

	<b>ARLINGTON COUNTY FIRE DEPARTMENT Policy and Procedure</b>		<b>Index # M.23/Cat.2</b>
	<b>Subject: SWAT Medical Support</b>		<b>Issue Date: 12/YY/2019</b>
	<b>Approved: Fire Chief David Povlitz</b>		<b>Revision Date: 12/YY/2019</b>

## 1. PURPOSE

- 1.1. This policy will define the responsibilities of the Arlington County Police Department (ACPD) and the Arlington County Fire Department (ACFD) in support of the Special Weapons and Tactics (SWAT) Medical Support (SWAT/MS) program and to delineate the various roles and responsibilities.

## 2. GENERAL

- 2.1. The SWAT/MS program consists of tactical paramedics and operational medical director who are specially trained in providing emergency medical care in police tactical environments. Appropriate medical support of tactical operations can enhance mission success by reducing mortality and morbidity, reducing line-of-duty injury and disability costs, and improving agency posture in liability-prone circumstances.
- 2.2. Tactical medical support requires a unique, advanced training and education over and above the basic qualifications of pre-hospital health care providers. This advance training and education is defined and determined by the ACFD medical director.

## 3. DEFINITIONS

- 3.1. The SWAT/MS program manager and the assistant program manager shall be appointed by the High Threat Program manager. He/she shall be SWAT/MS qualified, as defined by the medical director, and act as the operational liaison between the ACPD and ACFD.
- 3.2. SWAT medics or tactical paramedic(s) shall be appointed by the SWAT/MS Program Manager. He/she shall be SWAT/MS qualified, as defined by the medical director and shall provide medical interventions to injured officers first and other individuals within an operational perimeter determined by SWAT division or group supervisors.
  - 3.2.1. Minimum team qualifications
    - 3.2.1.1. Candidate must have two years as a non-probationary paramedic.
    - 3.2.1.2. Pass the SWAT physical aptitude test bi-annually.
    - 3.2.1.3. Complete selection and panel interview process.

- 3.2.1.4. Candidate must have a history of satisfactory appraisals.
- 3.2.1.5. Candidate must submit a supervisory recommendation.
- 3.2.1.6. Candidate must commit to three (3) years as a SWAT medic.
- 3.2.1.7. Pass SWAT medic initial education as defined by the medical director.
- 3.2.1.8. Pass the SWAT physical aptitude test bi-annually.
- 3.2.2. Maintenance Requirements
  - 3.2.2.1. Candidate SWAT medic must maintain their ALS certification requirements.
  - 3.2.2.2. SWAT medic must attend the Arlington specific SWAT medic bi-annual medical training given by the medical director or his/her designee.
  - 3.2.2.3. SWAT Medic must attend a minimum of 6 SWAT training annually.
  - 3.2.2.4. Successfully complete the SWAT physical aptitude test.

#### **4. POLICY**

- 4.1. ACFD will support the SWAT program to ensure definitive, high quality medical care is readily available.
- 4.2. Tactical paramedics will fall directly under the ACPD command when assigned to SWAT activities.
- 4.3. ACPD will request tactical medical support through the SWAT/MS program manager or the assistant program manager.
- 4.4. SWAT/MS personnel will not be assigned or carry any weapons.
- 4.5. The SWAT/MS team full strength will be ten (10) positions.
- 4.6. SWAT/MS personnel will have to complete a selection process as defined by the SWAT/MS program Manager, High Threat Program manager, ACFD medical director and the ACPD SWAT commander.

#### **5. PROCEDURE**

- 5.1. SWAT/MS Program Manager
  - 5.1.1. Item The SWAT/MS program manager shall be the primary point of contact for SWAT/MS issues and reports to the ACFD High Threat Program manager and the ACPD SWAT Commander.
  - 5.1.2. Coordinates and assigns tactical paramedics for mission coverage, duty and training assignments.
  - 5.1.3. The SWAT/MS Program Manager will be notified by the SWAT commander, team leader,

or assistant team leader of any incidents requiring medical support. The SWAT/MS program manager shall be responsible for ensuring proper coverage for the incident. Off-duty personnel shall be utilized first unless a rapid deployment (less than 30 minutes) is requested. At which time on-duty personnel may be detailed for mission coverage. If no off-duty personnel are available, on duty SWAT/MS qualified paramedics may be used with the approval of the on-duty battalion chief (s).

- 5.1.4. Shall attend SWAT team leadership meetings.
- 5.1.5. Shall maintain a current contact list of all active tactical paramedic personnel and ensure TeleStaff identifies these individuals.
- 5.1.6. Shall disseminate information from ACPD to all SWAT/MS personnel.
- 5.1.7. Shall electronically track all tactical paramedic participation, training costs, continuing education status and qualifications.
- 5.1.8. Shall maintain an inventory of medical equipment that includes quantities, expiration dates and locations.
- 5.1.9. Shall notify personnel in writing when they are not meeting participation and training standards and requirements.
- 5.1.10. Coordinates tactical medic education with the SWAT commander or the designee.
- 5.1.11. Coordinates requests for additional training and equipment issues with the SWAT commander.
- 5.1.12. Shall collect issued SWAT equipment from inactive SWAT/MS personnel and coordinate the return to the SWAT commander.
- 5.1.13. Shall investigate and document all SWAT/MS complaints.
- 5.1.14. Shall prepare and submit a bi-annual SWAT/MS activity report on July 1 and January 1 or when requested.

## 5.2. SWAT/MS Tactical Paramedic

- 5.2.1. Tactical paramedics are authorized to operate within the operational perimeter established by ACPD at the discretion of the SWAT commander. The tactical paramedic(s) shall provide medical interventions to injured officers first and other individuals within the SWAT operational perimeter after the safety of the ACPD SWAT officers has been confirmed. The tactical paramedic will be the primary EMS provider for an injured officer.
- 5.2.2. The tactical paramedic shall be responsible for completing the Arlington County Medical and Fire Threat Assessment (Attachment A) that includes evaluating the following factors: medical treatment and transport, building construction, fire plan, hazardous materials, environmental, etc. for each mission, The tactical medic shall advise the SWAT leader of any concerns that may affect the mission and the possible need for any special equipment or resources.

- 5.2.3. Shall reply and respond to the SWAT/MS program manager's alerts, texts, phone calls and e-mails.
- 5.2.4. Shall provide medical care during SWAT training exercises.
- 5.2.5. Shall provide proactive preventive care for SWAT team members during training and missions.
- 5.2.6. Shall ensure all equipment (medical/personal) is within date and in good working order.
- 5.2.7. Will inspect, maintain and be accountable for all personal SWAT equipment assigned to him/her and notify the SWAT/MS Program Manager of any replacement or repair requirements.
- 5.2.8. Shall provide regular training during SWAT practice related to various subjects that could impact SWAT operations; such as, detection and monitoring, building construction, utility control, elevator controls, fire behavior, etc.
- 5.2.9. Shall, through the SWAT/MS program manager, SWAT commander and SWAT leaders confirm that team members maintain and carry important medical history, immunization and a current medication list. This confidential information is necessary for the tactical medic to have in the event the officer requires treatment of an injury or illness and they cannot provide the critical information themselves.

### 5.3. Arlington County Police Department

- 5.3.1. ACPD will provide specifications and criteria for protective equipment, tactical supplies and uniforms. The equipment shall be the same style, make and model as all other team members.
  - 5.3.1.1. Communications equipment
  - 5.3.1.2. Respirators and associated equipment
  - 5.3.1.3. Ballistic protection
  - 5.3.1.4. Ballistic helmet
  - 5.3.1.5. Tactical uniform shirt with name and medic patches
  - 5.3.1.6. BDU pants
  - 5.3.1.7. Cold weather & rain gear (coat, gloves, etc.)
  - 5.3.1.8. Personal medical equipment

## 6. ATTACHMENTS

### 6.1. Arlington County Medical and Fire Threat Assessment

# ARLINGTON COUNTY MEDICAL AND FIRE THREAT ASSESSMENT



Filled by:  
Delivered to:

Date:  
Date:



## GENERAL OPERATIONAL INFORMATION

<b>Location:</b>		<b>Date:</b>	
<b>Building Construction Type:</b>		<b>Time:</b>	
<b># of Stories:</b>		<b>Estimated Duration:</b>	
		<b>Concern</b> YES <input type="checkbox"/> NO <input type="checkbox"/> Maybe <input type="checkbox"/>	
<b>Operation Type:</b>			
<b>Natural Gas Location:</b>		<b>Electric Location:</b>	
<b>Unique Building or Location Hazards:</b>			
<b>Medic(s):</b>		<b>Medical Vehicle:</b>	
<b>Weather Threats</b>			
<b>Weather Threats:</b>		<b>Mitigation:</b>	
<b>Animal Threats</b>			
<b>Animal Threats:</b>		<b>Mitigation:</b>	
<b>Atypical Medical Threats</b>			
<b>Explosives intended to be utilized or present?</b> YES <input type="checkbox"/> NO <input type="checkbox"/> Maybe <input type="checkbox"/>		<b>Considerations:</b>	
<b>Known Medical Issues or Problems of those involved?</b> YES <input type="checkbox"/> NO <input type="checkbox"/>		<b>Mitigation:</b>	
<b>Additional EMS Assets Needed:</b> YES <input type="checkbox"/> NO <input type="checkbox"/>		<b>Radio Channel:</b>	

## FIRE

<b>Additional Fire Assets Needed:</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	<b>Radio Channel:</b>
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Hazardous Materials Threats		
Specific Hazmat Concerns:		
Location of Hazardous Materials:		
Chemical Name:	ID#:	Hazards:
Considerations (Detection and Monitoring, PPE, Resources)		
Asset Staging		
Assets deployed or available:		
Location of Assets/Staging:		
Other Information:		
Battalion Chief or POC:		
Hospital Priority		
Trauma Hospital	NON - Trauma Hospital	
Address:	Address:	
Contact #:	Contact #:	
Pediatric Hospital	Burn Center	
Address:	Address:	
Contact #:	Contact #:	

## **Hospital Directions**

### **Trauma Hospital**