

Medical Aid and Response

465.1 PURPOSE AND SCOPE

This policy recognizes that members often encounter persons who appear to be in need of medical aid and establishes a law enforcement response to such situations.

465.2 POLICY

It is the policy of the Kitsap County Sheriff's Office that all deputies and other designated members be trained to provide emergency medical aid and to facilitate an emergency medical response.

465.3 FIRST RESPONDING MEMBER RESPONSIBILITIES

Whenever practicable, members should take appropriate steps to provide initial medical aid (e.g., first aid, CPR and use of an automated external defibrillator (AED)) in accordance with their training and current certification levels. This should be done for those in need of immediate care and only when the member can safely do so.

Prior to initiating medical aid, the member should contact Central Communications and request response by emergency medical services (EMS) as the member deems appropriate.

Members should follow universal precautions when providing medical aid, such as wearing gloves and avoiding contact with bodily fluids, consistent with the Communicable Diseases Policy. Members should use a barrier or bag device to perform rescue breathing.

When requesting EMS, the member should provide Central Communications with information for relay to EMS personnel in order to enable an appropriate response, including:

- (a) The location where EMS is needed.
- (b) The nature of the incident.
- (c) Any known scene hazards.
- (d) Information on the person in need of EMS, such as:
 - 1. Signs and symptoms as observed by the member.
 - 2. Changes in apparent condition.
 - 3. Number of patients, sex, and age, if known.
 - 4. Whether the person is conscious, breathing, and alert, or is believed to have consumed drugs or alcohol.
 - 5. Whether the person is showing signs of extreme agitation or is engaging in violent irrational behavior accompanied by profuse sweating, extraordinary strength beyond their physical characteristics, and imperviousness to pain.

Members should stabilize the scene whenever practicable while awaiting the arrival of EMS.

Members should not direct EMS personnel whether to transport the person for treatment.

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Injured persons shall be monitored while in law enforcement custody (Washington State Office of the Attorney General Model Use of Force Policy).

465.4 TRANSPORTING ILL AND INJURED PERSONS

Except in exceptional cases where alternatives are not reasonably available, members should not transport persons who are not in custody and who are unconscious, who have serious injuries, or who may be seriously ill. EMS personnel should be called to handle patient transportation.

For guidelines regarding transporting ill or injured persons who are in custody, see the Transporting Persons in Custody Policy.

Members should not provide emergency escort for medical transport or civilian vehicles.

465.5 PERSONS REFUSING EMS CARE

If a person who is not in custody refuses EMS care or refuses to be transported to a medical facility, a deputy shall not force that person to receive care or be transported. However, members may assist EMS personnel when EMS personnel determine the person lacks mental capacity to understand the consequences of refusing medical care or to make an informed decision and the lack of immediate medical attention may result in serious bodily injury or the death of the person.

In cases where mental illness may be a factor, the deputy should consider proceeding with an emergency detention in accordance with the Emergency Detentions Policy.

If a deputy believes that a person who is in custody requires EMS care and the person refuses, the deputy should encourage the person to receive medical treatment. The deputy may also consider contacting a family member to help persuade the person to agree to treatment or who may be able to authorize treatment for the person.

If the person still refuses, the deputy will require the person to be transported to the nearest medical facility. In such cases, the deputy should consult with a supervisor prior to the transport.

Members shall not sign refusal-for-treatment forms or forms accepting financial responsibility for treatment.

465.6 SICK OR INJURED ARRESTEE

If an arrestee appears ill or injured, or claims illness or injury, he/she should be medically cleared prior to booking. If the deputy has reason to believe the arrestee is feigning injury or illness, the deputy should contact a supervisor, who will determine whether medical clearance will be obtained prior to booking.

Arrestees who appear to have a serious medical issue should be transported by ambulance. Deputies shall not transport an ill or injured arrestee to a hospital without a supervisor's approval.

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465.7 MEDICAL ATTENTION RELATED TO USE OF FORCE

Specific guidelines for medical attention for injuries sustained from a use of force may be found in the Use of Force, Handcuffing and Restraints, Control Devices and Techniques, and Conducted Energy Device policies.

465.8 ADMINISTRATION OF OPIOID OVERDOSE MEDICATION

Members may administer opioid overdose medication in accordance with protocol specified by the health care practitioner who prescribed the overdose medication for use by the member (RCW 69.41.095).

465.8.1 OPIOID OVERDOSE MEDICATION USER RESPONSIBILITIES

Members who are qualified to administer opioid overdose medication, such as naloxone, should handle, store and administer the medication consistent with their training. Members should check the medication and associated administration equipment at the beginning of their shift to ensure they are serviceable and not expired. Any expired medication or unserviceable administration equipment should be removed from service and given to the on-duty supervisor.

Any member who administers an opioid overdose medication should contact Central Communications as soon as possible and request response by EMS.

465.8.2 OPIOID OVERDOSE MEDICATION REPORTING

Any member administering opioid overdose medication should detail its use in an appropriate report.

The Training Officer will ensure that the Support Services Supervisor is provided enough information to meet applicable state reporting requirements.

465.8.3 OPIOID OVERDOSE MEDICATION TRAINING

The Training Officer should ensure training is provided to members authorized to administer opioid overdose medication.

465.9 FIRST-AID TRAINING

The Training Officer should ensure deputies receive periodic first-aid training appropriate for their position.