#### Rules and Regulations, LSFR 101

GENERAL INFORMATION AND DEFINITIONS

#### I. Demographics

Lyndon Station First Responders ("LSFR") cover the Village of Lyndon Station, half of the Township of Lyndon, and the Township of Kildare, along with seven miles of federal interstate. According to the 2000 US Census Bureau, the Village of Lyndon Station has a population 458, with 354 being between the ages of 18 and 64. The Township of Lyndon has a population of 1,217, with 860 being between the ages of 18 and 64. The Township of Kildare has a population of 557, with 432 being between the ages of 18 and 64. We have two major hardwood lumber companies, several large campgrounds, along with various other businesses. The response area of LSFR is approximately 10-15 minutes from any of the three ambulance services that respond to our area, and approximately 10-25 minutes from the three hospitals in our area.

### II. Operations

- A. Currently we have a roster of 10-15 first responders, and 2 EMT-Basics. We are a volunteer organization, whose members are on call when available.
- B. We do not currently have a call schedule, but one may be implemented in the future. Members tend to let other members know verbally when they will be around or are not available. Most members are also familiar with other member's schedules. Members respond when paged, as all members have pagers. Members respond to the fire station to get the first responder vehicle, which holds our equipment and supplies. When at least 1-2 members are on the first responder vehicle, and more than 3-5 minutes have passed, they will go enroute. If additional personnel are required, a second page can be asked for and the members asked to respond to the scene.
- C. LSFR are operated by the Village of Lyndon Station Fire Department ("LSFD"). We are affiliated with the Juneau County EMS System and also are a part of the Juneau County Mutual Aid Agreement. We respond to all EMS calls in our service area and have three different ambulance services that respond to our area. We also respond to fire calls when requested. We attend biannual training with our medical control hospital and director. We hold in-house training and occasionally train with our responding ambulance services and mutual aid fire departments.
- D. LSFR participates in our county disaster plan and training. The Village of Lyndon Station also has its own disaster policy in which we participate. The Village of Lyndon Station policy is attached as Attachment 1. We cannot include a copy of our county disaster plan due to its size, but a copy of it is available through the fire chief or service director.

- E. We are affiliated with South Central Regional Trauma Advisory Council.
- F. Lyndon Station First Responders use the following equipment:
  - 1. Suction
  - 2. Oxygen, Regulators and Tubing
  - 3. Non Rebreathing Oxygen Mask and Nasal Cannulas
  - 4. Bag Valve Mask
  - 5. Oral and Nasal Airways
  - 6. Combitube
  - 7. Defibrillator
  - 8. Various Bandages and Dressings
  - 9. Blood Pressure Cuffs
  - 10. Stethoscope
  - 11. Long boards, Scoop Stretcher, Straps and Keds
  - 12. Splints
  - 13. Cervical Collars and Cervical Immobilization Device
  - 14. Infection and Blood borne Barrier Devices
  - 15. Advanced Skills Medications
  - 16. Various Tools for Repair and Extrication
  - 17. Penlight
  - 18. OB/GYN Kit
  - 19. Brooms and Antimicrobial Wipes
  - 20. First Responder Vehicle
  - 21. Road Flares
- G. Attached are the Protocols provided by our Medical Director (Hess Memorial Hospital). (See Attachment 10.)

## III. <u>Infection Control</u>

- A. LSFR has adopted the Village of Lyndon Station's exposure control plan and we also have an exposure control plan as part of our medical protocols through our medical control hospital. (See Attachment 11.)
- B. LSFR's exposure control plan includes a blood borne and airborne exposure control plan, and we provide annual training every year.
- C. Our post-exposure policy states that the service director must be informed immediately. Also any personnel with a significant exposure must register at the emergency department at Mile Bluff Medical Center as a patient, be examined, decontaminated and treated by hospital staff. Significant exposure forms are available in the emergency room and should be completed for all parental and mucocutaneous exposures.
- D. Our infection control officer keeps up to date on current safety engineered devices. There is also a sharp shuttle kept with each Epipen and a sharp container on the first responder vehicle.

- E. Our medical protocol infection control plan was last reviewed and updated on 10-1-05.
- F. Our members were last trained on our exposure control plan in 2007.

# IV. Communications/Dispatch

- A. The first responder vehicle has both a mobile and a portable radio for use in contacting dispatch, medical control and the responding ambulance. In case of radio failure, we also have a cell phone to be used to contact medical control.
- B. LSFR is dispatched by the Juneau County Communication Center.

  Depending upon the response area, Juneau County Communications will
  page Mauston Ambulance, or will contact the City of Reedsburg to page
  Reedsburg Ambulance, or will contact the Kilborn Fire Department to page
  Dells-Delton EMS.
- C. Juneau County Communications does not have any written policies available. Dispatch pages a code 1 message, two times approximately 30 seconds apart. Code 1 messages are for actual calls, and code 2 messages are for special messages and test pages. Juneau County Communications wants to know when enroute, on scene and back in the station.
- D. Dispatching is done by Juneau County Sheriff.
- E. Some dispatchers are medically trained and some are not.
- F. Dispatchers give pre-arrival instructions, if available.

### V. Education and Training/Competency

- A. Continuing education and skill competency will be assured by our required refresher course put on by WWTC, training biannually with our medical control hospital and by our in-house trainings. Trainings will include written and practical exams and competency evaluations. Competency evaluations are accomplished by biannual training with our medical director.
- B. We require that all first responders attend all training required by the State of Wisconsin to maintain their first responder certification, biannual advanced skills and medication training put on by our medical control hospital, annual training on HIPPA, annual blood borne and airborne training and various other county mandated training.
- C. LSFR uses Western Wisconsin Technical College and instructors for training. Other technical colleges may be used, if needed.

### VI. Quality Assurance

LSFR's Quality Assurance and Improvement Plan involves periodic and yearly reviews of first responder skills. Our Quality Assurance Director and Medical Director (if needed) review all run reports, especially those in which advanced

skills were used. Some of these run reports will be discussed as part of our training, and in-house or medical control hospital training will be held as a result of a run or run report, if needed. Our Quality Assurance policy is attached. (See Attachment 12.)

### VII. Data Collection

- A. Data is collected by LSFR in the form of run reports and personnel/skills tracking forms. These forms can be completed during or after a call. The run report is signed by the transporting ambulance service, and the carbon copy given to them. The personnel/skills tracking form and our copy of the run report is kept in-house for our files. A copy of our run report is attached. (See Attachment 13.)
- B. Lyndon Station First Responders will submit the requested data to DHFS when formally requested to do so. We also plan to enter our run reports into the WARDS system.