

PLYMOUTH AMBULANCE SERVICE, Inc.
POLICIES AND PROCEDURES

POLICY NUMBER 001 STATUS OF PERSONNEL

Purpose:

To provide adequate staffing for twenty-four (24) hours a day three hundred sixty five (365) days a year and should be fair to all employees.

Scope:

All employees of Plymouth Ambulance Service, Inc.

Personnel of Plymouth Ambulance Service, Inc. will work in one of two (2) categories:

1. Full-time: This will consist of the Director of Operations and the 1st out paramedics
2. Part-time: This will consist of the Members of Plymouth Ambulance
3. Part-time On Call: This will consist of the members of Plymouth Ambulance

POLICY NUMBER 002 STAFFING OF PERSONNEL

Purpose:

To provide twenty-four (24) hour coverage, three hundred sixty five (365) days a year for both the first (1st), second (2nd), and third (3rd) out ambulance.

Scope:

All employees of Plymouth Ambulance Service, Inc.

Scheduling of personnel will be made out and posted monthly.

1. Employees of Plymouth Ambulance Service, Inc. will be required to sign a job description contract for the position desired. The selected job description shall be used by the Director of Operations in filling staffing needs.
 - a. Each employee shall read and sign the job description and corresponding wage for the position desired. The selected position has a requirement that the employee will submit at least a minimum number of hours for scheduling equaling 24 hours, whether or not assigned.

EMT-Basic

On-call is paid at \$2.50 per hour.

EMT-B receives \$7.50 per hour of run time.

EMT-Basic IV Tech / Provisional Intermediate

On-call is paid at \$2.50 per hour.

EMT-BIV receives \$8.00 per hour

EMT-Intermediate

On-call is paid at \$4.00 per hour.

EMT-I receives \$12.00 per hour of run time.

EMT – Paramedic

On Call is paid at \$4.00 per hour.

EMT-P receives \$14.00 per hour run time

In addition Crew Chiefs will receive an additional \$0.25 per hour stand by and run pay as well as an additional \$25.00 per month, provided they continue to submit hours.

These wages are the base wages that will apply to all employees. There will be an Annual Evaluation process which shall include raises based on performance. The Board of Directors shall be responsible to set the acceptable range for employee raises.

2. Employee availability forms are to be completed and turned into the Director of Operations by the third (3) Monday of every month.

3. If availability forms are not filled out and turned in by the specified time each month. The hours will be assigned by the Director of Operations and it will be the employee's responsibility to fill the hours if he/she is unable to work. They must also contact the office informing them who will be working the hours.
4. Employees who fail to turn in a minimum average of 24 hours in two consecutive months will have their pager shut off. After the third (3rd) month of non-compliance the pager will be returned.
 - a. Employees exempt from this are anyone who is unable to work due to a physical or medical condition. It must be documented in written form from your physician.
 - b. The Director of Operations may also waive this for employee's requiring personal time off for an extended period.
5. The schedule will be completed by the Wednesday of the last full week of each month.
6. It is the responsibility of each EMT to pick up a copy of the schedule and read it carefully, and note when they are on duty.
7. The placement of the working crewmembers on the schedule is at the discretion of the Director of Operations.
8. After the schedule has been completed and posted. Scheduling changes may need to be done including rearranging of staff to provide the best coverage of a shift. (i.e. employee illness or injury). This will be done at the discretion of the Director of Operations.
9. After the schedule has been completed and posted it is each EMT's responsibility to find his/her replacement for the hours they are unable to work. They must notify in writing either the Director of Operations or his/her designee and the person who they were on-call with as to who will be working for them.

ALL SHIFT DROP / TRADES REQUIRE THE APPROVAL OF THE DIRECTOR of OPERATIONS or his/ her DESIGNEE.
10. The replacement must be trained to a level that provides a complete ambulance crew at the same level of care or greater than there was before the trade.
 - a. If assistance is needed in contacting staff to cover the hours **the staff member needing off will transmit a pager message**, informing the staff of the open hours. The person wishing to drop/trade hours will allow a 4 hour time limit to fill the shift. During this time anyone who wishes to pick up the hours will have ample time to request the hours. It will be the responsibility of the person dropping the shift to fill the hours with the person with the most seniority. The EMT requesting assistance will be required to secure coverage of his/her hours.

- b. In case of an emergency personal or family (illness, injury, funeral) the Director of Operations or his / her designee, will take the responsibility of finding coverage for the open hours.
- c. All employees doing a shift Drop / Trade shall fill out the drop trade form in order to maintain consistent coverage on the schedule. This will provide the proper crew make up for all shifts.
- d. The Director of Operations or his / her designee shall maintain the right to refuse a drop / trade request in the better interest of Plymouth Ambulance Service, Inc.

POLICY NUMBER 003 SCHEDULING TIMES

Purpose:

This policy will provide us with the twenty-four (24) hour coverage we need for both the first (1st) and second (2nd) out ambulance and will allow employees to make personal plans.

Scope:

All employees of Plymouth Ambulance Service, Inc.

- 1.
1. **0700-1700** (day shift). The Fulltime Paramedics along with five (5) other staff members of Plymouth Ambulance Service, Inc. will cover this.
 - a. The first out on-call crew will be scheduled from 0700-1700 (Monday-Friday)
 - b. The second out on-call crew will be scheduled from 0700-1700 (Monday- Friday)
 - c. The third out on-call crew will be scheduled from 0700-1700 (Monday- Friday)

The Director of Operations may need to adjust staffing as need for administrative needs. ***This is to be kept to a minimum.***

4. **1700-0700** (night shift). The Fulltime Paramedics along with five (5) other staff members of Plymouth Ambulance Service, Inc. will cover this.
 - a. The first out on-call crew will be scheduled from 1700-0700 (Monday-Friday)
 - b. The second out on-call crew will be scheduled from 1700-0700 (Monday-Friday)
 - c. The third out on-call crew will be scheduled from 1700-0700 (Monday- Friday)
5. The weekend and Holiday schedules will begin at 0700-0700. The Fulltime Paramedics along with five (5) other staff members of Plymouth Ambulance Service, Inc. will cover this. The part-time and on call staff may be covered in either (2) twelve (12) or (1) twenty-four (24) hour shift.

POLICY NUMBER 004 TIME SHEETS

Purpose:

This policy will allow employees to be compensated for their work in a timely manner.

Scope:

All employees and ride along personnel of Plymouth Ambulance Service, Inc.

1. Employees of Plymouth Ambulance Service, Inc. will be compensated in monetary amounts.
2. Time sheets are to be filled out by each employee in an honest and accurate manner. Time sheets will randomly be checked.
3. Full-time and part-time employees will fill out a weekly timesheet and be compensated an pre-determined flat hourly rate. Timesheets will be collected on Monday morning following the end of each bi-weekly pay period. Failure to complete bi-weekly timesheets will result in waiting for the following pay period for compensation
4. Time sheets for on call employees are to be turned into the office by the Monday of the first (1st) week of every month. If time sheet is not received by the scheduled time, the employee will have to wait until the following month to be compensated.
5. Employees of Plymouth Ambulance Service, Inc. will receive compensation for the following jobs that are completed.
 - a. By completing an ambulance check off sheet. You will receive one (1) hour of run time. The check off sheet is to have the employee's name and or employee number. For both employees to receive compensation both employees must complete a rig check and both names and or numbers must be on the paper work.
 - b. By attending the Plymouth Ambulance Service, Inc. staff meetings the employee will receive hourly run pay per meeting attended.
 - c. By being on-call, the employee of Plymouth Ambulance Service, Inc. will receive a set dollar amount per hour.
 - d. Run time; an employee of Plymouth Ambulance Service, Inc. will receive an hourly wage while on the ambulance call. This is to start at the time of dispatch and will conclude upon the ambulance being restocked and properly cleaned.
 - e. The employee will receive a minimum of one (1) hour run time for each time he/she is paged out.

POLICY NUMBER 005 RADIO COMMUNICATIONS

Purpose:

This policy will enable the Sheboygan County Sheriffs Department dispatchers to know where our ambulances are located and the status of each one.

Scope:

All employees of Plymouth Ambulance Service, Inc.

1. It is the policy of Plymouth Ambulance Service, Inc. that all employees of the service adhere to all standards of communication by the use of common language as outlined by the NIMS requirements (i.e. on scene, responding, transporting).
2. Upon receiving the call from the Sheboygan county fire dispatch. Let the pager sound twice. After the second (2nd) set of tones acknowledge the call by saying unit 806 1,2,or 3, whichever call you're on to county fire dispatch we, acknowledge the call.
 - a. The first (1st) person on the schedule is to acknowledge the call; on Sheboygan County fire primary (SCFP) this way the Sheriffs Department knows that we received the page.
 - b. When you contact the Sheriffs Department repeat the location or address to the dispatcher
 - c. When you start responding to the call, contact the Sheriffs Department on (SCFP) and tell them that you are responding to the address again.
 - d. When you arrive on scene contact the Sheriffs Department on (SCFP) that you are on-scene.
 - e. When you are prepared to transport. Contact the Sheriffs Department on Sheboygan County fire primary (SCFP)and let them know that you are enroute to the hospital and tell them which hospital you are transporting to and the number of patients that you have with you.
 - f. Contact the Sheriffs Department on (SCFP) when you arrive at the hospital.
 - g. If the patient has been transported to a hospital in Sheboygan. Contact the Sheriffs Department and let them know that your assignment is complete and that you are enroute back to the City of Plymouth. Upon arriving in the P.A.S. service area contact the Sheriffs department on (SCFP) and let them know that you are available for calls
 - h. Long distance transfers. Contact the Sheriffs Department on fire primary (SCFP) and inform them that you will be going on a transfer. Inform them where you are leaving from and to where you are transporting. Also, give an estimated amount of time that you will be out of service.
 - i. When 806 1 & 2 are on calls County Dispatch will dispatch 806-3. If all ambulances are busy we will request to have PFD 804 to be put on stand-by until there are two (2) Plymouth Ambulance Service units available for calls. We will then contact the Sheriffs Department on (SCFP) and have unit 804 taken off stand-by

(Reminder during the summer Unit 804 is contracted with the County fairgrounds for stock car races and is unable to leave).

j. There will be six (6) 800 MHZ radios available to the 1st, 2nd and 3rd out crews will sign each radio that they take out and in. Any radio signed out is to be returned at the end of the shift. Any employee that keeps a radio, ***unless prior arrangements have been made with management***, will be charged with theft and will be dismissed from Plymouth Ambulance Service, Inc.

POLICY NUMBER 006 RECORD KEEPING

Purpose: To facilitate accurate record keeping and complete documentation of the care and observations of the patient by Plymouth Ambulance Service, Inc.

Scope:

All employees and ride along staff of Plymouth Ambulance Service, Inc.

1. Run reports and other patient documentation is to be filled out completely by all members of Plymouth Ambulance Service, Inc. The electronic report is to be completed ***immediately*** after the call is completed.
2. Run reports and other patient documentation is a written legal document and must be filled out completely. If it is not documented, how can you prove that you did it?
3. Run reports and other patient documentation is to be filled out complete, accurate, and objective. The run reports are to be a factual documentation of your observations. Not you're personal conclusions.
4. Run reports and other patient documentation must be filled out completely
 - a. Run reports and other patient documentation is judged by appearance. If the report is sloppy and incomplete your care will appear to be sloppy.
5. The electronic copy of the patient's record is to be saved on the computer. It will serve as our record of the incident, and patient information.
 - a. Proper billing information. For prompt billing and payment
 - b. Signatures are required for insurance Co. and if the patient has refused treatment and or transport. We will have documentation of the incident.
6. During your response, you must document any difficulties that you encounter (i.e. bad roads from weather, road construction, and inadequate directions).
8. **ALL PATIENT RECORDS ARE TO REMAIN CONFIDENTIAL. THEY ARE NOT TO BE TALKED ABOUT OR SHOWN IN PUBLIC.**
9. ***AT NO TIME ARE PATIENT CARE RECORDS TO BE TAKEN HOME.***

ANYTIME PLYMOUTH AMBULANCE SERVICE, INC. IS PAGED OUT OR DOING A STAND-BY EVENT A RUN REPORT IS TO BE FILLED OUT WITH THE FOLLOWING INFORMATION.

1. Date
2. Time you went en-route
3. Time you arrived
4. Time that you cleared
5. Name of the event you were at
6. If there were any patient contacts, write that on the run sheet but if you do have a patient contact it is to be done on a separate run sheet
7. A billing sheet is to be filled out with every run

POLICY NUMBER 007 MORALE

Purpose:

To make Plymouth Ambulance Service, Inc. a place of employment, where all members of the staff treat people with respect.

Scope:

All employees of Plymouth Ambulance Service, Inc.

1. Employees are to work together and show respect toward their co-workers. Each employee has earned the right to work for an ambulance service. Some may have more experience than others.
 - a. By working in an area with a larger call volume
 - b. By having more schooling
 - c. By having more years of experience

Because some employees are able to have more experience than others, that does not give us the right to talk derogatory about staff members who do not. Everyone started out new and has learned new skills or acquired more knowledge over the years. If you wish to call yourself a good EMT, you will help the new people instead of scarring them off by making fun of them.

2. People who are doing ride along are to be treated with the same respect as anyone else. Remember the way you present yourself is a symbol of both you and the Plymouth Ambulance Service. We should be going out of our way to help teach them not destroy them. Being new, they are already going to be nervous. A compliment or simply taking the time to explain a mistake will help them grow in the profession. A simple rule of thumb is to treat them the way you want to be treated.
3. Employees, who are reported to be talking derogatory about other staff members, will be reprimanded.

POLICY NUMBER 008 HOSPITAL CHOICE

Purpose:

To give the patient the choice of which hospital to go to, unless directed by other agencies.

Scope:

All employees of Plymouth Ambulance Service, Inc.

It shall be the patients or the patients immediate families personal choice as to which medical facility they wish to be transported to.

1. In the case of a minor, a parent, legal guardian or relative will be requested to make the choice of which hospital or medical facility.
2. In the case of a minor child where life-threatening situations exists and no legal guardian, parent or relative is present, you will take the initiative to treat this child and transport the child to the closest medical facility.
3. In the case of any ***unconscious patient***, or ***in a life-threatening situation such as respiratory distress***, that may or not require an intercept, the patient is to be transported to the closest medical facility.
4. In the case of multi-injury situations, If the patients are family members and are stable more then one person maybe transported in the same ambulance. ***AT NO TIME WILL P.A.S TRANSPORT MORE THAN 3 PT.'S IN ONE (1) AMBULANCE.*** Do not jeopardize patient care by letting too many people in the back of your ambulance.

POLICY NUMBER 009 REPORTING INCIDENTS/COMPLAINTS

Purpose:

To address or correct any problems that may occur with management, other Plymouth Ambulance Service, Inc. employees, hospital staff, first responder units, fire departments, police and sheriff's officers, dispatchers in a professional and constructive manner.

Scope:

All employees of Plymouth Ambulance Service, Inc.

IT IS THE RESPONSIBILITY OF THE DIRECTOR OF OPERATIONS TO ACT ON ANY INCIDENTS OR COMPLAINTS. NOT THE INDIVIDUAL CREWMEMBERS.

Employees of Plymouth Ambulance Service, Inc. who have problems or complaints are to take care of them in the following manner.

1. Fill out a complaint form that is provided with the following information.
 - a. Date, time and location of the incident.
 - b. Who the complaint is being filed against (agency or individual).
 - c. Witnesses or crewmembers on scene.
 - d. Give a description of the incident in detail including any conversations that may have gone on.
 - e. List any complications encountered or if the patient was in danger.
2. Upon completion of the form it is to be given to the Director of Operations or the If the complaint is about the Director of Operations it can be given to the EMT representative on the board, or a member of the personnel committee.

IF THE INCIDENT/COMPLAINT IS NOT WRITTEN DOWN ON PAPER IT DID NOT HAPPEN.

Anytime there is a complaint filed with the management it is to be acted on and documented within 10 days. If management does not respond within this time frame the complaint can be filed with the board of directors.

Depending on the situation and the rules of confidentiality the person(s) filing the report may or may not find out the outcome of the action taken by management.

If you have filled out an incident/complaint form, do it in an area where no one else can read it if you were to leave. **DO NOT** go around telling everyone about it.

Violators of this policy will be reprimanded up to and including termination of employment from Plymouth Ambulance Service, Inc.

POLICY NUMBER 010 EMERGENCY VEHICLE DRIVING

Purpose:

To set guide lines for the Employees of Plymouth Ambulance Service, Inc. responding to emergency and non-emergency calls.

Scope:

All members of Plymouth Ambulance Service, Inc.

P.A.S will utilize three (3) modes of travel with any P.A.S. vehicle. These modes are as follows:

CODE 1: Day to day operations, all laws are to be adhered to and *no deviation* to the Laws of the Road will be permitted.

CODE 2: This mode is to be used when responding or transporting in the non – emergency mode. **AT NO TIME IS AN EMPLOYEE TO USE WARNING LIGHTS WITHOUT A SIREN.** This is strictly for non – emergency driving.

CODE 3: This mode of operation is the emergency operation of any P.A.S. vehicle. At no time is an employee to operate without both an audible siren and warning lights activated.

1. When responding to an emergency call, the driver of an authorized emergency vehicle is exempt from certain rules of the road, but only under the conditions set forth in **section 346.30** of the Wisconsin statutes, as amended. This means that if the police officials at the scene of an accident feel that the driver of an emergency vehicle was not driving safely with **DUE REGARD** for the safety of others, he/she may be held responsible for the accident, even though red lights and siren were being used.
2. When responding to an emergency call, the driver of an authorized emergency vehicle must give visual warning with the red lights as well as audible warning with the siren. At all times when the ambulance is operating, as an emergency vehicle, the warning lights, headlights, and siren will be on and operating. Rules on operating the siren are:
 - a. **WAIL** Normally the siren should be set in the wail position, as this is the mode most widely recognized by the majority of people. However, because this is a non directional mode operation, drivers of other vehicles may have difficulty ascertaining the direction from which the siren is approaching.
 - b. **YELP** This mode is more directional but less recognized as a vehicle siren by the majority of people. For these reasons reserve the use of the yelp for approaching intersections and heavy traffic conditions, but be back on wail once through the intersection
 - c. **PHASER** Generally avoid the use of the phaser mode, as the general public does not recognize it as a vehicle siren. It is also the least directional siren mode.
 - d. **P.A.** Use of the P.A. in conjunction with the siren is discouraged.

3. Under Wisconsin law a motor vehicle driver upon the approach of an emergency vehicle must pull to the right and stop. In reality, however, the emergency vehicle driver should expect the other drivers to do almost anything. Also, the emergency vehicle driver should be aware that due to the fact that many drivers have their windows closed, air-conditioning on and the radio playing, they may not even be aware of the emergency vehicle's approach. For these reasons defensive driving is necessary and extreme caution must be exercised at all times.
4. Recommended emergency vehicle operating procedures:

A maximum speed of 10mph above the posted speed limit on arterial streets is normally safe and adequate, and should rarely be exceeded. Speed on residential side streets should be restricted to the posted limit. Other considerations affecting speed are weather, road, and traffic conditions, and the presence of pedestrians.

- a. Since a motor vehicle driver is required to pull to the right and stop upon approach of an emergency vehicle, it is normally standard procedure for the emergency vehicle driver to use the left traffic lanes
- b. Emergency vehicle drivers are expected to exercise extreme caution or avoid passing another vehicle on the right. The reason for this is that the other driver is legally required to pull to the right. In the event another vehicle does not pull to the right but stops in the left hand lane, the emergency vehicle driver may pass on may pull to the right unexpectedly. After passing on the right, immediately return to the left lane of traffic.
- c. Driving the wrong way on a one-way street should be avoided. It can be considered to be not exercising **DUE REGARD** for the safety of others. Avoid traveling in the opposing traffic unless you are certain traffic is clear. If you must proceed, do so with extreme caution and stay to your far right.

Any violation in the above standards may void the driver from being covered by the ambulance insurance company

- d. When driving to a scene, the driver and the technician should be observing traffic simultaneously. Upon approaching an intersection, the technician should announce in a clear voice “clear” if he sees that all opposing traffic is yielding, or “hold it” if he suspects any danger. This type of teamwork results in safety for emergency personnel and the public.
 1. Making right or left turns across stopped vehicles:
 - a. Come to a complete stop next to the vehicle.
 - b. Establish eye contact with the vehicle’s driver via your partner or yourself.
 - c. Wait for your partner to tell you that it is clear.
 - d. Be aware of vehicles approaching you from behind.
 - e. Proceed with caution.
 - e. Patients are conveyed with lights and sirens only when life-threatening situations exist (i.e. deterioration of patient’s condition enroute).
 - f. Whenever it is necessary for an authorized emergency vehicle to cross an arterial street controlled with traffic signals, the driver in all such situations must exercise **DUE REGARD** for the safety of others. Specifically the following guidelines should be used:
 1. Crossing on green:
 - a. Slow down.
 - b. Take your foot off the accelerator and cover the brake.
 - c. Look in all three (3) directions; be aware of oncoming vehicles turning in
 - d. Proceed with caution.
 2. Crossing on a red light or an intersection with a stop sign:
 - a. Come to a complete stop
 - b. Establish eye contact with drivers of other vehicles
 - c. Wait for partner to communicate all is clear.
 - d. Wait two (2) seconds.
 - e. Proceed with caution.
 3. Reminder that the driver of an emergency vehicle must obey the speed limit signs in school zones. **The posted speed, is the speed that is to be traveled in these areas.**
 4. The driver of an authorized emergency vehicle must at all times abide by the duty to drive with **DUE REGARD** under the circumstances for the safety of all persons. The drivers of authorized emergency vehicles are responsible for the consequences of their reckless disregard for the safety of others.

NON-EMERGENCY RESPONSES

A non-emergency ambulance call is:

1. Based on reliable information from a health care professional on scene with the patient and the information gained clearly indicated a non- emergency nature (i.e., RN at nursing home, physician at a clinic, home health care nurse, ect.). The dispatcher should attempt to get as much patient information as possible to determine the patient status and potential need for A.L.S. (advanced life support). The final decision of mode to respond is at the discretion of the responding ambulance crew.

2. Pre-arranged transport between facilities which, would include therapy treatments, Scheduled transfers and return transports.
3. Incidents in which an on-scene ambulance crew request an additional ambulance for multiple patient transports.
4. Chapter 51 patients who have no acute history drug or alcohol ingestion or physical injury.
5. When requested to stand-by at a fire scene, swat incident, or hazardous materials incident unless requested emergency by requesting agency.

BACKWARD TRAVEL

TRY AND PERFORM ANY BACKING PROCEDURES PRIOR TO PATIENT CONTACT.

1. General rules:
 - a. If you can avoid backing, don't back.
 - b. Never be in a hurry when backing.
 - c. Do not start to back when unsure of the area.
 - d. Do not put the unit into reverse gear before coming to a complete stop.
 - e. Roll the window down completely
 - f. Make visual and verbal contact with spotter.
 - g. No spotter available:
 1. Reconsider backing up
 2. Make a reasonable attempt to get someone to act as a spotter.
 3. If a spotter cannot be obtained get out of the ambulance and walk around it, completely and survey the backing area.
 4. Be sure to check overhead clearance.
 5. If both crewmembers are present, but the patient requires constant care, the operator can proceed with backing the unit only if the above procedures are taken.
2. **Operator Responsibilities:**
 - a. Bring the unit to a complete stop.
 - b. If weather permits roll down the window to listen to the spotter.
 - c. Make verbal communication with spotter. If you can't hear the spotter, do not back up.
 - d. A spotter should be in place eight (8) to ten (10) feet at the left (driver's side) rear of the ambulance.
 - e. You must be able to see the spotter if you cannot see the spotter **DO NOT BACK UP.**
 - f. The driver and the spotter must establish and continue eye contact in the left mirror at all times.
 - g. The spotter will signal the driver when to back up.
 - h. When backing the ambulance at night turn on all the scene lights to light the area you will be backing into.

3. Spotters responsibilities:

- a. Get out and survey the right side and rear area for obstacles that would damage the ambulance. Remember overhead clearance.
- b. Place yourself eight (8) to ten (10) feet to the left (driver's side) rear of the ambulance.
- c. Make sure the driver can see and hear you.
- d. Have eye contact with the driver at all times.

Any violation of this policy will result in appropriate disciplinary action, up to and including discharge from employment from Plymouth Ambulance Service, Inc.

SEATBELTS

1. In the front compartment of the ambulance, seatbelts are to be worn by each Plymouth Ambulance Service, Inc. Employee and/or additional passengers when driving or riding in the ambulance at all times
2. In the patient compartment of the ambulance employees, patient(s), or any additional passengers must be appropriately restrained with a seatbelt or the three-ambulance cot straps. If patient care is in any way compromised by doing so, only then, it may be disregarded.

RESPONDING TO THE STATION IN YOUR PERSONAL VEHICLE

When responding to the station for an ambulance call in your personal vehicle, you must follow all of the traffic laws.

1. P.A.S. Employee's are not permitted to use a red light and/or siren in their personal vehicles or use 4 way flashers (hazard lights) when responding in the capacity of a P.A.S. Employee for any reason
2. Any tickets or citations will be the responsibility of the employee.

Any violation to this policy may result in immediate release of employment.

POLICY NUMBER 011 REPORTING TRAFFIC ACCIDENTS/CITATIONS

Purpose:

To document any traffic violations by employee's of Plymouth Ambulance Service, Inc.

Scope:

All members of Plymouth Ambulance Service, Inc. and any First Responders who drive the ambulance to the hospital.

1. Any accident/incident occurring while operating a Plymouth Ambulance Service, Inc. vehicle will be reported immediately to the Crew Chief on-call and/or the Director of Operations.
2. An incident report is to be completed within twenty-four (24) hours of the incident.
3. All traffic citations will be the personal responsibility of the driver involved.
4. Accidents involving a Plymouth Ambulance Service, Inc. vehicle and a private vehicle or public or private property must be reported to a law enforcement agency immediately, with a complete report made for insurance purposes. **NO EXCEPTIONS.** This must comply with the Wisconsin DOT driver manual regarding the reporting of accidents to law enforcement.
5. For the protection of the employee and Plymouth Ambulance Service, Inc. reserves the right to require any employee to undergo a blood or urine screen to determine the Presence of alcohol and/or drugs immediately after any accident involving a Plymouth Ambulance Service, Inc. vehicle.
6. Any and all employee's involved with a P.A.S. vehicle accident or damage shall fill properly fill out an incident form if physically able to do so before returning to their home. The report is to be forwarded to the Director of Operations.

POLICY NUMBER 012 TEMPORARILY LICENSED EMERGENCY MEDICAL TECHNICIANS (EMTs) AND NEW EMPLOYEES.

Purpose:

To let new employees know what we will be expected from them, and will allow management to keep accurate records on the status of temporary EMTs.

Scope:

All new employees, and students that are a taking the EMT class at the present time.

Requirements

1. You must be at least eighteen (18) years of age
2. You must have a temporary EMT license with the state of Wisconsin and Plymouth Ambulance Service, Inc.
3. You must be enrolled in, or have completed, a Department of Transportation (DOT) basic EMT class.
4. All temporary EMTs will adhere to all policies and procedures of Plymouth Ambulance Service, Inc.
5. All employees doing ride along will wear white shirts, black pants (not jeans) black shoes, and must have good personal hygiene.
6. Employees doing ride along will be compensated \$2.50 an hour stand-by pay and \$5.00 per call, and are covered under the ambulance insurance policy. Students who have not finished the EMT class will not be compensated.
7. You must complete the following work requirements of Plymouth Ambulance Service, Inc., which are as follows:
 - a. Minimum of ten (10) patient contacts under the direction of a Preceptor, of Plymouth Ambulance Service, Inc. This will also include writing complete run report on the patient for documentation procedures.
 - b. Minimum of ten (10) hours of driving of an emergency vehicle, under the direction of a Plymouth Ambulance Service, Inc. Preceptor.
 - c. Minimum of ten (10) hours of extra in-service, going over procedures and the workings of the equipment in the ambulance.
8. The EMT employee in training will be required to fill out all run hours on a time sheet for compensation as well as having information documenting their hours on their orientation form. This is a form that is supplied by the management to the new employees.
9. The information on the orientation form will, allow the EMTs on duty to critique each run that you go on, and provide feedback to the management for any extra training needs to be covered.
10. Any ride along will be required to stay at the service while doing ride alongs

For the EMTs that are hired by Plymouth Ambulance Service, Inc. that are just coming out of the EMT class. After two (2) years of working or two thousand (2500) hours of availability for the ambulance service and following the guidelines set forth in the policy of scheduling, you will be reimbursed for the EMT class.

POLICY NUMBER 013 SERVICE/TRAINING MEETINGS

Purpose:

To keep the members of Plymouth Ambulance Service, Inc. staff up to date with new information and new products that we have put on the ambulances. To continue doing education, so that we maintain the standard of care.

Scope:

All employees of Plymouth Ambulance Service, Inc. including new employees who are doing ride along.

It shall be the responsibility of the Director of Operations to call and conduct meetings with all staff. The purpose of these meetings being:

1. Solve problems
2. Seek information
3. Coordinate ambulance service operations

There will be eleven (11) scheduled meetings through out the year, January through November. The meetings will be held on the second (2nd) Thursday of each month at 1830 hours, unless otherwise informed by management. For people who are unable to attend the night meeting, there will be a make-up meeting the following Friday beginning at 09:30 unless otherwise noted by management. It is very important to attend these meetings to maintain your skills, if we want to go to the next level. Every attempt will be made to keep meetings no longer than two (2) hours long.

These meetings are mandatory. Each employee must attend nine (9) of the eleven (11) meetings. Each employee will receive \$10.00 for attending. All absences must be excused. If you know that you will be unable to attend, contact the office.

Just as important is maintaining the standard of care. To maintain the standard of care you must do the following. Stay up to date and proficient with the skills that may not be used on a regular basis. Another reason to maintain the standard of care is to protect the service and yourself in a negligence suit.

Make-up Training: There will be alternative training that may be available to substitute for the in service meetings that shall be set-up with the Director of Operations.

POLICY NUMBER 014 RESTRAINTS:

Purpose:

This policy is intended to protect the patient from hurting themselves and others if they are out of control.

Scope:

All employees of Plymouth Ambulance Service, Inc. and the people we respond with (i.e. 1st responders or law enforcement).

Use of restraints

Any mechanism used to physically confine a patient is restraining them. There must be a specific reason to restrain and this must be clearly documented. The common two (2) reasons are to insure crew safety from a belligerent patient, or to keep a combative patient from causing further injury to him/her self.

1. Document the events leading to the necessary use of restraints.
2. Document the method of restraint and the position of the patient. **NEVER RESTRAIN A PATIENT IN THE PRONE POSITION.**
3. In the event the patient is spitting, place a soft surgical mask over their mouth and provide supplemental oxygen.
4. Soft restraints should be used whenever possible.
5. Always inform the patient as to why the restraints are being used.
6. Allow for limited movement of the extremities. Do not bind the chest.
7. As soon as possible, remove all sharp objects from the patient
8. Continually reassess the circulation and airway of any restrained patient.
9. If a patient is so combative or belligerent that the crew feels in danger contact law enforcement for assistance. Stay away from dangerous patients until appropriate back up is on the scene.
10. Contact the hospital so they are aware of the impending arrival of such a patient.
11. **If you transport a patient with handcuffs a police officer must be in the ambulance with the patient. NO EXCEPTIONS**

POLICY NUMBER 015 RIDERS:

Purpose:

To set up guidelines for when riders should and should not be taken in the ambulance.

Scope:

To all staff members of Plymouth Ambulance Service, Inc.

Existing circumstances shall dictate whether Plymouth Ambulance Service Inc. shall allow riders.

1. In the case of a life-threatening emergency, where a “rider” would be a detriment to the life support of the patient, and a hindrance to the work of the EMT “riders” should be discouraged
2. The Parent or legal guardian of a minor child will be allowed to “ride” as consent to treat and transport will be needed by both the ambulance service and medical facility, as circumstances dictate.
3. If a patient needs to be in a child safety restraint seat, we will utilize either the patient restraint seat or the child restraint device that is carried on P.A.S. Ambulances.
4. Unless the parent or guardian needs to be in the back of the ambulance to keep the patient calm or to translate for you, all riders should be put in the front of the ambulance with their seatbelt in place prior to moving.

POLICY NUMBER 016 CONTINUING EDUCATION/REIMBURSEMENT ACCOUNT

Purpose:

To encourage attendance at continuing education seminars and workshops, this attendance is intended to provide personal and professional growth.

Scope:

All employees of Plymouth Ambulance Service, Inc.

Plymouth Ambulance Service, Inc. will pay/reimburse for the following:

1. EMT-Basic classes refresher
2. EMT-Intermediate classes
3. CPR classes
4. Manual Defibrillation class
5. Advanced airway class
6. Any other class or workshop that promotes growth in the medical field. With prior approval.

Employees of Plymouth Ambulance Service, Inc. will be registered by the ambulance service for EMT-Basic, and Intermediate refreshers and CPR classes held by the service. Any employee who does not finish that class will be required to reimburse the amount of that class to the ambulance service.

Each employee of Plymouth Ambulance Service, Inc. can earn up to but not to exceed three hundred dollars (\$300.00) per year for continuing education, but not to exceed a total spending amount of (\$500.00) per year. Each employee will receive twenty-five cents (\$0.25) for every hour of on-call worked.

Employees of Plymouth Ambulance Service, Inc., who attend seminars or workshops, will pay for the seminar/workshop on their own. Upon completion of the class, bring the cancelled check/receipt and a copy of the certificate showing completion of the class and the ambulance service will reimburse you up to but not to exceed three hundred dollars (\$300.00) and a spending cap of (\$500.00) per year.

Reimbursement for motels. If the seminar/workshop is 75miles or greater from the ambulance service, the ambulance service will allow the reimbursement for a single room rate to be taken from your continuing education account. If you wish to take your family along you will be responsible for the remainder of the bill.

If the seminar has an awards banquet or a dinner to honor people the meal would be paid for, but general meals will be at your own cost.

POLICY NUMBER 017 SPECIAL EVENTS AND SCHEDULING OF CREWS:

Purpose:

To provide staffing for special events.

Scope:

All employees of Plymouth Ambulance Service, Inc.

Through out the year Plymouth Ambulance Service, Inc. is asked to stand-by at many different events where we need to staff an ambulance. Some of the events are to be a dedicated ambulance (meaning that they do not leave the scene). The other events are covered by a “responding ambulance” with 911 & private party call responsibilities.

The Director of Operations will keep you informed when a stand-by is coming up. On occasion employees who wish to work certain stand-bys may be asked to sign up and state that they want the stand-by. When ever necessary we will have sign-up sheets showing the different events and the dates. Employees who sign up for that date will be scheduled. If more people sign up than the event requires, the employees with the picked by seniority.

If there is no sign up sheet the stand-by will be the responsibility of the third (3rd) out crew to stand-by at the event.

When you are doing a stand-by, the ambulance crew will be paid your regular run pay rate for your level of licensure per hour. Upon completing the stand-by you will continue to receive your regular stand-by pay per hour providing you are part of a duty crew.

Like the regular monthly schedule if you sign up for an event and are unable to make it you must find your own replacement. The replacement can be equally or higher trained. Once you have found your replacement you must contact the other person as well as management.

If there is more than one standby events going on at the same time we will staff the reserve ambulance with a crew assigned to the stand-by.

If 803-3 is at a standby event and the 1st and 2nd out ambulances go out on calls the procedure will be to request PFD 804 to be placed on stand-by until 2 PAS ambulances are available. In the event that 804 would be unavailable we would contact SCSD Dispatch and request 802 & 805 be placed on stand-by. At no time should a PAS ambulance leave a dedicated stand-by unless it is for a disaster, MCI event, or instructed by PAS Administration.

POLICY NUMBER 018 CLEANING/RESTOCKING AMBULANCE

Purpose:

To provide the best possible sterile conditions, and maintain the best possible appearance for the patients and families we treat and transport. By keeping the ambulance stocked we will be able to run multiple calls without running out of equipment.

Scope:

All employees of Plymouth Ambulance Service, Inc., new employees.

After each ambulance call the crew is responsible for the cleaning and washing of their ambulance. That includes doing the following:

1. Sweep and scrub the floors (patient and drivers compartment)
2. Wipe down walls and clean off the seats in the ambulance
3. Use disinfectants to clean as it pertains to the bloodborne pathogens
4. Washing the outside of the ambulance
5. Clean and dry the windows to avoid streaking.

If the vehicle is found to be dirty or not restocked the ambulance crew will each be docked one half (1/2) hour on their time card.

POLICY NUMBER 019 VEHICLE MAINTENANCE

Purpose:

To keep the vehicle in good working order and to prevent any major problems.

Scope:

All employees of Plymouth Ambulance Service, Inc., and employees in training.

Each employee while doing their rig checks will do regular vehicle inspections looking at the following items:

1. Warning equipment including lights and siren
2. Tires
 - a. pressure
 - b. wear of the tire
3. Check the water levels in the batteries, and radiator
4. All exterior lights, including headlights, directional signals, and back up lights
5. Fuel, and oil.
6. Check to make sure all latches and doors work freely

If you find any malfunctions of the above listed items or any other problems, document the problem on your rig check off sheet and then contact the Director of Operations or FTO in charge of maintenance, so that the problem can be fixed.

POLICY NUMBER 020 TORNADO WARNINGS/NATURAL DISASTERS

Purpose:

To provide the best possible coverage by EMS personnel during a disaster.

Scope:

All employees of Plymouth Ambulance Service, Inc.

In the event of a tornado warning or other natural disaster, no Firefighter or EMT, while on first (1st), (2nd), or (3rd) out on-call for Plymouth Ambulance Service, Inc., shall respond with their respective fire department or other ambulance service.

All on-call personnel shall keep themselves available to respond to any emergency in or outside of our service area.

The Director of Operations or Crew Chief shall inform the on-call staff members where to stage if the situation is warranted.

In the event that a staff member is unable to leave his home and family, the Director of Operations or On-Call Crew Chief shall find a replacement for that member.

POLICY NUMBER 021 REFUSAL OF TREATMENT/TRANSPORTATION

Purpose:

To honor the patient's wishes to refuse treatment and/or transport to a hospital.

Scope:

All employees of Plymouth Ambulance Service, Inc.

Plymouth Ambulance Service, Inc. will honor the patient's right to refuse treatment and/or transportation to the hospital, as long as the patient:

1. Is older than eighteen (18) years of age. If the patient is under eighteen (18) years of age and a legal guardian, or parent must sign the release form.
2. If you feel that the patient should seek medical attention, clearly advise him/her of the situation and the possible problems that could happen, related to their injuries if they refuse to be transported. Always make sure that they understand the situation. If they still refuse, tell them to at least call their family doctor.
3. If the patient is not going to be transported, make sure all reasonable steps are taken to protect the patient before leaving the scene.
4. If the patient is refusing transportation and there is no one to stay with the patient or you feel that the patient must be evaluated because of being a harm to themselves or others the police should be contacted. Just remember, unless they have threatened to harm themselves or others, they cannot be taken in under a chapter 51.

If the patient meets all of the above criteria, they may sign the refusal form for treatment and or transportation.

The staff of Plymouth Ambulance Service, Inc. will document the following information on the run sheet and refusal form:

1. Date and times of the call.
2. Address/location of the call.
3. Patient's name, address, DOB, and insurance information if needed.
4. Patient's name or legal guardian on the refusal form along with two (2) witnesses if possible.
5. A run sheet must be filled out appropriately for our records. You must document all your findings and who and why it was determined the transport was not needed.

Remember any patient of legal age can refuse transportation for any reason they want.

POLICY NUMBER 022 PARAMEDIC INTERCEPTS

Purpose:

To establish when a paramedic intercept should be called.

Scope:

All Plymouth Ambulance Service, Inc. employees

A Paramedic intercept should be called for the following situations

1. Code blue.
2. Crushing chest pain that is not changed by nitro, or oxygen.
 3. Patients in severe congestive heart failure
 4. Severe trauma with fractures (for pain medication).

Once you arrive on scene, you should start the patient care just like any other call. Start with the

1. ABCs
2. Treat any life threatening injuries.
3. Get a full medical history from the patient, family, or bystanders.
4. Do your primary and secondary survey.
5. Treat any complaints the patient may have.
6. Based on your assessment and the above information, you can then determine if you need a paramedic intercept.
7. **REMEMBER DO NO HARM**, if you feel that the patient will benefit from a paramedic intercept, they should be contacted.

When you have determined that you need a paramedic intercept, contact the sheriffs department and request that a PAS Paramedic ambulance be dispatched or the most appropriate Paramedic ambulance service. When you contact the sheriffs department inform them of what the patient's medical condition is. Also inform the sheriffs department on which way you want the ambulance to respond to the scene. Contact should be made on the EMS channel that is given.

The above are just guidelines for requesting a paramedic intercept. Remember once again, you are the one taking care of the patient, if you feel the paramedics are needed, contact them as soon as possible.

POLICY NUMBER 023 DISPATCHING PLYMOUTH FIRE DEPARTMENT FOR MEDICAL ASSIST

Purpose:

To assist Plymouth Ambulance Service Inc. staff members with help providing patient care, movement, and extrication of patients

Scope:

All Plymouth Ambulance Service, Inc. employees

A written agreement has been set up between the management of Plymouth Ambulance Service Inc. and the Plymouth Fire Department. The agreement reads as follows.

Plymouth Fire Department will be dispatched with Plymouth Ambulance Service Inc. in the City and Township of Plymouth. The Plymouth Fire Department is to be dispatched to the following emergencies.

1. Code Blue
2. Any Unresponsive patient of unknown nature
3. Automobile accidents
4. Any off-road type rescues

Plymouth Ambulance Service Inc. may also request the Plymouth Fire Department for lift assists for obese patients and helping extricate patient from difficult locations.

When Plymouth Ambulance Service Inc. is dispatched for any of the above situations the crew responding to the call is to contact the Sheboygan County Sheriffs Department (SCFD) and request that Plymouth Fire Department be dispatched for a medical assist. (i.e 806-1 to (SCFD) when we acknowledge the call and are en-route. Please dispatch Plymouth Fire Department for medical assistance.

If you arrive on scene and do not need the Plymouth Fire Department you can cancel them. The key is that if you-need help it is already under way. (Remember calling for help prior to arrival is to be done during your initial assessment all parts of scene size up that originates from the dispatch information

The policies and procedures of Plymouth Fire Department along with the command officer will determine the vehicle(s) that respond to the request being made by Plymouth Ambulance Service Inc. for assistance.

POLICY NUMBER 024 DESTRUCTION OF PATIENT CARE REPORTS

Purpose: To ensure a methodical, legal process of destroying archived patient care records.

Scope: Except for minors, patient care records will be kept on file for a minimum of 10 years after generation of the report. In the case of minors, the report will be maintained until the patient attains the age of majority plus 3 years or for 10 years, whichever is longer.

The Director of Operations or his/her designee archivist is responsible for ensuring that this policy is adhered to.

- I. Patient care reports meeting the above criteria may, at the discretion of the Director of Operations be destroyed using a mechanical shredder.
- II. Destruction of the documents shall be witnessed by the Director of Operations or his/her designee. Destruction of records will be thoroughly documented with the date, time, and signature of individuals performing the task.

POLICY NUMBER 025 QUALITY ASSURANCE / IMPROVEMENT (QA / QI)

Purpose: To provide a process that ensures both the quality as well as the documentation of care are consistently being scrutinized to maintain or improve the quality of care and documentation of care that our patients receive.

Scope: All Plymouth Ambulance Service, Inc. patient care records will be examined and critiqued by the Director of Operations and/or his/her designee. All patient care records will be kept confidential and all HIPAA requirements regarding QA / QI are to be followed.

The Director of Operations or his/her designee is responsible for ensuring that this policy is adhered to.

- I. Patient care reports are to be critiqued at least bi-weekly by either the Director of Operations and or his /her designee.
- II. All QA/QI shall be based off of the protocols and/or policies and procedures of Plymouth Ambulance Service, Inc.
- III. Only the Director of Operations has the authority to discipline an employee for QA/QI issues.
- IV. The Director of Operations and/or Designee will have the ability to recommend possible improvement or training that may be needed. The recommendations shall be in written form and shall be documented with a copy of the suggestion being placed in the employee's mailbox and a second copy being placed in the employee's training file. Employees may also be given recognition for certain documents that show there has been exceptional patient care or a better than normal turnout has occurred as a direct result of the patient care given.

- V. If the designee feels that there has been either a deliberate, malicious, or blatant disregard for protocol they shall notify the Director of Operations at the earliest possible moment.
- VI. Once the Director of Operations and/or the designee has completed the QA/QI assessment all patient care reports are to be placed in the Medical Director's QA/QI File to be examined by him/her.
- VII. The Medical Director shall also scrutinize the patient care report for deficits in patient care and/or documentation. All Medical Director Concerns shall come to the Director of Operations prior to notifying the appropriate employee.
- VIII. Once the QA/QI process has been completed the QA/QI (pink) copies of the patient care reports shall be shredded by either the Director of Operations and/or his/her designee.

**POLICY NUMBER 026 DOCUMENTATION OF LOADED MILEAGE
REGARDING AMBULANCE TRANSPORTS**

Purpose:

The purpose of this procedure is to define proper documentation for loaded mileage on all ambulance transports.

Scope:

This policy applies to all ambulance personnel affiliated with this ambulance service.

This procedure will provide the proper / legal process for documenting loaded mileage on all ambulance transports. Medicare requires that loaded mileage be documented consistently on all ambulance transports. The most appropriate means of obtaining this is mileage is directly from the odometer reading.

When documenting loaded mileage on the service's Patient Care Record (PCR), loaded mileage should always be documented as start and finished loaded mileage should always be obtained from the vehicle's odometer reading. It is not critical to obtain the entire odometer reading. The last 2 or 3 whole number digits, as well as the .10 (tenths) of a mile should be documented on the PCR. The service will take the difference between the start and finish mileage and round that number up to the next whole number. Even a difference in the total loaded mileage less than 1 should be documented in .10 (tenths) of a mile, as the ambulance is eligible to bill a total of 1 loaded mile for that particular transport.