Jackson Hole Fire/EMS Operations Manual

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PURPOSE:
To provide educational opportunities for interested parties who are not members of JH Fire/EMS to participate in ride-a-longs and observe on Fire/EMS apparatus.

SECTION I – GENERAL

1. All interested persons must be 18 years or older.
2. The Rider/Observation Guidelines and Form must be read and signed by participant.
3. Form must be approved and signed by a BC or DO prior to ride along.
4. Observation shifts must be pre-scheduled to ensure space availability.

SECTION II – DRESS CODE

1. Dark blue or black slacks or pants (no jeans) with a button down shirt or polo shirt are recommended. Clothing should be neat and clean.
2. Observer should dress appropriately for the climate condition for the time of year.
3. Sturdy high top boots are advised.

SECTION III – SEAT BELTS

When riding in the apparatus, the observer is required to remain seated and to wear a seatbelt at all times while the vehicle is moving.

SECTION IV – MEALS

Observer is responsible for providing their own meals or money for purchasing meals.

SECTION V – MEDICAL RESTRICTIONS

Observer must let Crew leader/Captain know of any medical conditions that may put observer at risk.

SECTION VI – PATIENT CARE

Observer may not participate with patient care or field operations.

OBSERVATION GUIDELINES

Statement of Vision and Mission

Jackson Hole Fire/EMS will be a highly effective, community focused organization with a skilled, enthusiastic, and empowered workforce. We will continually foster a spirit of professionalism, volunteerism and pride within our members and will earn the support of our citizens by providing the highest level of emergency services to Teton County.

The mission of Jackson Hole Fire/EMS is the protection of life and property from the adverse effects of fires, medical emergencies and exposures to man-made and/or natural dangerous conditions.

All members, resources and activities are dedicated to providing excellence in fire suppression, emergency medical care, hazard abatement, committed training, aggressive code enforcement and effective public education.

Thank you for requesting to observe our operations. We are grateful for the opportunity to show you what we do for our community and offer you the opportunity to learn as well. It is our goal to make this an exciting and fulfilling experience for you. Emergency Services is challenging field and our operations are a great deal more than providing patient care and fighting fires. While this is our primary job, it takes a lot to make that happen.

Our top priority is safety for patients, crews, bystanders, and you. During your time with us you may observe many different operations, under less than ideal conditions. The following guidelines are intended to protect you during your observation period. We must ask that you strictly adhere to the following:

1. Carefully read and return the signed observation/release form to our Administration office. Once you've returned the form, we will contact you to sign up for a shift. If the date you have requested already has an observer signed up, you must choose another date. If you are unable to ride with us during your scheduled time, please let us know 24 hours in advance.

2. Typical observation periods begin at 7 am and end at 7 pm, not to exceed 10 pm. You may sign up for any or all of that shift. Please be prompt. Contact the Crew Leader as soon as you arrive. In order to protect you from risk, it is important that we know of any medical conditions you may have. Please advise the Crew Leader of any such conditions.

3. Dress appropriately for the weather. Bring clothing to meet the climate conditions for the time of year. We suggest boots, hat, gloves, coat, sunglasses etc.

4. **It is possible that due to the nature of the call (law enforcement operation, hazardous materials event, etc.), you might not be allowed to accompany the crew on that call. The Crew Leader must make that judgment with your safety in mind.**

Our staff has a wealth of information. Ask lots of questions, we are happy to answer them.
Enjoy your time with us.

OBSERVATION FORM

Ethical Conduct and Confidentiality for Observers

I _____ request that Jackson Hole Fire/EMS allow me to observe on apparatus operated by Jackson Hole Fire/EMS on the following date, _____, 20____.

I understand that I am limited to observation and may not participate with patient care or field operations in any way. I further understand that there are risks of injury or illness associated with this observation period. I agree to follow instructions of the Crew Leader explicitly and under all circumstances. I agree that Jackson Hole Fire/EMS and their employees and agents will not be liable for any illness or injury which I may suffer as a result of this observation period.

I understand that during this period of observation I will come in contact with information that may be legally privileged and/or confidential. I agree not to divulge any information I gain as a result of my exposure to such information. I agree that Jackson Hole Fire/EMS and their employees and agents will not be liable for any damages arising from any breach of privileged and/or confidential information that I may cause.

My signature as follows verifies that I have read and understand this document and observation guidelines, I am 18 years of age or older, and that I agree to the conditions listed herein.

I understand and agree via my signature below that I will not disclose any information of a confidential nature gained during my experience at JH Fire/EMS.
I will conduct myself in an ethical and professional manner at all times.
I also understand that failure to adhere to these expectations may result in legal consequences.

_____ _____
Signature Date

_____
Printed name

Shift Officer or Crew Leader: _____ Date _____

Battalion Chief or Duty Officer: _____ Date _____