

# SOUTH PORTLAND FIRE DEPARTMENT

## STANDARD OPERATING GUIDELINES

|                  |   |                        |          |
|------------------|---|------------------------|----------|
| <b>Policy #:</b> | 5.313                                       | <b>Effective Date:</b> | 8*6/2024 |
| <b>Title:</b>    | Driver Certification and Refresher Training | <b># of pages:</b>     | 7        |
| <b>Category:</b> | Training                                    | <b>Classification:</b> | Red      |

1. **PURPOSE:** To define the requirements for driving department apparatus.

2. **POLICY:**

### **A. Initial Training:**

#### Full Time Employees:

Full Time Employees will not be allowed to drive emergency vehicles while responding to emergency calls (code 3) until they have completed the following requirements. The only exception is that employees may drive the ambulances to the hospital from the scene after meeting requirement 1, 2, and 3.

1. Completed and received an EVOC certificate (or possess a CDL license).
2. They have completed and documented proficiency with apparatus as outlined in the SPFD Driver Operator Task Book.
3. Reviewed Department SOGs on emergency response, safe backing, seatbelt use, vehicle maintenance lock/out tag/out.

#### Part Time Employees (Call Company):

Part time employees will not be allowed to drive emergency vehicles while responding to emergency calls until they complete the following requirements.

1. They are 20 years or older.
2. Completed and received an EVOC certificate (or possess a CDL license).
3. They have completed Basic Fire School or PB FF 1
4. They have completed and documented proficiency with apparatus as outlined in the SPFD Driver Operator Task Book.
5. Reviewed Department SOGs on emergency response, safe backing, seatbelt use, vehicle maintenance lock/out tag/out.

## **B. Refresher Training**

Each year, the Deputy Chief of Training will develop a lesson plan to refresh skills related to emergency vehicle operation.

Every three years each member of the department is required to complete refresher training following department lesson plan completing the SPFD recertification checklist and the prescribed driving course.

## **C. New Apparatus Training**

When the Department places new apparatus into service and that apparatus is substantially different from current apparatus, members will complete in-service training consisting of completing skills for the new apparatus as outlined in the SPFD Driver Operator Task Book as well as any training provided by the manufacturer.

### 3. REFERENCES:

- Maine Bureau of Labor Standards
- SPFD Bulletin 2006-04

By Order Of:



James P. Wilson  
Fire Chief



## SOUTH PORTLAND FIRE DEPARTMENT ROAD COURSE EVALUATIONIVER



**Purpose:** To provide documentation that an individual has completed the required minimum training before receiving authorization from the Chief Officer to drive fire department apparatus.

**Scope:** This checklist and required EVOC Course Documentation shall apply to all fire department members who will be authorized to drive fire department apparatus. It is expected that competency will be demonstrated in all areas before authorization will be made.

The following checklist will be completed and signed by the member and evaluator. The completed document will be submitted to the Chief Officer for his/her review and approval before a member can operate the designated apparatus other than for training purposes. The completed form will be kept in the department driver training binder.

### Driver / Vehicle Information

|                       |                  |                     |  |
|-----------------------|------------------|---------------------|--|
| Driver's Name:        |                  | Date of Evaluation: |  |
| Evaluator's Name:     |                  | Total Hours Driven: |  |
| Driver's License No.: | Expiration Date: | Restrictions:       |  |

**S** – Satisfactory **U** – Unsatisfactory **N/A** – Not Applicable **RE-S** Re-evaluated Satisfactory

|   | Engine | Ladder | Squad | Ambulance |
|---|--------|--------|-------|-----------|
| <b>Enter Apparatus number used for test</b>   | E-     | L-     | S-    | A-        |
| Reviewed differences from personal vehicle and stability issues   |        |        |       |           |
| Reviewed controls, instrumentation and equipment  |        |        |       |           |
| Review steering and maneuvering   |        |        |       |           |
| Review refueling procedures   |        |        |       |           |
| Discuss the limitations of the safe operation of the apparatus:   |        |        |       |           |
| Difficult and/or restricted areas   |        |        |       |           |
| Winter driving  |        |        |       |           |
| Limitations when wearing Personal Protective Equipment (PPE)  |        |        |       |           |
| Demonstrate pre-response inspection walk around safety check  |        |        |       |           |
| Check and adjust mirrors  |        |        |       |           |
| Secure Seat Belts/ Seat adjustment – Driver and Crew  |        |        |       |           |
| Check braking system for function, air pressure, and E-brake  |        |        |       |           |
| Check instruments for normal readings   |        |        |       |           |
| Four left and four right hand turns   |        |        |       |           |
| Straight section of urban street or two-lane rural road at least 1 mile.                                |        |        |       |           |
| One through intersection and two intersections where a stop has to be made                              |        |        |       |           |
| One curve, either left or right   |        |        |       |           |
| Section of a limited access highway that includes a conventional ramp entrance and exit (if applicable) |        |        |       |           |
| Downgrade long enough to require braking, or use of “Jake Brake”, retarder, and/or ABS                  |        |        |       |           |
| One underpass or low clearance or bridge  |        |        |       |           |
| Verify audible back-up alarm  |        |        |       |           |
| Demonstrate backing into station with spotter (per SOP/Policy)  |        |        |       |           |
| Demonstrate securing unit – parking brake, wheel chocks   |        |        |       |           |
| Apply air brakes properly   |        |        |       |           |
| Reduce speed and brake before curves or down grades   |        |        |       |           |
| Shifting downshift and change gears properly  |        |        |       |           |





## SOUTH PORTLAND FIRE DEPARTMENT ROAD COURSE EVALUATIONIVER



### Required Driving Route (for Central) CIRCLE IF USED

1. Start at Central Station in front bay
2. **Left** on to Broadway
3. **Curve** right staying on Broadway (1+ mile of two lane urban street) (School Zone)
4. **Left** onto Main Street
5. **Right** onto Maine Turnpike Approach (**Limited Access Highway**)
6. Take 1<sup>st</sup> **Exit/On Ramp** (I-295 N Portland) and then **Exit** onto Broadway
7. Take **Right** onto Broadway from I-295
8. Continue East on Broadway
9. **Under** Rail Overpass
10. Remain on Broadway
11. **Down** Brown's Hill
12. Remain on Broadway until Cottage Road
13. **Right** on to Cottage Road
14. **Curve** left on Cottage Road
15. **Up** Meeting House Hill
16. **Left** on to Pillsbury Street
17. **Right** into Willard Station Lot
  - a. Perform Alley Dock
  - b. Perform Station Simulation
18. **Left** on to Pillsbury Street
19. **Right** on to Cottage Road
20. **Curve** right on Cottage Road
21. **Left** on to Broadway
22. **Left** on to Central's ramp
23. **Back** into Car 2's bay

### Required Driving Route (for West End) CIRCLE IF USED

1. Start at West End Station in front bay
2. **Left** onto Western Ave
3. **Through** Gorham Rd Intersection
4. **Curve** Western Ave by Big Apple
5. **Under** I-295 Underpass
6. **Left** onto Broadway
7. Continue East on Broadway (1+ Mile of two lane urban street) (School Zone)
8. **Under** Rail Overpass
9. Continue East on Broadway **through Cash Corner**
10. **Down** Brown's Hill
11. **Right** onto Lincoln Street
12. Right **Curve** on Lincoln Street
13. Left **Curve** onto Pleasant Ave
14. Right **Curve** on Pleasant Ave.
15. **Left** onto Hemco Road
16. **Right** onto Dartmouth Road
17. **Curve** onto Rumery Road.



## SOUTH PORTLAND FIRE DEPARTMENT ROAD COURSE EVALUATIONIVER



18. **Left** onto Main Street
19. Continue **Up Hill** on Main Street
20. **Right** onto Maine Turnpike Approach (**Limited Access Highway**)
21. Take 1<sup>st</sup> **Exit/On Ramp** (I-295 N Portland) and then **Exit** onto Broadway
22. Take **Right** onto Broadway from I-295
23. **Left** onto Westbrook Street
24. **Under** I-295 Underpass
25. Continue **Through Gorham Rd Intersection Curve** onto Western Ave.
26. **Right** onto James Baka Drive
  - a. Perform Alley Dock
  - b. Back into station doorway

Evaluator's Signature:

Date:



# SOUTH PORTLAND FIRE DEPARTMENT ROAD COURSE EVALUATION



Employee's name (print) \_\_\_\_\_ has satisfactorily demonstrated appropriate skills as indicated by the attached driver/operator check list(s). I \_\_\_\_\_, Evaluator, recommend that the above individual be granted authorization to drive the below referenced vehicle(s).

- |   |                          |                          |
|---|--------------------------|--------------------------|
|   | <b>Yes</b>               | <b>No</b>                |
| Driver has reviewed all motor vehicle regulations (29-A)? | <input type="checkbox"/> | <input type="checkbox"/> |
| Driver has completed EVOC Course or CDL?                  | <input type="checkbox"/> | <input type="checkbox"/> |
| Driver's motor vehicle history reviewed                   | <input type="checkbox"/> | <input type="checkbox"/> |
| Driver reviewed Department SOGs and Polices               | <input type="checkbox"/> | <input type="checkbox"/> |

\_\_\_\_\_  
Instructor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Member's Signature

\_\_\_\_\_  
Date

As Chief of the South Portland Fire Department, I hereby authorize the above named Employee to operate below referenced vehicle(s).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Initials

| Vehicle<br>(Use 4 digit Inventory #) | Officer's Initial |      |
|--------------------------------------|-------------------|------|
|                                      | Initials          | Date |
|                                      |                   |      |
|                                      |                   |      |
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