

**Vermillion/Clay County
Emergency Medical Services**

**Personnel
Manual**

&

**Standard
Operating
Procedures**

**VERMILLION/CLAY COUNTY AMBULANCE
DEPARTMENTAL PERSONNEL MANUAL**

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UPDATED **AUGUST 2011**

NOTE: EMPLOYEES OF THE VERMILLION/CLAY COUNTY EMS DEPARTMENT ARE ALSO SUBJECT TO THE POLICIES OUTLINED IN THE CITY OF VERMILLION PERSONNEL MANUAL.

The Vermillion/Clay County Ambulance Department provides 24-hour Basic and Advanced Life Support to the residents of Vermillion and the southern sixty percent of Clay County and assists Union and Yankton Counties. The Department has three units, of which two are staffed 24 hours a day.

The Ambulance Department employs one full-time Director, one part-time billing specialist and as many as 40 part-time Emergency Medical Technicians.

The EMS Director is the administrator, personnel director, business manager and operations manager of the Ambulance Department and is a full-time employee of the City of Vermillion. The Director's immediate supervisor is the City Manager.

HIRING

Any individual who wishes to work for the Vermillion/Clay County Ambulance Department must fill out a City of Vermillion application for employment.

Requirements are:

- 18 years of age
- valid Drivers License
- good character, no felony arrests, no DUI arrests in the last five years,
- certification at EMT level or above in South Dakota or be eligible for reciprocity.
- additional requirements as included in job description (See Appendix B)

Personnel (EMTs) will be hired by the Director of the Ambulance Department. An interview with the candidate will be conducted by the Director. The Director has the option of inviting one or more Emergency Medical Technicians employed by the Ambulance Service to sit in on the interview to ask questions and offer an opinion after the interview. Hiring will be done depending on the need for EMT's.

PROBATION

All new employees go through a probationary period, the length of which will be determined by the Director. All new employees sign a probationary agreement (see Appendix A). All new employees must complete the training requirements set forth by current departmental practices. This EMT Training Program will include orientation sessions prior to taking any call time. The sessions are conducted by the Director or person appointed by the Director. Every EMT is strongly encouraged to keep a log of their impressions of calls they have been on. EMTs, during this period, will be required to ride along with Clay County Deputies and Vermillion Police officers to gain a basic orientation of the City of Vermillion and of Clay County.

DISCIPLINE

The Director of the Ambulance Department is responsible for all administrative decisions of the Vermillion/Clay County Ambulance Department. The Director, as Department Head, and the City Manager are responsible for taking any disciplinary action against an EMT. Reasons for disciplinary action include, but are not necessarily limited to: dishonesty, drunkenness, recklessness on the job, inefficiency, misconduct, unwillingness to perform adequate or quality work, fraudulently obtaining any benefits offered by the City of Vermillion, using abusive or profane language or gestures, or any other action or conduct that materially impairs the effectiveness of the Vermillion/Clay County Ambulance Department or conduct that brings the Department into disrepute.

In addition, disciplinary action may be taken for any conduct that is considered a dereliction of duty. An EMT shall be considered derelict if he/she commits any of the following infractions:

1. Refusal to respond to a page.
2. Negligently unavailable when needed (e.g. not picking up pager or not being at the phone number listed, not making sure shifts are covered when posted, etc.)
3. Negligent disregard or wanton mistreatment of patient.
4. Misrepresentation of position or uniform, (e.g. acting as a police officer or purchasing items in the name of the Director.)
5. Out of uniform while on first call without reasonable excuse.
6. Violations of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) or patient confidentiality policies or practices.
7. Unexcused or unreasonable failure to participate in mandatory training sessions.
8. Use of department property for personal activities
9. Violations of Department Policy, Protocol or Standard Operating Procedures

All EMT's may also be subject to disciplinary action for the following:

1. The commission of a criminal offense. If any EMT has been charged with a criminal offense, he or she shall be suspended from all call time until the pending case is disposed of in magistrate court or circuit court. If an individual EMT is found to be innocent of all charges, he or she then shall be reinstated. If the EMT is found guilty, he or she shall be dismissed from any further service with the Department.
2. The commission of any traffic violation. If the offense involves a class 1 Misdemeanor or the commission of a felony, the EMT will be suspended until the case is disposed of and/or his /her license has been reinstated.
3. The commission of a traffic offense while driving the ambulance. The action to be taken by the Director will be determined on a case by case basis.

DISCIPLINARY ACTION

Disciplinary action may include verbal or written warnings, suspension or termination of employment depending on the seriousness and frequency of the unacceptable behavior. When serious disciplinary action is taken, a written interpretation of the reason for the action, will be provided to the EMT by the Director. Such written notice then becomes a part of the EMT's permanent record. Further unacceptable behavior, after written warnings, may result in termination.

APPEALS

An EMT may appeal any disciplinary action by the Director to the City Manager. All decisions by the City Manager in regard to any disciplinary action taken by the Director of the Ambulance Department are final.

GRIEVANCE PROCEDURES

The purpose of the grievance procedure is to provide a just and equitable method for the resolution of grievances without discrimination, coercion, restraint, or reprisal against any fellow EMT who may submit or be involved in a grievance.

A grievance is a complaint by any EMT concerning the interpretation or application of the rules and policies of the Vermillion/Clay County Ambulance Department, or a complaint by an EMT against another EMT.

All grievances must be signed and filed in writing with the Director within three (3) days of the occurrence of the circumstances giving rise to the grievance. The Director shall submit his/her written decision on the grievance within seven (7) working days of the receipt of said grievance. All EMT's are required to cooperate with any investigation conducted by the Director in resolving a particular grievance.

All decisions made by the Director in regard to a grievance filed by an EMT may be appealed to the City Manager. The decision of the City Manager in regard to an EMT grievance shall be final.

INSURANCE

EMT personnel employed by the City of Vermillion are protected under the City's workman's compensation insurance as part-time paid employees in the Ambulance Department. This provides protection to EMT's while on an ambulance call. If an injury occurs, it must be reported to the Director immediately. Additionally, a first report of injury form must be completed within 24 hours.

All EMT's are protected under the Ambulance Department's professional liability/malpractice insurance while on a call. As EMT's you are free to get your own individual liability insurance.

TRAINING

Training for the department is conducted/coordinated by the Director. Mandatory requirements include:

- maintaining CPR certification
- continuing education in accordance with state guidelines
- training on airway equipment and AED equipment currently utilized
- training to demonstrate proficiency with all equipment

EMTs who do not get re-certified by the State prior to expiration will not be allowed to work until proof of certification is shown to the Director.

ASSOCIATION MEETINGS/INSERVICE TRAINING

Departmental policy changes, training, trip report critiques, etc., will be addressed at monthly Association meetings every second Wednesday of the month. Attendance at these meetings is mandatory. This information will also be communicated by means of the Department website.

DRILLS

In addition to the monthly meetings, drills may be called by the Director for purposes of equipment-specific training, topic-specific training or proficiency testing. **Attendance and participation in these drills are mandatory.**

QUALITY ASSURANCE/QUALITY IMPROVEMENT

In accordance with state law as a department providing ALS services, Quality Assurance/Quality Improvement meetings will be held on a regular basis. **All EMTs are encouraged to participate.** This provides an opportunity to meet with the medical director and other providers and review calls on a case-by-case basis to ensure that VCC EMS is providing patients with the highest level of pre-hospital care possible. It will be aimed at identifying training issues and developing patterns in patient care.

The purpose of meetings and trainings are to ensure we provide patients with the highest level of pre-hospital care possible and to promote professional development and equipment proficiency. Unreasonable failure to participate in these mandatory trainings and meetings will be grounds for disciplinary actions. Minimum acceptable attendance levels will be addressed by the Director.

OTHER TRAINING OPPORTUNITIES

The Department has a training budget. Anyone wishing to attend any training outside of the City, with the Department paying for it, must contact the Director for permission prior to attending the training. When attending training for the Department use of a City car is available with one week's notice to the Director. The number of EMT's that the Department will pay for may be limited depending on the Departmental budget.

LEAVE OF ABSENCE AND RESIGNATION

A LEAVE OF ABSENCE

Leaves of absence can be requested of the Director at any time. This leave of absence will last no longer than 3 months. After this period, the EMT will be required to return to his/her regular duties as an EMT. A letter needs to be written to the Director requesting leave for a specified period of time. The reason for the requested leave does not need to be stated if the person so desires. A leave of absence request may be denied by the Director depending on individual circumstances.

Medical leave of absence (i.e. injury, family leave, etc.) does not count as this 3-month leave of absence. Indefinite leave of absences are not allowed.

All EMTs who go on a leave of absence are required to turn in all equipment issued to them by the Department prior to going on leave. Equipment will be reissued when the EMT returns to active status.

RESIGNATION

A resignation from the Department is done when a person wishes to permanently leave the employment of the City. This is done, by writing a letter to the Director stating the person is resigning, and when it will take effect. A resignation letter, once accepted by the Director, cannot be taken back or changed. If a person resigns and then wishes to return, he/she must reapply for employment with the City.

PERSONAL INJURY

All injuries to personnel must be reported to the Director within 24 hours of injury. The injured party needs to fill out a personnel injury form. The form needs to be filled out immediately before or after medical treatment. The EMT will also need to fill out a worker's compensation form.

The EMT needs to be prepared to explain how the accident occurred and possibly add any suggestions as to how to prevent it from happening in the future.

PERSONNEL COMMUNICATIONS

DEPARTMENT WEBSITE

The VCC EMS website, <http://www.vermillionems.com>, is a resource used for communications between the Director and EMTs, as well as EMTs to one another. The shift calendar maintained on the website is the master shift log and EMTs are responsible for making sure adjustments to their assigned shifts are updated appropriately. The forum hosted on the website is one of the main channels of communication within the department. Additionally, the need to know section will disseminate information from the Director to EMS staff regarding equipment changes, protocol or procedure modifications, current threats or other information as necessary. **It is the EMT's responsibility to monitor this information center.**

TEXT MESSAGING/PHONE CONTACT

In both day-to-day operations and during mass-casualty situations, departmental information may be disseminated by text messaging or phone contact. **While on call, EMTs are required to have phone access.**

PERSONNEL BOX

A box located in the Communications room will have a folder with each EMT's name on it to leave notes for each other and/or the director. Any information that needs to be communicated between the EMTs and the Director will be found in this file. This box will stay in the Communications room available to the EMTs and the Director.

CALL SHIFTS

Daily call time consists of two 12-hour shifts (0700-1900 and 1900-0700) in a 24 hour period. Each of these 12-hour shifts have two staffed two-person crews. There is a 3rd person optional float position on the 1st call shift that may be filled by anyone who would like to take the 3rd person. However, new EMT's who are on probation have first chance at filling these 3rd person positions. If there aren't any new EMTs on probation, then any EMT may sign up for the 3rd person position. All first and 2nd call shifts must be filled each day.

Additional crews may be scheduled depending on necessity. A 3rd person position may be scheduled on a 2nd call shift at the discretion of the Director. (These may be used during D-Days, for example.)

Once an EMT is hired and finished with their probationary period, they can choose between becoming an "on call" or "volunteer" EMT with the department, depending on the needs of the department at the time. A volunteer EMT can sign up for shifts that are open at their convenience. An on call EMT is required to sign up and work 6 call shifts per 2 week pay period. An EMT can sign up for more than 3 shifts if they are available, and each EMT has signed up for their mandatory 3 shifts/wk. One of the 3 shifts must be a 1st call shift.

ON-CALL PERSONNEL

(SEE APPENDIX B)

1. Each On-Call EMT will be responsible for a minimum of 6 shifts per two-week pay period. The EMT will be scheduled for a minimum of 3 shifts/week (a minimum of 1 first call shift). The On-Call EMT must carry a pager for this number of shifts to maintain the On-Call pay level (this does not include third-person shifts). If the EMT continuously falls below the 6-shift minimum, he/she will be asked to work as a volunteer.
2. The On-Call EMT can work more than 6 shifts per pay period if he/she chooses, depending on availability of open shifts.
3. Each On-Call EMT will be paid \$6.00 per hour while on a call (standby, transfer, emergency, or Director's discretion –i.e. Public relations, training, etc.).
4. Holiday pay: Ambulance personnel will receive double shift pay for these holidays: Thanksgiving, Christmas, New Year's Day, Easter, Memorial Day, July 4th, Labor Day, Presidents' Day, Native American Day, and Veteran's Day. The holiday begins at 0100 the day of the holiday and ends at 0100 the following morning.
5. The On-Call EMT will choose shifts based on seniority (call shift seniority) and will be given first choice of 1st and 2nd call shifts.

COMPENSATION

	BASE	2 YRS	5 YRS	10YRS	15 YRS
<u>EMT-BASIC</u>					
First Call	\$30.00	\$30.60	\$31.21	\$31.84	\$32.47
Second Call	\$17.00	\$17.34	\$17.69	\$18.04	\$18.40
<u>EMT-INTERMEDIATE</u>					
First Call	\$35.00	\$35.70	\$36.41	\$37.14	\$37.89
Second Call	\$22.00	\$22.44	\$22.89	\$23.35	\$23.81

The above rates are shift pay rates for On-Call Personnel. Each EMT will be paid \$6.00 per hour while on a call. Volunteer personnel and EMTs riding as third person will be paid \$6.00 per shift and \$6.00 per hour while on a call. EMTs riding as third person will also be eligible for holiday pay. This includes double shift pay for

these holidays: Thanksgiving, Christmas, New Year's Day, Easter, Memorial Day, July 4th, Labor Day, Presidents' Day, Native American Day, and Veteran's Day. The holiday begins at 0100 the day of the holiday and ends at 0100 the following morning. The \$6.00/ hour rate begins at the time the crew is paged and ends when the call has been completed, all necessary paperwork has been filed, and the ambulance has been cleaned and restocked.

VOLUNTEER PERSONNEL

(SEE APPENDIX B)

1. Ambulance personnel to be paid for 12-hour shifts.
2. Each volunteer EMT will receive \$6.00 per 12-hour shift and \$6.00 per hour while on a call (standby, transfer, emergency, or Director's discretion –i.e. Public relations, training, etc.).
3. Holiday pay: Ambulance personnel will receive double shift pay for these holidays: Thanksgiving, Christmas, New Year's Day, Easter, Memorial Day, July 4th, Labor Day, Presidents' Day, Native American Day, and Veteran's Day. The holiday begins at 01:00 the day of the holiday and ends at 01:00 the following morning.
4. Can sign up for shifts after On-Call personnel have chosen their shifts.
5. Can be scheduled if they choose.
6. Will not receive On-Call pay if they work more than 6 shifts in a pay period.

THIRD PERSON ("FLOAT")

1. A flexible shift used to add another person to the first call shift.
2. On-Call and volunteer personnel can sign up for this shift at random provided all four positions on first and second call are filled. This does not apply to personnel on probationary status (new hires). Probationary status personnel can sign up for these positions at any time.
3. This person is an EMT to call when an EMT on first or second call needs time off. This also does not apply to personnel with probationary status without Director approval.
4. This is a shift not mandated to fill.
5. If you are signed up for the third person spot, it is your responsibility to notify the EMTs on first call that there is a 3rd person and you must respond to calls or you will not get credit for the shift.
6. If you are signed up for the third person spot, it is your responsibility to notify the EMTs on first call if you are not going to be on call.

Each EMT may be required to take scheduled weekend shifts if the shifts are not filled on the schedule. The EMT can be scheduled for one 1st call and one 2nd call shift each week. Other shifts the EMT takes are determined on the availability of shifts, and each individual's schedule.

If an EMT signs up for a shift, it is his or her responsibility to find a replacement for that shift. It is also each EMT's responsibility (not the Director's) to find replacements for scheduled weekend shifts. If the said individual is unable to find someone to cover his or her weekend shift, they must work those shifts in question.

FIELD TRAINING OFFICERS

Field Training Officer (FTO) positions will be available on an as-needed basis. FTOs will perform duties as described in their primary job description, whether on-call or volunteer. In addition, they will be expected to provide guidance to probationary EMTs and complete observation reports of probationary EMT calls on which they were involved. Their role in training will be fluid, dependent upon current needs and EMT Training Program Design. In addition to probationary EMT training duties, FTOs will be responsible for reviewing call run reports as assigned by the Director for purposes of Quality Assurance/Quality Improvement. In addition, FTOs may be called upon to act as training officers during drills or trainings.

ON-CALL RESTRICTIONS & GUIDELINES

EMTs on first call must stay within the boundaries of the City of Vermillion and have the ability to respond to the Fire/EMS station within 7 minutes at all times. All personnel must be of sound mind and body before taking call time. No mind-altering substances/alcohol are allowed 8 hours prior to being on call or while on call. This includes the use/abuse of prescription narcotics (i.e. morphine, Demerol, codeine, Dilaudid), amphetamines (i.e. Dexadrine, Ritalin), stimulants (i.e. Valium, Xanax), or barbituates (i.e. Phenobarbital, Nebutal). This, however, does not include the on-going therapeutic use of prescription medications for specific medical disorders (i.e. Phenobarbital for seizure disorder).

EMTs will not go into a bar or liquor store with a uniform on whether or not they are on call. EMTs may go in restaurants that serve alcohol to have a meal. While EMTs are on call they will behave in a professional manner. EMTs should also not purchase alcohol when wearing department clothing (shirt, coat, etc.) The behavior of the EMT directly reflects on fellow EMTs as well as the Ambulance Department/City of Vermillion.

Personnel should be physically able to take call (refrain from call during illness or injury). **All personnel becoming ill or injured prior to or during a scheduled shift should contact the Director. If the Director is not available, notify FC1 or the person who has been assigned by the Director. Each EMT is responsible to find someone to cover the available shift if at all possible.**

When 1st and 2nd call are paged at the same time, 2nd call should proceed to the station as safely and quickly as possible. If you are on 2nd call and in the outlying areas of Vermillion, you should not be concerned with getting to the station the same time as the 1st call crew.

When EMTs are on-call they must maintain excellent personal hygiene (hair clean, beards and mustaches trimmed neatly, good oral hygiene) clean uniforms, appropriate earrings and other jewelry. Jewelry and piercings which could cause safety issues must be removed while an EMT is on-call. In essence, look like a professional.

DEPARTMENT-ISSUED EQUIPMENT

The Ambulance Department supplies EMT's with shirts, winter coats, a pager, and an access code to the Fire/EMS station. Other equipment may be issued depending upon availability and necessity. Any equipment issued to an EMT must be turned in when the EMT leaves the service of the Ambulance Department. If equipment is not turned in the EMT will be billed for the replacement cost of the equipment. Leaving the service includes resignation, leave of absence for any reason, suspension or termination.

CONFIDENTIALITY

Patient confidentiality is VERY important. Calls may be discussed with other EMT's related to patient care. If you are discussing a call, be aware of who else is around. When people/friends ask about calls explain that you can't discuss it. Ambulance personnel will sign a Confidentiality Policy upon being hired by the department. Call can be discussed with other EMTs for training purposes only (see Appendix C). Police/Sheriff personnel can be given information about calls through the Director.

HEPATITIS B VACCINE

All Vermillion/Clay Co. Ambulance personnel must be given the opportunity to have the Hepatitis B vaccine series in order to work on the service. Personnel are not, however, required to have the vaccinations if they choose not to. If you wish to receive the vaccination series, it must be obtained at the Clay County Court House from the Public Health Nurse.

PERFORMANCE EVALUATIONS

The Director shall, at least annually, sit down with each employee and conduct a performance evaluation of the employee's work habit and job performance. The evaluation should be a discussion of the employee's good points as well as areas in need of improvement. The purpose of the evaluation is to provide the employee with a record of his/her performance, to encourage professional growth, to promote communication between the Director and the employee, to commend strengths, address weaknesses, suggest ways to improve, and discuss employee goals and objectives. The completed evaluation will be signed by the employee and Director, with one copy given to the employee, and one copy filed with the City Manager's office.

DIRECTOR'S ABSENCE

When the Director is going to be out of town for a period of time, FC1 will be in charge of operations (i.e. scheduling conflicts, personnel issues, mechanical problems). When FC1 is not available, the Director will assign someone who will be available.

PAGERS

Pagers are issued to each EMT on their first day of hire. Each EMT is responsible for the upkeep of their pager. The pager must be returned to the Director when the EMT resigns or is on a leave of absence. If pager shortages exist, there may be a need to share pagers between EMTs. Upon resignation or termination, the pager must be turned in immediately or the EMT will be billed for that pager.

Pagers are an important part of being on call. They are also expensive items. If a pager malfunctions notify the Director immediately after the malfunction is found. Do not try to fix it yourself. EMT's may be on phone page only when absolutely necessary (i.e. pager malfunction). When on phone page it is necessary to maintain an open line at all times. Notify the Director if this situation manifests.

CREW COMPOSITION

Crews are made up of two certified EMT attendants (first call also has 3rd person) for first and second call. Attendants are EMT's who have completed the EMT class and have passed the testing adherent to the State of South Dakota requirements, have been hired by the City to staff the Vermillion/Clay County EMS Department, and must have a valid drivers license in the state of South Dakota. Vermillion Police, Clay County deputies, and Vermillion volunteer firefighters will be allowed to drive the ambulance from a scene to the hospital when all crew members are taking care of patients.

In addition to EMTs, other healthcare professionals may be involved on calls, specifically interfacility transfers. Involvement of any healthcare provider not associated with VCC EMS or Sanford-Vermillion Hospital is not allowed.

FIRST CALL

The first call crew is the first response unit and is made up of two EMT's. While on first call EMT's will be in uniform. Uniform is as follows:

Shirt: navy blue shirt with Vermillion/Clay Co. EMS logo over left breast (standard issue).
Slacks: navy blue or black (BLACK/BLUE JEANS ARE NOT ALLOWED).
Shoes: leather (for your protection) black, dark brown or navy (may be black leather tennis shoes).
Coats: are provided by the Department (winter). Departmental coats can be worn at any time, but EMTs are to remember that they are representing the City of Vermillion as well as the Vermillion/Clay County EMS Department.
Windshirt: blue with embroidered VCC EMS logo.

Shorts: may be worn during the summer time. They must be navy blue or black uniform style shorts. If you choose to wear shorts, please have your jumpsuit available for possible hazardous calls.

Uniform and coats must be in good repair and clean (everything is machine washable) at all times, exceptions between calls on the same shift within reasonable time period. Uniforms must be turned in upon resignation or termination.

SECOND CALL

The second call crew is the second unit and has two certified EMTs. Second call gets called out only when first call is already out on a call. Personnel on second call should be prepared, in the event they are called out (coat, or uniform available). The EMT may wear jeans or slacks that are not uniform issue. EMT's must also be wearing appropriate shoes (no sandals, thongs, etc). All policies pertaining to first call apply to second call except for being in uniform when on call.

THIRD & SUBSEQUENT CALLS

Third call is set up in emergency situations when both first and second call are already dispatched to other emergencies, or in a disaster. The procedure used for setting up third call is: the dispatcher will send out a page or begin calling EMT's from the roster. Third call staffing requires a minimum of two EMT's.

TRIP REPORTS

A trip report must be filled out and signed by the entire crew for each patient that is transported. Crew members should always read the trip report before signing it, if they do not agree with what the trip report says, the crew should discuss the point of disagreement, come to an agreement and put it on the Trip Report. Only one trip report is needed when a patient is taken to another hospital and brought back right away, (e.g. CT-scan to Sacred Heart and back to Sanford-Vermillion Hospital.)

Trip reports are legal documents and must be filled out in blue or black ink (no pencils). A trip may not be changed or added to after the report has been signed by the entire crew, unless, the entire crew has been consulted on the addition/changes. Completeness and accuracy are a necessity.

A trip report must also be filled out for all runs (cancelled calls, deceased patient, no transport, standbys, etc.) or anytime the ambulance leaves the station on a call, even if the call is cancelled en route. If a patient refuses treatment, they must sign transport refusal line on the trip report after it is explained to the patient the consequences to his/her health if not transported by ambulance.

Standby reports must be filled out for all standbys. **Reports must be completed for all call-outs.**

All reports must include mileage, times, signature of the crew, face sheet from the hospital, signatures from nurses, patient (or patient family), and Physician Statement of Necessity if run was a transfer. All reports must be entered, in their entirety, into the computer-based reporting software utilized by the department.

CALL CRITIQUE

At the end of each call the crew should talk about the call, discussing if things could have been done differently, if each person did their job to the best of their ability, if communications between the crew during the call could have been conducted differently, if an EMT is unfamiliar with a particular piece of equipment, etc. This is meant as a form of learning for each EMT and to help the crew function more efficiently and effectively.

Important findings or training issues should be reported to the Director for review. Issues pertaining to patient care or provider competency should also be reported to the Director for individual review or to be discussed at QA/QI.

COMPLETED CALLS

When a crew is paged-out for a transfer, stand-by, emergency, or public assist; the crew is to remain on that call until it is completed (No “call jumping”). The next ambulance crew that is available (i.e. first, second, or third call-if available) will be paged-out to handle any calls occurring within this time frame. A crew is not available until they notify dispatch they are available, and are paged back into service.

Examples of a completed call:

Stand-by—sporting event stand-by is complete when the game is over and all spectators have vacated the premises. Fire stand-by is complete when the Fire Chief (FC1, FC2, FC3, FC4) has cleared the ambulance crew. **Ambulance is cleaned/restocked/refueled, reports filed.**

Emergency—emergency calls are complete when the patient care has been transferred to an individual of equal or higher training (i.e. nurse, paramedic) at the hospital or to another ambulance service and paperwork has been finished. **Ambulance cleaned/restocked/refueled, reports filed.**

Transfer—transfers are complete when the crew has returned to Vermillion, and is within city limits. **Ambulance cleaned/restocked/refueled, reports filed.**

Public assist—public assist is complete when the patient/person has been cared for, refusal of care signature has been obtained, and the ambulance crew has returned to Vermillion city limits. **Ambulance cleaned/restocked/refueled, reports filed.**

Please keep in mind that these policies are to be followed, but allow for flexibility in the event of a mass casualty incident or the availability of ambulances and personnel (i.e. third-call crew). Should one of these situations manifest, direction will be provided by the Director, a Fire Chief, or an Operations Commander.

VEHICLE MAINTENANCE & SUPPLY

At the completion of every call, the crew is responsible for preparing the vehicle for the next call. All items used must be cleaned up and placed back in the proper place. Replace any disposable supplies used, noting for the Director any items out of stock. Be sure all equipment is operational. If any equipment is not operational, be sure to document it and notify the Director.

Replace the linen on the cot after every patient. Maintain a good supply of linen in the vehicle or in the supply cabinet, the crew may pick up clean linen at the hospital. A minimum of three cot changes (six sheets) must be in the vehicles at all times as well as pillow cases, towels, and wash cloths. When restocking the vehicles do so neatly. When picking up clean linen from the hospital, take dirty linen to the hospital and dispose of it in a dirty linen basket.

Disposal of linens from a potentially contagious patient: linens will be disposed of at Sanford-Vermillion Hospital in the dirty linen room prior to the crew being done with a call. The ambulance will be disinfected on all surfaces: cot, floor, walls, etc. Pay special attention to disinfecting surfaces and equipment the patient came in contact with.

When done with a call make sure the shore line is plugged into the vehicle and all equipment inside the rig is plugged in. The vehicle must be cleaned after every call, i.e. mop the floors, clean windows, disinfect the cot, and make sure all garbage is removed from the vehicle.

The Service Center is the location of vehicle maintenance and fuel. At no time should the vehicle be parked in the garage with less than ¾ of a tank of gas. Access to the Service Center is gained with the B1Y key on the key ring in each ambulance. The other key on the key ring is the restraint key in 19-9A, there is also a key to the doors of the vehicle.

COMMUNICATIONS

All on-call personnel are responsible to the Clay Area Emergency Communications Center, they are responsible for dispatching ambulances. When on-call, personnel must be available to the Communications Center by pager or telephone (only during pager malfunction). **The phone number to the Clay Area Emergency Communications Center is 677-7180.** Use of the paging system for personal messages to other EMT's is not allowed.

Vermillion Fire/EMS Radio Channels:

1 1	City HB	normal operations
1 2	Fire/EMS	digital, SF, Yankton, by direction
1 3	EMS 3	hospitals, helicopters
1 4	Verm FD	digital, by direction
1 5	Verm INT	digital, by direction
1 6	Wak FD	Wakonda FD & first responders
1 7	Yank HB	City of Yankton
1 8	Yank TAC	Yankton FD
1 9	Clay CD	Highway Dept.
1 10	Union CD	Jefferson & Elk Point Fire & Ambulance
1 11	Linc Co FS	Beresford Fire & Ambulance

19-9A and 19-9B each have a Cellular phone. 19-9A has 1 portable radio and 2 stationary radios. 19-9B and 19-9C each have 2 stationary radios.

19-9A Cell # is 675-9643

19-9B Cell # is 675-9466

CODE SYSTEM

Code 3 – Life threatening emergency ambulance call. When responding to any call with compromise of LOC or ABCs, please respond this way. This requires immediate response by the EMT's to the ambulance garage with due regard for personal and public safety. When responding to the ambulance garage in personal vehicle, use flashers and headlights. ANY COLOR DASH LIGHTS ARE NOT LEGAL IN SOUTH DAKOTA AND MAY NOT BE USED.

When responding in the Ambulance, lights and sirens are used and traffic control may be requested as the need arises. Remember lights and sirens only request passage; be prepared for unpredictable behavior of the public. Lights and sirens do not give the EMT permission to break the law. Drivers are required to exercise due regard.

Code 2 – Emergency/non-life threatening. This requires that the EMT's respond immediately, but must obey all traffic laws. When responding in the ambulance all traffic laws must be obeyed as well.

Code 1 – Non-emergency ambulance call. This does not require an urgent response by the EMT's to the garage or the ambulance to the scene. It still means come right now or at the time announced by the dispatcher.

Signal 1 – Vehicle accident with injuries. Respond Code 3.

Signal 2 – Vehicle accident without injuries (usually we do not respond to these).

Standbys: When the ambulance is asked to standby at: football games, fires, demolition derby, parades and other special events. All EMT's on call when a standby is requested are paid the usual wage.

Standby at fires will occur if there is a report of smoke present, a fire alarm, or at the request of the Fire Chief/person in charge with no report of injury, respond to scene code 2. An ambulance may be requested for standby at any scene that fire units respond to.(i.e. CO leaks, responses at the river, etc). When called to standby at a fire, drive carefully if you are responding at the same time as the fireman. Be sure to park away from the fire units at the scene. Check with the Fire Chief upon arrival at the fire. Do not leave the fire scene unless the Fire Chief releases you. If you get a patient, 2nd call needs to respond to the fire scene to replace 1st call on the standby or transport patient to the hospital.

Athletic standbys are scheduled in advance. Report to the garage at least 15 minutes early. There will usually be a parking place reserved for the ambulance. Report to the person in charge (i.e. trainer, coach, etc.) and find an out-of-the-way place to watch the action. At football standbys EMTs must take the cot, oxygen, c-collars backboard, AED, and assessment kit in with you. At football games, the crew should remain together or in the near vicinity of the training room. Do not go out on the football field for an injured player unless the trainer requests you. For accidents elsewhere in the Dome during games, Security will call for the ambulance crew on City High Band so need to make sure pagers are turned up and on open. If you get a patient, 2nd call needs to respond to the athletic event to replace 1st call or to transport the patient to the hospital.

Occasionally, EMTs will be paged to standby for Law Enforcement. This could be at the station or at a discreet location. The dispatcher will page EMTs and will ask them to call the PD upon their arrival at the station for further instructions.

PARKING

Parking for EMT's responding to a call is available in the lots either to the south or west of the Fire/EMS station.

Parking accommodations for on-call EMTs on USD Campus or other areas in town will be communicated to EMTs by the Director.

ABUSIVE/UNRULY PATIENTS

Protect yourself – but do not strike the patient or speak abusively to them. If you can't get control of the patient, pull over and call for assistance from law enforcement. Usually the presence of an officer will calm them down.

If you have enough EMT's, the following examples may be used:

- cot and scoop sandwich – place the patient on stomach, use the scoop and tie the scoop securely to cot, secure patient in place, make sure they can breathe.
- use 4 patient restraints – either supine or prone, use cot frame not handles of cot to secure.
- use 2 patient restraints if patient is less disturbed, tie wrists together and tie wrists to cot.
- if not enough EMT's to use restraints, call for law enforcement.
- key for leather restraints is on the key ring.

If patient is suspected of having a weapon, EMTs should call immediately for law enforcement and clear the scene until officers have secured the scene. EMT's should not try to relieve any patient of any weapon. If the crew feels it is unsafe for them to work at a scene, they should contact law enforcement for assistance. Scene safety and EMT safety should always come before patient safety.

If any of the above restraint procedures are utilized, contact the Director immediately following the call.

DECEASED BODIES

Deceased bodies are the responsibility of the Clay County Coroner's office. We do not transport bodies to the Coroner. He/she should be requested to come to your location and pick up the body. This would be true in all cases, accidental death or suspicious circumstances. If a patient dies at home of natural causes (e.g. known terminal disease) the coroner should still be notified, but the family can have the local funeral home remove the body if they wish. Do not leave grieving members alone. Stay on scene until police officers arrive. If the survivors are too stunned to know what to do, it may be necessary for you to make some phone calls for them. Be as courteous and helpful as you can. Fill out a Dry Run report.

ACCIDENTS WITH AMBULANCE

Minor accident (Signal 2): park vehicle out of traffic, turn on 4-way flashers. Check on other parties involved, and call local law enforcement. Document on back of trip report as an official account of what happened. Obtain name and phone number of other party involved, as well as description of vehicle and damaged obtained.

If en route to the scene of a call, stay at the accident site and have 2nd call respond to the original call. DO NOT leave the scene of the accident. If an accident occurs when you have a patient on board, a Code 1 or 2 call, you can wait for law enforcement to arrive depending on the patient status.

If you have a Code 3 patient, continue on having driver contact the PD and have an officer respond and talk to other party involved and then meet you at the hospital. Try to get the license plate number and/or description of the other vehicle involved.

Major accident (Signal 1): any person who is conscious needs to call for help! If any one is able to move without injuring themselves, they need to assess the others in the ambulance first. If the vehicle is not in a stable position, do not move around but try to determine status of others verbally, turn off ignition and batteries (when fire/smoke are present) and wait for help to arrive. Watch out for gas leaks! Check out person/s in other vehicle.

If an EMT(employee of the City of Vermillion) is involved in any kind of accident that damages a City of Vermillion vehicle (ambulance, city car, fire truck, etc.), that individual will be relieved of driving that vehicle and will possibly be subject to mandatory drug and alcohol testing within two hours of the accident.

The Director of the Ambulance service must be notified immediately. If he/she is not available, notify FC1 or person designated by Director.

BREAKDOWN OF AMBULANCE

When patient is on board, call for another unit if in Vermillion area, if in another city call for their ambulance to continue transporting your patient and send one/two of the crew with the patient. Contact 710 (city mechanic), the Director, the Fire Chief, or the Communications Center to assist you with the problem and let you know what to do.

SEVERE WEATHER

During the winter, be prepared for inclement weather and if necessary the Director may ask the crews to spend the day/night at the Fire/EMS station. During the summer, thunderstorms/tornado watches and warnings happen, drive carefully if called out in a thunderstorm. If a tornado hits Vermillion, all EMTs should report to the Fire/EMS station, but remember the first rule of being an EMT, "Protect thyself".

GENERAL EMERGENCY AMBULANCE PROTOCOL

Upon arrival to the Fire/EMS station, the first EMT should determine the exact location of a call, nature of injury/illness, and other pertinent information with the communications center. If the call is in the county, exact location will need to be determined using locator numbers and maps in the ambulance or on the wall in the Communications Room.

When all EMTs have arrived, proceed to the scene (Comm. Center, 9A is en route) adhering to the emergency routes in the best possible manner. When going en route to the call use City High Band channel. When changing radios make sure you state which system you are on (e.g. Comm. Center, 9A on City High band).

When arriving at the scene, advise the dispatcher you have arrived (Comm. Center, 9A has arrived on scene). Patient evaluation and assessment takes place at this time with treatment and radio contact to Sanford-Vermillion Hospital to follow. Transport should take place after treatment has begun, advise the dispatcher you are en route to the hospital (Comm. Center, 9A en route to Sanford-Vermillion) and when you arrive at destination (Comm. Center, 9A has arrived at Sanford-Vermillion). Do not use 10 codes during the radio report use plain English (e.g. we are en route, we have arrived at scene, we are en route to hospital, we are arriving at the hospital).

When communicating on the EMS channel 3, communicate in plain English, be calm, concise, and courteous.

City of Vermillion

Ambulance Department

The purpose of this document is to establish a agreement between the Vermillion/Clay County Ambulance Department and any new EMT in regards to a six (6) month probationary period.

1. The probationary period will last six (6) months, but can be shortened or lengthened based on the discretion of the Director.
2. During the probationary period, the EMT will ride as a third person on the first call ambulance.
3. The EMT will work at least two first call shifts a week during the probationary period. If the number of probationary EMT's is to great to allow for this, the probationary EMT's will take as many first call shifts as possible, rotating between all probationary EMT's.
4. During the probationary period, the probationary EMT will not drive the ambulances to a call or with a patient in the vehicle unless specifically asked to by a senior EMT. The recommended place for a probationary EMT is in the front passenger seat. The probationary EMT can drive the ambulance when returning to the station, but this is up to the discretion of the senior EMT on duty.
5. During the probationary period, the probationary EMT will follow the directions of the senior EMT's on the call, unless the probationary EMT believes the directions will be harmful to the crew or the patient.
6. When a probationary EMT has signed up for a shift, they are responsible to go on every call during that 12-hour shift. If a problem arises that cannot be worked out, the probationary EMT needs to find another probationary EMT to cover that shift, before the shift starts.
7. Observation Reports will be completed by any FTO working a call with a probationary EMT. These reports will be reviewed by the Director and will serve as a performance evaluation and instrument of measure of professional development and competency of EMS care.
8. Other requirements may be instituted at the Director's discretion in accordance with the EMT Training Program.
9. If, during the probationary period, the EMT or the Director wishes to end the relationship between the EMT and the service, either party can terminate at any time. It is understood by both parties that the probationary period is a time when both the EMT and the Director can decide if the working relationship will work well for both the EMT and the service.

Probationary EMT: _____ Date: _____

EMS Director: _____ Date: _____

Outcome:

Off Probation: YES NO

Relationship Dissolved: YES NO

By Whom: Director EMT Both

Probationary EMT: _____ Date: _____

EMS Director: _____ Date: _____

JOB DESCRIPTION

ON-CALL (part-time) EMERGENCY MEDICAL TECHNICIAN

General Statement of Duties: Performs emergency medical care and transport to the citizens of Vermillion/Clay Co. region.

Tasks/Essential Functions: The essential functions of this job include but are not limited to:

- 1) responds to all emergencies, non-emergencies, inter-facility transfers and event standbys.
- 2) required to maintain 3 shifts/week and 6 shifts within a pay period.
- 3) required to stay within Vermillion city limits while on first call.
- 4) inventory/restock/clean/refuel ambulances as needed.
- 5) maintain EMT/CPR certification and provide a record of such to the Director.
- 6) help with community education/public relation efforts.
- 7) obtain billing information needed.
- 8) provide proper documentation of each ambulance call.
- 9) attend ambulance department meetings.
- 10) FTO and QA/QI duties as assigned by the Director.

Standards: The EMT:

- 1) will act in accordance to state and national standards for emergency medical care.
- 2) is required to wear a uniform at all times while covering a first-call shift, and be prepared to wear a uniform while covering a second-call shift.
- 3) must be able to handle stressful situations and maintain professionalism at all times.
- 4) must be able to respond to calls in a timely manner.

Conditions/Work Environment: The EMT will operate ambulances based at the William J. Radigan Fire/EMS Station. He/she will be required to work under stressful conditions, bad weather, poor driving conditions. He/she will be expected to make decisions involving emergency medical care and/or the ambulance service without the supervision of the EMS Director. The EMT will be expected to maintain a positive work environment with other EMTs and public safety personnel (i.e. police, fire , and hospital personnel).

Minimum Qualifications: The EMT will be at least 18 years of age with a valid drivers license. He/she will be required to be a South Dakota State certified and/or Nationally Registered EMT. Current CPR certification required. ALS providers are required to hold current licensure through the SD Board of Medical & Osteopathic Examiners as required by State law.

Supervision Received: The EMT will be under the direct supervision of the Director of Emergency Medical Services. He/she will follow all policies and procedures the EMS Director sets forth.

Steps in the position: The EMT can progress to the Director's position at the discretion of the City Manager.

JOB DESCRIPTION

VOLUNTEER EMERGENCY MEDICAL TECHNICIAN

General Statement of Duties: Performs emergency medical care and transport to the citizens of Vermillion/Clay Co. region.

Tasks/Essential Functions: The essential functions of this job include but are not limited to:

- 1) responds to all emergencies, non-emergencies, inter-facility transfers and event standbys.
- 2) may sign up for available call shifts.
- 3) required to stay within Vermillion city limits while on first call.
- 4) inventory/restock/clean/refuel ambulances as needed.
- 5) maintain EMT/CPR certification.
- 6) help with community education/public relation efforts.
- 7) obtain billing information as needed.
- 8) provide proper documentation of each ambulance call.
- 9) attend ambulance department meetings.
- 10) FTO and QA/QI duties as assigned by the Director.

Standards: The EMT:

- 1) will act in accordance to state and national standard for emergency medical care.
- 2) is required to wear a uniform at all times while covering a first-call shift, and be prepared to wear a uniform while covering a second-call shift.
- 3) must be able to handle stressful situations and maintain professionalism at all times.
- 4) must be able to respond to calls in a timely manner.

Conditions/Work Environment: The EMT will operate ambulances based at the William J. Radigan Fire/EMS Station. He/she will be required to work under stressful condition, bad weather, poor driving conditions. He/she will be expected to make decisions involving emergency medical care and/or the ambulance service without the supervision of the EMS Director. The EMT will be expected to maintain a positive work environment with other EMTs and public safety personnel (i.e. police, fire, and hospital personnel).

Minimum Qualifications: The EMT will be at least 18 years of age with a valid drivers license. He/she will be required to be a South Dakota State certified and/or Nationally Registered EMT. Current CPR certification required. ALS providers are required to hold current licensure through the SD Board of Medical & Osteopathic Examiners as required by State law.

Supervision Received: The EMT will be under the direct supervision of the Director of Emergency Medical Services. He/she will follow all policies and procedures the EMS Director sets forth.

Steps in the position: The EMT can progress to the Director's position at the discretion of the City Manager.

JOB DESCRIPTION

EMERGENCY MEDICAL TECHNICIAN FIELD TRAINING OFFICER

General Statement of Duties: The EMT Field Training Officer (FTO) performs all duties and functions listed under primary job description, either On-Call EMT or Volunteer EMT. Additionally provides guidance to probationary EMTs, promotes departmental standards, procedures and protocols, and provides objective feedback to the Director.

Tasks/Essential Functions: The essential functions of this job include but are not limited to:

- 11) Observing and providing objective feedback on performance of EMTs.
- 12) Completing paperwork regarding EMT Training Program in accordance with current practices.
- 13) Involvement in developing training program requirements and plans of action.
- 14) Act as mentor to EMTs as requested by the Director.
- 15) Act as training officer during drills/trainings as assigned.
- 16) Communicate openly with EMTs and Director regarding training issues and status.
- 17) Perform QA/QI duties as assigned by the Director.
- 18) Act as QA/QI officer as assigned by the Director.
- 19) Attend ambulance department meetings, drills and QA/QI meetings in accordance with SOPs.

Standards: The EMT FTO:

- 5) will act in accordance with state and national standards for emergency medical care and be prepared to coach EMTs on those standards of care in a learning environment.
- 6) will conduct themselves in a professional manner with patients and staff in order to create a learning and training environment while making patient safety and a high standard of care their priority.
- 7) will promote the department standard operating procedures and current protocols.
- 8) will act as a mentor to probationary EMTs.

Conditions/Work Environment: The EMT FTO will be held to the highest expected standards of the Vermillion Ambulance Department. FTOs will take calls with their usual responsibilities while adding the responsibility of observing and assessing probationary EMT actions and subsequently providing guidance in professional development. The EMT FTO will take a lead role during drills, trainings and incidents involving probationary EMTs.

Minimum Qualifications: At least two years on the Vermillion/Clay County EMS department with at least one year acting as a non-probationary EMT. Ability to demonstrate equipment competency, knowledge of current protocols and standard operating procedures, and departmental policies.

Supervision Received: The EMT FTO will be under the direct supervision of the Director of Emergency Medical Services. He/she will follow all policies and procedures the EMS Director sets forth.

Steps in the position: The EMT FTO can progress to the Director's position at the discretion of the City Manager.

Vermillion/Clay Co. Ambulance Dept. Confidentiality Policy

During your course of employment/relationship with the Vermillion/Clay County Ambulance Department, you will be exposed to personal, medical and financial information concerning our patients, employees and the Department. It is the responsibility of all Department personnel to preserve the confidentiality of this information.

Patients are protected by the Health Insurance Portability and Accountability Act of 1996. Maintaining patient confidentiality and compliance with HIPAA is so important that any violation makes an employee/student/observer subject to disciplinary action.

Here are your obligations as a member of the Vermillion/Clay Co. Ambulance emergency medical team:

- 1) Access to all patient information (also known as Protected Health Information, or PHI) within the Department is restricted solely to those employees who are directly involved with an activity which makes it necessary for them to review that information.
- 2) Information in patient care documentation is by law confidential and protected and shall not be revealed to or discussed with unauthorized personnel, either within the Department, in the community, or elsewhere.
- 3) All of our employees and their families, when treated as patients by the Department, have the same rights to privacy and confidentiality as any other patients of the Department, and their PHI is safeguarded by the same legal restrictions as those of any other patients.
- 4) Release of PHI to outside parties for any reasons other than treatment, payment or Department operations may only be made with a signed authorization from one of the following.
 - a. Patient
 - b. Parent, if the patient is a minor
 - c. Custodial parent of a minor patient in the case of divorce or separation
 - d. Patient's legal guardian
 - e. A person with Power of Attorney
- 5) Verbal discussion of any confidential or protected health information outside the scope of the professional setting on or off Department premises is expressly prohibited.
- 6) Any employee, student or observer who willfully discloses information concerning a patient to those not authorized to receive it, will be subject to disciplinary action.
- 7) Procedures and policies for the release of PHI include facsimile, voice mail and electronic mail.
- 8) Confidential, sensitive or PHI will be shredded rather than disposed of in waste baskets.
- 9) Every effort will be made to store confidential, sensitive or PHI information in a place physically secure from access by unauthorized persons.

Employees, students and observers are expected to guard our patients' trust. Nothing can undermine the confidence of a patient with the Department as fast as the belief that personal records and information given to the Department has become public information through the carelessness or indifference of Department personnel. Even an innocent sounding statement such as "We picked up Mr. _____ today." is to be avoided. He may not want anyone to know he needed medical care.

Your signature on this acknowledgement indicates that you have read, fully understand, and agree to abide by the Vermillion/Clay Co. Ambulance Department's Confidentiality Policy and comply with HIPAA regulations.

ACKNOWLEDGEMENT

I realize violation of the policy may result in disciplinary action up to and including termination of employment and possibly criminal or civil action. I also understand that this agreement extends beyond my affiliation with Vermillion/Clay Co. Ambulance Department.

Nothing in this document creates an express or implied contract. All employees are employed on an at-will basis. Employees have the right to terminate at any time and Vermillion/Clay Co. Ambulance Department retains that same right.

Employee Signature

Date

EMS Director Signature

Date

CALL NUMBERS AND NAMES OF AREA GOVERNMENT AGENCIES/AMBULANCES

WOODBURY COUNTY
ELK POINT AMBULANCE
JEFFERSON AMBULANCE
BERESFORD AMBULANCE
YANKTON AMBULANCE
TURKEY RIDGE

WOODBURY CO. COMM. CENTER
62-9a
62-9J
62-9
7-9
TURKEY RIDGE GOVERNMENT

TO BE USED FOR INFORMATIONAL PURPOSES ONLY

APPENDIX E

10 CODES/SIGNALS

10-1 RECEIVING POORLY
10-2 RECEIVING WELL
10-3 E.T.A. LANDLINE RESIDENCE
10-4 O.K. AFFIRMATIVE, WILL DO, GRANTED
10-5 RELAY, J-1 PERSONNEL, J2-PROPERTY
10-6 BUSY STAND BY
10-7 OUT OF SERVICE
10-8 IN SERVICE
10-9 REPEAT
10-10 OUT OF SERVICE SUBJECT TO CALL
10-12F FEMALE VISITOR OR OFFICIAL PRESENT
10-12M MALE VISITOR OR OFFICIAL PRESENT
10-13 WEATHER AND ROAD CONDITIONS
10-14 CONVOY OR ESCORT
10-15F FEMALE PRISONER IN CUSTODY
10-15M MALE PRISONER IN CUSTODY
10-16 NCIC CHECK
10-16H HIT ON NCIC
10-19 RETURN TO YOUR STATION
10-20 LOCATION
10-21 CALL THIS STATION BY TELEPHONE
10-22 TAKE NO FURTHER ACTION LAST INFORMATION/CANCEL
10-23 STATUS CHECK
10-24 MAKE PERSONNEL CONTACT TIME/PLACE
10-25 DO YOU HAVE CONTACT WITH
10-28 CHECK FULL REGISTRATION
10-29 CHECK FOR RECORD OR WANTED
10-29H LOCAL WANTS WARRANT HIT
10-29W WANTED CHECK ONLY
10-30 DOES NOT CONFORM TO RULES AND REGULATIONS
10-31 SEND WRECKER TO
10-32 SEND AMBULANCE TO
10-33 EMERGENCY TRAFFIC THIS STATION ALL UNITS STAND BY
10-35 CONFIDENTIAL INFORMATION
10-36 CORRECT TIME
10-37 WHO IS THE OPERATOR ON DUTY
10-39 YOUR MESSAGE DELIVERED
10-40 CLEAR FOR LOCAL DISPATCH
10-41 PERMISSION GRANTED FOR 10-40
10-42 OFFICER NOW AT HIS/HER RESIDENCE
10-44 STOPPING (DESCRIPTION AND LICENSE OF VEHICLE)
10-45 PATROL WITH 2 OFFICERS
10-50 USE CAUTION
10-51 DRUNK DRIVER
10-53 REQUEST BACKUP NON-EMERGENCY
10-54 REQUESTING BACKUP EMERGENCY
10-58 CHECK FOR DRIVERS LICENSE AND RECORD
10-59 DRIVERS LICENSE STATUS ONLY
10-60 NEXT CASE NUMBER
10-70 IS THERE TRAFFIC FOR THIS UNIT OR STATION
10-71 SEND CORONER
10-78 FOR YOUR INFORMATION, INFORMATION ITEM
10-80 ANY NARCOTICS INFO
10-89 UNIT IS OFF THE AIR NEEDS SERVICE/BROKE DOWN
10-90 CIVIL DISTURBANCE
10-97 ARRIVED AT THE SCENE
10-98 ASSIGNMENT COMPLETED
10-99 EMERGENCY, ALL UNITS AND STATIONS COPY

SIGNAL 1 ACCIDENT AT... PERSONAL INJURY
SIGNAL 2 ACCIDENT AT...PROPERTY DAMAGE ONLY
SIGNAL 6 DROWNING AT...
SIGNAL 7 DRUNK AT...
SIGNAL 8 DRUNK DRIVER
SIGNAL 11 FIRE AT...
SIGNAL 15 MURDER AT...
SIGNAL 16 DEATH AT...UNKNOWN CAUSE
SIGNAL 20 SUICIDE AT...