedures and when they might be used.
- Explain and demonstrate using a white board appropriate positioning of the ambulance on the scene of an auto accident including different road types such as a two-lane road, divided highway, and intersection, keeping in mind that these are examples and every situation may be different.
- Explain appropriate positioning of the ambulance on the scene of a medical emergency in various neighborhoods and at different types of houses.

Comments:

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Preceptor

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Recruit

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EMS Sergeant

\_\_\_\_\_  
Date



### Skill Sheet 1-10: First-Due Familiarisation

- o Understand the concept of box numbers and assignments, as well as how units are dispatched.

Candidates must give box numbers of and directions from the first-due station to the following locations.

- o Stone Bridge High School
- o Broad Run High School
- o Riverside High School
- o Belmont Ridge Middle School
- o Farmwell Station Middle School
- o Trailside Middle School
- o Elementary schools and label on a map *(need map)*
- o National Conference Center, as well as understanding the facility's design
- o Lansdowne Resort
- o Ashby Ponds
  - o Be familiar with the facility's design
- o One Loudoun
- o Winkler House Apartments
  - o East Building number and access code:
  - o West Building number and access code:
- o Leisure World
  - o Be familiar with the facility's design
- o Label ZIP codes on a map – 20147, 20148, 20166, 20175, 20176 *(for writing correct Ems reports in the future)*
- o Indicate W&OD access points on a map. Understand that addresses on the W&OD trail correspond to the mile markers (245 = 24.5, etc.)
- o Indicate median turn-around locations on Routes 7, 28, and 267.

Comments:

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Preceptor

Recruit

EMS Sergeant

Date



**Skill Sheet 1-10A: Major Street Familiarization**

1. Belmont Ridge Road
2. Waxpool Road
3. Russel Branch Parkway (Eastern Segment)
4. Russel Branch Parkway (Central Segment)
5. Russel Branch Parkway (Western Segment)
6. Claiborne Parkway
7. Farmwell Road
8. Harry Byrd Highway
9. Loudoun Co Parkway
10. Shellhorn Road
11. Hay Road
12. River Creek Parkway
13. Tournament Parkway
14. Palmer Classic Parkway



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15. Riverpoint Drive

16. Riverside Parkway

17. Sycolin Road

18. Plymouth Boulevard

19. Cheltanham Circle

20. Fultanham Circle

21. Marblehead Drive

22. Crossroads Drive

23. Louisa Drive

24. Upper Belmont Drive

25. Kipheart Drive

26. Wintergrove Drive

27. Alexandras Grove Drive

28. Demott Drive

29. Broadlands Boulevard



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30. Bruceton Mills Circle

31. Christiana Drive

32. Fincastle Drive

33. Village Market Boulevard

34. Crosstrail Boulevard

35. Sully Road

36. Pacific Boulevard

37. Atlantic Boulevard

38. Smith Circle



### Skill Sheet 1-11: Fuelling Procedures

- Explain when to fuel the unit.
- Demonstrate how to fuel: the code to the garage and the fuelling process.

Comments:

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Preceptor

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Recruit

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EMS Sergeant

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Date



**Skill Sheet 1-12: MDC Use**

- Know the password for logging into both the MDC and EMS ToughBook.
- Know how to log a unit into the MDC.
- Know how to do the following on the MDC, and that communication with dispatch must still be made.
  - Mark enroute, on-scene, and available.
  - Mark at enroute to and at the hospital
    - Understand how the mileage works: both the odometer reading and the tripmeter reading are acceptable.

Comments:

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Preceptor

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Recruit

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EMS Sergeant

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Date



**Skill Sheet 1-13: BLS Skills (Ambulance Driver Release Only)**

- o Demonstrate backboarding procedures.
- o Demonstrate use of the KED.
- o Demonstrate knowledge in how to assist an EMT with splinting.
- o Demonstrate ability to take vitals on 10 different people. Don't forget the quality, not just the quantity, if applicable.
  - o 1: P \_\_\_\_\_ R \_\_\_\_\_ BP \_\_\_\_\_ LS \_\_\_\_\_ Pupils \_\_\_\_\_
  - o 2: P \_\_\_\_\_ R \_\_\_\_\_ BP \_\_\_\_\_ LS \_\_\_\_\_ Pupils \_\_\_\_\_
  - o 3: P \_\_\_\_\_ R \_\_\_\_\_ BP \_\_\_\_\_ LS \_\_\_\_\_ Pupils \_\_\_\_\_
  - o 4: P \_\_\_\_\_ R \_\_\_\_\_ BP \_\_\_\_\_ LS \_\_\_\_\_ Pupils \_\_\_\_\_
  - o 5: P \_\_\_\_\_ R \_\_\_\_\_ BP \_\_\_\_\_ LS \_\_\_\_\_ Pupils \_\_\_\_\_
  - o 6: P \_\_\_\_\_ R \_\_\_\_\_ BP \_\_\_\_\_ LS \_\_\_\_\_ Pupils \_\_\_\_\_
  - o 7: P \_\_\_\_\_ R \_\_\_\_\_ BP \_\_\_\_\_ LS \_\_\_\_\_ Pupils \_\_\_\_\_
  - o 8: P \_\_\_\_\_ R \_\_\_\_\_ BP \_\_\_\_\_ LS \_\_\_\_\_ Pupils \_\_\_\_\_
  - o 9: P \_\_\_\_\_ R \_\_\_\_\_ BP \_\_\_\_\_ LS \_\_\_\_\_ Pupils \_\_\_\_\_
  - o 10: P \_\_\_\_\_ R \_\_\_\_\_ BP \_\_\_\_\_ LS \_\_\_\_\_ Pupils \_\_\_\_\_

Comments:

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\_\_\_\_\_  
Preceptor

\_\_\_\_\_  
Recruit

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EMS Sergeant

\_\_\_\_\_  
Date



AVFRD EMS Driver Release Manual 2015 Revision – Version 6.3

**Phase I Completion Form**

Date: \_\_\_\_\_

To: Deputy Chief

From: \_\_\_\_\_  
(EMS Sergeant)

Subject: Phase I Skills completion for \_\_\_\_\_  
(Recruit Name)

I have reviewed the recruit's Ambulance Driver Release Manual and found that all sections have been completed. This recruit has demonstrated the skills and knowledge necessary to either be released as a driver and/or move on to the Phase II skills, as applicable, and has my full endorsement.

EMS Sergeant: \_\_\_\_\_

Deputy Chief: \_\_\_\_\_


Please forward a copy of this Phase Completion Form the Deputy Chief.



## **Recommendation for Driver Release**

Refer to SOP 206 Attachment.



	<b>LOUDOUN COUNTY COMBINED FIRE AND RESCUE SYSTEM SYSTEM-WIDE PROCEDURE (SWP)</b>
<b>TITLE</b>	Social Media Policy
<b>SECTION</b>	
<b>SWP#</b>	
<b>ISSUED</b>	
<b>REVISED</b>	
<b>APPROVED</b>	System Chief _____ W. Keith Brower, Jr.

**Scope:**

All Loudoun County Combined Fire and Rescue System (LC-CFRS) members

**Purpose:**

The purpose of this policy is to provide guidance to LC-CFRS members by identifying the appropriate use of social media by System personnel, and acknowledge that the inappropriate use of social media may lead to actual harm and disruption to the System. This may include, but is not limited to, negatively impacting the public's perception of the organization and its willingness to render services to them. For example, if a member of the LC-CFRS makes negative stereotypic comments on social media about a protected class, religious group, or race of people, citizens in such groups may avoid calling 9-1-1 due to that member's stated beliefs. Engaging in social media and social networking activities is a form of speech. Nothing in this policy is intended to unlawfully restrict a member's right to discuss, as a private citizen, matters of public concern.

**Definitions:**

- **Social media** is a Web- or mobile-based means of mass communication allowing for interaction amongst users, moving information between a news source, an individual and/or a broader community in the form of interaction and dialog. Social media websites are either publicly accessible or accessible to invited guests, in order to create, view or update the content. Social media sites include, but are not limited to, Facebook, Twitter, Instagram, Snapchat, YouTube, Pinterest, LinkedIn, Flickr, Google+, blogs, commenting on online media reports, and other similar communication platforms or channels.
- **Loudoun County Combined Fire Rescue System:** "Combined System" or "LC-CFRS" includes every volunteer fire-fighting and EMS organization recognized pursuant to Chapter 258 of the Codified Ordinances of Loudoun County and authorized by the Board of Supervisors to operate as a fire-fighting and/or EMS organization within the geographic boundaries of Loudoun County, or any of its incorporated towns, as well as the Loudoun County Department of Fire, Rescue and Emergency Management (LCDFREM) and all of its employees.


- **Spokesperson for the System** includes any System member who is authorized to make a statement on behalf of the System in his/her capacity as a member of the System, or in such a way that it may reasonably be attributed to the System. Any such authorization must be given by the Incident Commander, Chief of System or designee.
- **Hate speech** is speech that identifies, in a negative manner, a person or group on the basis of attributes including race, ethnic origin, national origin, skin color, gender (including status as pregnant or nursing), religion, disability, gender identification, age, or sexual orientation, including a level of intolerance or hostility that is incompatible with a commitment to serve all members of the community.

### Procedure:

1. System members who identify their affiliation with the LC-CFRS on personal website(s) shall provide a disclaimer on said personal website(s) to explicitly state that their statements are not intended to represent the Combined System. (An example of such a statement is: “The posts, opinions and/or views being expressed on this site are my own and do not necessarily reflect the views of the *Loudoun County Combined Fire and Rescue System (LC-CFRS)*”).
2. LC-CFRS members authorized to utilize social media on behalf of the LC-CFRS in emergency response and non-emergency capacities shall include: the System Chief and designee(s), Staff Duty Officers, Incident Commanders (or designee), and the LC-CFRS Public Information Officer (PIO) (or designee).
3. LC-CFRS maintains official social media platforms (e.g. website, Instagram, Facebook, Twitter). Any other social media accounts are considered personal use, and each individual is responsible and potentially accountable for posted content on such personal sites.
4. System members’ use of social media sites shall be in accordance with all applicable System –Wide policies regarding confidentiality, harassment, and the System-wide code of conduct.
5. No member of the System will, while speaking as a private citizen on a matter of public concern, do so in such a manner as to cause actual harm or disruption to System operations.
6. System members are not usually protected when speaking on matters that are not of public concern. Personal grievances, complaints about conditions of employment, or expressions about other matters of personal interest do not constitute speech about matters of public concern that are protected by the First Amendment, but are matters more immediately concerned with the self-interest of the speaker as an employee.
7. System members shall not engage in speech that is false, deceptive, libelous, slanderous, intentionally misleading, or causes harm to others, including speech that constitutes hate speech, or is harassing in nature; nor shall members discuss or post on a social media site protected or confidential matters of the System, including:
  - a. Investigations (to include, but not limited to: criminal investigations, fire and/or explosive origin and cause investigations, accident or collision investigations);
  - b. Patient Protected Health Information (as defined in the Health Insurance Portability and Accountability Act – “HIPAA”);
  - c. Personnel matters that are protected from disclosure by law;

- d. Protected controlled unclassified information, provided by federal, state, or local government partners, for System operational situational awareness (often labeled FOR OFFICIAL USE ONLY);
  - e. Information protected from public release under a Freedom of Information Act (FOIA) exemption.
  - f. Policies and Procedures of the LC-CFRS that are not for public dissemination (e.g. Station and Personnel Safety and Security; Response to Active Violence Incidents).
- 8. Violations of this SWP may result in disciplinary action up to and including dismissal from the System, as determined by the System Chief.
- 9. The use of personal web and social media while on-duty is prohibited during emergency response which begins at time of initial dispatch and continues through the time the unit returns to quarters. Only authorized personnel as described in #2 herein may conduct social media updates during emergency operations.
- 10. Supervisors of System members shall not require personnel under their supervision/management to accept a request to join their social media circle.
- 11. When social media impersonation of a System member is discovered, notification shall be made to the member's chain-of-command and reported to the Chief of System as soon as practical, due to potential negative impact on the reputation of the System.
- 12. System-affiliated entities (LC-CFRS organizations) who operate their own social media platforms shall not publish content which includes, but is not limited to, the following:
  - a. Matters that are under investigation (to include, but not be limited to: criminal investigations, fire and/or explosive origin and cause investigations, accident or collision investigations;
  - b. Any information that is protected by HIPAA;
  - c. Personnel matters that are protected from disclosure by law;
  - d. Protected controlled unclassified information, provided by federal, state, or local government partners, for System operational situational awareness (often labeled FOR OFFICIAL USE ONLY); and
  - e. CAD Information, protected by Loudoun County Fire and Rescue System Guideline 6.2.1 Confidentiality of CAD Information
  - f. Policies and Procedures of the LC-CFRS that are not for public dissemination (e.g. Station and Personnel Safety and Security; Response to Active Violence Incidents).
- 13. Information protected from public release under a Freedom of Information Act (FOIA) exemption. The LC-CFRS name and associated logos are not to be utilized, disseminated, sold or reproduced without permission of the System Chief, or designee.
- 14. All System members are responsible for protecting confidential information. System members seeking clarification regarding protected information or experiencing difficulty with that responsibility can seek free, confidential assistance through:
  - a. Direct supervisor, following chain-of command;
  - b. Employee Assistance Program



	<b>LOUDOUN COUNTY COMBINED FIRE AND RESCUE SYSTEM SYSTEM-WIDE PROCEDURE (SWP)</b>
<b>TITLE</b>	Use of Personal Electronic Devices
<b>SECTION</b>	
<b>SWP#</b>	
<b>ISSUED</b>	
<b>REVISED</b>	
<b>APPROVED</b>	System Chief _____ W. Keith Brower, Jr.

**Scope:**

All Loudoun County Combined Fire and Rescue System (LC-CFRS) members

**Purpose:**

To provide guidance to LC-CFRS members by clarifying the boundaries for the personal use of digital devices (including, but not limited to: mobile phones, smartphones, tablets, personal computers and digital cameras) while on duty in the following ways:

- Acknowledging that the inappropriate use of personal digital devices may lead to actual harm and disruption to the LC-CFRS, such as negatively impacting the public's perception of the organization;
- Acknowledging that the inappropriate use of personal digital devices may delay or otherwise adversely impact a member's ability to focus on incident priorities; and
- Acknowledging that the inappropriate use of personal digital devices may inhibit a member's ability to protect patient information and jeopardize the integrity of ongoing investigations. Photos, video, or recordings of any type while on-scene that are inadvertently released publicly, including on personal social media accounts, potentially violate privacy and/or confidentiality laws.

**Definitions:**

**Social media** is considered to be a Web- or mobile-based means of mass communication allowing for social interaction, moving information between a news source, an individual and/or a broader community in the form of interaction and dialog. Social media sites are either publicly accessible or accessible to invited guests, in order to create, view or update the content. Social media includes, but is not limited to, Facebook, Twitter, Instagram, Snapchat, YouTube, Pinterest, LinkedIn, Flickr, Google+, blogs, commenting on online media reports, and other similar communication platforms or channels.

**Loudoun County Combined Fire Rescue System:** "Combined System" or "LC-CFRS" includes every volunteer fire-fighting and EMS organization recognized pursuant to Chapter 258 of the Codified Ordinances of Loudoun County and authorized by the Board of Supervisors to operate as a fire-fighting and/or EMS organization within the geographic boundaries of Loudoun County, or any

of its incorporated towns, as well as the Loudoun County Department of Fire, Rescue and Emergency Management and all of its employees.

**Spokesperson for the System** includes any System member who makes a statement on behalf of the System in his/her capacity as a member of the System, or in such a way that such statement may reasonably be attributed to the System, as opposed to making the statement as a private citizen. Individuals functioning in this capacity must be authorized by the Incident Commander, Chief of System or designee.

**Hate speech** is speech that identifies, in a negative manner, a person or group on the basis of attributes including race, ethnic origin, national origin, skin color, gender (including status as pregnant or nursing), religion, disability, gender identification, age, or sexual orientation, including a level of intolerance or hostility that is incompatible with a commitment to serve all members of the community.

**Public Record:** In accordance with the Virginia Freedom of Information Act, public records are letters, words or numbers, or their equivalent, set down by handwriting, typewriting, printing, photostating, photography, magnetic impulse, optical or magneto-optical form, mechanical or electronic recording or other form of data compilation, however stored, and regardless of physical form or characteristics, prepared or owned by, or in the possession of a public body or its officers, employees or agents in the transaction of public business. Records that are not prepared for or used in the transaction of public business are not public records. [Virginia State Code § 2.2-3701]


A public record is determined by the content of the record, not the device on which it is found; as a result, personally owned devices may hold public records if the user, creator or owner of the record chooses to use such a device to capture or store the record.

#### **Procedure:**

1. The use of personal electronic devices while on-duty is prohibited during emergency response which begins at the time of initial dispatch and continues through the time the unit returns to quarters.
  - a. LC-CFRS members authorized to capture photographs, images, videos, and/or audio on behalf of the LC-CFRS during emergency response shall include: the Incident Commander (or designee), Staff Duty Officer(s), Chief of System (or designee), LC-CFRS Public Information Officer (PIO), LC-CFRS Safety Officer, Loudoun County Fire Marshal and/or law enforcement agency, or other investigatory agency or department as permitted under law.
  - b. Personal mobile phone exemption may be allowed for voice communications only, when approved by the Emergency Medical Services (EMS) Attendant-in-Charge (AIC), Fire Unit Officer or Incident Commander in support of scene or incident operations. Examples may include communications with a hospital, poison control center, emergency communications center(s), emergency point(s) of contact for the incident, hazardous material (HAZMAT) reference entity, Federal, state, and/or local government support. Personal calls of an emergent nature may also be authorized by appropriate authority as identified above.

2. Images, photos, videos, and/or audio shall not be recorded while on-duty using personal electronic devices, with the exception of station duties, training, and/or non-emergency documentation. Such images could be subject to release under FOIA if determined to be a public record.
3. Images, photos, videos, and/or audio captured by an authorized on-duty System member at the scene of an emergency call for the purposes of historical record shall forward a copy of the captured media to the LC-CFRS PIO for cataloguing and retention. Once receipt is acknowledged by the PIO, the original captured media on the System members' device(s) shall be destroyed.
4. Images containing identifiable patient information are protected as medical documentation under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and/or Health Information Technology for Economic and Clinical Health Act (HITECH).
5. No images, video, and/or audio may be shared, transferred or reproduced, unless required for patient care purposes and then only to the medical professionals involved in the care of that patient; as required by law, or for law enforcement activity.
6. No images, video, and/or audio captured by on-duty personnel may be sold or used for private or commercial purposes outside of the System under any circumstances.
7. Off-duty LC-CFRS members shall not use their affiliation to gain access to areas of an emergency scene that the general public is not able to access.
8. Use of personal helmet, dashboard, window, and body cameras are prohibited.



	<b>LOUDOUN COUNTY COMBINED FIRE AND RESCUE SYSTEM SYSTEM-WIDE PROCEDURE (SWP)</b>
<b>TITLE</b>	Awards and Recognition
<b>SECTION</b>	
<b>SWP#</b>	
<b>ISSUED</b>	Final Draft – EC Action Item v2 050516
<b>REVISED</b>	
<b>APPROVED</b>	System Chief _____ W. Keith Brower, Jr.

## PURPOSE

To recognize personnel who distinguish themselves in the performance of their duties and who contribute significantly to the achievement of the goals of the Loudoun County Combined Fire and Rescue System. This policy shall apply to all members of the Loudoun County Combined Fire and Rescue System.

## BACKGROUND

The Loudoun County Combined Fire and Rescue System (LC-CFRS) provides a variety of services to the citizens of Loudoun County. Occasionally, individual or team performance is worthy of special recognition by the placement of a bar on the Class A, B, C, (or other variation) or civilian employee uniforms (where applicable).

## POLICY

It shall be the policy of LC-CFRS to accept recommendations for recognition of significant acts made by its members and private citizens. LC-CFRS will make awards for those deemed qualified. It shall also be the policy to encourage all system members to recognize those actions of any member who deserves recognition in any form. LC-CFRS acknowledges the following category of awards:

- A. Achievement Awards
- B. Specialty Service Recognition
- C. Program Completion Recognition
- D. Valor Awards

## E. Agency Specific Awards/Recognition

**AWARDS NOMINATION REVIEW COMMITTEE (AWARDS COMMITTEE)**

- A. The Awards Committee is appointed by the System Chief of the Loudoun County Combined Fire and Rescue System.
- B. The Awards Committee shall receive all recommendations for awards and recognition with the exception of the Chamber of Commerce Valor Awards. The committee is responsible for reviewing the submitted nominations for awards to confirm that the criteria for the award has been met and the recipient is eligible to receive the award.
- C. The Awards Committee shall consist of nine (9) members in good standing within the LC-CFRS. The members shall include:
- Assistant Chief of Operations or Support Services and Volunteer Administration
  - 3 Career Members - One member must be a civilian employee
  - 3 Volunteer Members - One member must be administrative
  - Member of the Recruitment and Retention Committee
  - Member of the Emergency Communications Center (ECC)
- D. The chair and vice-chairperson will be elected by the committee members.
- E. Membership terms will be two years. Any member may be reappointed by the System Chief.
- F. Any vacancy will be filled as soon as possible by the System Chief.

**NOMINATIONS OF AWARD RECIPIENTS**

- A. Nominations for the following awards may be submitted by any LC-CFRS member: Civilian of the Year, Distinguished Service Award, EMS Provider of the Year, Fire Instructor of the Year, Firefighter of the Year, Hall of Fame Award, Meritorious Service Award, Officer of the Year, Recruitment and Retention Award, Leo C. Kelly ALS Instructor Award, Robert “Hap” Arnold BLS Instructor Award, System Chief’s Commendation, System Recognition Award, Team Performance Award, and the Unit Citation Award.

- B. Nominations and selection for the Clark J. Deener Memorial Award, John C. Carr, Jr. Memorial Award, and Top Student Awards are nominated and selected by other nomination methods as described within this policy.
- C. The nominator must submit an LC-CFRS *Awards and Recognition Form* electronically via the following awards and recognition link:  
<https://lfportal.loudoun.gov/forms/Awards-and-Recognition>

Note: If additional supporting information beyond the narrative portion of the e-form is needed, it shall be submitted electronically via [awards@loudoun.gov](mailto:awards@loudoun.gov).

- D. Nominators should recognize that the Awards Committee must determine if an award is appropriate based on the information contained in the e-form's nomination narrative and/or supporting documentation. Therefore, all nominations and narratives should be as detailed and timely as possible including dates, times, location, and incident number (if applicable), names and addresses of any witnesses, newspaper articles, photographs, and any supporting letters or memos, etc.
- E. Nominations for any of the awards and commendations listed in this System-Wide Policy must be in accordance with the description, criteria, and nomination contained for each of the awards.

## RECOGNITION OF AWARDS

The Awards Committee in cooperation with the Training Division shall process all awards approved by the System Chief and execute the award ceremonies with the exception of the Chamber of Commerce Valor Awards.

- A. A ceremony to honor recipients of the system awards will be scheduled in the spring of each year. The cutoff date to submit award recipients for inclusion in the spring ceremony will be January 31<sup>st</sup> of each year for award nominations of the previous year.
- B. The Top Student Awards will be awarded by the Training Division at the conclusion of each EMS and Fire School during graduation
- C. The Chamber of Commerce Awards Committee will arrange an appropriate presentation ceremony for Valor Awards to be held in the spring of each year to present awards for the previous calendar year.

- D. The System Recognition Award that is awarded to a person(s) who is not a member of the LC-CFRS may be coordinated by the Public Information Officer at a time convenient for the person(s) receiving the award.

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## CATEGORY OF AWARDS

### A. Achievement Awards

#### A1. Civilian of the Year

- **Description:** This award honors a civilian (non-operational or administrative) member of the system who exemplifies outstanding performance in the day-to-day performance of their duties, and their outstanding service and dedication which are keeping with the highest traditions of the fire and rescue system.
- **Criteria:** Nominee must be a civilian and/or non-operational member of the LC-CFRS.
- **Nomination:** This award is nominated by any member of the LC-CFRS. The Nomination Review Committee will make its recommendation to the System Chief on an annual basis.
- **Recognition:** Annual Award. The recipient(s) will receive a certificate and plaque from the System Chief.

#### A2. Clark J. Deener Memorial Award

- **Description:** Recognizes an EMS member for their significant contribution to the development of the EMS system in Loudoun County.
- **Criteria:** The nominee is not required to be a member of the LC-CFRS.
- **Nomination:** This annual award is sponsored by the Loudoun County Emergency Medical Service Council, Inc. It is a closed invitation process in which the former recipients choose the next recipient. The award recipient shall be forwarded to the Nomination Review Committee.
- **Recognition:** Annual Award. The recipient(s) will receive a commendation bar lapel pin, and plaque.

#### A3. Distinguished Service Award

- **Description:** Recognizes system member's exemplary performance and service either of an operational or administrative nature who has increased their unit, division or department efficiency or effectiveness.
- **Criteria:** Nominee is any member(s) of the LC-CFRS. This performance can occur on an emergency incident(s) or in a non-emergency function such as training, administration, education, prevention, public, and community service.
- **Nomination:** This award is nominated by any member of the LC-CFRS. The Nomination Review Committee will make its recommendation to the System Chief.
- **Recognition:** Ongoing Award. The recipient(s) will receive a certificate from the System Chief.

**A4. EMS Provider of the Year**

- **Description:** This award honors an EMS provider of the system who exemplifies outstanding performance in the day-to-day performance of their duties, and their outstanding service and dedication, which are keeping with the highest traditions of the fire and rescue system.
- **Criteria:** Nominee must be an affiliated EMS operational member of the LC-CFRS.
- **Nomination:** This award is nominated by any member of the LC-CFRS. The Nomination Review Committee will make its recommendation to the System Chief on an annual basis.
- **Recognition:** Annual Award. The recipient(s) will receive a certificate and commendation bar from the System Chief.

**A5. Fire Instructor Award**

- **Description:** This award is sponsored by the Fire Operations Committee (FOC) and the LCFR Training Division. It recognizes a fire instructor for their dedication and commitment in fire suppression training. Nominee's activities must include contributions to the fire training process for all system members.
- **Criteria:** The nominee is not required to be a member of the LC-CFRS. He/She must provide fire training for one or more of the LC-CFRS agencies or The Oliver Robert Dubé Fire and Rescue Training Academy.
- **Nomination:** This annual award is nominated by any member of the LC-CFRS. The recipient will be chosen by the Fire Operations Committee (FOC) and LCFR training representatives. The award recipient shall be forwarded to the Nomination Review Committee.
- **Recognition:** Annual Award. The recipient(s) will receive a certificate and plaque from the System Chief and include their name and position/rank engraved on a perpetual plaque.

**A6. Firefighter of the Year**

- **Description:** This award honors a uniformed member of the system who exemplifies outstanding performance in the day-to-day performance of their duties and their outstanding service and dedication, which are keeping with the highest traditions of the fire and rescue system.
- **Criteria:** Nominee must be a uniformed firefighter or technician operational member of the LC-CFRS.
- **Nomination:** This award is nominated by any member of the LC-CFRS. The Nomination Review Committee will make its recommendation to the System Chief on an annual basis.

- **Recognition:** Annual Award. The recipient(s) will receive a certificate and commendation bar from the System Chief.

#### **A7. Hall of Fame Award**

- **Description:** This award is sponsored by the Fire Operations Committee (FOC) and EMS Operations Committee (EMSOC). It recognizes system members for fire, EMS or direct contributors for outstanding achievement for their many years of service and/or outstanding contributions furthering the advancement of the fire and EMS service in Loudoun County. Nominees must show activities to include contributions to the County as a whole and not to a specific station. Nominees may be recognized for achievement, humanitarian and lifesaving actions.
- **Criteria:** Nominee is any member of the LC-CFRS. All nominees must have a minimum of 20 years of service or contribution in Loudoun County to be eligible.
- **Nomination:** This award is nominated by any member of the LC-CFRS. The recipient will be chosen by the FOC and EMSOC committee. The award recipient shall be forwarded to the Nomination Review Committee
- **Recognition:** Annual Award. The recipient(s) will receive a commendation bar, lapel pin and plaque.

#### **A8. John C. Carr, Jr. Memorial Award**

- **Description:** The award is sponsored by the Fire Operations Committee (FOC). It recognizes those who have been a member of the LC-CFRS for a minimum of five years and have displayed outstanding leadership and achievements during their service.
- **Criteria:** Nominee must be a member of the LC-CFRS for greater than 5 years.
- **Nomination:** This annual award is a closed invitation process in which the former recipient(s) choose the next recipient(s). The award recipient shall be forwarded to the Nomination Review Committee.
- **Recognition:** Annual Award. The recipient(s) will receive a commendation bar, lapel pin and plaque.

#### **A9. Meritorious Service Award**

- **Description:** Previously the LC-CFRS Lifesaving Award. This award recognizes a member or members of the LC-CFRS for conspicuous gallantry and bravery at the risk of life, above and beyond the call of duty, in action involving either fire ground operations or emergency medical services, or under extreme emergency circumstances that directly resulted in the saving of a human life.
- **Criteria:** Nominee is any member of the LC-CFRS, administrative or operational. Lifesaving action may occur on or off duty.
- **Nomination:** This award is nominated by any member of the LC-CFRS. The

Nomination Review Committee will make its recommendation to the System Chief on an annual basis.

- **Recognition:** Annual Award. The recipient(s) will receive a certificate, commendation bar and medal from the System Chief.

#### **A10. Officer of the Year**

- **Description:** This award honors an officer of the system who exemplifies outstanding performance in the day-to-day performance of their duties, and their outstanding service and dedication, which are keeping with the highest traditions of the fire and rescue system.
- **Criteria:** Nominee must be a fire or EMS operational or administrative officer of the LC-CFRS.
- **Nomination:** This award is nominated by any member of the LC-CFRS. The Nomination Review Committee will make its recommendation to the System Chief on an annual basis.
- **Recognition:** Annual Award. The recipient(s) will receive a certificate and commendation bar from the System Chief.

#### **A11. Recruitment and Retention Award**

- **Description:** Previously the Leadership Award. This award is sponsored by the Loudoun County Recruitment and Retention Committee. It recognizes members of the LC-CFRS who have demonstrated leadership at multi-agencies or County-wide levels and whose impact greatly influenced newer members of the system.
- **Criteria:** Nominee must be a past or present member of the LC-CFRS.
- **Nomination:** This annual award is selected by a panel of representatives from the LC-CFRS Recruitment and Retention Committee and LCFR personnel. The nominee shall be forwarded to the Nomination Review Committee on an annual basis.
- **Recognition:** Annual Award. The recipient(s) will receive a certificate and plaque and include their name and position/rank engraved on a perpetual plaque.

#### **A12. Leo C. Kelly ALS Instructor Award**

- **Description:** This award is sponsored by the Loudoun County Emergency Medical Services Council, Inc. with input from the LCFR Training Division. It recognizes an ALS instructor for their dedication and commitment to EMS training including contributions to the training process and program(s).
- **Criteria:** The nominee is not required to be a member of the LC-CFRS. The nominee must provide ALS training at one or more of the combined system agencies, Loudoun County Emergency Medical Services Council, Inc. member agencies or Oliver Robert "O.R." Dubé Fire and Rescue Training Academy.

- **Nomination:** This award is nominated by any member of the LC-CFRS. The recipient will be chosen by the Loudoun County Emergency Medical Services Council, Inc. with input from the LCFR training representatives. The award recipient shall be forwarded to the Nomination Review Committee.
- **Recognition:** Annual Award. The recipient(s) will receive a plaque and lapel pin from the System Chief.

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**A13. Robert “Hap” Arnold BLS Instructor Award**

- **Description:** This award is sponsored by the Loudoun County Emergency Medical Services Council, Inc. with input from the LCFR Training Division. It recognizes a BLS instructor for their dedication and commitment in EMS training including contributions to the training process and program(s).
- **Criteria:** The nominee is not required to be a member of the LC-CFRS. The nominee must provide ALS training at one or more of the combined system agencies, Loudoun County Emergency Medical Services Council, Inc. member agencies, or the Oliver Robert “O.R.” Dubé Fire and Rescue Training Academy.
- **Nomination:** This award is nominated by any member of the LC-CFRS. The recipient will be chosen by the Loudoun County Emergency Medical Services Council, Inc. with input from the LCFR training representatives. The award recipient shall be forwarded to the Nomination Review Committee.
- **Recognition:** Annual Award. The recipient(s) will receive a plaque and lapel pin from the System Chief.

**A14. System Chief’s Commendation**

- **Description:** Recognizes a system member who has distinguished themselves by exceptional service and performance during a single act of merit. This award recognizes system member(s) who displayed critical decision-making abilities or engaged in similarly noteworthy actions that contributed to the successful outcome of an incident or project.
- **Criteria:** Nominee is any member of the LC-CFRS
- **Nomination:** This award is nominated by any member of the LC-CFRS. The Nomination Review Committee will make its recommendation to the System Chief on an annual basis. The System Chief or his/her designee will make the ultimate decision of who is the recipient of this award.
- **Recognition:** Annual Award. The recipient(s) will receive a certificate, commendation bar and medal from the System Chief.

**A15. System Recognition Award**

- **Description:** This award recognizes persons who have made significant contributions to the progress of the LC-CFRS. The nominee’s activities must include contributions or actions to promote the efforts of the fire and rescue system as well as actions, which influence or enhance the efficiency of the system.
- **Criteria:** The nominee is not required to be a member of the LC-CFRS.
- **Nomination:** Anyone inside or outside of the LC-CFRS can submit a nomination. The Nomination Review Committee will make its recommendation to the System Chief on an annual basis.
- **Recognition:** Annual Award. The recipient(s) will receive a certificate and plaque from

the System Chief.

#### **A16. Team Performance Award**

- **Description:** This award is intended to recognize members for administrative or non-operational excellence. In special situations where functional units (work groups, sections, etc.) perform a task, special project or other non-emergency incident group activity which, while routine and a normal part of assigned duties, and while the unit's performance does not set it apart from other units with similar duties, the performance of the task(s) is identified as being a key to the successful outcome of the project.
- **Criteria:** Nominees are any members of the LC-CFRS.
- **Nomination:** This award is nominated by any supervisor/officer in the LC-CFRS. The Nomination Review Committee will make its recommendation to the System Chief.
- **Recognition:** Ongoing Award. The recipients will receive a certificate mounted in a plaque with the individual team member's names inscribed on it. The award will be provided by the appropriate chief officer and is intended to be displayed in a prominent location at the fire station or work location. In addition, each member of the group will receive a letter of recognition.

#### **A17. Top Student (ALS, BLS and Fire School)**

- **Description:** Recognizes the top student who has excelled in all aspects of school from practical, didactic and physical training. This student stands out in the areas of attitude, dedication, motivation and intelligence.
- **Criteria:** This award is open to system members who complete ALS, BLS, or fire certification school.
- **Nomination:** The training staff will maintain this award and determine each recipient.
- **Recognition:** Presented at the end of each EMS or fire school during graduation, the recipient(s) will receive a certificate and commendation bar from the training staff.

#### **A18. Unit Citation Award**

- **Description:** This award is intended to recognize a functional unit that performs in a superior manner on the scene of an emergency incident. The unit must display outstanding execution of duties and performance as to set it apart from other units with similar duties.
- **Criteria:** Nominee is any member of the LC-CFRS.
- **Nomination:** This award is nominated by any member of the LC-CFRS. The Nomination Review Committee will make its recommendation to the System Chief.
- **Recognition:** Ongoing Award. The recipients will receive a certificate mounted in a plaque with the individual team member's names inscribed on it. The award will be provided by the appropriate chief officer and is intended to be displayed in a prominent location at the fire and/or rescue station or other work location. In addition, each member of the group will receive a unit citation certificate.

## **B. Specialty Service Recognition**

*The managers (person providing oversight or leading the program) of the following specialty programs will award those who qualify to receive a bar. These are available to all System personnel who meet the criteria.*

### **B1. ALS-Intermediate Service Medal**

Must hold an Intermediate level of certification for two years and have completed a preceptorship in Loudoun County. This specialty bar may only be displayed on the Class A, B or C uniform. Employees must forfeit wearing this specialty bar once they are no longer a certified EMT-I. The Battalion Chief of EMS or designee will maintain and disseminate this bar.

### **B2. ALS-Paramedic Service Medal**

Must hold a Paramedic level of certification for two years and have completed a preceptorship in Loudoun County. This specialty bar may only be displayed on the Class A, B or C uniform. Employees must forfeit wearing their EMT-I bar once the level of EMT-P has been obtained. Employees must forfeit wearing this specialty bar once they are no longer a certified EMT-P. The Battalion Chief of EMS or designee will maintain and disseminate this bar.

### **B3. Hazmat Technician (I)**

Must have completed Hazmat Technician level of certification and be an active member of the Hazardous Materials Response Team. This specialty bar may only be displayed on the Class A, B or C uniform as long as the employee's Hazmat Technician certification is up-to-date and the employee is an active member of the response team. The Hazmat Technician response team consists of anyone with an up-to-date Hazmat Technician certification who is able to be utilized in an operational role and is able to contribute during an emergency incident. The Hazardous Materials Team Leader or designee will maintain and disseminate this bar.

### **B4. Hazmat Technician (II)**

Must have completed Hazmat Specialist level of certification and be an active member of the Hazardous Materials Response Team. This specialty bar may only be displayed on the Class A, B or C uniform as long as the employee's Hazmat Technician certification is up-to-date and the employee is an active member of the response team. The Hazmat Technician response team consists of anyone with an up-to-date Hazmat Technician certification who is able to be utilized in an operational role and is able to contribute during an emergency

incident. The Hazardous Materials Team Leader or designee will maintain and disseminate this bar.

#### **B5. Honor Guard**

Must be an active member of the Honor Guard. This specialty bar may only be displayed on the Class A, B, or C uniform. System members must forfeit wearing this specialty bar once they are no longer an active member of the Honor Guard. The head of the Honor Guard team or designee will maintain and disseminate this bar.

#### **B6. Swift Water Technician**

Must have completed Swift Water Technician, Ice Rescue Technician and the Loudoun County Emergency Boat Operator courses. This specialty bar may only be displayed on the Class A, B or C uniform as long as the employee's previously mentioned certifications are up-to-date and the employee is an active member of the response team. The Swift Water response team consists of anyone with an up-to-date Swift Water Technician, Ice Rescue Technician and Loudoun County Emergency Boat Operator certifications who is able to be utilized in an operational role and is able to contribute during an emergency incident. The head of the Swift Water program or designee will maintain and disseminate this bar.

### **C. Program Completion Recognition**

#### **C1. Chief EMS Officer**

Through the Center for Public Safety Excellence (CPSE), the Chief EMS Officer (CEMSO) Designation Program recognizes emergency medical services leaders of fire, private, hospital and third-service providers who have demonstrated excellence throughout their careers. The designation verifies past accomplishments and represents a launching point for continued achievement. The CPSE maintains and disseminates this bar.

#### **C2. Chief Fire Officer**

Through the Center for Public Safety Excellence (CPSE), the Chief Fire Officer (CFO) Designation Program was created to recognize fire officers who have demonstrated excellence and outstanding achievement throughout their career. The designation demonstrates that individuals have developed a strategy for continued career improvement and development. The highly competitive CFO designation assures departments that their leaders have the educational and technical competencies necessary to meet the demands of today's society. The CPSE maintains and disseminates this bar.

#### **C3. Chief Training Officer**

Through the Center for Public Safety Excellence (CPSE), the Chief Training Officer (CTO) recognizes administrators of training and educational programs in emergency services who

have demonstrated excellence and outstanding achievement throughout their career. The process also assesses what contributions to the emergency services field the Chief Training Officer has made in the way of professional articles, public speaking, teaching and research as well as professional memberships and community and civic involvement. The CPSE maintains and disseminates this bar.

#### **C4. Executive Fire Officer**

The National Fire Academy's (NFA) Executive Fire Officer Program (EFOP) provides senior fire officers with a broad perspective on various facets of fire and emergency services administration. The courses and accompanying research examine how to exercise leadership when dealing with difficult or unique problems within communities. The NFA maintains and disseminates this bar.

#### **C5. Fire Marshal**

Through the Center for Public Safety Excellence (CPSE), the Fire Marshal (FM) Designation Program recognizes fire prevention leaders who have demonstrated excellence and outstanding achievement throughout their career. The program also assesses contributions to the fire prevention field in the way of professional articles, public speaking, teaching and research as well as professional memberships and community and civic involvement. The CPSE maintains and disseminates this bar.

#### **C6. Fire Officer**

Through the Center for Public Safety Excellence (CPSE), the Fire Officer (FO) Designation is open to all company level officers, junior officers and above who have supervisory responsibilities or those who have served in an intermittent acting status for a minimum of twelve months. The CPSE maintains and disseminates this bar.

#### **C7. National Honor Guard Academy**

Recognizes personnel who have completed the National Honor Guard Academy (NHGA). The NHGA specializes in providing honor guard training to firefighters, police officers, and EMS personnel. The NHGA maintains and disseminates this pin.

#### **C8. Officer Command School**

Recognizes personnel who have completed all requirements of the Loudoun County Fire and Rescue (LCFR) Command School. The Battalion Chief of LCFR Human Resources maintains and disseminates this bar.

#### **C9. Officer Development School**

Recognizes personnel who have completed all requirements of the Loudoun County Fire and Rescue (LCFR) Officer Development School. The Battalion Chief of LCFR Human Resources maintains and disseminates this bar.

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## **D. Valor Awards**

### **Chamber of Commerce Valor Awards**

These awards are sponsored and recipients are chosen by the Loudoun County Chamber of Commerce. These awards honor local heroes, from Public Safety personnel to ordinary citizens, for their courageous, often lifesaving actions. The entire Loudoun County business community is invited to attend these annual award ceremonies often held in April to help honor these dedicated public servants for their selfless acts of heroism and commitment to protecting our families, our neighbors and our community.

The Chamber of Commerce valor awards are selected by their Valor Awards Selection Committee each January. The System Chief will decide the LCFR representative. The Chamber of Commerce committee will review the nominations submitted and determine the degree of risk and proper classification of the award to be presented. This procedure applies to all system members whether they were on or off duty. The nominated acts of valor must have occurred between January 1<sup>st</sup> and December 31<sup>st</sup> of the prior year. Nominations are to be received by the date, which is announced each year and submitted on the *Chamber of Commerce Valor Awards Nomination Form*. Members may be nominated for the following valor awards based upon varying criteria (*subject to change by the Chamber of Commerce*):

#### **D1. Gold Medal of Valor**

This highest award is in recognition of an act involving the supreme sacrifice or extreme personal risk and heroism, which is clearly above and beyond the call of duty. The recipient will receive a medal, bar, and plaque.

#### **D2. Silver Medal of Valor**

This second highest award is in recognition of an act involving the significant personal risk and bravery beyond that which is expected during the performance of duty. The recipient will receive a medal, bar, and plaque.

#### **D3. Bronze Medal of Valor**

This third highest award is in recognition of acts involving personal risk and demonstrating unusual judgment, zeal and/or ingenuity during an emergency situation, when such action is beyond that normally expected in the performance of duty. The recipient will receive a medal, bar, and plaque.

#### **D4. Lifesaving Award**

Recognition of actions not normally involved in the performance of duties by an individual, which directly result in the saving of a human life. The recipient will receive a medal, bar, and plaque. This award may be presented to a civilian.

**D5. Certificate of Valor**

This award recognizes acts demonstrating unusual judgment, zeal or ingenuity not normally involved in the performance of duties. The recipient will receive a bar and a framed certificate.

**D6. Meritorious Service Award**

No longer awarded, however, previous recipients may still wear on appropriate uniform. It was awarded for sustained exemplary performance within the scope of normal responsibilities, but performed in such a manner as to deserve recognition.

**D7. Meritorious Civilian Award**

Recognition of everyday citizens for their extraordinary acts of courage in emergency situations.

**D8. Unit Citation**

This award provides recognition of acts by a unit/division/company demonstrating unusual judgment, ingenuity and/or personal risk and bravery during an emergency situation, with such actions beyond those only expected in the performance of duty.

To nominate a member for a valor award, the following must be completed:

- a. The official *Chamber of Commerce Valor Awards Nomination Form* is available to all system members at the following link [-Valor Nominations](#).
- b. Nomination forms must be properly (and fully) completed. In addition to the nomination form, other supporting documentation (newspaper clippings, official records, video footage, and photographs of the incident) should be included.
- c. In order for the selection committee to determine significance of the nomination, please take sufficient time to create a very detailed description of the incident. The narrative should include, but not be limited to the following: summary of the specific act (what the person did to deserve recognition), date of the act, time of day of the act, location of the incident, other participants in the act, persons given aid, injuries to the nominee, equipment used at the scene, equipment used by the nominee, the specific dangers encountered, the nominee's specific actions, describe the incident scene (including hazards, point of rescue, weather conditions, etc.), and other recognition already received by nominee.
- d. Nomination forms submitted from system personnel must be signed by the nominator and their Battalion Chief then submitted through the chain-of-command to

the System Chief. A copy should be sent to the Deputy Chief of Operations or directly to the Chamber of Commerce, Valor Awards Selection Committee.

e. A recent photograph, provided by the department, of the nominee(s) and/or group will be requested for all award winners.

## **E. Agency Specific Awards (Not all inclusive)**

### **E1. Alex Keepers Award**

- **Description:** Recognizes a Loudoun County Fire and Rescue (LCFR) career recruit who has shown the most improvement in academics, physical standards and knowledge of the Loudoun County Department of Fire, Rescue, and Emergency Management core values between the first day of recruit school and class graduation. This recruit also personifies the values of Recruit Training and the attitude to never give up.
- **Criteria:** This award is open to LCFR personnel only.
- **Nomination:** This award is nominated by LCFR training staff and presented at the end of each recruit school.
- **Recognition:** The recipient(s) will receive a certificate and lapel pin from the System Chief.

### **E2. Baby Delivery (Also known as Stork Award)**

- **Description:** Recognizes a system member for a field delivery of a baby on an EMS incident or through emergency medical dispatch pre-arrival instructions. Only the personnel that are directly involved with delivery of the baby (delivery, suctioning, warming, and stimulating, and/or pre-arrival instructions) receive the award.
- **Criteria:** Each agency and/or division will develop its internal criteria for the receipt of this award.
- **Nomination:** Each agency and/or division will develop its own nomination method.
- **Recognition:** The recipient(s) will receive a commendation bar or pin from their respective agencies and/or division. Personnel who have received multiples of this award may receive a numeric pin at specific intervals (i.e. 5, 10, etc.). This will reflect the appropriate number of previous awards.

### **E3. Top Recruit**

- **Description:** This award recognizes the top LCFR recruit who has excelled in all aspects of recruit school to include fire and EMS school from practical, didactic and physical training. This recruit stands out in the areas of attitude, dedication, motivation and intelligence.
- **Criteria:** This award is open to system members who complete LCFR recruit school.

- **Nomination:** The training staff will maintain this award and determine each recipient.
- **Recognition:** Presented at the end of each recruit class, the recipient(s) will receive a certificate and commendation bar from the training staff.










#### **E4. CPR-Life Saving Award (Also known as Walking Heart Award)**

- **Description:** Recognizes a system member who provided direct patient care on a cardiac arrest where the patient recovers to the point when they are discharged from hospital care (or other defined criteria). Only the personnel that are directly involved with patient care (performed CPR, ventilations, defibrillation, medication administration, and/or pre-arrival instructions, etc.) receive the award.
- **Criteria:** Each agency and/or division will develop its internal criteria for the receipt of this award.
- **Nomination:** Each agency and/or division will develop its own nomination method.
- **Recognition:** The recipient(s) will receive a commendation bar or pin from their respective agencies and/or division. Personnel who have received multiples of this award may receive a numeric pin at specific intervals (i.e. 5, 10, etc.). This will reflect the appropriate number of previous awards.

#### **E5. Service Year Awards**







Each agency may recognize their personnel for service milestones. Service milestones for County employees are typically recognized in the fall of each year. Volunteer agencies may recognize their members governed by their own policies. Typically, volunteer members are recognized at agency installation banquets in the beginning of the year.

## Achievement Awards








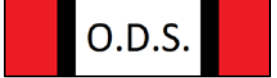

<b>Clark J. Deener Memorial Award</b>	
<b>EMS Provider of the Year</b>	TBD
<b>Firefighter of the Year</b>	
<b>Hall of Fame Award</b>	
<b>John C. Carr, Jr. Memorial Award</b>	
<b>Meritorious Service Award</b>	TBD
<b>Officer of the Year</b>	
<b>Robert Hap Arnold ALS Instructor Award</b>	
<b>Robert Hap Arnold BLS Instructor Award</b>	
<b>System Chief's Commendation</b>	
<b>Top Student – ALS</b>	
<b>Top Student – BLS</b>	

<b>Top Student – Volunteer Fire School</b>	



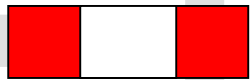

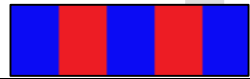

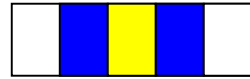
## Specialty Service Recognition

<b>EMT-Intermediate Service Medal</b>	 The EMT-I Service Medal is a rectangular badge with a blue background and a yellow border. It features a yellow Star of Life on the left and the text "EMT-I" in yellow on the right.
<b>EMT-Paramedic Service Medal</b>	 The EMT-P Service Medal is a rectangular badge with a white background and a yellow border. It features a blue Star of Life on the left, the text "EMT-P" in blue in the center, and a yellow ECG line on the right.
<b>Hazmat Specialist</b>	 The Hazmat Specialist Service Medal is a rectangular badge with a yellow background and a yellow border. It features a red diamond in the center, flanked by a red square on the left and a blue square on the right.
<b>Hazmat Technician</b>	 The Hazmat Technician Service Medal is a rectangular badge with a blue background and a yellow border. It features the text "HAZ/MAT" in yellow in the center.
<b>Honor Guard</b>	 The Honor Guard Service Medal is a rectangular badge with a blue background and a yellow border. It features the text "HONOR GUARD" in yellow in the center.
<b>Swift Water Technician</b>	 The Swift Water Technician Service Medal is a rectangular badge with a blue background and a yellow border. It features the text "SWT" in yellow in the center.

## Program Completion Recognition



<b>Chief EMS Officer</b>	
<b>Chief Fire Officer</b>	
<b>Chief Training Officer</b>	
<b>Executive Fire Officer</b>	
<b>Fire Marshall</b>	
<b>Fire Officer</b>	
<b>Officer Command School</b>	
<b>Officer Development School</b>	
<b>National Honor Guard Academy</b>	

## Chamber of Commerce's Valor Awards

<b>Gold Medal</b>	
<b>Silver Medal</b>	
<b>Bronze Medal</b>	
<b>Lifesaving Award</b>	
<b>Certificate of Valor</b>	
<b>Meritorious Service Award</b>	No longer awarded 
<b>Unit Citation</b>	

## Agency Specific Awards/Recognition

<b>LCFR Stork Award</b>	
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LCFR Top Recruit	
LCFR Walking Heart Award	

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