

Vehicle Safety?

01/04/07 67 W - + 14 - 12

On the subject of collisions and crashes and general safety, what are everyone's best practices with regard to driving? Ditto your agency's SOPs on same. Alternately and without naming names-- no dirty laundry, please-- what are the less-desirable practices on display these days? From responding to staging to returning to quarters, what are your notable do's, don't's, and d'ohs?

DJ's Top Ten Ambulance/Emergency Vehicle Driving Tips (Note- any new medics riding with me need to know these. DJ)

1. Do not do anything that will cause bodily injury to me.
2. Driver and passenger are both responsible for looking both ways and forward. Four eyes are better than two. Stop at stop lights and stop signs. Stop twice at big intersections. Look at all lanes (including the turning lane) and the shoulder.
3. No, they cannot see or hear you coming. Their stereo's sound system is better than your siren. Speed is not a medical treatment. Drive as though you will have to stop on a dime. Just because a Powerstroke will run 95+ does not mean you have to.
4. Always drive the speed limit in residential and crowded areas. Even though you are driving as though you can stop on a dime, you really can't. And drive less than the speed limit in school zones. Shopping centers and the airport terminals qualify as school zones.
5. No sirens in residential areas. Kids like to come out and see what's going on- right into the path of the other vehicle (engine company, ladder company, supervisor, or police car) that is following you.
6. No police escorts. The average not-paying-attention, oblivious-to-the-world, I-am-so-important-I-have-to-talk-on-my-cell-phone-all-the-time, the-world-revolves-around-me driver will not think that there is another emergency vehicle coming behind the police car.
7. Never use 'yelp' on the new eQ2B's. Use it just like the mechanical siren. You would be surprised at how much volume and distance you lose with 'yelp'. Never move the selector on the older electronic sirens (Whelen 295, Federal PA300, etc) back and forth. Set it on 'wail' and leave it. People will move out of your way better. The wailing sound carries further. Never use the 'phaser' or 'piercer'...it is worse than 'yelp'.
8. When traveling with emergency lights on during the day, activate your side load lights. Many times your strobe lights disappear in the daylight.
9. Put at least one (preferably two) big red fire trucks between my ambulance and oncoming traffic.
10. Do not do anything that will cause bodily injury to me.

DJ - 01/05/07 - 17:26

Hmmm, no siren? Nah, I disagree. God forbid someone pull out in front of you, and you nail them, this is the question you will be asked; yes or no, were all of your warning devices activated, audible and visual?

Guest - 01/05/07 - 18:05

I agree with Dale... sirens are over-used and there is a time not to use them. If you read what Dale said, "speed limit in residential areas" and you are not asking for anyone to yield the right of way, you do not need the siren. If you are going above the posted speed and asking for the right of way; sure, use the siren.

emsguest - 01/05/07 - 18:22

Correct...never exceed the speed limit in a residential area. Even if you have lights and sirens on, and you hit someone, then there is going to be the question "were you acting in the same manner as a reasonably prudent person would under similar circumstances?" And you can believe that there will be plenty of "expert witnesses" to testify that you were not acting as a reasonably prudent person would...

emsguest makes a good clarification...per NC law you only need the siren when you are exceeding the speed limit or proceeding through intersections against a light or sign.

And besides, if you are driving in a residential area with the siren on, you tend to go faster. And even though you won't be charged, how will you (or anyone) feel about the driver of that emergency vehicle behind you (we seem to travel in pairs or more) who hits the 6 year old who wanted to go and follow the (insert emergency vehicle here)?

BTW— the 'Top Ten' is based upon 31 years of experience in driving all manner and sizes of emergency vehicles in rural, suburban, and urban environments.

Coming up next..."Top Ten Goofs of the Past Few Years"

DJ - 01/05/07 - 18:38

I think it might be worth noting that we all ought to belt up more.

I know...I don't wear my seat belt as much as I ought to either (for instance, I've always been more likely to wear the belt when in the front seats than in the back), but it is a precaution that we should all be taking.

attic.rat - 01/05/07 - 20:09

I agree... we do not use our seatbelts enough. I heard the Rocky Mount Fire Chief speak once and he said that seat belt use is mandatory at all times and that the disciplinary action is tough for those who are caught without a belt on. How do most of the firefighters feel about that, I wonder? EMS doesn't use backers as often as we should. You generally always see a firefighter on the ground backing; however, in EMS we are slack in this. It's one thing to have a patient; however, when backing up at a restaurant or the station, we don't have any excuse. I'm as bad as everyone else, but it is a bad habit.

emsguest - 01/05/07 - 21:08

I agree with all of you. However, have you all ever noticed that when you ride with people that are over cautious and they really s-t-o-p at intersections that the motoring public thinks we are giving them the right of way and just as you start to proceed through so do they?

Sometimes i think we have to be a little aggressive and kind of "tell" people where we are trying to go.

firedriver ([Email](#)) - 01/05/07 - 22:07

Regarding roadway incidents around Raleigh, it sure seems like lane blocking is done very conservatively. On (northern half of the) Beltline incidents, for example, one lane versus all but one lane might be blocked. Yeah, this ain't Atlanta and traffic gets pretty pokey passing an accident scene. Maybe one lane under most circumstances is fine. Maybe that's what law enforcement wants. Don't know, just speaking anecdotally. The southern half of the Beltline, as well as I-40 into Durham or Garner, is another story. Haven't observed nearly as many incidents on those routes.

Legeros - 01/06/07 - 07:10

Some stuff I noticed in Atlanta recently- First, they have dedicated "Highway Incident Management Units" (not the actual name, but it is what they do) that respond lights and sirens to highway incidents around Atlanta. They are yellow F-450's with utility type bodies, traffic director flashers that fold up, spill containment, first aid equipment, and probably more. At one MVC-rollover, in addition to a full alarm assignment from DeKalb County Fire (two engines, a quint, a heavy rescue, a battalion chief, and four ambulances) there were three of these units on a Sunday afternoon. Second, as noted in #7 of the top ten list, yelp is useless. I never knew how much until then. Third, they did not have any problem in shutting all lanes of traffic for the safety of the responders, and then only opened up one lane at the time as the ambulances and other emergency vehicles departed. Fourth, this was all done without the assistance or input (or interference some would say) of the Atlanta area police or the Georgia State Patrol.

DJ - 01/07/07 - 20:35

I've tried for years telling people that yelp and phaser are useless. I always thought the old "Hi-Lo" was pretty effective though, and that's probably because it is such an unusual sound here locally. I tell you, I don't see how we can justify the Wake County EMS supervisors running emergency traffic all the way across the county to get to a lot of these calls – it is just plain dangerous. Place the equipment on the ambulances for everyone or at least develop some type of "full assignment" which consists of a second ambulance for certain incidents. In Wake County, the supervisors/DC's with EMS are merely QRV paramedics and are not able to function as supervisors because they are too busy doing paramedic things and chasing cardiac arrests all over the county.

emsguest - 01/07/07 - 20:35

Exactly what type of 'medical' calls does the supervisor respond on? Do they go on all cardiac arrests?? I can understand them responding to

Pin-in/Extrication incidents (wrecks, industrial, machinery, etc) and other "speciality-type" incidents (high/low angle rescue, trench rescue..). What about fires? Do they respond to your average "bread and butter" first alarm fire or do they only respond on greater alarm fires? What is the justification behind having them respond to the incidents that they do? Which brings me to my next question, what equipment do they carry that the ambulance does NOT carry?

Not being all too familiar with Wake EMS, I always thought it was interesting/strange that there were so many "supervisors" on duty. In my opinion, they are more like Battalion Chiefs. Of course, I'm 'coming from' a place that pretty much has 1 Operations Supervisor on duty whom operates out of an office and responds to calls at their discretion, but is dispatched on any "large" incident or special rescue incident.

Luke - 01/07/07 - 20:36

If I'm not mistaken, before I left Apex, Apex EMS had implemented some type of 'full assignment' response for cardiac arrests. I remember seeing one arrest run with this assignment and it was 2 ambulances and their QRV (suburban) and possibly a Wake EMS supervisor (I can't remember that detail). Maybe someone still in Apex can clarify this response. The particular incident I'm referencing was a cardiac arrest at Spring Arbor, which should be renamed... Apex Station 4!

Legeros - 01/07/07 - 20:36

In answer to Luke's Question:

The "District Chiefs" (as Wake EMS calls them) and the 2 Supervisors (Cary EMS & Eastern Wake EMS) are dispatched as follows (all things being equal:

203 (based at EMS Station 8 on Varsity Drive) – City and Western Wake County Responses

204 (based at Fairview FD Station 2 on Ten-Ten Rd) – Souther Wake County & Apex/Cary responses

205 (based at EMS Station 10 -S. Franklin St, Wake Forest) – Northern Wake County responses

Cary 580 (baseed at Cary EMS Station 1 – Medcon Ct, Cary) – Cary responses (will cancel EMS Supervisors)

Eastern Wake 602 (based at Eastern Wake EMS Station 1 – 3rd Street in Wendell) – Eastern Wake County responses

The QRV medics respond on what CAD refers to as "high-acuity incidents." These include shootings and stabbings, specialized rescues, cardiac arrests and other situations where breathing cannot be verified or is ineffective, MVC's with high potential for injury (Head-on, Rollover, Ejection, Pin-in, etc.), any high-acuity response on the Burns card (EMD Card 7), any HazMat call (EMD Card 8), drownings (EMD Card 14),... you get the picture. Really, it's any situation where an extra set of hands might be used.

As far as what they carry, they carry specialized incident command equipment, extra supplies (O2 tanks, meds, the like). They also carry the equipment that the county is using to start the Induced Hypothermia protocol on resuscitated cardiac arrest patients (supposed to improve neurological outcomes).

As far as other supervisors, there are operational people who are paramedics (other chiefs, QA officer, Ops Chiefs for Wake EMS) who have vehicles which will respond at their discretion, but most of the time stay in the office. And then there's MD-1 (Dr. Myers), who has his own vehicle and will show up if he's not in the ER. (That's really cool, because he does some things in the field that we never dream about doing...)

And I do agree with "msguest" when he says it is just too dangerous for these supervisors to be going like a bat out of hell to get to some of these calls. Occasionally, you will here them pipe up on the radio and swap calls, or say that they will not be responding due to distance. At that point, the EMS unit responding has the discretion to request another EMS unit, carte blanche, and will not be penalized for it. I have more than once rolled up to a bad 10-50 and the supervisor wasn't coming due to distance. We just got on the radio and asked for another ambulance, and we got it while they were still extricating both patients...

Yeah, the system has some bugs to work out, but a lot of it is common sense: If you're too far, DON'T GO. There's always someone closer (and if you call an ambulance instead of the supervisor, you get two sets of hands instead of one...).

And Dale, I like those rules, because they make sense, but I disagree with "No sirens in residential areas." You should always slow down (something I'm guilty of not always doing), but leave your siren on. The first thing they'll ask you on the stand is, "Were all of your warning devices activated?" And as soon as you say "No," there goes your certification... career... freedom? (I don't seem to recall any exception to siren use in the NCGS... I might have missed it, could you post it so I can read it?)

EMS Guy - 01/07/07 - 20:36

Here's a passenger's seat perspective on riding with an EMS Supervisor: <http://www.firenews.net/contents/news/05...>

Legeros - 01/07/07 - 20:37

Cary's supervisor is now called a District Chief and has been dispatched out of the Cary area on more than a few occasions.

During the day you also have the chief that will respond if needed.

ok question to stir the pot:

Does anyone see any one agency taking over EMS county wide? be it Wake EMS, Wake Med, or something totally different. ON that same note does anybody see any of the larger FD's taking over EMS response? figured this will lead into some interesting conversation.

I also noticed on the news the other night that Wake Med got the green light for their helicopter... I've also heard that quite a few of Wake EMS's medics have been going over to WakeMed in recent months... is this maybe a sign of things to come?

CFP 7021 - 01/07/07 - 20:37

If you are not exceeding the speed limit, then turn it off. I can remember several times over the years when I was coming in a block or two behind another emergency vehicle and some kid (or two) came barreling out on a bike to follow them. If I had been driving 'emergency' I would have hit them. Also, even if you are using light and siren, while you may not be guilty in criminal court (think OJ Simpson) that still will not release you in civil court. In criminal court it is "beyond a reasonable doubt" while in civil court it is based upon "the preponderance of the evidence". In civil court they will ask several expert witnesses about the prudence of speeding in a residential area. But anyway-

§ 20 145. When speed limit not applicable.

The speed limitations set forth in this Article shall not apply to vehicles when operated with due regard for safety under the direction of the police in the chase or apprehension of violators of the law or of persons charged with or suspected of any such violation, nor to fire department or fire patrol vehicles when traveling in response to a fire alarm, nor to public or private ambulances and rescue squad emergency service vehicles when traveling in emergencies, nor to vehicles operated by county fire marshals and civil preparedness coordinators when traveling in the performances of their duties. This exemption shall not, however, protect the driver of any such vehicle from the consequence of a reckless disregard of the safety of others. (1937, c. 407, s. 107; 1947, c. 987; 1971, c. 5; 1977, c. 52, s. 3; 1985, c. 454, s. 5.)

§ 20 125. Horns and warning devices.

The operators of all such vehicles so equipped are hereby authorized to use such equipment at all times while engaged in the performance of their duties and services, both within their respective corporate limits and beyond.

In reading the general statutes I cannot find anything that says specifically you have to have both lights and sirens on. You are just not released from liability for reckless actions and you have to act with due regard for the safety of others. That's where those pesky expert witnesses come in to play.

Everyone does it a little different. Me? On my ambulance? No siren in a residential area.

Changing subjects, another reason the supervisors go on full arrests is the new 'induced hypothermia' protocol (Raleigh/Wake is the third in the nation to implement it). At present the supervisor vehicles carry the chilled normal saline and the necessary medications.

DJ - 01/07/07 - 20:37

I can't say how I would drive if I were an EMS person, as we know they all do things different, but I can tell you one thing that is for sure, if my warning lights are on, my siren is on. Period whether it's a highway, throughway, or residential street. That's what they're there for. If you are not exceeding safe speed then turn the lights off too in that case.

You also have to obide by your departmental protocol when responding emergency traffic. I know that I don't exceed the speed limit in residential areas as it's a pet peeve of mine and I avoid residential streets as much as possible. But if my lights are on, my siren is on as it's either an emergency or it's not, no gray area or "code 2"

as for the kid barrelling out to follow another emergency vehicle, if you would have had your siren on he would have heard you and perhaps not have darted out.

There is a difference in having all warning devices on and activated and still obeying traffic laws, and having all warning devices on and activated and using "due regard" when exceeding the speed limit. They're both emergency responses, but you drive according to conditions, and in residential streets the conditions, in my mind, dictate obeying the speed limit and driving more careful than on other streets.

I don't have the time in service as you do and don't dispell your experience but that's just my \$.02.

CFP 7021 - 01/07/07 - 20:38

Thanks for answering my question, although it has raised a few more questions! For the calls you mentioned (shootings, stabbings, MVAs, etc) is the Supervisor (or District Chief) automatically dispatched on the run or do they add themself to the call OR might they just decide to head that way? If they are automatically dispatched on the run, it seems as though they would be running calls all day, as there are probably plenty of stabbings, shootings, wrecks, cardiac arrests, etc. during your average day. Also, I see you refer to them as QRV Medics; once on scene do they take over patient care or do they only step in if things aren't going well and/or give advice to the Paramedics? I guess when I think of a QRV Medic the first thing that comes to mind is Orange County's program. I know Wake isn't like that, at least I know Wake isn't EXACTLY like that!!

Do the District Chief's automatically get dispatched to a "fire standby" when the ambulance does or would they only respond on a 'greater alarm' fire incident?

Are they the ones in charge of the personnel that fall into their "District" (like a Battalion Chief in the Fire Department) or is there a "Shift Supervisor" that handles personnel issues/concerns/etc. ?

Like I said earlier, I am really only familiar with two EMS systems.. Mecklenburg County and vaguely Wake County (mainly Apex). Thanks for the clarification and information.

Legeros - 01/07/07 - 20:38

First, to Dale... thanks for posting that. Helps to clear up some confusion, but creates a couple of questions.

To Luke: DC's are automatically dispatched as part of the CAD run card, similar to a fire run card. Per Dr. Myers, "the supervisors are a resource to be used. THEY ARE NOT TO TRY AND TAKE CONTROL OF A SCENE IF IT IS BEING MANAGED. If you need them to do CPR, they will. If you need them to fetch a stretcher, they will. If you need them to do an advanced procedure, they will. If you need them to stand out of the way, they are to do so." (That is a direct quote, because there were some scenes in the county rescue squad picture where some supervisor showed up and tried to take over when things were running smoothly and went to crap.) They are only dispatched to working fires (after engine gets there and assesses the situation). They are needed for rehab sector. As for the personnel questions, I can't answer those, as I'm not a Wake EMS employee. But maybe someone else who is reading the blog can.

And to CFP 7021... I don't see any changes coming for EMS in the next 5 years. 10, and there might be some big changes. But there will have to be a push by the county commisioners to do something. As it stands, they get a great service from the rescue squads for next to nothing. Someone will have to take that into account.

And I also agree with you about the "all or none theory" when it comes to response. If they dispatch you emergency, you go, no questions asked. DO IT SAFELY, but assume (I know) that dispatch knows what they are talking about when they say an emergency response is dictated. I HAVE SAT IN DISPATCH, and I know that sometimes that is a great leap of faith, but still...

EMS Guy - 01/07/07 - 20:38

EMS Guy- Thanks for that clarification.

7021- [sarcastic] THANKS for opening THAT can of worms!! I think it will be tough, and take many years, but eventually we will probably see Fire and EMS combine. I would venture to guess that if the County ever took over all County stations that they could probably angle to take over EMS as well. The EMS stuff might take extra time to gain, but I could see it happening. Creating "Wake County Fire/EMS Department." Not sure all of the logistics of it, but they could probably contract to provide EMS to municipal areas that have 'stand alone' EMS (Apex as an example). I'm sure as a combined County organization they would be able to provide the service at a cheaper rate. Again, I'm not familiar with all the 'nuts and bolts' of what would be involved... I'm just speaking off the cuff. I think it might end up being something similar to what you see a lot in NOVA (Northern VA) and Maryland. Something like what PG County MD has. Of course, this would be many moons down the road. Charlotte FD will probably be combined by then. On that note, I could see most large departments eventually combining and becoming

Fire/EMS. Look at most of the large departments these days..

And that's my .02 worth, for now!

Luke - 01/07/07 - 20:39

In regards to NC Statutes and Warning Devices, here is something to think about:

§ 20-157. (Effective until July 1, 2006) **Approach of police, fire department or rescue squad vehicles or ambulances;** driving over fire hose or blocking fire-fighting equipment; parking, etc., near police, fire department, or rescue squad vehicle or ambulance.

(a) Upon the approach of any police or fire department vehicle or public or private ambulance or rescue squad emergency service vehicle giving **warning signal by appropriate light and by audible bell, siren or exhaust whistle**, audible under normal conditions from a distance not less than 1000 feet, the driver of every other vehicle shall immediately drive the same to a position as near as possible and parallel to the right-hand edge or curb, clear of any intersection of streets or highways, and shall stop and remain in such position unless otherwise directed by a police or traffic officer until police or fire department vehicle or public or private ambulance or rescue squad emergency service vehicle shall have passed. Provided, however, this subsection shall not apply to vehicles traveling in the opposite direction of the vehicles herein enumerated when traveling on a four-lane limited access highway with a median divider dividing the highway for vehicles traveling in opposite directions, and provided further that the violation of this subsection shall not be negligence per se. Violation of this subsection is a Class 2 misdemeanor.

<http://www.ncga.state.nc.us/EnactedLegis..>

Just FYI, those are the same rules that apply to any bicycle riders.

Luke - 01/07/07 - 20:39

That's the GS I could not find because I could not remember the number! If you want to see how well THAT law is working, just ride along in Raleigh in a fire truck or ambulance...

DJ - 01/07/07 - 20:40

Just a little note: EMS 204 runs out off Fairview Sta-1 now.

Lee - 01/07/07 - 20:40

Luke, you beat me to the punch. Just FYI from earlier in this blog, it's not just running the siren "every once in a while". The statute clearly states lights AND siren.

Silver - 01/07/07 - 20:41

Word around RFD is that the MVA response on a "major thoroughfare" will change to 2 pieces of apparatus. One for the incident, the other for "blocking". I think Dallas started this concept, and personally I like it. Especially with high speed collisions, you can usually use the extra hands and medical equipment. I'd like to see it happen.....

Guest - 01/07/07 - 20:41

Also the Cary Supervisor doesn't have to cancel the County supervisor as they are no longer dispatched with the Cary Supervisor is closer. The Cary Supervisor is a recommendable resource just like all of the others now. I do like the comments regarding Dr. Myers' thoughts on what supervisors are there for – but that's not reality. [Observations on varying styles/skills of supervisors deleted.] One of the biggest EMS problems right now is the fact that multiple units will sit at the hospital and will not clear for calls. This is unless the call is for a shooting, stabbing, MVC or code blue. Then they all fly out and 2 or 3 Wake EMS trucks go. If the call is for a sick person or other medical complaint, an ambulance has to come from Six Forks, Garner, Eastern Wake or Cary into the city to answer calls within 2 or 3 blocks of the hospital where there are often times 5 or 6 Wake EMS trucks. We need to start treating every call the same and not picking and choosing. The contracted agencies do a great job of answering their calls and calls all over the city of Raleigh, yet the County people gripe about having to do key coverage for one of the contracted agencies. It works both ways and it is time to put district lines aside and quit fussing about who is going where. Let us start relying more on common sense than on what CAD recommends. Also, it is high time that the supervisors step up to the plate and get on the radio! A supervisor is well within their bounds to say, "No Raleigh, do not send that unit to cover, do it this way." The telecommunicators are doing as directed, and sometimes a supervisor needs to step up to the plate and override the computer and make some good judgment calls so that these ambulances aren't passing each other to do key coverage. Also Supervisors, step up and cancel some of these units. On more than one occasion, 3 Wake EMS ambulances, a supervisor, engine company and at times the medical director or q/a officer ALL respond to the same call. Cut the fat, folks and use some sense here. You're depleting the city of resources when you allow 3

ambulances to answer the call for a single patient incident.

guest100 - 01/07/07 - 21:27

To guest100, thanks for the updated info regarding Cary response. And you're absolutely right when you say that the Wake County EMS trucks will sit at the hospital and "jack their jaws" (no offense, DJ), causing backup, until the adrenaline calls come in, and then go screaming out of the ER like tomcats going over the wall at a neutering clinic. But let's not just gripe at Wake EMS folks for this. Anytime two or more units from the same agency end up at the same parking lot, there is going to be that "exchange of mutually beneficial information" (politically correct way of saying "shooting bull") and some time to smoke cigarettes, drink coffee (insert favorite beverage here), and generally waste time and run up UHU numbers. Let's be clear. Wake EMS gets a lot more grief than they should simply because of a numbers game. The numbers...

Wake County EMS – 15 full-time trucks, 2 (or 3) peak-load trucks, 3 District Chiefs, and a gaggle of support personnel. MD-1 is excepted.

Apex EMS – 2 full-time trucks and a chief

Cary EMS – 3 full-time trucks, 1 Supervisor, and a chief

Garner EMS – 3 full-time trucks, 1 rescue truck, 1 assistant chief, 1 chief

Holly Springs – 1 truck (medic from Wake EMS)

Eastern Wake EMS – 4 full-time trucks, 1 peak-load truck, 1 Supervisor, 1 assistant director, 1 director

Rolesville EMS – 1 full-time truck, 1 peak-load truck

Six Forks EMS – 2 full-time trucks, 2 peak-load trucks, 1 supervisor (not a regular thing)

It is a bad rap for Wake EMS because they have so many trucks, but we're all guilty of it. We want to see what the other truck had that was so cool...

And as for the supervisors that I generally run with, I've never had a problem with them trying to take over a scene. I like all the supervisors I run with (no names, per the initial entry).

And for your CAD comments, you are right when you say that the supervisors need to step up and say what needs to happen. The dispatchers have been told, "CAD is right, everyone else is wrong. If the supervisor tells you to change it, then do it. But the CAD is always right." I don't mean to open up that can of worms again, but at this time, Supervisors can make the appropriate call.

And key station coverage is a hot issue, I'm not even going to touch it, especially since they changed all the station names. I'm still trying to get used to it...

EMS Guy - 01/07/07 - 23:27

EMS Guy, you are very right – everyone is guilty of sand-bagging, just some agencies and some crews more than others. Your comment regarding supervisors is right on! It is high time that they intervene and stop some of the craziness out there! Step up to the plate and tell your guys, "Negative, one unit response only, keep a unit in service!"

By the way, why not let's see how many "Chiefs" Wake County EMS does have. They blame the contracted agencies for being "top heavy" but exactly how many people have a "chief" title?

Chief, Asst. Chief x 3, Mgt Services Chief, Training x 2,q/a etc... Look at how many Chiefs that Wake County EMS has vs. the number of employees and then look at the contracted agencies vs. employee – the County is "top heavy." It's time to trim some fat and/or make it fair across the board and allow the contracted agencies to get the help they deserve.

guest100 - 01/08/07 - 00:02

[This is a friendly reminder to stay on topic. The thread is tilting in the direction of griping, and the Watch Desk or other such forum might be a better place for airing grievances: <http://www.thewatchdesk.com/forum/forumd..>]

Legeros - 01/08/07 - 08:27

"Word around RFD is that the MVA response on a "major thoroughfare" will change to 2 pieces of apparatus. One for the incident, the other for "blocking". I think Dallas started this concept, and personally I like it. Especially with high speed collisions, you can usually use the extra hands and medical equipment. I'd like to see it happen....."

Cary FD has been doing that for near about a year now, they send a ladder onto the limited access highways to act as a blocker.

CFP 7021 - 01/08/07 - 12:41

Mike is right, we are starting to gripe on other agencies... thanks for playing referee...

But honestly, does anyone see a major safety violation (names withheld) that is becoming a major trend? I know something that I have been seeing is the back-up alarms being turned off while backing. You'd better be using it anyway, but if you're not using a spotter and you turn it off, you are just asking for trouble. What's the current OSHA fine for that anyway, something like \$70,000?

Does anyone else have an opinion on this??

— To guest100, as right as you are about Wake EMS being "top-heavy," there is a need for it that is actually practical. Excepting the fact that some of those people work for Public Safety and are just attached to EMS (Management Services Chief, MD-1, QA), the bigger the organization, the bigger the chain has to be. Remember your ICS: Optimum span of control allows for maximum efficiency (Oh my God, did I really just type that????!!!!)

Also, when I was referring to supervisors, I wasn't just talking about Wake County EMS, I was talking about anyone who is a supervisor in the system. THIS INCLUDES the chiefs of all the contracted agencies. It's high time everyone sits at a table and listens to the voice of everyone, and not just their own departments... that's when you'll start to see real change around the county. (By the way, I have no clue what agency you are with, be it fire or EMS, so please don't take any of this personally, I don't know if you are one of the progressive chiefs or a "stick in the mud" – if you want to discuss anything personally, e-mail Mike and he can give you my contact info)

EMS Guy - 01/08/07 - 20:52

County units have been sending 2 pieces of apparatus to all calls on I 540 since it opened and it works well. I would much rather be protected by a 40-80K pound apparatus than a 10lb traffic cone. It's best for the guys (or girls) in the field.

ncff123 - 01/08/07 - 21:29

County units are doing that but it is disappointed that a couple of the run cards don't make sense, example having two trucks come eastbound not one east and one west, that way the call is responded to no matter what side of the road it is on and the other truck can run up to next exit turn around and then assist.

guest - 01/08/07 - 23:37

Very interesting discussion. For those of you who spend a lot of time counting "chiefs" at Wake County EMS, please keep in mind that several of those chiefs (one assistant chief and two divisions chiefs) as well as the training chiefs provide services to the entire county EMS system (including the contract agencies, the fire service, and the 911 center). Everything from in-service education to the domestic preparedness task force, to dispatch planning, certifying firefighters as medical responders, keeping the educational records so about 1,000 people can get re-credentialed by the state, quality assurance for all calls, certifying telecommunicators in EMD, coordinating and consolidating the budget, etc., etc. Yep, they work for and get paid by Wake County, but their work supports everybody.

Side note – we try to respond all the resources that we might need, and then slow down or cancel those that are not obviously needed. You can tell if scene management and triage has failed if you have cancelled units, then you have to call them back later. And NOBODY should be driving "like a bat out of anywhere." Be safe out there!

EMS100 ([Email](#)) - 01/09/07 - 09:54

I'm just shocked to find out a traffic cone weighs 10 lbs.!

pal - 01/09/07 - 16:33

And I thought I was the only one who was shocked with the 10lb. traffic cone!!

Luke - 01/09/07 - 17:18

To EMS100 – you are right, sir, that several of those people serve the entire county, and not just the organization... I was trying to get that point across (hence, the reason I said that those people work for Public Safety and are attached to EMS – that was the way it was explained to me), and I truly appreciate all the work they do. They give me the ability to maintain and keep my county certification, as well as cover my six when I'm treating a patient... and, please note that I DO support the need for the number of upper management and middle management that there is in place. 1 person cannot properly supervise all of the people who work for Wake County EMS.

However, I am also somewhat concerned by the view that the "county agencies are top-heavy" (quoted), since the same chain-of-command issue exists there. THERE MUST BE ADEQUATE SUPERVISION FOR PERSONNEL. ONE PERSON CANNOT DO IT ALL.

I would like to discuss this issue further; however, forum policy will not allow for much more of the griping. If you would please e-mail me, I will be happy to have a further discussion.

EMS Guy ([Email](#)) - 01/09/07 - 23:30

Just how many "Chiefs" are there within Wake EMS? Am I correct in estimating 15 or 16? How many staff members are there?

EMS Curious - 01/10/07 - 00:17

So guys, why don't we take this to the watch desk where we can talk a little more openly and lay everything on the table?

emsguest - 01/10/07 - 00:41

emsguest is right... we're kinda putting Mike in a bind. Watch Desk sounds like a good idea...

EMS Guy ([Email](#)) - 01/10/07 - 01:18

[Closing this thread at this time. For a LOT more information about the Wake EMS organization, see their web site:

<http://www.wakegov.com/ems/default.htm>]

Legeros - 01/10/07 - 06:46