
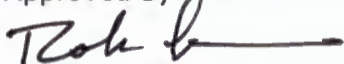


City of Manassas Fire and Rescue System System Wide Standard Operating Procedure		2.14
	Ride Along / Observer Program: Citizen and Student	Presented Date: 09/15/2011 Effective Date: 09/15/2011 Revision Date: 08/19/2020
	Approved by:  Rob Clemons Fire and Rescue System Chief	Date: <u>8/19/2020</u>

PURPOSE

To establish a standard for the City of Manassas Fire Rescue System for a Citizen and Student Ride Along/Observation Program. The Citizen program is to provide the public the opportunity to observe the activities of Fire and Rescue Services to gain a better understanding of the duties and responsibilities for fire and EMS personnel. The Student program is to provide the EMS student the opportunity to observe field operations and perform skills as authorized by their level of instruction to satisfy clinical hours as outlined by class curriculum.

POLICY

A Citizen Observer is an individual not affiliated with any agency within the City of Manassas Fire and Rescue Services and not one of the following: An EMS Student, a member of the news media acting as such, a staff member or volunteer from a mutual aid jurisdiction actually providing mutual aid in response to a request for it, or a family member riding along with a patient in an emergency. Individuals under the age of 16 years old are ineligible to be Citizen Observers.

An EMS student may participate in the ride along program if he or she is enrolled in and pursuing a professional certificate, associate's degree, or higher program in EMS from a college or university currently accredited by the Commonwealth of Virginia's Office of EMS. Such individuals are referred to as "Students" in this SOP. Individuals under the age of 16 years old are ineligible to ride-along as Students.

It is the responsibility of a chief level officer to approve an application prior to Citizen Observers / Student riding on apparatus. It is the responsibility of the Duty Crew Officer in Charge / Attendant in Charge (OIC/AIC) to ensure that Citizen Observers / Students have complied with the Fire and Rescue Systems Ride Along program requirements prior to riding on apparatus. This includes the completion of the waiver of liability and HIPAA participant agreement.

Citizen Observers shall not participate in fire suppression, emergency medical services, or other Fire and Rescue Services duties. Students may only take part in EMS incidents to the extent permitted under this SOP.

PROCESS

Citizen and Student:

- To be considered for the Citizen or Student Ride Along program, a person must submit a request to the Chief Officer on the Ride Along application, specifying the station where the Citizen / Student wishes to ride. Any request less than five business days before the first requested ride-along date will not be considered.

- If the application is approved, the Citizen / Student must review this SOP in its entirety, and sign all related forms, to include: Ride-Along Program Application, Informed Consent, and Ride-Along Participation Agreement. *Please note that these forms are required for each period of time a Citizen / Student will be participating in the Ride Along program.*
- Copies of this Ride Along SOP with application and all applicable forms are available at all stations, the Fire and Rescue Department Headquarters, and online at www.ManassasCity.org/Fire.
- No person may participate in the Ride Along Program if he or she has a conviction or pending indictment that would prohibit him or her from being hired by the City of Manassas under the provisions of City Code § 2-138. Other circumstances that disqualify an applicant include being the subject of a restraining order for a person or address in or near Manassas.

Student:

- The original signed forms shall be maintained on file with the Clinical Coordinator for the City of Manassas Fire and Rescue Services for a period of three years after the last ride along by that Citizen / Student. A copy of the forms shall be forwarded to the appropriate shift officer, career and/or volunteer. These forms are personnel records for purposes of the Virginia Freedom of Information Act and related laws.

AUTHORITY AND RESPONSIBILITY:**1. Ride-Along Hours and Standards*****Citizen:***

- a. Citizen Observers are limited to one ride along period every 90 days. A ride-along period is a continuous period of no longer than eight hours, starting no earlier than 0800 and ending no later than 2300. Citizen Observers may not sleep in a station or Fire and Rescue vehicle. The Fire and Rescue System Chief may approve or deny any request for participation in this program, or alter such request in the best interest of the department.
- b. Citizen Observers must not become physically or verbally involved in an incident. Under no circumstances will a Citizen Observer be permitted to enter a building that is or has been on fire until such time as the Incident Commander has declared the fire under control, all smoke has been cleared from the building, and the building has been determined to be safe for entry by non-operational personnel. Fire department personnel shall directly supervise such entry.

Student:

- c. Students approved for a ride along must schedule their needed hours with the Clinical Coordinator who will maintain a calendar of all students. The Fire and Rescue System Chief retains ultimate authority with regard to such scheduling.
- d. Students may only perform skills which their instructors or class administrators have authorized them to perform, after appropriate instruction as part of on-going certification training.

Citizen and Student:

- e. Failure to follow the directions of the OIC/AIC will result in loss of the privilege to participate in the ride along program.
- f. The on-duty Battalion Chief shall determine whether a crew has appropriate qualifications and equipment to take a Citizen or Student ride along.

2. Dress and Appearance

- a. Participants shall be neat and clean in appearance. Their personal hygiene and grooming must be acceptable to the shift duty officer and chief. While participating in the Ride-Along Program, the Citizen Observer / Student is, in effect, representing the Fire and Rescue System.
- b. Participants shall wear suitable attire. Dark pants and light plain shirts are recommended (no jeans). No writing or artwork is allowed on clothing, except small brand logos are acceptable. Shorts and tank tops are prohibited. Riders must wear flat, closed-toe shoes (steel-toe shoes are strongly recommended). Citizen Observers from agencies other than the City of Manassas Fire and Rescue System may wear their agency uniform with prior approval.
- c. Citizen Observers shall wear a name badge or observer vest provided by the Department, or other appropriate badge provided by the media, school, or hospital, etc.
- d. Students shall wear a name badge or other appropriate badge provided by their school. Students shall wear safety vests provided by the System when in or near moving traffic.

3. Conduct

- a. Health and Safety
 - i. No firearms or other weapons may be brought onto department property or carried during the ride along, unless the Citizen Observer is currently a certified active police officer with a jurisdiction in the Commonwealth of Virginia.
 - ii. Participants may not be under the influence of alcoholic beverages or drugs during a ride-along. The OIC/AIC will not allow the Citizen Observer / Student to ride along if there is any reason to suspect that the Citizen Observer / Student is under the influence.
 - iii. Participants shall wear a seat belt as per State Law and City of Manassas Fire and Rescue System Standard Operating Procedure 2.11 "Seat Belt Usage."
 - iv. Participants shall carry a valid Virginia Driver's license or identification with them during the ride along.
 - v. Use of tobacco products is not permitted in any station or vehicle.
 - vi. Participants are responsible for determining whether they are physically and psychologically healthy enough for a ride-along, and whether they are currently impaired due to illness, injury, medication, or the like. In any case of doubt, the Citizen Observer should postpone the ride-along activity to another date.

b. Patient Privacy

- i. At no time will Citizen Observers / Students be permitted to take pictures or use a video camera or any other audio-visual recording device while on the scene of an incident. Requests for media to ride along will be dealt with separately through the Fire and Rescue System Chief.
- ii. All participants will treat PHI (private health information) as strictly confidential. The disclosure of PHI outside of the organizations who are working with the patient is strictly forbidden.
- iii. Participants may not take, copy, or transmit response documents with individually identifiable information such as name, address, Social Security Number, photograph, medical history, or other information from which identity can be inferred.

c. Expenses

- i. Citizen Observers / Students will be responsible for bringing their own meals or can make arrangements to buy-in for meals with officer in charge.

City of Manassas Fire and Rescue System Citizen / Student Ride Along Application

APPLICANT INFORMATION

The completed form must be returned to the Fire and Rescue Department Headquarters at least five business days prior to your requested participation. Any false information or omissions on this application may result in disqualification for ride along privileges. Fire and Rescue Systems reserves the right to deny ride along privileges for any reason, without prior notice.

Full Name: _____ Date of Birth: ____/____/____

Home Address: _____
Street Address

City: _____ State: _____ ZIP: _____

Home Number: _____ Cell Number: _____

Female Male Undisclosed

Citizen Observer Ride Along Program Student Ride Along Program

If Citizen: _____ ***If Student:*** _____
Place of Employment: EMS Training Site:

Address: _____ Address: _____

Phone No.: _____ Phone No.: _____

Name of Instructor or Class Administrator
at EMS Training Site:

Signature of above person:

Date of signature:

Unit level / Student Participation (circle one):

BLS ALS

Dates you are requesting to Ride Along:

Please answer the following by circling a 'Y' for Yes, or an 'N' for No:

1. Are you subject to a court order restraining you from contacting any person? Y N
If so, state the date of the order, the name of the court that issued it, the name of the party protected by the order, and the address of the party protected by the order:

2. Have you ever been convicted of a felony or a misdemeanor? Y N
If Yes, please list the offense, date, and city/county of the court where you were convicted. Exclude any convictions adjudicated in juvenile court or under a youth offender law, and exclude any traffic infractions for which you paid only a fine.

3. Are you under indictment or do you have charges pending in any court for any crime? Y N

4. Are you taking any medication that could impair your judgment in a stressful situation? Y N
If so, indicate the situations and/or times when you are on this medication:

5. Have you ever participated in this program? Y N
If yes, when did you last participate?

6. Are you an unlawful user of marijuana, any depressant or stimulant, or any controlled substance? Y N

I have read and understand the procedure for the Ride Along Program of the City of Manassas Fire and Rescue System. The above information is true and accurate to the best of my knowledge.

Signature of Applicant:

Signature of Applicant

Date

Printed Name

Signature of Parent / Guardian (if participant is under 18):

Signature of Parent / Guardian

Date

Printed Name

FOR Chief Officer Use:

Approved: Yes No

Signature: _____ Date ____/____/____

Comments:

Return completed form to the: City of Manassas Fire and Rescue System Headquarters
9324 West Street, Suite 103 | Manassas, Virginia 20110 | (703) 257-8458



City of Manassas Fire and Rescue System Informed Consent – Ride Along Program

I understand that there is a possible risk for exposure to potentially life-threatening infectious diseases by direct contact or body fluid exposure, aerosolized airborne means, aerosolized droplet means, or by agents potentially used for bioterrorism or biological warfare when participating in a ride along program within the fire and rescue work environment.

I have been offered an opportunity to ask questions about the diseases and the risk for exposure, and to have those questions answered.

Should I become exposed to any potentially infectious materials, I will be advised by a representative of the City of Manassas Fire and Rescue System of that exposure and to seek medical attention. I understand that the City of Manassas Fire and Rescue System is **NOT** responsible for covering any costs associated with post-exposure medical treatment and/or counseling.

Participant:

Name (Print legibly): _____

Signature: _____

Date: _____

Witness: _____

Parent / Guardian (if participant is under 18):

Name (Print legibly): _____

Signature: _____

Date: _____

Witness: _____

CITY OF MANASSAS FIRE IN RESCUE SYSTEM

RIDE-ALONG PARTICIPATION AGREEMENT, NOTICE OF PRIVACY LAWS, RELEASE OF ALL CLAIMS AND ASSUMPTION OF THE RISK

WHEREAS, I, the undersigned, for my own personal education and benefit, request at the City of Manassas Fire and Rescue System (“System”) grant me permission to ride in Fire and/or Emergency Medical Service (“EMS”) vehicles, participate in Fire and/or EMS training exercises, and participate in other fire and rescue related activities (“exercise”), and the System is willing to permit my participation because it serves important government functions such as public education and recruitment, I agree as follows:

I have been instructed in federal, state and local laws and regulations concerning emergency medical services, including the Health Insurance Portability and Accountability Act (“HIPAA”) relating patient confidentiality, and I agree to abide by such laws and regulations. As a participant in the Systems Ride-Along program, **I agree to safeguard the privacy and confidentiality of all patients and participate in these exercises.** I agree not to share or confirm any information regarding individual patients or their treatment, except with System personnel. This includes any information that could be used to identify these patients, such as address, description, or otherwise. I understand that any disclosure of patient information in violation of HIPAA may subject me to civil and/or criminal penalties as prescribed by 42 USC §§ 1320d-5 and 1320d-6 or other law. Such penalties may include up to ten (10) years in federal prison and up to \$50,000 per violation.

I acknowledge that **at all times I will remain under the direct supervision of Fire or EMS instructors** which may include System officials (“supervisor”). At all times I will display my identification and participant/student status. I agree to immediately notify my supervisor of any accident or injury to me, or any incident that causes me concern, and cooperate in providing information concerning same.

During and after these exercises while in or around System premises in vehicles, I will remain under the instruction of my supervisor, and **I will abide by all instructions and restrictions imposed by the System and/or my supervisor** including but not limited to instructions as to how I should act and the use of equipment. I acknowledge that I may be asked to discontinue the exercises or required to leave the premises at any time for any reason and I agreed to abide by such decision and the reason therefore need not be disclosed to me. I authorize the System to seek emergency medical treatment for me and to arrange for my transportation to a medical facility in the event of a medical emergency.

I have been instructed as to the nature of an EMS ride along and my participation in these exercises. I understand that each exercise requires of substantial degree of physical and psychological involvement in danger. I acknowledge that the System has taken all reasonable steps to prepare and train me and properly equip me for these exercises. However, I have been warned that despite reasonable efforts made to protect me, I could suffer serious bodily injuries, emotional and psychological trauma, personal injuries, death and/or property damage as a result of the exercises. Notwithstanding such warning, and with full and complete understanding of the risks and dangers the exercises involve, **I voluntarily assume full responsibility and risk** for any and all personal and bodily injuries, death and property damage that may result to me from my participation in the exercises, and the risk that such injuries and damage may become permanent or more extensive than is known, anticipated or expected, and I assume all risk inherent to these exercises.

I certify that I am physically capable of safely participating in the program, and I have taken all actions that I consider necessary to make this determination, including seeking the advice of appropriate examinations by qualified physician, and seeking any recommended vaccinations and health care. I agree to advise the System of any disability that may require accommodation and agreed to cooperate with the System to determine whether an accommodation of such disability is reasonable.

In consideration of being allowed to participate in these exercises, I hereby waive, release and forever discharge the City of Manassas, the City of Manassas Fire and Rescue System and its constituent entities, their officers, directors, employees, agents and volunteers (the "City") from any and all claims, liabilities, losses, damages, expenses, actions and causes of action of every nature and kind arising out of or relating in any way to the exercises. I agreed to indemnify and hold harmless the City from any and all personal and bodily injuries, death of property damage, including cost of investigation, reasonable attorney's fees and costs of appeals, arising out of any such claims or suits because of any acts or omissions by me. I understand that any insurance or reinsurance related to my risk is solely my responsibility.

I acknowledge that, although I will be assigned duties as a ride-along, these duties and my participation in the ride-along program or not job-related activities for me. No worker's compensation, insurance, reimbursement or other benefits are available to me in the event of an injury, death, property damage or other loss. No promise or inducement has been made to me for my agreement.

I certify that I am over eighteen (18) years of age and am mentally competent. This Release and Assumption of Risk is binding on all my heirs, executors, administrators, next of kin and assigns, and all persons who may claim by or through me.

CAUTION: READ THE FOREGOING RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK BEFORE SIGNING. THIS DOCUMENT IS VALID UNLESS AND UNTIL REVOKED IN WRITING AND REVOCATION DELIVERED TO THE CHIEF OF THE CITY OF MANASSAS FIRE AND RESCUE SYSTEM.

PARTICIPANT SIGNATURE: _____ Date: ____/____/____

Print Name _____ Phone _____

Address _____

In emergency, you may contact _____
Name Phone

Witness _____ Date: ____/____/____

Department Chief _____ Date: ____/____/____