FIRE RESCUE
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ALBEMARLE COUNTY FIRE AND EMERGENCY MEDICAL SERVICES BOARD AGENDA

Wednesday, September 25, 2024 | 1800 Hours | COB-McIntire, Room 246

Agenda Item	Name
I. Call to Order	
A. Moment of Silence	K. Alibertis
B. From the Board: Matters Not Listed on the Agenda	
C. From the Public: Matters Not Listed on the Agenda	
II. Approval of Consent Agenda	
A. July & August 2024 Minutes	K. Alibertis
III. Committee updates -	
A. Executive Committee	See Attachment
B. Training Committee	No Meeting
C. Operations Committee	No Meeting
D. Recruitment & Retention	No Meeting
E. Quartermaster	No Meeting
F. Apparatus Committee	No Meeting
IV. Unfinished Business –	
A. Dispatch Review Committee	S. Saxton
V. New Business –	
A. FY 26 Budget Process Update	A. Mezzoni
B. Speed Cameras	D. Puckett
C. Townhouse FOG	D. Puckett
D. High-Rise FOG	D. Puckett
E. Medication Policy	D. Puckett

ALBEMARLE COUNTY FIRE/EMS BOARD
FEMS BOARD MEETING
WEDNESDAY, AUGUST 28, 2024 – 1800 HOURS

A regular meeting of the Albemarle County Fire/EMS Board was held on Wednesday, August 28, 2024 at 1800 hours in Room 246 at the County Office Building–McIntire Road, Charlottesville, Virginia.

The following members were in attendance:
Dan Eggleston, Albemarle County Fire Rescue
George Stephens, North Garden Volunteer Fire Department
Greg McFadyen, Seminole Trail Volunteer Fire Department
Kostas Alibertis, Western Albemarle Rescue Squad

Others in attendance:
Christina Davis, Albemarle County Fire Rescue
David Puckett, Albemarle County Fire Rescue

I. Call to Order
Chief Alibertis called the meeting to order at 1801 hrs.

A. Moment of Silence
Participants observed a moment of silence.

B. From the Board: Matters Not Listed on the Agenda
There were none presented.

C. From the Public: Matters Not listed on the Agenda
There were none presented.

II. Consent Agenda
A. July 2024 Minutes
There was no action taken on the Consent Agenda, as there was not a quorum present.

III. Committee Updates
A. Executive Committee
B. Training Committee
C. Operations Committee
D. Recruitment & Retention
E. Quartermaster
F. Apparatus Committee

Chief Alibertis mentioned that Rescue 1 has had two deaths in the past week: Steve Chappell, a MED-COM operator; and Bill Henderson, who taught EMT classes.

IV. Unfinished Business

A.

V. New Business

A. Townhouse FOG

Chief Puckett reported that this FOG is already approved, and the only change was related to the response, which Stephanie had talked about at the last meeting.

B. High-Rise FOG

Chief Puckett reported on the High-Rise FOG (five stories and up) and Mid-Rise FOG (up to four stories), stating that high-rise has a slightly larger response plan, with an extra ambulance and engine due to the size and complexity of the floors. He said that they had previously addressed the "high-hazard" buildings such as nursing homes, which may not be five stories tall but may have many people who are not ambulatory.

Chief Eggleston asked if Brandon Akard had provided statistics on how many buildings in the County meet the mid-rise criteria.

Chief Puckett responded that he did not recall that it was provided, but he was pulling some ISO information from Mr. Akard, and there is some information already from the assessor's office.

Chief Alibertis commented that it must not have anything to do with occupancy, citing the example of Piedmont Place in Crozet, which is four stories plus a rooftop but doesn't have a lot of occupants; whereas Mountainside Senior Living is six stories with 80 occupants—so it would definitely qualify.

Chief Eggleston noted that there are several buildings in Old Trail that are four stories or more.

Chief Alibertis mentioned that they are connected.

Chief Puckett stated that four stories would constitute mid-rise, which is the same as multi-family and garden-style apartments; high-rise would only be five stories or greater, which represents very few buildings in the County.

Chief Alibertis asked if there was any consideration just for number of people, as Old Trail connects a bunch in a row instead of one tall building.

Chief McFadyen emphasized that this is a concern for his station, because the sheer number of people inside Lowe's, Sams Club, or COSTCO warrants extra response, especially given the size of the building. He noted that 2600 Barracks Road just keeps adding wings to the building, and an easier metric to consider would be square footage—and this is in First Due.

Chief Puckett acknowledged that it is in there, but it's not something he can action CAD off of.

Chief Eggleston noted that they are trying to assess the risk at a more granular level.

Chief Alibertis said it could be done by the battalion chief or one of the officers.

Chief Stephens commented that Northrup Grumman has about 500 people.

Chief Puckett pointed out that for commercial and industrial properties, people are typically awake and ambulatory, and there are fire alarm systems and evacuation plans. He stated that the larger concern is with buildings that contain people who are sleeping, particularly non-ambulatory residents.

Chief Eggleston asked what a commercial fire brings currently.

Chief Puckett responded that it is five engines and a truck; one of the next FOGs due is for commercial, which will cover strip malls, big box stores, etc. He said that this is currently lumped together in CAD, with no strip mall delineation—but Chief Burkett is thinking that in the future, a strip mall/commercial response plan will be the same as garden apartment/townhouse response, which would be four engines, two trucks, and an ambulance.

Chief Alibertis stated that they needed to look at what the medic response is, noting that there were very limited rescue resources available on a recent call in Dunlora. He emphasized that they needed to be careful not to put too many resources on one call, as they are now getting a lot of "system busy" hits. He noted that one was in Scottsville.

Chief Puckett noted that there were about 50 calls in the County by that afternoon, which was extremely busy.

Chief Alibertis added that they really need to have some latitude for adding and subtracting resources.

Chief Puckett and Chief Eggleston agreed that it cuts both ways.

Chief Eggleston said that a lot of times responses are modified based on call data and what dispatchers are conveying, but it is a good starting point. He added that with some of the new buildings that are going in, as well as the existing ones that are further deteriorating, they are getting some high-risk facilities.

Chief McFadyen stated that in Seminole's area, they are continuing to see where an ambulance parks and gears up and then becomes another crew—but it ties up that crew, so they end up having to call for another ambulance. He noted that in some of these areas, two ambulances are already going to be on dispatch. He said that Seminole would like to explore how they will determine when the ambulance does that

gear-up; and if they want to do that gear-up, they need to announce that they will gear up the same way as an engine crew because it changes the order of FOG. He stated that this wasn't happening currently, and he wasn't sure if it was worth pulling additional ambulances when those calls would continue to happen.

Chief Stephens commented that this was a common practice in 7's area and wherever Scottsville was interacting with North Garden. He said they have had a secondary where there has been an injury, and they have to juggle to get an ambulance.

Chief Alibertis said that he encourages his responders to just not get in the way.

Chief Puckett said the instruction is for responders to arrive, put turnout gear on, and also bring their cot and bag—so basically having the right equipment and being ready for anything.

Chief Alibertis stated that they should meet the need, including getting people who inside a structure.

Chief McFadyen stated that if there are four engines and two trucks, his question is which would get the people inside.

Chief Alibertis said you could designate one of those crews as a secondary EMS crew until an ambulance arrives.

Chief Puckett said that was the way he approached it.

Chief Eggleston announced that ACFR was doing station visits this week, and a lot of what they've been discussing is related to limited resources. He said that they were getting ready to start the hiring process for North Garden and for the second unit at 18. He reported that they have 141 applicants for those positions, and he is hoping they can get some good people out of this recruitment.

Chief Alibertis stated that the last item for discussion was LODA, and they needed to streamline the process for Augusta Health so the chiefs can simply forward the authorization forms.

Ms. Davis said that she would look into making that happen.

Chief Alibertis added that there should be a backup for Ms. Davis also.

Chief McFadyen asked if they could just make it one appointment.

Ms. Davis said that she would ask Augusta if that would be possible.

Chief Alibertis stated that it's probably one person/one appointment so they can talk

about lab results with the patient—and there may be something there that merits a different exam.

Chief McFadyen said that last month, they were tracking a 26-day delay in WorkMed; now they are up to a 34-day delay. He added that they are trying to process people through recruitment and accelerate this process.

Ms. Davis mentioned that a Seminole member had called her this morning to ask about physicals, and she provided the phone numbers for WorkMed and Augusta but also offered to assist if he ran into any delays or other issues.

Chief Eggleston asked if they had better physicals and results from Augusta.

Chief Alibertis said that Augusta has been very responsive.

Chief McFadyen noted that you had to call Augusta for results, as they do not automatically send them to Ms. Davis.

Ms. Davis explained that they do send them, but it takes about a week to get them.

Chief Stephens asked if there had been any decision made about the Firefighter I class at Seminole.

Chief McFadyen replied that Seminole would be running the Firefighter I class, but they had encountered some obstacles with instructors. He said that Rob is aware of the need from North Garden and other stations, and Seminole is currently trying to find one or two additional instructors.

Chief Stephens said they are also looking at Nelson County and other options.

Chief McFadyen emphasized that Seminole was definitely going to do the class, but they just needed the additional instructors. He added that this was part of the concern about physicals, as UVA students were now coming in. He noted that the class started on October 7, 2024.

Adjournment
At 18:23 hrs., the FEMS Board adjourned its meeting.

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ALBEMARLE COUNTY FIRE AND EMERGENCY MEDICAL SERVICES BOARD
ATTENDANCE LOG

Date: Wednesday, August 28, 2024

VOTING MEMBERS (OR DESIGNATES)

Chief Dan Eggleston (Albemarle County): _____

Chief Virginia Leavell (CARS): _____

Chief Gary Dillon (Crozet): _____

Chief Todd Richardson (Earlysville): _____

Assist Chief George Robinson(East Rivanna): _____

Chief George Stephens (North Garden): _____

Chief Timothy Cersley (Scottsville Fire): _____

Chief Greg McFadyen (Seminole Trail): _____

Chief Dustin Lang (Stony Point): _____

Chief Kostas Alibertis (Western Albemarle): _____

ALBEMARLE COUNTY DEPARTMENT OF FIRE RESCUE

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ALBEMARLE COUNTY FIRE AND EMERGENCY MEDICAL SERVICES BOARD
ATTENDANCE LOG

GUESTS & OTHERS

Date: Wednesday, August 28, 2024

Guest/Other	*Organization/Agency/Affiliation*
Christina Davis	ACFR
David Puckett	ACFR

ALBEMARLE COUNTY FIRE/EMS BOARD
FEMS BOARD MEETING
WEDNESDAY, JULY 24, 2024 – 1800 HOURS

A regular meeting of the Albemarle County Fire/EMS Board was held on Wednesday, July 24, 2024 at 1800 hours in Room 246 at the County Office Building–McIntire Road, Charlottesville, Virginia.

The following members were in attendance:
Dan Eggleston, Albemarle County Fire Rescue
Virginia Leavell, Charlottesville-Albemarle Rescue Squad
Gary Dillon, Crozet Volunteer Fire Department
Todd Richardson, Earlysville Volunteer Fire Company
George Robinson, East Rivanna Volunteer Fire Company
George Stephens, North Garden Volunteer Fire Department
Timothy Cersley, Scottsville Fire and Rescue
Greg McFadyen, Seminole Trail Volunteer Fire Department
Dustin Lang, Stony Point Volunteer Department
Kostas Alibertis, Western Albemarle Rescue Squad

Others in attendance:
Heather Childress, Albemarle County Fire Rescue
Christina Davis, Albemarle County Fire Rescue
David Puckett, Albemarle County Fire Rescue

I. Call to Order

Chief Alibertis called the meeting to order at 1802 hrs.

A. Moment of Silence

Participants observed a moment of silence.

B. From the Board: Matters Not Listed on the Agenda

Chief Alibertis accepted additional items for the agenda.

C. From the Public: Matters Not listed on the Agenda

There were none presented.

II. Consent Agenda

A. June 2024 Minutes

MOTION: Chief Stephens motioned, seconded by Chief Richardson, to approve the Consent Agenda as presented. The motion passed unanimously (10-0).

Ms. Davis indicated that the Training Policy in the packet is the older version and she would provide the newer one on the screen and send it out after the meeting.

III. Committee Updates
A. Executive Committee
B. Training Committee
C. Operations Committee
D. Recruitment & Retention
E. Quartermaster
F. Apparatus Committee

IV. Unfinished Business

A.

V. New Business
A. Training and Registration Policy
Chief Childress reported that this policy had been in the works for some time now, and the only substantive change from the previous version is the proposal for rotation through the waiting list so that each department has an opportunity to pull someone from the waiting list up into the class. She noted that this would allow more equitable access to classes, particularly Firefighter I and EVOC.

Chief Childress stated that Seminole has a strong opposition to the policy, but she emphasized that this is an attempt to be equitable across the system so that every department has opportunity. She said that one of the last issues they had discussed previously was consulting departments when choosing from the waitlist as opposed to picking the first person from the list, to give stations that discretion. She added that this would provide departments with an additional slot after the initial two guaranteed spots.

Chief Alibertis commented that this was intended so that stations might provide someone who was more ready for the class.

Chief McFadyen asked if this should be deferred to allow more time for review, since the older policy was distributed in the packet.

Chief Alibertis responded that given the minimum level of changes—with just one substantive change—they could probably proceed.

Chief Dillon said that the policy was discussed in the Executive Committee, so none of this is a surprise.

Chief Alibertis emphasized that the only difference from the one that is in print is the one single line.

Chief McFadyen stated that there were more changes between the policies than just one sentence.

Chief Childress said that while it’s more than one sentence, it is just the waitlist issue.

Chief McFadyen stated that in the older version, there is no reference to LODA—but there is in the newer version.

Chief Dillon emphasized that they could talk about it now, including discussing the differences, and vote on it tonight instead of kicking the can down the road. He added that there was no need to delay, as this has already been going on too long.

Chief McFadyen pointed out that they were given an advanced copy, whereas others may not have seen it.

Chief Childress said that the specific piece missing was that you wouldn't be able to be accepted officially into the class until you got your LODA physical. She stated that this is already an existing policy in LODA, and they simply incorporated that verbiage into the policy. She added that they were trying to avoid last-minute chaos because people haven't gotten their physical or scheduled one.

Chief McFadyen asked if this could be any class—CPR, EMT, etc.

Chief Childress clarified that it would be any ACFR-sponsored class.

Chief Stephens asked how this would affect filling a class slot with someone outside of the locality and how they would verify if they'd had a LODA physical.

Chief Childress responded that ACFR requires verification that someone is covered by another department's insurance before they are allowed in the system, as they cannot control how other localities handle their rules regarding who is eligible to sign up. She noted that ACFR does require a COI from them.

Chief Alibertis stated that another issue they both have is that a fair number of individuals who take the summer EMT course are not affiliated.

Chief Childress confirmed that if they're not affiliated, there is no requirement.

Chief Alibertis said that if someone wants to take the CPR class and isn't a member yet, they don't have to have a LODA physical.

Chief Childress reiterated that this just reinforces the existing policy and remind people that they have to do a LODA physical.

Chief Dillon commented that they want to make sure that everyone gets a LODA physical, but this policy doesn't necessarily grab every person getting one

Chief Childress agreed but said there are a few other prongs such as IDLH—and while it won't catch everyone, it will catch a lot of people. She noted that there are currently 80

people in the system who have not had a LODA physical. She also said that there are a few other measures they are taking to confirm this, including issuance of gear.

Chief Lang asked if this incorporated the people who were grandfathered.

Chief Childress confirmed that it did.

Chief Eggleston noted that most of the people without physicals are those who onboarded during Covid.

Chief Childress agreed, noting that there is a mention in the language that it's "After July 1, 2014," so you don't have to go back and get a physical.

Chief Lang asked whether there was a built-in window for those who signed up prior to a class starting but it wasn't possible to get a physical before then.

Chief Childress responded that if you're signed up a few months ahead of time, Ms. Davis has communicated with Work Med—and for the January class, they will have Life Scan to do employee physicals on that day. She added that the predicament being addressed currently is the timing, as VDFP has changed the number of days that the class closes, and they need to give enough time to fill the slots if someone comes throughout without their physical.

Chief Childress explained that at the recruitment and retention level, they are encouraging people to communicate if they are having trouble getting their physicals. She said that Work Med has agreed to provide two spots per day in August, September, and October, which will help Seminole with the big recruitment efforts at the UVA activities fair, etc. She encouraged the chiefs to reach out if they run into issues with getting physical scheduled, noting that they have several different options now but have not yet looped in MJH/Sentara.

Chief Alibertis said that he had wanted to use Augusta but the process was onerous—you have to schedule an appointment, notify the station that they've made the appointment, then the station has to contact ACFR. He said if they could streamline that process, it would be a lot easier for his station.

Chief Childress agreed and said that none of the options is perfect, but they have gotten better and she feels there will be a long-term solution soon.

Chief McFadyen stated that Seminole is experiencing 26 days on average before they get appointments—from the time they call to the time they actually get an appointment—which is still down from 75 days. He noted that they were trying to push through about 6–8 people per month, and the other challenge with Work Med has been the unpredictability of having an X-ray technician present, which creates the need for yet another appointment.

Chief Alibertis asked if there was any further discussion specific to the Training Policy and LODA.

Chief McFadyen responded that Seminole's primary concern is how the pick order works, explaining that the station took the current Firefighter I course and ran it through the existing policy and the new policy to see how it would affect the station. He reported that with the current policy in a typical 24-person class, there would be one WARS person, three East Rivanna, three Crozet, three Stony Point, and 14 Seminole; with the proposed policy by date order, there would be two Stony Point people (registering May 22 and July 8) who had a higher priority in the class—effectively kicking out two Seminole people who registered in April and early May.

Chief McFadyen stated that the way the pick order goes, Seminole is always last.

Chief Childress dissented with his assessment, stating that the first person on the waitlist is that station's slot.

Chief McFadyen agreed but said that it would then go to ACFR, then WARS, then CARS.

Chief Childress said that it would depend on the list order as to who came next.

Chief Alibertis asked if it was date order or station order, as his understanding was that it was the latter.

Chief Childress confirmed that he was correct.

Chief McFadyen said that wasn't what was emailed by the County.

Chief Childress explained that it would go by the list, and the departments have the spot and get to choose who goes in—so the date doesn't matter.

Chief Dillon said that for illustrative purposes, the date closes, you fill the class, and now you have a waitlist; if someone drops out of the class, you will now go to the waitlist. He asked how you decided which station went first off of that waitlist and whether it was the next person who registered, according to date.

Chief Childress responded that the first one off the waitlist is the first one who was on the waitlist, and the department had the option as to who to send.

Chief McFadyen noted that every station would get an opportunity each round, then it would reset for the next round.

Chief Dillon gave an example that if slots 4, 5, 6, 7 happen to be Seminole since they all registered at the same time, they would only pull 4 (one person from Seminole), then circle back through the list.

Chief Eggleston noted that the class limit was now 30, so there was a high likelihood that everyone would get in.

Chief Childress said if they applied the new policy, four people would be able to get in across all firefighter classes.

Chief McFadyen replied that her comment just alluded to Seminole's point that pick order doesn't matter, timing doesn't matter—capacity matters, and they need more Firefighter I and EVOC slots. He emphasized that this policy change was a Band-Aid on a problem, and they needed an actual solution that supported capacity.

Chief Dillon said that he disagreed with part of that and explained that his primary focus with this policy has been equity, and this proposal is more equitable. He stated that he is more comfortable with every station having a chance.

Chief McFadyen responded that there is four months to sign up for a class.

Chief Lang said that his issue was that all of Seminole's people would sign up on the first day, and if his person registers two months after the course opens, he might not get in because Seminole wants 15 people in.

Chief McFadyen pointed out that he has people registering in July as well, and he isn't expecting them to get in—but it's worth it for them to be on the waitlist.

Chief Alibertis commented that they are going around in circles with this, and the design of this is meant to be equitable. He emphasized that WARS has the same issue with EVOC as Seminole does with Firefighter I, but this is a way to be fair because it brings people off of the waitlist in a fair order, and it's up to the station to have that latitude. He added that they can address he capacity issue in other ways as well.

Chief Leavell stated that this is the foundation they need to increase capacity, and she has not run the numbers to see exactly how the policy impacts this.

Chief Dillon commented that this isn't anything personal against Seminole, and going solely on the date people register isn't equitable—especially in light of internet access and the timing of members joining. He acknowledged the impact on Seminole and their frustration, but he was looking at this from the perspective of what as best for the system, as they still all needed engines from other departments.

Chief Alibertis said that WARS is in the same situation, and they have three people on the waitlist for EVOC.

Chief Leavell noted that CARS is hosting quarterly EVOC classes now.

Chief Eggleston emphasized that they are trying to eliminate the “Ticketmaster” approach to class registration, which isn’t fair across the system. He said that it is helpful to have the additional slots in classes, but he can’t do that with the current classes already scheduled. He commented that this is about as equitable as it can be at the moment.

MOTION: Chief Dillon moved to accept the Training and Registration as presented in the meeting and shown on the screen. Chief Leavell seconded the motion, which passed 9–1, with Chief McFadyen dissenting.

B. Garden Apartment FOG

Chief Puckett reported that he had emailed information out about the FOG but would point out that this includes a recommendation for a response-level change for commercial buildings, and there was a typo that didn’t update the effective response force number of 21 as it was in 702.3, the overview, to that same number of 21 in 702.5, the dispatch plan.

Chief Puckett explained that for multi-family structures such as Garden Style Apartments, this would raise the number to four engines, two trucks, ambulance, and chief—which is consistent in Central Virginia and Northern Virginia based on the amount of work and number of people impacted who may need to be evacuated or rescued. He added that specifically for ACFR, the concentration of resources means that it takes longer to get somewhere, which impacted the townhouse fire in Crozet and the Garden Style Apartments on Commonwealth Drive, where they had to call for an additional truck to have one on each side of the structure.

Chief Puckett noted that in their packet was also an updated reference guide/cheat sheet, with an addition under “type of structure” to include an assignment line to make it easier to see what response they should be getting. He said that they would also be updating this for high-rises, with a slightly higher assignment level.

Chief Lang asked if the second truck was coming from the County or the City.

Chief Puckett responded that it wasn’t in their current MOUs, so they would need to discuss whether they wanted to expand that.

[inaudible question asked]

Chief Puckett responded that they discussed this internally, and they ended up with the approach of automatically getting a second ambulance if there is a fire with entrapment, but you would have to request a second ambulance for fires without entrapment.

Chief Dillon asked what feedback they had received from the committees on this.

Chief Puckett replied that they reviewed this at the committee level, and some people provided feedback by email, but there was limited input. He noted that the Executive Committee had reviewed this last month and had no real feedback.

Chief Eggleston commented that they reached out to other departments to assess their effective response force, and ACFR was slightly below that.

Chief Puckett confirmed that they are slightly below, and one of the factors considered in those is whether there are specific staffing levels on the units—and ACFR is assuming three people on all of their units.

Chief McFayden asked if he had the opportunity to evaluate this based on cross-staffing and other measures.

Chief Puckett responded that he had not, but he had shared with the group that there were questions about truck units and cross-staffing. He said that they cannot say when to use cross-staffing or when not to from a response plan perspective, but they can prioritize what to pull first. He said he had suggested following engine, truck, engine, truck, and then the rest of the engines. He stated that ideally, they want the first due engine in there first, as water on the fire is the best thing they can do in most cases, followed by a truck to have access and start a search. He noted that he would prefer a second engine to complete the water supply, versus a truck that may not be helpful at a hydrant that is a distance from the building.

MOTION: Chief McFayden moved to accept the FOG policy as presented. Chief Dillon seconded the motion, which passed unanimously (10-0).

Chief Puckett said that he would incorporate a month ahead effective date so stations have time to communicate it to personnel.

Chief Puckett also stated that they would change their commercial response package in the short term, and as they get into phase two with fire call types, it would be dispatched as structure fire-multi-family, structure fire-commercial, and structure fire-high-rise.

C. Miscellaneous

Chief McFayden announced that it was raised in the Apparatus Committee to review the lease replacement schedule, and the committee has effectively said that this needed to be handled at a higher level. He said that he is requesting a FEMS Board work session to discuss the schedule.

Chief Alibertis stated that he had talked to Chief Walker about this, as they used to have an annual review of this but haven’t done that for a number of years.

Chief Puckett responded that he would work on getting a draft out for review, but the process in question was based on outside maintenance before they had their own shop. He said that they now have better data and assessment of those vehicles.

Chief Alibertis commented that to him, this was even more reason to have an annual assessment.

Chief Puckett stated that in his opinion, they should move away from a hard replacement schedule and provide more flexibility with assessing and determining what needs to be repaired or replaced.

Chief Stephens said they had been doing this in reverse, kicking it out another year or two, which they have been doing for a while.

Chief Puckett commented that they have moved these all up a year from a CIP perspective, which hasn't yet resolved the issue, so they may need an entirely new approach. He noted that he would add this for future discussion.

Chief McFayden reported that there would be a third Firefighter I class in the County, and several station officers have reached out to Seminole about it—but this on hold because of funding mechanisms not being in place.

Chief Eggleston stated that he and Chief McFayden had met before this meeting, and going into this year, they had to cut $1 million+ out of their budget, with additional expenditures they weren't anticipating and a $500K "hold" by the County. He said that they were going through a lot of scrutiny in their budget, and they were already feeling the pressure at this point in the fiscal year.

Chie McFayden said that Seminole has heard from quite a few stations, and they are trying to figure out how to proceed.

Chief Eggleston commented that this could be a test case for a more permanent funding stream for future years, through demonstrating a return on investment.

Chief Stephens asked what the cost was for a 24-person class.

Chief Alibertis responded that it was $34,000, or about $1,500 per student.

Chief McFayden said that other stations could put money behind this with training dollars.

Chief Stephens said that's what he was thinking, as each department has a training budget; if he had someone who needed the class, he would spend the money.

Chief McFayden stated that their goal was to have an October to February class on a Sunday schedule, which accommodates the other classes that take place on Saturday. He said that he would reach out to stations and gauge their interest, along with figuring out the funding piece.

Chief Cersley asked if there had been any discussion with ECC about addressing the items they had been talking about.

Chief Eggleston responded that there have been a lot of frustrations, but he was reminded that ECC has a process now to address problems. He noted that there has been a lot of turnover, but they have made salary adjustments that were stemming that. He suggested that they bring Celeste into a future FEMS meeting, as she has been there a long time and it might help shed some light on the challenges and remedies.

Chief Cersley said that was a good idea and mentioned that they recently had a structure fire in Fluvanna County as mutual aid, and it was 13 minutes from the time Fluvanna made the request until ECC toned the battalion. He added that they didn't tone for mutual aid but instead toned the battalion to tell them to call ECC. He stated that this was inexcusable for a fire that he didn't need County battalion to tell him he could go to. He said that today, a brush truck marked up for a tree on a powerline, and ECC toned the engine two more times after that to say they were covering the call.

Chief Eggleston reiterated that it would be best to have Celeste come in, and it was a two-way street as a dispatcher could make or break a call.

Chief Puckett said he had already reached out to her and wasn't sure if they would want a meeting or a work session.

Chief Eggleton responded that a work session would probably be best, and ECC does use the feedback form that has been implemented. He stated that some of these issues could be related to training, and it was important for Celeste to speak to this directly.

[The chiefs shared several stories about ECC delays and incidents, but they were said off-mic.]

Chief Eggleston said that the system needed to be improved, and he would like to offer how they as a system could make this work effectively.

Chief Stephens commented that the CAD updates have helped somewhat.

Chief Alibertis said that whenever they go to an interstate response, the first-due is always late.

Chief Puckett responded that this had been an issue but was recently resolved, so it is plotting correctly now. He said he hadn't heard about delayed notifications but asked the chiefs to let him know if it continued to be a problem.

Chief Childress reported that there is some mandatory IT security training for all albemarle.org email addresses, which the chiefs may have.

Chief Stephens stated that the County's link for the training has not worked—and IT has not responded to him, despite his inquiries.

Chief Childress and Chief Alibertis reminded attendees that the volunteer program lists are due on Friday, with tier one being higher than tier two.

Chief Alibertis said that there would be an EMT class in late September or early October, and he wanted stations to have an opportunity before it went public.

Adjournment
At 19:04 hrs., the FEMS Board adjourned its meeting.

FIRE RESCUE
ALBEMARLE COUNTY
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www.ACFireRescue.org

ALBEMARLE COUNTY FIRE AND EMERGENCY MEDICAL SERVICES BOARD
ATTENDANCE LOG

Date: Wednesday, July 24, 2024

VOTING MEMBERS (OR DESIGNATES)

Chief Dan Eggleston (Albemarle County): _____

Chief Virginia Leavell (CARS): _____

Chief Gary Dillon (Crozet): _____

Chief Todd Richardson (Earlysville): _____

Assist Chief George Robinson(East Rivanna): _____

Chief George Stephens (North Garden): _____

Chief Timothy Cersley (Scottsville Fire): Tim Cersley (Comm) _____

Greg McFayden
Chief ~~Dennis Hahn~~ (Seminole Trail): Greg McFayden (Comm) _____

Chief Dustin Lang (Stony Point): _____

Chief Kostas Alibertis (Western Albemarle): _____

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ALBEMARLE COUNTY FIRE AND EMERGENCY MEDICAL SERVICES BOARD
ATTENDANCE LOG

GUESTS & OTHERS

Date: Wednesday, July 24, 2024

Guest/Other	*Organization/Agency/Affiliation*
Christina Davis	ACFR
David Puckett	ACFR
Heather Childress	ACFR

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ALBEMARLE COUNTY FIRE RESCUE EMERGENCY AND MEDICAL SERVICES BOARD ACTION RECORD

AGENDA TITLE/ISSUE:	AGENDA DATE:	
Consent Agenda	Wednesday, July 24, 2024	
MOTION:	**MOTION MADE BY:**	**SECONDED BY:**
To accept consent agenda	Chief George Stephens	Chief Todd Richardson
SUBSEQUENT MOTIONS/AMENDMENTS:		

CALL OF THE QUESTION:	Yes	No	Abstain
Chief Dan Eggleston (Albemarle County)	☒	☐	☐
Chief Virginia Leavell (CARS)	☒	☐	☐
Chief Gary Dillon (Crozet)	☒	☐	☐
Chief Todd Richardson (Earlysville)	☒	☐	☐
Assistant Chief George Robinson (East Rivanna)	☒	☐	☐
Chief George Stephens (North Garden)	☒	☐	☐
Chief Timothy Cersley (Scottsville Fire)	☒	☐	☐
Chief Greg McFadyen (Seminole Trail)	☒	☐	☐
Chief Dustin Lang (Stony Point)	☒	☐	☐
Chief Kostas Alibertis (Western Albemarle)	☒	☐	☐

I hereby attest that the foregoing is true and complete to the best of my knowledge.

Christina Davis
Clerk

July 24, 2024
Date

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ALBEMARLE COUNTY FIRE RESCUE EMERGENCY AND MEDICAL SERVICES BOARD ACTION RECORD

AGENDA TITLE/ISSUE:	AGENDA DATE:	
Training and Registration Policy	Wednesday, July 24, 2024	
MOTION:	**MOTION MADE BY:**	**SECONDED BY:**
To accept the Training and Registration Policy that was on the screen	Chief Gary Dillon	Chief Virginia Leavell
SUBSEQUENT MOTIONS/AMENDMENTS:		

CALL OF THE QUESTION:	Yes	No	Abstain
Chief Dan Eggleston (Albemarle County)	☒	☐	☐
Chief Virginia Leavell (CARS)	☒	☐	☐
Chief Gary Dillon (Crozet)	☒	☐	☐
Chief Todd Richardson (Earlysville)	☒	☐	☐
Assistant Chief George Robinson (East Rivanna)	☒	☐	☐
Chief George Stephens (North Garden)	☒	☐	☐
Chief Timothy Cersley (Scottsville Fire)	☒	☐	☐
Chief Greg McFadyen (Seminole Trail)	☐	☒	☐
Chief Dustin Lang (Stony Point)	☒	☐	☐
Chief Kostas Alibertis (Western Albemarle)	☒	☐	☐

I hereby attest that the foregoing is true and complete to the best of my knowledge.

Christina Davis
Clerk

July 24, 2024
Date

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ALBEMARLE COUNTY FIRE RESCUE EMERGENCY AND MEDICAL SERVICES BOARD ACTION RECORD

AGENDA TITLE/ISSUE:	AGENDA DATE:	
Garden Apartment FOG	Wednesday, July 24, 2024	
MOTION:	**MOTION MADE BY:**	**SECONDED BY:**
To accept Garden Apartment FOG	Chief Greg McFadyen	Chief Gary Dillon
SUBSEQUENT MOTIONS/AMENDMENTS:		

CALL OF THE QUESTION:	Yes	No	Abstain
Chief Dan Eggleston (Albemarle County)	☒	☐	☐
Chief Virginia Leavell (CARS)	☒	☐	☐
Chief Gary Dillon (Crozet)	☒	☐	☐
Chief Todd Richardson (Earlysville)	☒	☐	☐
Assistant Chief George Robinson (East Rivanna)	☒	☐	☐
Chief George Stephens (North Garden)	☒	☐	☐
Chief Timothy Cersley (Scottsville Fire)	☒	☐	☐
Chief Greg McFadyen (Seminole Trail)	☒	☐	☐
Chief Dustin Lang (Stony Point)	☒	☐	☐
Chief Kostas Alibertis (Western Albemarle)	☒	☐	☐

I hereby attest that the foregoing is true and complete to the best of my knowledge.

Christina Davis
Clerk

July 24, 2024
Date

ALBEMARLE COUNTY FIRE/EMS BOARD
FEMS BOARD EXECUTIVE COMMITTEE
MONDAY, SEPTEMBER 9, 2024 – 1630 HOURS

A meeting of the Albemarle County Fire/EMS Board Executive Committee was held on Monday, September 9, 2024, at 1630 hours.

The following members were in attendance:
David Puckett, Albemarle County Fire Rescue
Virginia Leavell, Charlottesville/Albemarle Rescue Squad
Gary Dillon, Crozet Volunteer Fire Department
Greg McFadyen, Seminole Trail Volunteer Fire Department
Kostas Alibertis, Western Albemarle Rescue Squad

Others in attendance:
Christina Davis, Albemarle County Fire Rescue

I. Call to Order

Chief Puckett called the meeting to order at 1636 hrs.

A. From the Board: Matters Not Listed on the Agenda

Chief Leavell said that she would like to discuss the ACFR drug screen policies, given the addition of legalized cannabis, as someone can "fail" a drug test due to the presence of marijuana. She stated that the County does not necessarily care, nor does she, but CARS would like some guidance on this.

Chief Alibertis stated that he would like to add

II. Approval of Consent Agenda

A. August 5, 2024 Minutes

MOTION: Chief Alibertis motioned, seconded by Chief McFadyen, to approve the Consent Agenda as presented. The motion passed unanimously (5-0).

III. Unfinished Business

A. None

IV. New Business

A. Medication Policy

Chief Puckett reported that the EC had a copy of the medical policy attached in their packets, and he had already started making edits beyond what is presented. He stated that November 27, 2024 is the deadline for the hospital drug box exchange program to end, so they have to become self-sufficient at that point. He said that the plan is to roll out training in the first part of October; they were doing central supply at PSOC and

resupply sites at PSOC on 11/15 and 11/16. He said that starting in mid-October, they would light up one of the “spokes” to have everything up and running by mid-November, a few weeks ahead of the deadline.

Chief Puckett stated that the hope was to get some of the policy ironed out now, even though it wouldn’t be entirely complete, and then push it to FEMS so they can start working on it. He said that the goal was to have a final policy by the end of October ;if it was not complete by then, the chief would need to enact it as an interim policy until they can finalize the official policy—as a lot of training is based on the policy.

Chief Puckett reported that Pyxis is onsite beginning today and continuing for the next three weeks, and there have been many conversations already with them as to which path they would take. He explained that Pyxis is an automated dispensary with a computerized cabinet where all the medications are stored, accessible by fingerprint that determines which medications are available to whom. He noted that the system also tracks inventory, and Pyxis will be at PSOC on 11/15 and 11/16.

Chief Alibertis stated that there would need to be credentials for those accessing the cabinet.

Chief Puckett responded that for their tiers, there would be a BLS provider and an ALS provider; theoretically, they will have access to some medications they will not use.

Chief Alibertis suggested that they have a cross-check run through one person.

Chief Puckett explained that the one-person scenario is having someone do it themselves and read from the vial, saying it to themselves; the other piece is that they want people to report back any errors or close calls—not necessarily the provider name, but the circumstances so they make appropriate changes for drugs that are not being administered properly.

Chief Puckett stated that the draft policy includes a responsibility section that goes through EMS providers, company officers, chief officers, etc. to stipulate the specific items people should be doing. He offered to send this updated version to the group.

Chief Alibertis asked if they needed a police report for that, as his understanding was that it should be reported to law enforcement, He noted that the DEA does not count as law enforcement ,and it would likely need to be reported locally as there could possibly be criminal charges.

Chief Alibertis said that he would like for “controlled substances” to list schedule 2, 3, and 5 because the Virginia Board of Pharmacy calls things like syringes “controlled,” whereas federal definitions differ.

Chief Leavell noted that the “non-controlled substance” listed below is a schedule 6.

Chief Alibertis commented that the way the Virginia Board of Pharmacy handles these things has been inconsistent. He asked Chief Dillon if he would be storing medications.

Chief Dillon responded that he hoped not, but that was a good question.

Chief Leavell stated that the UVA Pharmacy Director had said in an O&D meeting that all the boxes would be pushed out and not taken back.

Chief Puckett said that was good news, and he would email UVA to get it in writing.

Chief Alibertis asked for clarification that if an engine showed up on an EMS call and they needed a drug box, they could get it off the engine.

Chief Puckett confirmed this, adding that he would need to clarify how that would work if the unit goes out of service and was going to the shop; someone would need to be able to pull it off on a night or a weekend.

Chief Alibertis stated that someone from EMS could do that and store it.

Chief Puckett added that they could also move it to the secondary engine, as there would be storage compartments.

Chief Alibertis emphasized that they may need to use the station, as the boxes must be climate controlled.

Chief McFadyen noted that currently, the volunteer side does not have access and does not have the combination—and he doesn't want to be involved unless it's absolutely necessary.

Chief Alibertis added that they would have to remove the drug box if the engine has to go to the shop.

Chief Puckett said that would probably be a rare occurrence.

Chief McFadyen stated that one concern Seminole has is that the medic units would regularly get the second drug box off of their engines and have them bring them to the medic units; at that point, the medic unit would need to take possession of both drug boxes and transport back to them, which could be delayed. He added that this always happens at night.

Chief Puckett explained that during the day, whomever for ALS was there would restock if it was their kit; if it was a night or weekend and there wasn't an ALS provider on the unit, the medic unit would likely take possession of that and return it when possible.

Chief McFadyen noted that they also store Narcan in the compartment that holds the drug box, which is used more than PEDs at this point.

Chief Alibertis asked if they did a PPCR.

Chief McFadyen confirmed that they did.

Chief Puckett presented an example of the designed kit, stating that this is a training version (green) versus an actual production kit (yellow). He said that from a BLS standpoint, there is a nebulizer kit, nitroglycerin, aspirin, etc.; it is not sealed or locked except in a compartment. He stated that the ALS part has three separate boxes, and the narc or RSI box is the smallest and the only thing that's actually sealed separately.

Chief Puckett said that the paralytics would have red labels to be easily identified, and they were going to use tacking labels to mark every component. He also pointed out the cardiac kit and its components, and other random items such as Haldol, Benadryl, etc. He stated that there would also be a sharps container and on the front side, there would be drip sets, syringes, needles, and extra non-sealed supplies. He said that on each side, they would be putting in an IV start kit and an IO gun.

Chief Puckett stated that they have bought training bags for the high-use ACFR stations—11, 12, 15, and 16—as well as several for the training division. He added that they also have sim meds for those, and they would be marked because they are not supposed to be keeping actual expired medications in vials and reusing those. He stated that they may have to rework or relabel their kits for uniformity, and they would be putting a suitcase-style tag with a discrepancy card that can be used for documentation as to any items changed/stocked.

Chief Puckett said that this was the general concept, and they have all the bags and boxes in, as well as all the non-controlled medications; they are now just waiting on the vendor to verify the controlled substances.

Chief McFadyen asked for confirmation that there was only one kit for Seminole, and if that unit was going out of service, they would need to transfer this along with the other ALS items.

Chief Puckett confirmed that they would need to switch the medications box to the first-due engine.

Chief McFadyen asked if they were adding badge riggers or changing the compartment lock, as it was vague in the current policy.

Chief Puckett clarified that all the drug box compartments would be updated with CompEx, which is a smart lock that requires a swipe and a PIN to gain access. He said that would have some ripple effects, and everyone must have a unique PIN with no repeating digits. He stated that ACFR would assign the PINs and back up/duplicate those on Knox boxes; on first due, you would choose your own PIN that could be used for each system.

Chief Puckett explained that on scene, you can resupply things like Benadryl so that other units don't have to go back and restock; but if you show up and they've administered fentanyl on scene, that cannot be resupplied from and must be restocked only for their unit. He said that their initial plan was to assign a kit to a unit, but instead, each station will have a designated number of kits that it is responsible for—including dissemination, trackability, and compliance. He noted that this also provided flexibility to swap within stations.,

Chief Puckett confirmed that there would be unique identifying numbers for each station's kits. He stated that they would pick the kit in first due, and it would prompt for the kit's serial number; that would be entered, then they would be prompted to choose "okay," with about 30 second given to access it. He acknowledged that this would be challenging at first, but if responders can document that the kit was good at the start of the shift and at the end of it, they can attest to that and provide protection and accountability. He added that this would identify diversions much sooner than waiting a month to check each kit, noting that it requires two people to attest to serial numbers. He commented that the non-controlled substances are able to be accessed and examined without going through a lot of hoops.

Chief Alibertis noted that the policy states that ALS is assigned, so that may need to be modified if others can access the non-controlled substances.

Chief Leavell asked if there was a point at which CARS could buy in to cover the costs of all the equipment since they are part of the system, because it was initially pitched that if an organization had an NPI, they had to do it separately—but it was changed to allow for participation in a coordinated system. She stated that they have a very strong interest in that so they don't have to do it themselves.

Chief McFadyen said that they are running calls together in the system, so it only makes sense for them to be on the identical system.

Chief Puckett responded that they currently were not in the same system, so they couldn't be restocked from the same system.

Chief McFadyen stated that about every week, someone runs out of medications out of their box and gets replenished from another unit—and he wondered if they were allowed to go get that box and use it on the ALS side.

Chief Puckett replied that the policy currently states that for non-system units, you cannot provide drugs to another agency.

Chief McFadyen said he would advocate strongly for them to be part of the system, because this would become an issue when there is a late-night call and the battalion and/or medic isn't there. He stated that it would most likely happen with Seminole's first due every single time.

Chief Puckett explained that they are increasing the number of epi-pens in the box, and

the vast majority of the time, they need another box because they need more epis. He said that they would be stressing that units need to start drawing it up once they used the first four epis rather than just grabbing another box. He added that if things were extremely tense, they should just do what's best for the patient and figure it out on the back end, as responders were ultimately responsible for the patient.

Chief McFadyen emphasized that he simply needed guidance as to whether they were allowed to bring a box when a unit requested it—and Seminole would not be making that call.

Chief Puckett noted that there were starting to be enough variations between ALS and BLS that they needed to be careful.

Chief Alibertis pointed out that they would put different things in a side compartment in their own kit.

Chief McFadyen said that the only other request from Seminole was with 505-13, and who is "A" referencing, in terms of "fire rescue chief or designee" and whether that was Chief Eggleston, Chief Puckett, etc.

Chief Puckett clarified that "A" was Chief Eggleston.

Chief McFadyen asked if the station chief should be notified if it fell outside of ACFR.

Chief Puckett responded that the policy states that immediate notification should be made to the company officer, volunteer chief, on-duty battalion chief, and medication supply manager. He said that if the latter couldn't reconcile it, then it starts escalating into all the other agencies.

Chief McFadyen said as they read it, a station would be given the opportunity to reconcile but would never receive feedback on whether it was reconciled. He said that Seminole was asking if the local agency could be notified that non-reconciliation was made.

Chief Puckett responded that this could be done.

Chief Alibertis noted that if there was a police report, it would have to be at the agency level and not at the system level.

Chief Puckett pointed out that they would need to decide tonight for it to be advanced to FEMS, or there wouldn't be time to enact it as a policy. He said that some of these finer points could be finessed at the full FEMS Board level.

Chief Alibertis said they could advance it, but it wasn't entirely complete—and it could always come back for fine tuning.

Chief McFadyen stated that he would like to advance it as a working document, acknowledging that there may need to be some adjusting.

Chief Puckett noted that Pyxis might also have some adjustments that are out of FEMS' control. He said that as they roll it out, they would probably put a box in and use it side by side with the old boxes. He stated that he would likely start on the northern spoke, then east, south, and west—so they could iron out any issues.

Chief Alibertis stated that they could also put these on the ambulances to start.

Chief Puckett agreed, adding that he needed to know from the agencies who would be responsible for restocking, as they would need to have Pyxis training and be loaded into the Pyxis system. He noted that there would be a training soon at Station 15, and they were currently beta testing the locks; he said that he wasn't sure all the locks would be deployed on go-live, as there were about 50 that needed to be deployed. He stated that there would be a station rollout, and he would need to verify the EMS providers to get them loaded into the Pyxis system.

Chief Puckett clarified for Chief McFadyen that the battalion chief, Station 15, and WARS would be able to open the lock; they would just need to be instructed to move it from one unit to another.

Chief Dillon asked if it was going to the PSOC, if there would be a place they could just lock it in the PSOC.

Chief Puckett said that the station would be responsible for the kits, so they would have to ensure that it remained intact if it was offsite, such as when a unit was being repaired.

MOTION: Chief Alibertis moved that the Medication Policy be forwarded to the FEMS Board. Chief McFadyen seconded the motion, which passed unanimously (5-0).

C. Miscellaneous

Chief Leavell stated that her item was whether the County had an updated policy for drug screens that came back for marijuana.

Chief Puckett responded that they did not currently have a policy for it but had discussed several years ago removing marijuana from the drug screen, unless they were testing for reasonable suspicion of someone under the influence while at work. He said that because of the way they test the panels, they can't take it out—so if they do a drug screen and get that information, then decide what to do with it.

Chief Alibertis said that if someone was on duty, it would be the same as if they were using alcohol; it would only work for a random screen.

Chief Levell pointed out that THC would show up for 30–45 days.

Chief Puckett stated that the County has addressed it more in the context of preemployment.

Chief Leavell noted that it was the physician who informed a member that they failed a drug screen due to marijuana.

Ms. Davis commented that it was hit or miss with WorkMed as to whether a drug screen came back with a positive test for marijuana.

Chief Dillon stated that he had a member that ran a “weed shop,” and he told him not to use it before class or show up to duty crew under the influence. He emphasized that this was a concern on the risk management side as well, and they were in a bit of a predicament if a member shows up with a medical marijuana card.

Chief Puckett said that there is a good reasonable suspicion policy in place, so if a member appears to be under the influence, they could be tested at that point. He noted that they don’t have to meet any kind of legal standard, so they could take action based on observation of performance.

Chief Dillon commented that Prince William, for example, does not differentiate between marijuana and alcohol/drugs.

Chief McFadyen pointed out that members may come in contact with smoke when responding to a residence.

Chief Puckett asked if there was any research that correlates second-hand smoke to THC levels.

Chief Leavell responded that it was very minimal, and it doesn’t really show up on trace. She said that in the event of an accident, they would get a quantitative drug screen.

Chief McFadyen stated that a way to set that policy may be setting a threshold number that indicates egregious use versus just coming in contact.

Chief Dillon asked if they have contemplated having a department policy on substance use, but at a minimum, they should go with reasonable suspicion.

Chief Puckett said that he recalled reviewing a draft policy in Lexipol, so that might be worth revisiting for guidance.

Chief Dillon asked if the information such as EAP that was once provided on the plastic cards given out years ago was still the same.

Ms. Davis asked if someone could take a picture of it and send it to her so she could see if it was still accurate.

Chief Leavell mentioned that there were binders that contained that information, which needed to be updated periodically.

Chief Alibertis mentioned the change in the Augusta Health policy.

Ms. Davis said that stations can now submit the authorization form to Augusta Health and copy her on those emails so she can notify the correct station when the results are received. She said that they can request one visit, but that can't necessarily be assured unless Augusta Health allows it.

Chief McFadyen asked about the County clinic, as that information had not yet been shared.

Chief Puckett stated that County local government and school system were starting an employee clinic, which he understood would include volunteer physicals. He said there would be a site in Station 8's area and also at Pantops. He said they would be able to do occupational health services, physicals, etc., and were supposed to have space for Lifespan in that building instead of Station 12. He noted that the first clinic is slated to open by January 2025, and they were still looking for space at Pantops.

Chief McFadyen said that onboarding people has been a real challenge, and they definitely need more options.

Chief Alibertis commented that Augusta Health had been working out well.

V. Next Meeting

A. Monday, October 14, 2024 at 1630 hours

The next FEMS Board meeting will be held on Monday, October 14, 2024 at 1630 hours in the Fire Rescue Conference Room.

Adjournment

At 17:07 hrs., the FEMS Executive Committee adjourned its meeting.

FIRE RESCUE
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www.ACFireRescue.org

ALBEMARLE COUNTY FIRE AND EMERGENCY MEDICAL SERVICES BOARD
EXECUTIVE COMMITTEE

ATTENDANCE LOG

Date: September 9, 2024

VOTING MEMBERS (OR DESIGNATES)

Chief Virginia Leavell (CARS):

Chief Gary Dillon (Crozet):

Chief Greg McFadyen (Seminole Trail):

Chief Kostas Alibertis (WARS):

Chief ~~Dan Eggleston~~ David Puckett (Albemarle County):

GUESTS & OTHERS

Guest/Other	*Organization/Agency/Affiliation*
Christina Davis	ACFR

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ALBEMARLE COUNTY FIRE AND EMERGENCY MEDICAL SERVICES BOARD
EXECUTIVE COMMITTEE
ACTION RECORD

AGENDA TITLE/ISSUE:	**AGENDA DATE:**	
Approval of Consent Agenda	September 9, 2024	
MOTION:	**MOTION MADE BY:**	**SECONDED BY:**
Approve Consent Agenda	Chief Kostas Alibertis	Chief Greg McFadyen
SUBSEQUENT MOTIONS/AMENDMENTS:		
1.		

CALL OF THE QUESTION:	**Yes**	**No**	**Abstain**
Deputy Chief David Puckett (ACFR)	☒	☐	☐
Chief Virginia Leavell (CARS)	☒	☐	☐
Chief Gary Dillon (Crozet Fire)	☒	☐	☐
Chief Greg McFadyen (Seminole Trail)	☒	☐	☐
Chief Kostas Alibertis (Western Albemarle)	☒	☐	☐

I hereby attest that the foregoing is true and complete to the best of my knowledge.

Christina Davis — Clerk

August 5, 2024 — Date

FIRE RESCUE
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ALBEMARLE COUNTY FIRE AND EMERGENCY MEDICAL SERVICES BOARD
EXECUTIVE COMMITTEE
ACTION RECORD

AGENDA TITLE/ISSUE:	**AGENDA DATE:**	
Medication Policy	September 9, 2024	
MOTION:	**MOTION MADE BY:**	**SECONDED BY:**
Advance to FEMS as a Working Document	Chief Kostas Alibertis	Chief Greg McFadyen
SUBSEQUENT MOTIONS/AMENDMENTS:		
1.		

CALL OF THE QUESTION:	**Yes**	**No**	**Abstain**
Deputy Chief David Puckett (ACFR)	☒	☐	☐
Chief Virginia Leavell (CARS)	☒	☐	☐
Chief Gary Dillon (Crozet Fire)	☒	☐	☐
Chief Greg McFadyen (Seminole Trail)	☒	☐	☐
Chief Kostas Alibertis (Western Albemarle)	☒	☐	☐

I hereby attest that the foregoing is true and complete to the best of my knowledge.

Christina Davis
Clerk

August 5, 2024
Date

Townhouse (TH) Guide

701.1 PURPOSE

This document provides arrival and on-scene procedures for Albemarle County Fire Rescue units operating at incidents involving fires in townhouses.

701.2 SCOPE

This procedure applies to all members of the Albemarle County Coordinated Fire and Rescue System as defined in Albemarle County Code Chapter 6, Article I, Division 2, Section 6-102.

701.3 OVERVIEW

Fires in townhouses often present a life safety hazard and present with attached exposures where fire can spread, whether the exposure is separated by a firewall or not.

The term townhouse is a generic term used to describe various styles of attached dwellings. Townhouses are constructed in a variety of layouts. Because of this, a thorough size-up where as many sides of the structure are viewed as possible (360 lap) is paramount. The size-up and 360 lap will allow the initial IC to determine the location of the fire within the building as well as life hazards, conditions in the rear, and eventually the attached exposures.

Townhouses range from two to four or more stories in height and may differ in height from front to rear. Additionally, townhouses may have garages which can store one or two vehicles. The garage may be on the lowest level, or it may be detached in the rear off a common alley.

Commercial townhomes and residential townhomes are similar to each other in both construction and firefighting tactics. The occupancy type is the primary difference between commercial and residential townhomes. Commercial establishments may operate in townhomes and may not involve the same life safety concerns.

The Effective Response Force (ERF) for townhouse fires should be 21 for hydranted responses and 21 for non-hydranted responses.

701.4 DISPATCH PLAN

701.4.1 HYDRANTED AREA
(4) Engines, (2) Trucks, (1) Transport Unit, (1) Chief Officer (Minimum ERF 21 Personnel)

701.4.2 NON-HYDRANTED AREA
(5) Engines, (3) Tankers, (1) Transport Unit, (1) Chief Officer (Minimum ERF 21 Personnel)

701.5 DISPATCH ASSIGNMENTS

See attachment: Quick Reference Guide.pdf

701.5.1 1ST ENGINE
Expected Actions:

- Determine and announce water supply as soon as possible
  - In hydranted areas companies should generally lay in from a hydrant.
  - In non-hydranted areas companies should not lay in and should commit to the driveway.
- Size-up and command.
- Determine and announce Mode of Operation.
- Place 1st line in service.

Tactical Considerations:

In hydranted areas the first engine shall normally lay in from a hydrant to the fire scene. If a hydrant is within 100' of the fire scene the company officer may elect to have the DPO hand jack the LDH and humat valve to the hydrant where the 2nd engine will complete the connection. If a hydrant is within 50' then the 1st engine may make an independent hydrant connection. Occasionally, exigent circumstances such as a known rescue or need for VEIS may negate the 1st engine from laying in. In these situations, the water supply plan must be passed to the next arriving engine(s).

In non-hydranted areas the first engine shall commit to the driveway and shall not deploy any LDH. This allows for additional companies to deploy closer to the residence and increase the number of personnel and equipment immediately available on the scene.

Apparatus positioning shall provide room for the arrival of an aerial apparatus if dispatched. Additionally, positioning shall take into consideration the anticipated hose deployment and generally shall not be more that 100' from the fire scene.

Initial decisions must be made based on a systematic consideration of deployment following the guidance of RECEO (Rescue, Exposure, Confinement, Extinguishment, Overhaul).

As stated in the overview, the size-up is of paramount importance and should be used to determine layout, exposures, fire location, fire growth, flow paths, and victims. The officer should perform a complete 360-lap as part of the size-up. For fires involving middle units, consideration should be given to entering Bravo or Delta exposure to obtain a view of Side Charlie. If physical barriers make the 360-lap impractical, the lap may be assigned to another unit. However, interior operations should not commence until a report from Side Charlie is received. In situations where immediate action is needed to mitigate an immediate life hazard, the initial IC shall transmit the need to bypass the visualization of Side Charlie and the completion of the 360-lap.

As the officer performs the walk-around of the structure, attention should be given to controlling or noting utilities. Gas utilities should be easily controlled during the walk-around while electric utilities may not be easily controlled. However, the location of the electric utility should be noted for future control.

The rapid application of water is the primary goal of the first arriving engine. Crews should work to insure this takes place, often simultaneously of the officer's walk-around. Generally, fire attack

should be transitional with the primary attack beginning from a safer area and pushing towards the fire. The placement of the line should be to provide for the most advantageous location for fire attack (i.e., deck fires, vinyl siding fires, etc.). Attention should also be given to flow paths and any potential flow paths should be controlled. Once the fire attack transition has begun, the first line should be placed between the fire an any persons endangered by the fire. This is generally accomplished by stretching the line to the primary means of egress, normally the front door.

The purpose of the initial attack line is to protect occupants, the interior stairwell, and, if possible, advance to the seat of the fire. The conditions found upon arrival and the information gained during the size-up may dictate changes in these tactics. If it is determined there is no life hazard in the occupancy then the first line shall be positioned between the fire and the most at-risk exposure, either internal or external. Additionally, the requirement of rapid water application may require fire attack to be direct and to begin from the location of the original transitional attack. It should be noted that this tactic does not insure the first line enters via the primary egress point but does address rapid water application; additional attention should be directed towards the primary egress as appropriate.

Townhouse construction practices include regular use of vinyl siding and may have less substantial eaves and soffits than many other multiple dwellings. These practices can lead to an external fire extending internally and into the attic. Fire incidents that present with fire on the exterior of the structure where vertical transmission is likely should have the eaves and soffits swept with the fire attack stream prior to entry.

As time and actions permit, the operator should look to deploy ladders to the building with an emphasis on placement to the fire room.

701.5.2 2ND ENGINE

Expected Actions:

- Water Supply:
  - Complete water supply for the 1st engine when in hydranted areas.
  - In non-hydranted areas deploy LDH down the driveway (less than 1,000') or perform a split lay of LDH down the driveway (greater than 1,000').
- Perform primary search and rescue in coordination with the fire attack (1st engine).

Tactical Considerations:

In hydranted areas the second engine shall complete the water supply (make the hydrant connection) for the first engine.

In non-hydranted areas the second engine shall deploy LDH down the driveway. When the driveway is less than 1,000' the LDH shall be deployed from the end of the driveway with the Siamese. When the driveway is greater than 1,000' the LDH shall be deployed from a location approximately 1,000' from the 1st arriving engine and efforts should be made to prepare for relay-pump operations. Special consideration should be made to identify the water supply. If an

appropriate non-pressurized source is available within 3,000' of the fire scene then relay-pumping is desired over a tanker shuttle.

When the mode of operation is **Offensive**, the 2nd engine shall establish the initial 2-out until relieved of the responsibility by the next arriving company.

When the mode of operation is **Rescue**, the 2nd engine shall assist the 1st engine with rescue efforts or assume a complementary role such as fire attack. Generally, the assumed role should be the complement to the role of the 1st engine, either search or fire attack, unless immediate assistance is required by the 1st engine.

Search priorities and efforts shall focus first on any known area of victim location or refuge. Efforts shall then focus on the fire area, fire floor, floor above the fire, and remaining floors. It is critical to understand that sleeping areas and means of egress are considered highly critical areas in need of search.

Support for the primary search should include ladders to upper story windows and hoselines engaged on the fire.

When accessing the fire floor, crews should begin their search while making their way to the fire area. Crews going to the floor above the fire must also begin searching immediately, but with the objective of quickly getting to the area above the fire first, and then searching outward.

701.5.3 3RD ENGINE

Expected Actions:

- Water Supply:
  - Position for secondary water supply in hydranted areas.
  - In non-hydranted areas the 3rd engine shall generally assume the role of the dump side engine.
- Deploy second line.

Tactical Considerations:

In hydranted areas the third engine shall look to establish a secondary water supply.

In non-hydranted areas with driveways less than 1,000' the third engine shall assume the role of the dump site engine and shall work with arriving tankers to provide for continuous water to the fire scene. If the driveway is longer than 1,000' then the third engine shall prepare to operate within a relay-pump operation and deploy the Siamese as appropriate.

Unless directed otherwise, the second line shall be deployed to back up the first line. This tactic allows for a rapidly deployable line in the event the first line suffers a burn through or catastrophic failure. The second line may also be used in a simultaneous fire attack in coordination with the first line. If the second line is not needed to support the primary fire attack, it may be deployed to the floor above. Additionally, the second line may be used to protect the crew searching above

the fire. This may be accomplished by deploying the line to the base of the stairs on the fire floor to observe fire conditions and to prevent fire from spreading to and up the stairs.

An additional consideration for the second line is that the second line may be deployed to the Charlie Side of the structure. The 3rd engine should consider the possibility of deploying the line from their engine or from the first arriving engine. A second line to the Charlie Side provides for additional reports from that side to the IC, access to potential basements or cellars, and for access to the interior for typical second line objectives via an alternate entrance from the first line.

701.5.4 4TH ENGINE

Expected Actions:

- RIT
- Water Supply:
  - In hydranted areas the operator should complete the hydrant connection for the 3rd engine or for the tower ladder.
  - In non-hydranted areas the operator should assist the dump site operator after positioning out of the way. If no assistance is needed, the operator should join the crew to bolster the size of the RIT.

Tactical Considerations:

The Rapid Intervention Team (RIT) shall perform proactive measures to increase the safety of crews operating in the IDLH and on the fireground. These measures include the preparation of the RIT pack and the readiness of forcible entry and rescue equipment. Additionally, this may include the deployment of ladders for rescue / escape, the preparation of the search tag line, and / or the deployment of a dedicated hose line. Efforts should be made to soften the structure without creating additional flow paths (remove window bars).

701.5.5 5TH ENGINE

Expected Actions:

- Hydranted Dispatch:
  - In the hydranted area and in the absence of an available tower ladder, a 5th engine will be added. The 5th engine should perform a walk-around and provide the IC an update and be prepared to fulfill duties typically assigned to the tower ladder.
- Non-Hydranted Dispatch:
  - In non-hydranted areas the 5th engine shall become the fill-site engine and should proceed to the nearest and most capable water site and prepare to fill tankers with attention to efficiency.

Tactical Considerations:

In non-hydranted areas the 5th engine should work to identify the most appropriate and accessible water source. Upon identification of the water source, they shall proceed to the location and set up to provide adequate water supply to maintain water shuttle requirements.

In hydranted areas, the 5th engine should position out of the way of the scene. Generally, the crew should abandon the apparatus and proceed to the scene. Upon arrival to the scene a walk-around should be performed with a status update provided to the IC. The crew should then be prepared to perform duties normally assigned to the tower ladder that are not yet completed. Ladders shall be placed to the fire building with focus on areas directly involved in fire, where crews are operating, and areas of potential civilian / victim refuge. Additionally, if utilities have not been fully controlled, the 5th engine shall work to ensure all utilities are controlled. As appropriate and necessary, under the guidance of the IC, ventilation shall be performed. The 5th engine may also be deployed to bolster the efforts of the Fire Attack Group and the Search Group.

701.5.6 1ST TRUCK

Expected Actions:

- Position on Side Alpha unless directed otherwise by the IC.
- If arriving first, perform size-up, establish command, as well as determine and announce mode of operation.
- Perform 360# and communicate findings to IC.
    - For fires involving middle units, consideration should be given to entering the Bravo or Delta exposure to obtain a view of Side Charlie.
- Prepare for immediate VEIS when appropriate.
- Perform forced entry.
- Initiate primary search and rescue if arriving prior to the second engine; this is inclusive of searching for fire. If arriving after the second engine, begin secondary search and / or assist in the primary search based on conditions and extent.
- Perform ventilation in coordination with fire attack and the IC.
- Ladder the structure.
- Control utilities and prepare for salvage and overhaul.

Tactical Considerations:

The role of the truck company is very important to the success of fire ground operations and personnel assigned to the truck must be able to adapt based on needs and at the direction of the IC. In the absence of a truck company, all tasks must still be completed and will generally fall to the 5th engine.

Nothing should delay the efforts of the primary search or VEIS if conditions warrant.

Ventilation shall be coordinated with fire attack and the IC. Ventilation shall give special consideration to flow path and unnecessary flow paths shall be controlled.

Generally, the truck operator shall be responsible for ladders and utilities. The operator should place initial ladders to the fire building with focus on areas directly involved in fire, where crews are operating, and areas of potential civilian / victim refuge. If ladders are already in place, then additional ladders should be placed to enhance operational safety and increase ingress and egress points.

Based on the structure, fire extent, and at the IC direction the truck company should be prepared to perform elevated master stream operations. Additionally, some townhouses may require the truck to be used for access to upper floors. Special consideration should be made to ensure apparatus placement allows for both operations.

There are three general locations for turntable placement at townhouse fires. These are determined by degree of fire extension and location.

- Typically, turntable placement at townhouse fires should consist of the turntable being placed one unit away from the involved unit towards most of the exposures. This will facilitate the best placement of the aerial to windows, if needed. Additionally, the aerial will be able to be raised to the roof or to adjoining exposures if needed.
- For a large fire volume / heavily involved situation that may require the use of an elevated stream, the turntable of the first truck should be in front of the most threatened exposure. Additional tower ladders / trucks that may arrive should position their turntable(s) at the next most severely threatened unit. If possible, all turntables should be able to rotate back to the originally involved unit to assist with completion of extinguishment.
    - During large volume fire incidents, the truck should utilize their elevated stream to defend the firewall(s) of the involved unit. This is accomplished by applying heavy caliber streams to the fire side of the firewall to prevent horizontal spread of fire to the attached exposure.

701.5.7 2ND TRUCK

Expected Actions:

- Position on side Charlie or to access side Charlie. When there is no side Charlie access available, the 2nd truck should position opposite of the 1st truck to provide coverage of the uncovered exposure(s).
- Deploy ground ladders to the Charlie side.
- Provide the IC with an updated Charlie side report.
- Prepare to assist in the primary search.
- Prepare to search exposure units.
- Prepare to complete taskings not initiated or not completed by the 1st truck.

Tactical Considerations:

The primary positioning option for the 2nd truck should focus on gaining access to the rear of the townhouse, either by directly positioning on side Charlie or by positioning on either side of the complex to reach the rear. When access to the Charlie side is not available, the 2nd truck should position on side Alpha opposite of the 1st truck and in front of an uncovered exposure.

The taskings of the 2nd truck will be based on incident needs and at the direction of the IC and may include:

- Assist with the completion of the primary search.
- Deploy ground ladders to the rear of the structure with a focus on providing means of egress.
- Perform primary search in exposure units.
- Perform secondary search of the fire unit(s).
- Perform ventilation in coordination with fire attack.

701.5.8 TANKERS

Expected Actions:

- 1st Tanker
  - Supply attack engine
    - If arriving prior to the 2nd engine, commit to the supplying the 1st engine.
    - If arriving after the 2nd engine, supply water through the Siamese to support fire attack and begin establishing the dump site. No water should be dumped; rather, a nursing operation should be continued, and any water used to fill the dump tank(s) should come from subsequent tankers.
    - If arriving after the 3rd engine, supply water to support fire attack, assist in establishing the dump site, maintain uninterrupted supply until empty, and then proceed to the fill site.
- Subsequent Tankers
  - If 1st Tanker has < ¼ tank, then continue nursing operation.
  - If 1st Tanker has > ¼ tank, then dump enough water to establish draft. Once the draft is established, then dump remaining water.
  - Proceed to fill site when empty.

Tactical Considerations:

While the presence of townhouses in the rural area is rare, it is not impossible. Tanker operators must be aware that townhouse fires will likely involve the need for more personnel to arrive rapidly on the scene to control the incident and they should attempt to maintain some access to the scene.

The primary responsibility shall always be to supply and support the fire attack and to maintain an uninterrupted flow to the fire scene. Tankers should continue nursing operations if the tanker currently supporting fire attack has < ¼ tank. In addition to appropriately supplying fire attack efforts, continued nursing provides the fill site unit enough time to establish an appropriate fill site.

The secondary responsibility of tankers is the establishment of the dump site in conjunction with the dump site engine.

Additional personnel that arrive on tankers and that are not needed for tanker operations should report to Staging or in the absence of Staging, the IC, for deployment as needed.

701.5.9 TRANSPORT UNITS

Expected Actions:

- Position for rapid egress
- Treatment of initial patients
- Set up and prepare for rehab
- Support fire ground operations at the direction of the IC
- If first arriving, perform size-up, establish command, and determine and announce mode of operation.

Tactical Considerations:

There are multiple types of transport units that operate within Albemarle County. There are differences between EMS capability (BLS versus ALS) and differences between suppression capability. The IC shall consider the capabilities of the transport unit assigned to the incident and make any adjustments or additions that may be deemed necessary.

In general, the transport unit shall be responsible for maintaining a position that allows for rapid egress from the scene with focus placed on not becoming trapped due to apparatus and hose deployment. The transport unit shall be responsible for the treatment of initial patients. In the absence of initial patients, the transport unit shall prepare for and set up rehab.

If the transport unit is suppression capable and the arrival order warrants, the transport unit may be utilized in a suppression role such as search. If the transport unit is used in a suppression role a second transport unit shall be added.

701.5.10 CHIEF OFFICERS

Expected Actions:

- 1st Chief Officer
  - Position with view of incident with attention to preferred apparatus placement
  - Receive CAN from IC
  - Size-up and assume role of IC

- Reaffirm or update the IAP

- Subsequent Chief Officers
  - Meet with IC
  - Be prepared to operate any of multiple roles:
    - Safety Officer
    - Accountability Officer
    - Division Command

Tactical Considerations:

The standard plan of action for fires in townhouses shall be to address them according to the guidelines contained herein. However, it is understood that situations involving fire are dynamic and may require actions that are outside of standard practice. In those instances, all changes must be announced by the IC.

The goal of the IC should be to continue and / or update the appropriate IAP for the incident. The IAP shall be based on a thorough and continuous size-up, recognition of who and what are in danger, attention to safety considerations, and resource needs. The anticipated need for additional resources should be requested early.

Objectives at fires shall set within the following areas: Rescue, Exposure, Confinement, Extinguishment, Ventilation, and Salvage.

701.6 CONSTRUCTION STYLES

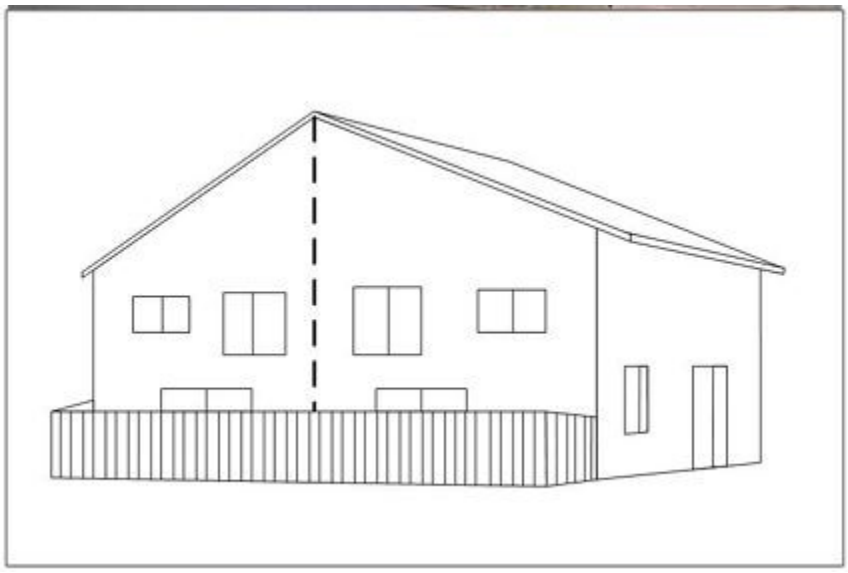
The region contains multiple construction styles and types of townhouse structures. These styles include, but are not limited to, modern townhomes, back-to-back townhouses, piggyback townhouses, over-under townhouses, rowhouses, duplexes, quads, and hybrids. Each occupancy has its own address and own entrance.

701.6.1 MODERN TOWNHOUSE

The modern townhouse is a multi-story dwelling that is normally attached to several other similar units. Typically, each townhouse has rated floor and wall assembly separation. Townhouses will most often have an attic with a pitched roof.

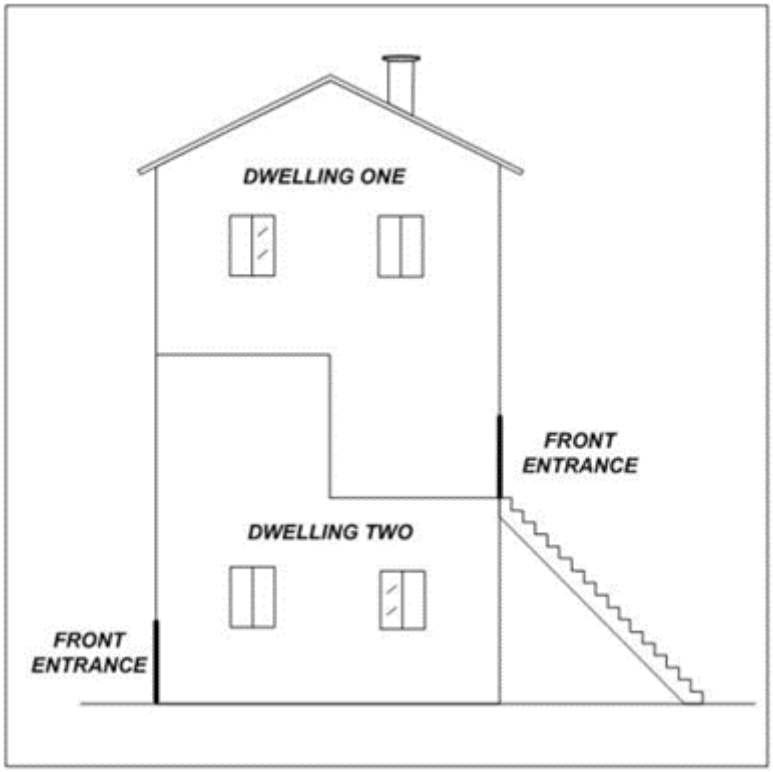
701.6.2 BACK TO BACK TOWNHOUSE

A back-to-back is a townhouse that consists of two or more occupancies under one roof connected by the Side Charlie wall.



701.6.3 PIGGYBACK TOWNHOUSE

A piggyback townhouse consists of two stacked dwellings (one over the other), each with a separate address and entrance. These occupancies share a common floor separated by a fire wall on that floor.



701.6.4 OVER-UNDER TOWNHOUSE

An over-under townhouse usually consists of two stacked dwellings (one over the other). These are usually two-level occupancies over one-level occupancies with entrances on opposite sides; however, other floor plan variations exist. Occasionally, an over-under townhouse may have two dwellings stacked above two dwellings. Over-under dwellings such as those are typically referred to as **two-over-two townhouses**.

701.6.5 ROWHOUSE

A rowhouse is a multi-story dwelling attached to at least two other dwellings. These dwellings may or may not be separated by fire walls. Typically, a rowhouse will have a common cock loft under a flat roof.

701.6.6 DUPLEX

A duplex is two dwellings under one roof sharing a common wall.

Townhouse (TH) Guide

701.6.7 QUAD

A quad is four dwellings connected, under one roof, with separate addresses. A quad may have entrances on four different sides.

701.6.8 HYBRID

A hybrid is a building construction style that can be inclusive of various types of townhouse styles (piggyback, back-to-back, and over-under) under one roof.

Townhouse (TH) Guide

701.7 ISSUE AND REVIEW

ISSUE	EFFECTIVE	REVIEW	REVIEWER
12/1/2022	4/1/2023		

Attachments

Quick Reference Guide.pdf

HYDRANT AREA RESPONSE PLAN

	Single-Family Dwelling	Townhouse	Strip Mall/Commercial	Garden Apartment	Midrise	High Rise
Assignment	4E/1T/1Amb	4E/2T/1Amb				5E/2T/2Amb
1st Engine	Lay supply line or establish own water supply, size up, establish command, complete 360 lap (if size permits) and report findings via follow-up report, determine mode, deploy and manage initial attack line				Lay supply line or establish own water supply, supply FDC, size up, establish command, assess FACP, report findings via follow-up report, determine mode, identify fire floor, identify attack stairwell, place first line in service	
2nd Engine	Complete water supply for 1st engine if needed, assume Search and Rescue		Complete water supply for 1st engine if needed, FDC if on Side A, deploy second line to assist fire attack/protect public stairs, perform search and rescue in absence of a truck		Complete water supply for 1st engine if needed, assess FACP, assist 1st engine with fist line, deploy second line to assist fire attack and/or protect public stairs/hallway, perform primary search and rescue on fire floor in absence of a truck	
3rd Engine	Position for second water supply, assume 2nd line		Position on Side C, secure water supply if available, forced entry on fire and exposure units, FDC if on Side C	Initiate secondary water supply, provide Charlie side or opposite side report, deploy line above fire	Be prepared to supply the 2nd FDC or initiate secondary water supply, deploy line to floor above	
4th Engine	Assume RIT, DPO to complete water supply for 3rd engine or truck				Entire crew abandons apparatus and whole crew assumes RIT in the attack stairwell, staged one floor below the fire floor	
5th Engine	*SPECIAL REQUEST ONLY*					Assist 3rd engine establish secondary water supply, report to CMD post, assume lobby control
1st Truck	Position Side A with effort to reach fire area and exposure(s), forced entry, search and rescue, ladders, ventilation, utilities, assist fire attack				Position to reach fire floor, DAO remains with apparatus, crew to fire floor with 1st engine for forcible entry and primary search	
2nd Truck	*SPECIAL REQUEST ONLY*	Position for Side C coverage as able, roof, ventilation			Position to reach fire floor, DAO remains with apparatus, crew to floor above with 3rd engine	
1st Transport	Position for rapid egress, treatment/transport of injured, rehab or support fire ground ops, if first arriving: complete size up, mode declaration, establish command					
2nd Transport	*SPECIAL REQUEST ONLY*					Position for rapid egress, treatment/transport of injured, prepare to establish lobby treatment/rehab area
1st Chief	Position with view of incident, receive CAN report, size up, assume command, reaffirm or update IAP					
2nd Chief	Meet with IC, assume position as requested by IC (Prepare for Division/Tactical Supervisor, Safety, Accountability)					

NON-HYDRANT AREA RESPONSE PLAN

	Single-Family Dwelling	Townhouse	Strip Mall/Commercial	Garden Apartment
Assignment	5E/3K/1Amb	5E/3K/1T/1Amb		
1st Engine	Size up, establish command, complete 360 lap and report findings, determine mode, deploy and manage initial attack line			
2nd Engine	Lay supply line. If the driveway is over 1000 feet, split lay. Search and rescue.			
3rd Engine	Dump site; complete split lay if needed and assume relay Engine role. Assume second line.			
4th Engine	Assume RIT. Position out of the way. If 3rd Engine is relay, assume dump site. DPO should assist w/ the dump site. If no assistance is needed, the DPO should join the crew to bolster RIT.			
5th Engine	Fill site.			
1st Truck*	*SPECIAL REQUEST ONLY*	Lap with update, ladders, utilities, ventilation, assist Fire Attack, Search and Rescue		
1st Tanker	If arriving prior to the 2nd Engine, commit to the driveway and supply the 1st Engine. If arriving after the 2nd Engine, stage at the end of the driveway and supply the Siamese; assist with the dump site.			
Subsequent Tankers	Be prepared to either continue nursing supply or dump water for the dump site.			
2nd Truck*	*SPECIAL REQUEST ONLY*			
1st Transport	Position for rapid egress, treatment/transport of injured, rehab or support fire ground ops, if first arriving complete size up, mode declaration, establish command			
2nd Transport	*SPECIAL REQUEST ONLY*			
1st Chief	Position with view of incident, receive CAN report, size up, assume command, reaffirm or update IAP			
2nd Chief	Meet with IC, assume position as requested by IC (Prepare for Division/Tactical Supervisor, Safety, Accountability)			
Notes	1. Unlike fires in the hydranted area, a 2nd Truck will only respond based on special request. Personnel should consider access and need prior to the request.			

High Rise (HR) and Midrise (MR) Guide

703.1 PURPOSE

This document provides arrival and on-scene procedures for Albemarle County Fire Rescue units operating at incidents involving fires in high rise and midrise structures.

703.2 SCOPE

This procedure applies to all members of the Albemarle County Coordinated Fire and Rescue System as defined in Albemarle County Code Chapter 6, Article I, Division 2, Section 6-102.

703.3 PROCEDURE LAYOUT

Operations at fires involving high rise and midrise structures are very similar. As such, this procedure is prepared in a manner to first cover operations at high rise structures with fires involving midrise structures being discussed at the end in section 703.10.

703.4 OVERVIEW

High rise buildings, for the purposes of Albemarle County Fire Rescue, are those buildings that are five stories and greater. This definition ensures that the appropriate dispatch complement is assigned to fires in these buildings. However, the inclusion of five and six story structures creates some overlap with the definition of midrise buildings (discussed in the included addendum) and likely code differences should be noted.

The Virginia Uniform Statewide Building Code was modified in February of 1976 to require a fire control room in buildings with occupied/occupiable floors located more than 75' above the lowest level of fire department vehicle access. It is important to note that fires that occur in structures with fewer floors or lower building height can still present the same challenges experienced in much taller buildings. Buildings that have four to six, at least one standpipe, and at least one elevator may require the same tactical considerations as a high-rise, yet they likely lack the same built-in fire protection systems.

High-rise buildings present a wide variety of occupancies and may be strictly residential, strictly commercial, or house a combination of residential and commercial occupancies. These buildings often contain community rooms, restaurants, gyms, swimming pools, parking garages, trash

rooms and chutes, trash compactors, dumpsters, and commercial occupancies. These buildings may present with large footprints and/or odd designs that result in excessively long hose stretches and the potential for large distances between stairwells.

Data related to fires in high-rise structures indicates that nearly three-quarters of fires in high-rise structures occur in residential structures with cooking being the leading cause. The overwhelming majority of those fires originate at or below the 4th floor.

High-rise structures are scarce within Albemarle County. However, they are all within the hydranted area of the County.

High-rise structures are served by several utilities: water, sewer, gas, electric, and communications systems. These utilities may be in a variety of locations based on the occupancy.

The Effective Response Force (ERF) for high-rise fires should be 27 based on a hydranted area response.

703.5 INCIDENT OBJECTIVES

The following incident objectives serve as an initial incident action plan (IAP) for fires involving high-rise buildings. However, it is essential that the Incident Command continuously evaluate the scene and modify the IAP based on the unique circumstances of the incident. Although the objectives are listed in sequential order, it may be appropriate to prioritize lower-priority objectives if achieving them will expedite incident stabilization. Additionally, if sufficient resources are available, objectives may be accomplished simultaneously.

(a) Life Safety / Rescue / Civilian Protection

(b) Exposure Protection / Fire Attack / Confinement

(c) Search

(d) Water Supply

(e) Extinguishment

(f) Overhaul / Ventilation / Salvage

The action with the highest potential to positively impact victim survivability and the safety of firefighters at any fire is to accomplish extinguishment of the fire as quickly as possible in its smallest state. Fires in high-rise buildings require effective size-up to identify the fire location and to recognize when an aggressive and overwhelming fire attack is the most appropriate action. It also requires recognition of when conditions are beyond the ability to control effectively by a standard interior fire attack. Size up must include the recognition of structural involvement as early as possible with a pessimistic perspective.

It is paramount that determination is made as to the occupancy of the high-rise. High-rise structures containing housing units pose a high-life hazard and should generally be addressed within the strategic mode of Rescue. Conversely, high-rise structures that house solely commercial occupancies that operate during normal business hours may indicate a need to operate within

any of the defined strategic modes of Offensive, Rescue, or Defensive. High-rise structures with mixed occupancy should be addressed as residential housing.

For the incident objectives to be met, fires in high-rise buildings require five basic actions:

(a) determination of the fire floor,

(b) verification of the fire floor,

(c) control of occupants,

(d) control of building systems, and

(e) confinement and extinguishment of the fire.

703.6 DISPATCH PLAN

(5) Engines, (2) Trucks, (2) Transport Units, (2) Chief Officers (Minimum ERF 27 Personnel)

703.7 DISPATCH ASSIGNMENTS

See attachment: Quick Reference Guide.pdf

703.7.1 1ST ENGINE

Expected Actions:

- Determine and announce water supply plan. 1st arriving engines should generally plan to either secure their own water supply or lay in from a hydrant to the scene.
- Supply the FDC.
- Size-up and initial command.
  - Assess Fire Alarm Control Panel (FACP)
  - Identify fire floor
  - Identify attack stairwell
- Determine and announce Mode of Operation.
- Place 1st line in service
  - Standpipe deployment
  - Preconnect deployment
  - Leader line
  - Hose bundle/high rise pack
  - Well stretch
  - Ladder advancement
  - Rope hoist options

Tactical Considerations:

All high-rise structures are within the hydranted area of Albemarle County, and the water supply plan should follow the anticipated deployment for the hydranted area. Generally, the 1st engine should plan to supply the FDC. As such, the 1st engine may opt to lay in from the hydrant to the scene remaining cognizant to maintain access for the truck(s) and other responding apparatus. If a hydrant is within 100' of the fire scene the company officer may elect to have the DPO hand jack the LDH and hydrant assist valve to the hydrant where the 2nd engine will complete the connection. If a hydrant is within 50' then the 1st engine may make an independent hydrant connection. The FDC should be immediately charged with company reports of fire or visible smoke or upon the direction of the IC.

Due to the potential for fire growth within high-rise structures and the impact smoke travel, the 1st engine should fully commit itself to the tasks associated with supplying the FDC and placing the 1st line in service. If the 1st line deployed is not a standpipe line, the operator should still connect to and supply the FDC if available. There is more potential to positively impact higher numbers of building occupants by limiting fire growth as the 1st engine. The practice of immediately forgoing the hose line deployment to focus on rescue should be avoided and left to either the truck or later arriving engines.

The size-up is of paramount importance and should begin at dispatch and continue throughout the incident. High-rise structures offer unique features and challenges. Serious fires can develop in areas remote from the exterior and personnel must aggressively investigate reports of "nothing showing." The FACP is a great resource that must be checked; additional signals from the FACP should serve as a strong indicator of a growing/advancing fire. The company officer should attempt to view multiple sides of the structure during the approach to the scene and make note of any fire location, extent of smoke, and any obvious rescues. If all sides of the structure are not able to be viewed prior to initiating actions on scene the company officer should make that announcement and assign the task to a later arriving company. The size-up should include all aspects of the initial and follow-up reports as listed in the Incident Command Procedure.

Additional items pertinent to size-up include, but are not limited to:

- Wind direction and strength
- Information garnered from building occupants, security, and/or maintenance
- Lobby directory review
- Determination of attack stairwell
- Determination as to whether elevators are viable for fire department use
- Determination of standard versus odd floor labeling or configurations

All items determined during the ongoing size-up must be announced to incoming companies and to the incoming/on-scene IC. It is the responsibility of the 1st engine company officer to identify and verify the fire floor.

The rapid application of water is the primary goal of the first arriving engine. Crews should work to ensure this takes place as rapidly as possible. The primary purpose of the first line should be to:

- Protect occupants.
- Protect stairwells.
- Confine the fire.
- Extinguish the fire.

The first line, rather deployed from a preconnect or utilizing the high-rise pack and standpipe, will typically be the 1 ¾" line to allow for the needed speed, mobility, and fire flow. The deployment method utilized will be based on the size-up and determination of fire location and fire progression. If the fire attack is planned to commence from a stairwell, efforts should be made to determine that the stairwell is clear of fleeing occupants above the point of attack. Once the doorway to the fire floor is opened and the line advanced, the doorway will remain open, and the stairwell may become polluted with smoke.

The 1st engine officer must be prepared to operate as a team with the 1st truck. In a perfect deployment model, the 1st engine and 1st truck should proceed to the fire floor together. Once on the fire floor, the truck should initiate reconnaissance operations to locate and identify the extent of the fire. Simultaneously, the 1st engine should be preparing the hose line for deployment from the stairwell but must remain aware and maintain the ability to relocate based on information from the reconnaissance efforts. In the absence of a truck, it is the responsibility of the 1st engine to accomplish these necessary tasks.

As time and actions permit, the operator should look to deploy ladders, as feasible and practical, to the building with an emphasis on placement to the fire room.

703.7.2 2ND ENGINE

Expected Actions:

- Water Supply:
  - Complete water supply for 1st engine.
  - If the 1st engine obtained their own water supply and there is no need to assist in the primary water supply for the incident the operator should dress out, abandon the apparatus, and deploy with the crew of the engine.
- Assess Fire Alarm Control Panel (FACP)
- Assist 1st engine with deployment of the first line
- Deploy second line to assist fire attack and/or protect the hallway/stairs.
- Perform primary search and rescue in coordination with fire attack (1st engine) in absence of a truck.

Tactical Considerations:

Generally, the 2nd engine should complete the water supply (make the hydrant connection) for the 1st engine. If the 1st engine has obtained its own water supply, the 2nd engine's operator should dress out, abandon the apparatus, and deploy with the crew of the engine.

The company officer should obtain building keys, if available, and assess the FACP to identify any changes since the assessment by the 1st engine.

The crew from the 2nd engine should deploy to the location of the 1st engine with hose packs, forcible entry tools, and additional SCBA cylinders. The 2nd engine's primary objective is to assist the 1st engine with the deployment of the initial attack line. After the initial attack line has been deployed the 2nd engine should work to deploy the second line. The second line may be used to assist with fire attack on the fire floor and/or protect the hallway/stairs.

In the absence of a truck, the 2nd engine may need to initiate/complete the primary search of the fire floor. In this instance, the crew should work with the 1st engine to coordinate search efforts. Refer to the *Tactical Considerations* section under *1st Truck* to determine taskings.

703.7.3 3RD ENGINE

Expected Actions:

- Water Supply:
  - Be prepared to:
    - Establish water supply to secondary FDC if present
    - Establish water supply to ground-level stairwell standpipe discharge to provide secondary water supply in absence of a secondary FDC
    - Initiate secondary water supply with support for potential aerial operations
- Deploy hose line to the floor above the fire
- Work in conjunction with the 2nd truck to perform fire attack, search/rescue, and check for extension

Tactical Considerations:

Deployment of the line above the fire is highly important. This line increases the safety of the crew(s) performing search above the fire and provides a means of extinguishment when fire extension is encountered.

The best-case scenario(s) for the deployment of the third line/line above involves buildings that are equipped with 3 or more stairwells. This allows for the third line to be deployed from a stairwell standpipe riser that is not being used as the primary attack stairwell and is not being used as the evacuation stairwell. At the very least, every effort should be made to use a stairwell standpipe riser that is different from the attack stairwell as both the first and second lines will typically deploy from the same riser.

If the evacuation stairwell must be used for the advancement of the third line personnel should work to limit contamination of the stairwell by allowing the truck company to search and assess for

extension while the door to the floor remains closed. During this time the line should be deployed and staged in the stairwell while members of the engine company assist occupants around the obstruction(s).

703.7.4 4TH ENGINE
Expected Actions:

- Position away from building; all personnel abandon apparatus
- Assume RIT
    - Stage one floor below the fire floor via the attack stairwell
    - When faced with a below-grade fire RIT should be established just outside of the IDLH but still in proximity to the working crews

Tactical Considerations:

The Rapid Intervention Team (RIT) shall perform proactive measures to increase the safety of crews operating in the IDLH and on the fireground. This includes deploying to the appropriate location in or adjacent to the attack stairwell with appropriate equipment. The 4th engine should bring, not only their RIT pack, but RIT packs from several apparatus. Additionally, they should deploy with search rope and tools potentially necessary to mitigate a firefighter rescue. While staged, the RIT should actively assist with the movement of hose lines through the stairwell.

703.7.5 5TH ENGINE
Expected Actions:

- Assist the 3rd engine establish the secondary water supply
- Report to the IC for potential alternative assignment(s)
- Report to the lobby and assume lobby control

Tactical Objectives:

The 5th engine must be highly organized, knowledgeable, and capable of operating multiple building systems to successfully manage lobby control. Lobby control manages several tasks. The successful management of the responsibilities associated with lobby control will generally require the 5th engine to split their crew. The specific tasks managed by lobby control may include:

- Internal accountability.
    - Personnel assigned to manage internal accountability should position themselves in a conspicuous location and be prepared to track pertinent information related to operating companies on a command board. The information tracked should resemble:

UNIT ID	TASK and LOCATION	ENTRY TIME	PAR
Engine 72	Second Line, 4th floor	2145	3

- Building systems control.
    - The management of building systems can be a daunting task. Personnel assigned to manage building systems should make every effort to identify and work with building maintenance or building engineer(s). Personnel and building staff should move to the fire control room. Building systems that may require control include:

Fire Pump	Determine operation of fire pump and activate if necessary. Communicate discharge pressure of fire pump.
Fire Alarm	Monitor alarm system status for changing activations and communicate.
Sprinkler System	Monitor the floor/location with activated sprinkler heads. Notify command if the sprinkler system is in trouble or indicating water flow.
Fire Phones	Constantly monitor and answer fire phones.
HVAC System	Initially shut down the HVAC. Coordinate with building staff and IC regarding reactivation to utilize the HVAC in an exhaust function.
Elevator Systems	Determine the status and location of all elevators. Elevators not already recalled to the lobby will require identification and search.

- Elevator operations.
    - Elevators may be used to deliver personnel and equipment to staging and/or the fire floor. Elevators may also be used to rapidly evacuate patients from upper floors. Tasks associated with elevator operations includes:

Retrieve keys, either from the Knox Box or from the fire control room.
Recall elevators (firefighter service Phase 1) if not already performed.
Determine which elevators have firefighter service.
Confirm the shaft is clear of any fire, smoke, or water. If clear, enter the car and take control of the car operations (firefighter service Phase 2).
Do not allow operation of the elevator above the fire floor.

- Evacuation coordination.
    - There is the potential for evacuating and displaced persons to congregate in the lobby. Personnel may need to evacuate civilians to an alternate area.

703.7.6 1ST TRUCK

Expected Actions:

- Position on side Alpha unless the fire location is different and can be readily identified.
- Position to reach the fire floor.

- When arriving first, perform size-up, establish command, as well as determine and announce mode of operation.
- Prepare for immediate rescues as appropriate.
- Perform forced entry.
- Perform reconnaissance of the suspected fire floor.
- Perform primary search of the fire floor.
- Perform ventilation in coordination with fire attack and the IC.
- Ladder the structure.
- Control utilities and prepare for salvage and overhaul.

Tactical Considerations:

The role of the truck company is vital to the success of fire ground operations and personnel assigned to the truck must be able to adapt based on needs and at the direction of the IC. Delays in the arrival of the truck may result in some taskings being performed or initiated prior to the truck's arrival. In these instances, the truck officer should work with the IC and other company officers to determine tasking priorities.

The 1st truck should position on side Alpha unless the fire location is different and can be readily identified. In those instances, the truck should position on the fire side of the building if accessible. Personnel should work to make an immediate determination as to the anticipated effectiveness of the aerial. If smoke, fire, and/or victims appear within reach of the aerial, the crew should:

- Utilize the aerial to access the unit or location while attempting to maximize the scrub area.
- Avoid placing the aerial to a window or balcony directly involved in fire unless there is an indication that there is an occupant requiring immediate rescue in that area or the elevated master-stream tactic is planned to be used for a portion of the initial fire attack.
- Raise the aerial to an adjoining unit if the apartment or unit is fully involved.

The 1st truck should generally plan to deploy with the DAO remaining exterior to operate the aerial while the crew enters the structure for interior taskings (recon, search, etc.). It should be noted that accomplishing the interior taskings may be delayed when the interior crew of the truck is comprised of fewer than three personnel. If there is no need for the aerial, or if the fire floor is completely out of reach, the officer should consider deploying the entire crew interior.

While en route to the fire floor the truck crew should assist the 1st engine as necessary. Upon arrival at the anticipated fire floor the truck crew should:

- Consider deploying a search line to assist in maintaining orientation.

- Determine and announce the location of the fire. In times when the fire location is not readily apparent, the crew should perform reconnaissance while the engine prepares the line.
- Perform forcible entry on the fire unit.
- Initiate the primary search of the fire unit.
- Coordinate the evacuation of occupants from the fire floor.
- Remove obstructions that may hinder the hose deployment and fire attack.

Once the fire is located, the fire attack is initiated, and the fire unit has been searched to the extent possible, the truck crew should begin their search of the remainder of the fire floor.

Search priorities for residential occupancies are:

- The fire unit,
- Exit hallways,
- Adjacent/exposure units, and
- All other units on the fire floor.

Search priorities for commercial occupancies are:

- The immediate fire area and floor,
- The floor above the fire area,
- The top floor, inclusive of the involved hallways, stairwells, and elevators, and
- The floors between the floor above the fire and the top floor.

703.7.7 2ND TRUCK

Expected Actions:

- Position to reach the fire floor
- Ensure the identification of the evacuation stairwell
- Deploy to the floor above the fire for reconnaissance, search and rescue, ventilation, and aid the engine operating on the same floor

Tactical Considerations:

During the response and arrival sequence, the 2nd truck should attempt to view as much of the structure as possible and note changes from initial reports and persons in distress. The company officer should assess the potential need for elevated master streams. The positioning of the 2nd truck should be based off this information and coupled with wind direction and strength.

The deployment of the crew from the 2nd truck may be based on several factors. If the aerial can reach the fire or victims, it should be raised to the fire floor with a minimum of the DAO left exterior to operate the aerial. If the 2nd truck is a tower ladder and is operating as a crew of three, the DAO may operate the aerial from the bucket and elevate to the level of the fire and remain ready for

placement as needed. The DAO should not raise the bucket above the fire except for immediate rescue(s). If the tower ladder is operating with a crew of four, the officer may split the crew into an inside team and an x-ray crew with the x-ray crew handling the exterior taskings. If there is no ability to access the fire floor, victims or roof, the entire truck crew should deploy to the interior of the structure to assume their role on the floor above.

703.7.8 TRANSPORT UNITS

Expected Actions:

- Position for rapid egress.
- Provide treatment for initial patients.
- Set up and prepare for rehab.
- Support fire ground operations at the direction of the IC.
- When first arriving, perform size-up, establish command, and determine and announce mode of operation.

Tactical Considerations:

There are multiple types of transport units that operate within Albemarle County. There are differences between EMS capability (BLS versus ALS) and differences between suppression capability. The IC shall consider the capabilities of the transport unit assigned to the incident and make any adjustments or additions that may be deemed necessary.

In general, the transport unit shall be responsible for maintaining a position that allows for rapid egress from the scene with focus placed on not becoming trapped due to apparatus and hose deployment. The transport unit shall be responsible for the treatment of initial patients. In the absence of initial patients, the transport unit shall prepare for and set up rehab.

If the transport unit is suppression capable and the arrival order warrants, the IC may direct the unit to be utilized in a suppression role. If the transport unit is used in a suppression role, an additional transport unit shall be added.

Based on the complexity of the scene, and at the direction of the IC, the second transport unit may be directed to establish a treatment and/or rehab area within the lobby of the structure.

703.7.9 CHIEF OFFICERS

Expected Actions:

- 1st Chief Officer
  - Position with a view of the incident with attention to preferred apparatus placement.
  - Receive CAN from IC.
  - Size-up and assume role of IC.
  - Reaffirm or update the IAP.

- 2nd Chief Officer
  - Meet with IC.
  - Assume Division/Tactical Supervisor.
- Subsequent Chief Officers
  - Meet with IC.
  - Be prepared to operate any of multiple roles:
    - Division/Tactical Supervisor(s).
    - Group Supervisor(s).
    - Branch Director(s).
    - Lobby Control.
    - Logistics and Planning.
    - Safety Officer.
    - Accountability Officer.

Tactical Considerations:

The standard plan of action for fires in high-rise structures shall be to address them according to the guidelines contained herein. However, it is understood that situations involving fire are dynamic and may require actions that are outside of standard practice. In those instances, all changes must be announced by the IC.

The goal of the IC should be to continue and/or update the appropriate IAP for the incident. The IAP shall be based on a thorough and continuous size-up, recognition of who and what may be in danger, attention to safety considerations, and resource needs. The anticipated need for additional resources should be requested early. Fires in high-rise buildings require more resources than similar fires in smaller structures and additional alarms should be considered early. Additionally, the IC should consider requesting additional resources to bolster the RIT assignment.

Objectives for fires shall be set within the following areas: Rescue, Exposure, Confinement, extinguishment, Ventilation, and Salvage.

High-rise building fires present oversite and management challenges not typically encountered by chief officers operating at single family dwelling fires. For this reason, later arriving chief officers should be immediately prepared to operate within an assigned tactical supervision role such as a Division Supervisor. Chief officers assigned to this role must anticipate managing all aspects of suppression, search/rescue, ventilation, salvage, and overhaul for the assigned area. Chief officers should refer to the Tactical Supervisors Procedure for additional information and best practices.

703.8 OPERATIONAL CONSIDERATIONS

703.8.1 HOSE SELECTION AND ADVANCEMENT

Typically, hose operations within high-rise buildings will involve the use of standpipes. However, for fires occurring below grade or on the first through the third floors, personnel may elect to deploy preconnected lines from the engine due to speed and familiarity. It is imperative that even when this tactic is employed the standpipe system must still be supplied.

Residential occupancies are considered to have a low fire load requiring 10 gpm per 100 sqft of involved area. If the fire occurs in a residential or hotel building, use of the 1 ¾" hose high-rise pack is likely preferred. Based on the tip size, personnel should achieve 160-210 gpm, and one or two lines should achieve extinguishment in residential settings. This size of line also provides more mobility which may be needed due to the inherent compartmentation found in residential high-rises. Consideration should be given to large diameter hose lines for fires on extreme upper levels of a high-rise structure due to the potential delay in achieving the benchmark of "water on fire."

Commercial occupancies are considered to have a moderate fire load requiring 20 gpm per 100 sqft of involved area. Company officers should consider whether 1 ¾" hose, 2" hose, or 2 ½" hose would be better suited based on the extent of any fire on arrival. 1 ¾" and 2" hose offer more maneuverability and offer flows from 160-240 gpm. 2 ½" hose offers flows from 260-300 gpm along with increased reach and penetration. However, 2 ½" hose will increase the number of staff required to operate the line. For fires involving compartmentalized commercial spaces the 1 ¾" or 2" hose line offers the best option.

703.8.2 STANDPIPE OPERATIONS

Great care and attention should be given to identifying and determining the attack stairwell. Incorrectly designating the attack stairwell prior to confirming the fire location may cause hose lines to be stretched short of the objective. Initial companies should work to identify the fire location prior to announcing the attack stairwell. Likewise, ICs should exercise patience and allow companies a reasonable amount of time to determine the fire location.

Standpipe operations should include the use of flow meters or pressure gauges. Companies should include these devices in their high-rise bag and deploy them inline between the standpipe and the hose line. This increases the ability of companies to troubleshoot and overcome water supply problems and allows companies to adjust flows.

703.8.3 SEARCH OPERATIONS

Typically, commercial high-rises are most populated during the daylight hours whereas residential high-rises experience higher occupancy rates during the evening and nighttime hours. However, personnel should note that there is no hard rule delineating occupancy rates; it is not uncommon for commercial occupancies to have some occupants after hours and it is not uncommon for residential occupancies to have daytime occupancy.

Personnel should greatly consider the use of a search rope. Even small fires may experience rapid growth creating conditions that significantly impact visibility.

Search priorities for residential occupancies are:

- The fire unit,
- Exit hallways,
- Adjacent/exposure units, and
- All other units on the fire floor.

Search priorities for commercial occupancies are:

- The immediate fire area and floor,
- The floor above the fire area,
- The top floor, inclusive of the involved hallways, stairwells, and elevators, and
- The floors between the floor above the fire and the top floor.

Personnel should note that search operations also include evacuation of occupants via a controlled manner. Personnel must work to prevent panic amongst the fleeing occupants, control the evacuation, and ensure all searches are complete. Throughout the entire process of search and evacuation personnel must monitor changes in smoke, heat, and fire and be prepared to alter the evacuation plan as necessary.

703.8.4 VENTILATION

Smoke is a major issue during fires involving high-rise structures. Smoke may travel through the many passageways (stairs, elevator shafts, utility shafts, HVAC, etc.) found in high-rise structures and poses a danger to building occupants.

Newer high-rise structures are tightly sealed and are designed to be highly energy efficient. The tight seal of these structures influences smoke travel.

Smoke may mushroom within a structure. This occurs when the smoke rises vertically, uninfluenced by external environmental conditions, until it reaches the roof or ceiling level. The smoke then banks down and begins to fill the area working back towards the fire.

Additionally, smoke may contaminate the structure via the stack effect. This is more likely in tightly sealed structures during winter temperature extremes. During the stack effect, smoke rises until the temperatures balance, at which point the smoke will settle and stratify. This occurs when the smoke is not sufficiently hot enough to rise all the way to the roof or ceiling.

A reverse stack effect may occur during summer temperature extremes. During the reverse stack effect, heated smoke will rise through shafts and chases as normal. However, smoke will also migrate to floors below the fire floor due to temperature differences with the exterior of the tightly sealed building.

Personnel must be prepared to ventilate the heat, smoke, and dangerous gases that build up during a fire. These efforts must be coordinated with attack, search, evacuation activities, and the IC. There are generally three tactics that may be considered for ventilation of a high-rise structure. The impacts of wind and the stack effect will impact the decision regarding the tactic utilized.

Additionally, it is generally better to have the fire knocked down prior to initiating ventilation during a high-rise fire. The three tactics that are generally considered for ventilation include:

- Horizontally through windows,
- Vertically through stairwells, or
- Through the building's HVAC system.

Horizontal ventilation in high-rise structures poses difficulties for a multitude of reasons. Many windows in high-rise structures are sealed closed and unable to open. Some windows are made with the ability for firefighters to break them, however, this creates a hazard to units operating on the exterior of the structure. Additionally, personnel must pay careful attention to the wind when utilizing windows for horizontal ventilation. Preferably, horizontal ventilation would be performed by utilizing the pressurized attack stairwell to pressurize the fire floor. From there only window(s) in the fire unit can be opened to perform the ventilation. Personnel must monitor smoke travel to ensure that it only vents out of the fire unit window(s) and does not collect in any common hallways or the attack stairwell.

Vertical ventilation may be accomplished through stairwells. However, it is important for personnel to understand that evacuation stairwells cannot be used for this purpose. Those stairwells must remain pressurized with any top-side openings, such as bulkhead doors, closed. Additionally, vertical ventilation through the stairwells depends on the extent of progress of the fire attack to avoid fire pushing back towards advancing hose and search teams. Once an appropriate stairwell has been identified, personnel can utilize PPV from the ground level to pressurize the stairwell and push smoke through a suitable roof opening. Personnel should note that elevator shafts are generally not a viable option for vertical ventilation as they likely do not have a suitable opening to expel the smoke and the presence of smoke in an elevator shaft removes that elevator from service.

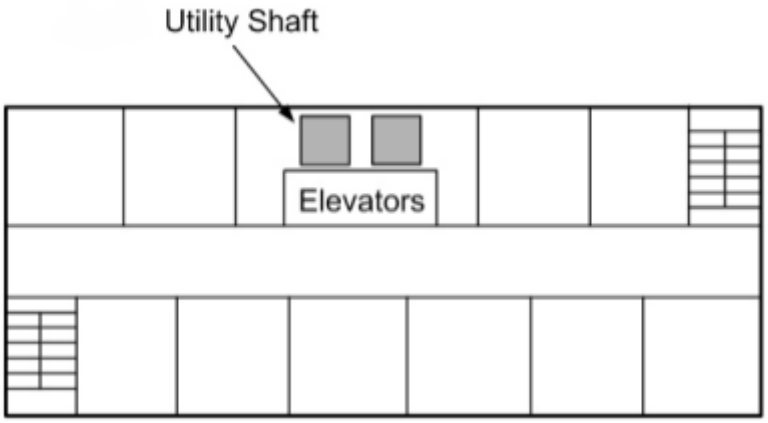
The HVAC system is another option for ventilation within high-rise structures. Initially, during the beginning phases of a high-rise fire, the HVAC system should be shut down to limit any fire spreading through the system. Once knock down has been achieved, companies may consult with the IC and/or building maintenance/engineering to determine the feasibility of the HVAC system to ventilate the structure. Many newer HVAC systems can be placed into an exhaust function to remove smoke on one or more floors. During this process, personnel should monitor the status of the system to ensure that the desired effect is observed.

703.9 CONSTRUCTION CHARACTERISTICS

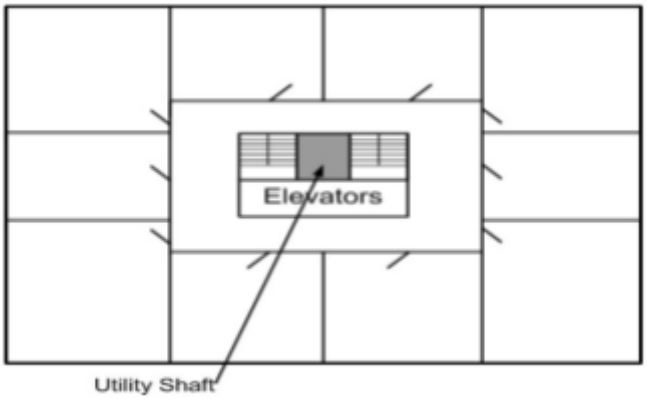
703.9.1 DESIGN DIFFERENCES

High-rise structures can generally be classified into two basic designs, either residential or commercial. Often, newer high-rise structures contain a mixture of commercial space and residential space. These high-rises should be treated as residential by the responding companies.

Residential high-rise buildings are characterized by center-fed hallways, numerous interior compartments, and 24-hour occupancy. These buildings include apartments, hotels, condominiums, hospitals, and/or assisted living facilities. An example of common center-fed hallway design in residential high-rise buildings is below.



Many commercial high-rise buildings are characterized by center-core construction. This construction technique places utility routes up through the center of the building with circuit and utility corridors around the building's core. These buildings likely have large, open expanses on each floor. Elevators, stairwells, and mechanical rooms generally reside in the building's core with office or residential spaces comprising the perimeter of each floor. An example of center-core design is below.



A common construction practice, particularly in hotels, is the inclusion of an atrium as shown below. Atriums are typically located at the main entrance of the building. Atriums can increase the difficulty of controlling smoke conditions as they allow multiple floors to be exposed to smoke, fire, and heat.

High-rise buildings may present with long hallways. Often, these long hallways will be sectioned with fire-rated doors. Personnel should regularly perform pre-incident planning to gain knowledge of these structures. Personnel may also perform reconnaissance on a floor below the fire area to determine door locations, floor layout, and standpipe locations. Generally, if areas are sectioned by fire doors, each section should include a stairwell and a standpipe.

High rise structures greater than 75' in Albemarle County were constructed after the 1976 building code change and therefore have:

- Fire resistive construction,
- Class 3 standpipe system(s),
- A compartmentation option if built between 1976 and 1991,
- Sprinkler protection,
- Firefighter service to the elevators,
- Some form of smoke control system or compartmentation inclusive of windows that may be opened, tempered glass panels on at least two sides of the building that can be broken out, or an HVAC system that can exhaust smoke to the outside,
- At least two approved means of egress from each floor,
- A building communications system if built after 1991,
- In building emergency communications enhancement if built after 2003,
- A fire control room, and

- Standby and emergency power systems.

703.9.2 FIRE WALLS

High-rise structures are constructed with multiple fire walls. Fire walls, either gypsum or masonry, typically enclose shafts (stairway, elevator, and utility) within high-rises. These fire walls are typically constructed to provide a minimum of a 2-hour fire resistance rating. Fire walls may also be utilized to separate occupied areas from storage, utility, and commercial areas.

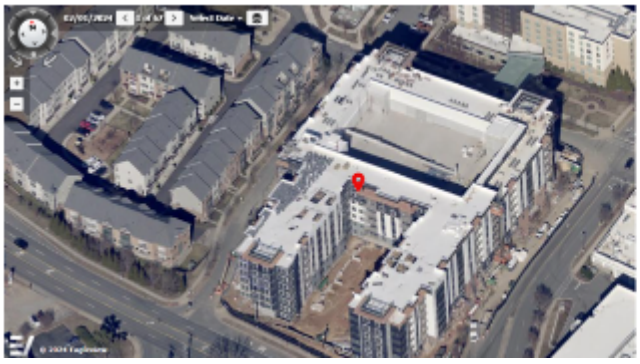
703.9.3 ROOFS

The most common roof design of high-rise structures is the flat roof. Typically, the roof is designed to be much lighter than that of the other floors. Most commonly, these roofs are constructed using composite metal floor decking with a rubberized or tar-and-gravel layer supported by steel bar joist. Occasionally, the structure may include a roof-top community room or community space. This structure typically differs from the noncombustible lower floors in that it is constructed of lightweight combustible materials.

Flat roofs are often accessed through a hatch or a bulkhead at the top of the stairwell(s). Occasionally, this access may be gained through a machine room located off a penthouse. Personnel should make note during preplans of which stairs provide access to the roof.

Often, flat roofs are hidden with facades. These facades are used to hide utilities installed on the roof and to create the appearance of a decorative pitched roof or of an additional floor. HVAC units are the primary utility that is installed on the roofs. Personnel should be cognizant of the increased deadload these present and be prepared to access the roof to control power to these units.

Additionally, flat roofs may be used to house elevator control rooms, antennae, microwave dishes, helicopter pads, and communications equipment.

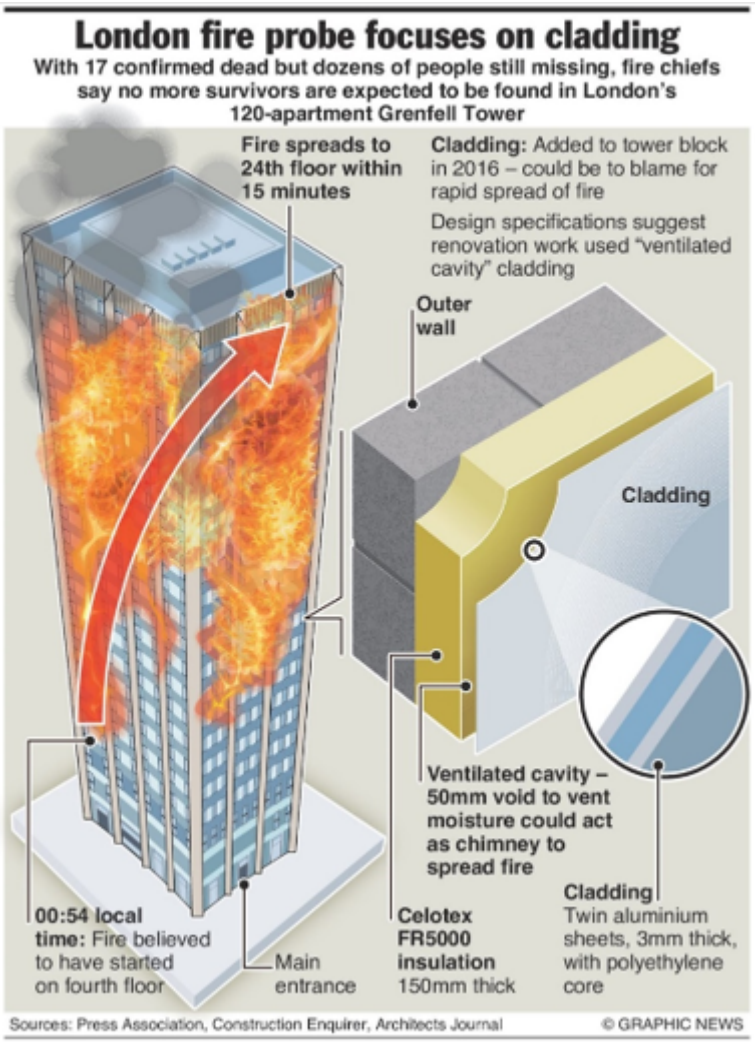


703.9.4 EXTERIOR WALLS

A common feature found on many newer high-rise structures involves the installation of exterior curtain walls. These curtain walls are normally constructed of either glass or panels made from precast masonry or metal. Occasionally, structures may be designed to have a "living curtain wall" where lattice panels are installed, and vining plants are encouraged to grow throughout the lattice work. Depending on the type of bracket used to mount the curtain wall to the building a gap of 6" – 12" may exist. Any gap that may exist is required to have firestops. Personnel should be cognizant

and remain vigilant for vertical, both upward and downward, spread of fire with the presence of curtain walls.

Additionally, some structures are designed with exterior cladding used to enhance a buildings appearance and to improve the overall performance of the façade. This design feature presents challenges for service personnel. On some structures, this added design feature includes lightweight materials such as Styrofoam designed to mimic carved stone and enhance the insulation of a structure. On other structures, this added design feature includes the installation of thick, dense insulation mounted on the exterior of the building and then covered with cladding. There is an air gap between the cladding and the insulation to allow for ventilation. This air gap can act as a chimney resulting in rapid fire growth and development. An extreme example of the dangers associated with this design feature was evidence in the Grenfell Tower fire that occurred in London, England on June 14, 2017.



703.9.5 STANDPIPES AND SPRINKLERS

High-rise buildings in Albemarle County were all constructed after 1976 and, as such, contain automatic sprinkler systems. Design features such as compartmentation may result in these structures being either partially or completely sprinklered.

Buildings with standpipe and sprinkler systems often utilize a combination fire department connection (FDC) that supplies both systems. Occasionally, buildings may have individual FDCs for each system. The FDCs for these systems may be either mounted directly to the building or away from the building on the surrounding property. Each FDC will have an accessible hydrant located within 100 feet of the standpipe and sprinkler FDC.

It is important to note that not every stairwell may contain a standpipe riser. Standpipe riser outlets can vary depending on the stairwell type and location; some stairwells may lack standpipe riser outlets due to proximity to other risers within the building.

Some buildings, due to layout and floorplan, may house standpipe riser outlets at hallway midpoints. While these are useful, they should not be a primary option for fire personnel due to the inherent safety and level of protection afforded to crews by the landing door when using stairwell standpipe riser outlets.

Sprinkler control valves for each floor may be found at stairwell landings. In buildings with hallway riser connections personnel may find sprinkler control valves in hall closets or recessed above a drop ceiling.

Some high-rise structures may have pressure-regulating devices on standpipe discharges. These are designed to reduce, regulate, control, or restrict water pressure. There are two types of pressure-regulating devices: pressure-restricting devices and pressure-reducing valves. Pressure-restricting devices are typically mounted on the exterior of the riser outlet and are designed to reduce downstream water pressure only in flowing (residual) conditions. If possible, personnel should remove any pressure-restricting devices prior to use. Pressure-reducing valves include a device with internal components affixed to the riser discharge. These valves cannot be easily removed or adjusted. Personnel should note the presence of any pressure-reducing valves and be prepared to alter their method of fire attack if the valve disallows appropriate flows and pressures.

One tactic for the supply of the standpipe riser involves the DPO connecting directly to the standpipe riser in the stairwell. This tactic is typically utilized when exterior FDC connections are found to be out of service. The presence of a pressure-reducing valve on the standpipe riser outlet will not allow this technique to work due to the presence of a one-way valve within the reducer.

703.9.6 PARKING GARAGES

Vehicle fires within attached parking garages pose a challenge to fire service personnel. Parking garages may be found attached to high-rises, below grade within a high-rise, designed as the center-core, or in other configurations. Personnel should be prepared to address fires in parking garages at grade, below grade, and above grade. These structures can easily exceed several

thousand square feet and can house any number of vehicles. Additionally, these structures are often now equipped with electric vehicle charging stations.

Personnel have two primary options for addressing fires in parking garages:

- Deploy a hose line directly from the engine to attack the vehicle fire. In this instance, the FDC should still be supplied.
- Operate a hose line off the standpipe from the riser on the fire floor.

Other options for addressing above grade parking garage fires include:

- Utilize an aerial for an elevated standpipe connection.
- Deploy a leader line.

When the fire is located on a lower level of a below grade parking garage, personnel should utilize a combination of positive pressure ventilation and the garage ventilation system to keep the attack stairwell clear of smoke.

703.10 MIDRISE BUILDING FIRES - ADDENDUM

703.10.1 OVERVIEW

Midrise buildings, for the purposes of Albemarle County Fire Rescue, are three and four stories.

Midrise buildings may be strictly residential, strictly commercial, or house a combination of residential and commercial occupancies. These buildings allow for a greater occupancy density than garden apartments without the code requirements or regulations associated with high-rises. Additionally, midrise structures may present with large footprints and/or odd designs that result in excessively long hose stretches and the potential for large distances between stairwells.

Midrise buildings share many characteristics with both garden apartments and high rises. Three factors will dictate the shared characteristics and whether the specific midrise is more akin to a garden apartment or to a high rise. Those factors are the year of construction, the building code enforced during construction, and the original intent of the occupancy.

Characteristics that may be shared with garden apartments:

- Full, partial, or no sprinkler protection
- No standpipe system
- Ordinary construction
- Lightweight wood construction
- Large/open attic space

Characteristics that may be shared with high rises:

- Full, partial, or no sprinkler protection
- A standpipe system
- Hallway riser connections
- Firefighter elevator service
- Standby and emergency power systems
- Noncombustible construction
- Hallways to access work or living areas
- Fire doors in the hallways
- Center core floor plans
- Center fed hallways
- Lower-level commercial occupancies
- Parking garages

Fire data (property loss, fire numbers, and deaths) does not exist specifically for midrise structures. Rather, reported fire data tracks the number of residential versus nonresidential structure fires. Residential fires are broken down into "home structure fires" (one/two-family homes and apartment/multi-family homes) and "other residential structure fires." In 2022 there were 80,000 apartment/multi-family fires resulting in 470 civilian deaths. Those 470 deaths account for 17% of residential fire deaths.

Midrise structures can be found throughout the hydranted area of the County.

Midrise buildings are typically served by several utilities: water, sewer, gas, electric, and communications systems. These utilities may be in a variety of locations based on the occupancy.

The Effective Response Force (ERF) for garden apartment fires should be 22 based on a hydranted area response.

703.10.2 INCIDENT OBJECTIVES

The incident objectives for fires involving midrise structures mimics those for fires involving high-rise structures. Personnel should focus on:

(a) Life Safety / Rescue / Civilian Protection

(b) Exposure Protection / Fire Attack / Confinement

(c) Search

(d) Water Supply

(e) Extinguishment

(f) Overhaul / Ventilation / Salvage

The action with the highest potential to positively impact victim survivability and the safety of firefighters at any fire is to accomplish extinguishment of the fire as quickly as possible in its smallest state. Fires in midrise buildings require effective size-up to identify the fire location and to recognize when an aggressive and overwhelming fire attack is the most appropriate action. It also requires recognition of when conditions are beyond the ability to control effectively by a standard interior fire attack. Size up must include the recognition of structural involvement as early as possible with a pessimistic perspective.

It is paramount that determination is made as to the occupancy of the midrise. Midrise structures containing housing units pose a high-life hazard and should generally be addressed within the strategic mode of Rescue. Conversely, midrise structures that house solely commercial occupancies that operate during normal business hours may indicate a need to operate within any of the defined strategic modes of Offensive, Rescue, or Defensive. Midrise structures with mixed occupancy should be addressed as residential housing.

703.10.3 DISPATCH PLAN

(4) Engines, (2) Trucks, (1) Transport Unit, (2) Chief Officers (Minimum ERF 22 Personnel)

703.10.4 DISPATCH ASSIGNMENTS OVERVIEW

Midrise buildings share characteristics found in both high-rise buildings and garden-style apartments. Because of this, the tactics necessary for mitigating fires in midrise buildings can overlap with tactics employed during fires in garden apartments or high-rise buildings.

The presence of a standpipe system should drive the tactical decisions regarding operations at fires in midrise structures. For structures that lack a standpipe system personnel should refer to the Garden Apartment (G-APT) Guide. For structures with a standpipe system personnel should refer to the tactics outlined in the High Rise (HR) Midrise (MR) Guide.

Responding units should position and operate based on the initial tactical plan identified by the first arriving officer. This plan should generally align with either the Garden Apartment (G-APT) Guide or the High Rise (HR) and Midrise (MR)Guide.

While operating at fires in midrise buildings without a standpipe system the 5th due engine company may be utilized to:

- Assist the 3rd engine with completion of the secondary water supply.
- Assume lobby control.

- Perform tasks as requested and deemed necessary by the IC.

703.10.5 CONSTRUCTION EXAMPLES

As discussed earlier, construction styles may greatly mimic those found in high-rise construction without the inclusion of the associated regulations and code requirements. Midrise structures that are only three stories are not required to have a standpipe system.

703.10.6 COMMERCIAL MIDRISE

703.10.7 RESIDENTIAL MIDRISE

High Rise (HR) and Midrise (MR) Guide

Attachments

Quick Reference Guide.pdf

HYDRANT AREA RESPONSE PLAN

	Single-Family Dwelling	Townhouse	Strip Mall/Commercial	Garden Apartment	Midrise	High Rise
Assignment	4E/1T/1Amb	4E/2T/1Amb				5E/2T/2Amb
1st Engine	Lay supply line or establish own water supply, size up, establish command, complete 360 lap (if size permits) and report findings via follow-up report, determine mode, deploy and manage initial attack line				Lay supply line or establish own water supply, supply FDC, size up, establish command, assess FACP, report findings via follow-up report, determine mode, identify fire floor, identify attack stairwell, place first line in service	
2nd Engine	Complete water supply for 1st engine if needed, assume Search and Rescue		Complete water supply for 1st engine if needed, FDC if on Side A, deploy second line to assist fire attack/protect public stairs, perform search and rescue in absence of a truck		Complete water supply for 1st engine if needed, assess FACP, assist 1st engine with fist line, deploy second line to assist fire attack and/or protect public stairs/hallway, perform primary search and rescue on fire floor in absence of a truck	
3rd Engine	Position for second water supply, assume 2nd line		Position on Side C, secure water supply if available, forced entry on fire and exposure units, FDC if on Side C	Initiate secondary water supply, provide Charlie side or opposite side report, deploy line above fire	Be prepared to supply the 2nd FDC or initiate secondary water supply, deploy line to floor above	
4th Engine	Assume RIT, DPO to complete water supply for 3rd engine or truck				Entire crew abandons apparatus and whole crew assumes RIT in the attack stairwell, staged one floor below the fire floor	
5th Engine	*SPECIAL REQUEST ONLY*					Assist 3rd engine establish secondary water supply, report to CMD post, assume lobby control
1st Truck	Position Side A with effort to reach fire area and exposure(s), forced entry, search and rescue, ladders, ventilation, utilities, assist fire attack				Position to reach fire floor, DAO remains with apparatus, crew to fire floor with 1st engine for forcible entry and primary search	
2nd Truck	*SPECIAL REQUEST ONLY*	Position for Side C coverage as able, roof, ventilation			Position to reach fire floor, DAO remains with apparatus, crew to floor above with 3rd engine	
1st Transport	Position for rapid egress, treatment/transport of injured, rehab or support fire ground ops, if first arriving: complete size up, mode declaration, establish command					
2nd Transport	*SPECIAL REQUEST ONLY*					Position for rapid egress, treatment/transport of injured, prepare to establish lobby treatment/rehab area
1st Chief	Position with view of incident, receive CAN report, size up, assume command, reaffirm or update IAP					
2nd Chief	Meet with IC, assume position as requested by IC (Prepare for Division/Tactical Supervisor, Safety, Accountability)					

NON-HYDRANT AREA RESPONSE PLAN

	Single-Family Dwelling	Townhouse	Strip Mall/Commercial	Garden Apartment
Assignment	5E/3K/1Amb	5E/3K/1T/1Amb		
1st Engine	Size up, establish command, complete 360 lap and report findings, determine mode, deploy and manage initial attack line			
2nd Engine	Lay supply line. If the driveway is over 1000 feet, split lay. Search and rescue.			
3rd Engine	Dump site; complete split lay if needed and assume relay Engine role. Assume second line.			
4th Engine	Assume RIT. Position out of the way. If 3rd Engine is relay, assume dump site. DPO should assist w/ the dump site. If no assistance is needed, the DPO should join the crew to bolster RIT.			
5th Engine	Fill site.			
1st Truck*	*SPECIAL REQUEST ONLY*	Lap with update, ladders, utilities, ventilation, assist Fire Attack, Search and Rescue		
1st Tanker	If arriving prior to the 2nd Engine, commit to the driveway and supply the 1st Engine. If arriving after the 2nd Engine, stage at the end of the driveway and supply the Siamese; assist with the dump site.			
Subsequent Tankers	Be prepared to either continue nursing supply or dump water for the dump site.			
2nd Truck*	*SPECIAL REQUEST ONLY*			
1st Transport	Position for rapid egress, treatment/transport of injured, rehab or support fire ground ops, if first arriving complete size up, mode declaration, establish command			
2nd Transport	*SPECIAL REQUEST ONLY*			
1st Chief	Position with view of incident, receive CAN report, size up, assume command, reaffirm or update IAP			
2nd Chief	Meet with IC, assume position as requested by IC (Prepare for Division/Tactical Supervisor, Safety, Accountability)			
Notes	1. Unlike fires in the hydranted area, a 2nd Truck will only respond based on special request. Personnel should consider access and need prior to the request.			

Medication Storage, Use, and Accountability

505.1 PURPOSE

The purpose of this policy is to establish the procedures for the supply, use and accountability of controlled substances administered by the Albemarle County Fire Rescue System (21 CFR 1300.01 et seq.).

505.2 SCOPE

This policy applies to all members of the Albemarle County Coordinated Fire and Rescue System as defined in Albemarle County Code Chapter 6, Article I, Division 2, Section 6-102.

505.3 DEFINITIONS

Definitions related to this policy include:

Automated Dispensing Cabinet (ADC) - Computerized cabinets that store and dispense medications, and track their distribution.

Controlled substance - A drug or substance listed as Schedule 2-5 of the federal Controlled Substances Act or any medications stored in the Albemarle County Fire Rescue System controlled substance kit.

EMS Physician(s) - The ultimate responsible authority for the medical actions taken by a prehospital provider or EMS system and the process of performing actions to ensure that care provided by EMS personnel is appropriate. Also known as the Operational Medical Director.

Medication - All controlled and non-controlled substances stored or administered by the Albemarle County Fire Rescue System.

Medication Inventory System - The software system used by the system to account for medications assigned to units.

Medication Kit - A system provided case that includes controlled and non-controlled medications along with the necessary equipment and supplies to administer them.

Medication Supply Manager - The individual assigned to administer the system's medication program including procurement, inventory, distribution, and compliance.

Non-controlled substance - A drug or substance listed as Schedule 6 by the Virginia Board of Pharmacy.

Qualified - When a member has obtained the required certifications, demonstrated skill competency, successfully completed the field training program, and has been authorized to function in a role.

Unit - Any Emergency Medical Services (EMS) vehicle equipped with system medications.

505.4 POLICY

It is the policy of the Albemarle County Fire Rescue System to ensure the availability of the proper medications for emergencies and to comply with all applicable local, state and federal regulations governing the supply, use and accountability of all controlled substances (21 CFR 1300.01 et seq.; Title 21 USC Controlled Substances Act and VA 18VAC110-20-500).

All agencies receiving medications from Albemarle County Fire Rescue shall adhere to the following policy and procedures.

505.5 PROCUREMENT

Albemarle County Department of Fire Rescue's EMS Physician shall approve all medications purchased by ACFR. Only designated and DEA-registered personnel are authorized to procure controlled substances.

Controlled substances must be ordered from licensed and DEA-registered suppliers using the following process:

(a) The Medication Supply Manager shall submit orders to the designated supplier using the DEA Controlled Substance Ordering System (CSOS) or a completed DEA Form 222.

(b) Upon receipt of the controlled substance from the supplier, the Medication Supply Manager or the designated ALS provider shall inventory the controlled substance received to ensure that the type and quantities ordered match the type and quantities received and are reflected on the corresponding DEA Form 222 (21 CFR 1305.12; 21 CFR 1305.13).

(c) The Medication Supply Manager or the designated ALS provider will immediately place the controlled substance in the controlled substance vault or automated dispensing cabinet and ensure that inventory is reconciled with any electronic data files.

All equipment, medications, and supplies provided as part of the medication program remains the property of Albemarle County. If an agency's participation in the program is terminated for any reason they shall return all related items within seven days.

505.6 STORAGE AND SECURITY

To prevent unauthorized access, medications must either be locked in a secured area as outlined below or in direct possession of an authorized EMS provider.

505.6.1 STORAGE IN FIRE & EMS STATIONS

The storage of medications is restricted to areas approved by the Virginia Board of Pharmacy and the Drug Enforcement Agency (DEA), in the case of controlled substances. Station storage areas shall comply with the following requirements and be approved by the Logisitics Battalion Chief prior to storing medications.

(a) The storage area shall be temperature controlled and capable of maintaining medications within the manufacturer's suggested temperature range.

(b) Stations with an automated dispensing cabinet will have an external return bin to deposit expired medications. All expired medications shall be deposited in the designated bin until collected by the Medication Supply Manager.

(c) The storage area shall remain locked at all times when not in use and the keys or access code shall be restricted to personnel with the authorization to access the medications.

(d) Controlled substances shall be stored in a separate locked area, safe, or automated dispensing cabinet.

(e) The storage area shall have an alarm system capable of detecting a potential intrusion by unauthorized persons. The alarm shall remain armed at all times and access to the alarm system shall be restricted to designated and necessary personnel. The following circumstances are exempt from the alarm requirement:

1. Storage that is limited to non-controlled substances
2. Temporary storage of controlled or non-controlled substances if the EMS vehicle they are stored on is either out of service or unable to maintain the manufacturer's suggested temperature range.

(f) Storage areas containing controlled substances outside of a sealed kit shall have a security camera system installed and maintained by the County of Albemarle.

505.6.2 STORAGE IN EMS VEHICLES

The storage of medications is restricted to vehicles that are licensed by the Virginia Office of EMS and other vehicles used for transporting medications to and from designated locations. Vehicle storage areas shall comply with the following requirements and be approved by the Logistics Battalion Chief prior to storing medications.

(a) The storage area shall be temperature controlled and capable of maintaining medications within the manufacturer's suggested temperature range.

(b) Areas storing controlled substances shall be equipped with an Albemarle County managed access system that requires two forms of identification (swipe card and PIN).

(c) The storage area shall remain locked at all times when not in use and the keys or access code shall be restricted to personnel with the authorization to access the medications.

(d) Controlled substances shall be kept in a sealed tamper-evident kit.

(e) Medications shall be removed from the vehicle and secured in the station before being sent to the shop for maintenance.

505.6.3 REFRIGERATED STORAGE

Medications requiring refrigeration shall be stored in approved refrigerators with a temperature monitoring system. Temperatures shall be monitored to ensure they remain within the manufacturer's suggested temperature range. The recommended shelf life of each medication outside of refrigeration shall be determined based on the manufacturer's recommendations and posted in a conspicuous location.

When medications are removed from refrigeration to supply a medication kit, a label shall be affixed to the container indicating the new expiration date.

505.6.4 STORAGE DURING TRANSIT
Medications transported from central supply to the resupply sites shall be secured in a locked case while in transit. If the vehicle is left unattended for any reason the operator shall lock the vehicle and keep the key on their person or transfer it to another authorized person.

505.6.5 TRAINING MEDICATIONS
Training kits and simulated medications are not required to be stored in a secure area as outlined above, but they shall have prominent green markings to ensure they are not mistakenly placed on emergency response vehicles. Only simulated medications shall be placed in training kits. Medication intended for patient use and their containers are prohibited from being used for training.

505.7 AUTHORIZED ACCESS

Only qualified EMS providers are permitted to access department medications. Access shall require two forms of identification such as a swipe card, personal identification number (PIN), signature, and/or a witness. At no time shall an individual share their access information, attest to information they didn't directly witness, or enter a name or signature on behalf of another person.

BLS providers are prohibited from handling medications outside of their scope of practice except as directed by an ALS provider.

Participating EMS agencies are responsible for notifying the Medication Supply Manager within seven days of any changes in their authorized providers' status including if they are no longer active with the agency or their ability to practice as an EMS provider has changed.

505.8 INVENTORY CONTROL

The Medication Supply Manager, in coordination with the EMS Physician, shall establish the standard complement of BLS and ALS medications and approve any modifications. Modifications due to supply chain shortages, such as reduced quantities or alternative medications, will be communicated prior to implementation. A medication kit that does not have the full standard complement will have a medication shortage tag attached by the provider resupplying the kit that details the differences from the standard complement. See attachment: Medication Kit Standard Inventory

The Medication Supply Manager will issue medication kits to each station as directed by the Deputy Chief of Operations. Each station will be responsible for the security and inventory of their assigned kits. Medication kits are not permitted to be relocated to another station unless approved by the Medication Supply Manager.

Medications shall be inventoried based on the frequency and procedures outlined below. In addition, the Medication Supply Manager shall complete a full inventory of all controlled substances bi-annually.

505.8.1 MEDICATION KITS

Controlled Substances

(a) At each shift change, an incoming and outgoing EMS provider shall, in each other's presence, inspect the integrity of all sealed controlled substance kits assigned to the station. Each EMS provider shall attest to the current seal number by entering their PIN code and signature in the department's medication inventory system.

(b) If a kit's seal number doesn't match the previously recorded seal, then the controlled substance kit shall be opened to inspect the quantities, the integrity of the containers, and the expiration dates of the controlled substances. Each EMS provider shall attest to the quantity available by entering their PIN code and signature in the department's medication inventory system.

(c) If the unit is dispatched to an incident before the daily inventory occurs, the inventory and reconciliation shall be done as soon as practicable upon returning to the station.

(d) If no one is available from the incoming/outgoing shift then one on-duty EMS provider and the Company Officer or a member from the on-duty shift may conduct the inventory and reconciliation process.

(e) In the event that a EMS provider works two consecutive shifts on the same unit, the inventory shall be performed by the EMS provider and witnessed and verified by another EMS provider assigned to the station, a Company Officer or an on-duty shift member.

Non-Controlled Substances

(a) On the last day of each month, the ALS provider shall open each medication kit to inspect the quantities, the integrity of the containers, and the expiration dates of the non-controlled substances.

(b) A BLS provider is permitted to conduct the inventory of BLS medications.

(c) If no one is available to complete the inventory on the last day of the month, it shall be performed as soon as practicable.

(d) Any expiration dates that have changed since the last inspection should be updated in the medication inventory system.

505.8.2 AUTOMATIC DISPENSING CABINETS

A physical inventory of controlled and non-controlled substances located in station-based automated dispensing cabinets shall be completed monthly to confirm quantities, inspect the integrity of containers, and remove expired medications.

505.8.3 CENTRAL SUPPLY

Controlled substances shall be stored in an automated dispensing cabinet at the central supply and require a blind count back each time they are accessed. The Logistics Battalion Chief, or designee, will conduct a physical inventory of the controlled substance at least weekly.

A physical inventory of non-controlled substances will be completed every three months to remove expired medications and ensure sufficient supply levels exist.

505.9 ADMINISTRATION AND DOCUMENTATION

505.9.1 ADMINISTRATION

The EMS Physician shall approve which medications an agency is authorized to administer. Only authorized providers operating within their scope of practice shall administer medications. Prior to the administration of any medication, the provider should complete a medication administration cross-check procedure.

EMS providers should follow agency protocols to report medication errors and close calls. Participating agencies shall report a summary of all medication errors and close calls to the Medication Supply Manager. The Medication Supply Manager shall document the occurrence and attempt to identify common trends related to how medications are packaged or stored. See attachment: Medication Administration Cross-Check Tool

If a unit transfers the care of a patient to a transporting ALS provider prior to the administration of the entire dosage of a controlled substance, any remaining controlled substance shall not be provided to the transporting ALS provider. If additional medication is needed after the patient care transfer, the controlled substance shall be used from the inventory of the transporting unit.

Following the administration of a controlled substance, the ALS provider shall, as soon as practicable, temporarily reseal the controlled substance kit with the supplied red seal and lock it in a secure area until it can be resupplied.

505.9.2 DOCUMENTATION

Each time a medication is administered to a patient the following items shall be documented in the Department's patient care reporting (PCR) system.

(a) Type of order (standing or verbal)

(b) Medication name

(c) Dose

(d) Route of administration

(e) Date and time of administration

(f) Patient name

(g) Patient response to medication

If a medication is administered as a result of a verbal order, the PCR shall include the name and signature of the physician issuing the order or a physician from the receiving facility.

If the entire amount of a controlled substance is not administered, another EMS provider shall witness the proper disposal of the remaining amount. Disposal may be accomplished by wasting or emptying the remaining medication into a drain or onto an area of bare soil or grass. Each provider shall attest to the proper disposal of the remaining controlled substance by entering their PIN code and signature in the department's medication inventory system.

505.10 MEDICATION RESUPPLY

Medication shall be resupplied utilizing one of the following procedures. Resupply from any other sources, including a non-system unit is not authorized.

If the care of a patient is transferred to a non-system unit, the administering EMS provider will obtain the resupply from the system's automated dispensing cabinet.

Resupplying non-system units with system medications is prohibited. If an EMS provider administers medications from a non-system unit, that EMS agency is responsible for resupplying their unit.

505.10.1 RESUPPLY FROM ANOTHER UNIT

If a non-controlled substance is administered the transporting unit or another on-scene system unit may resupply the administering unit on-scene if it is operationally appropriate. The resupplying unit shall then be responsible for obtaining the resupply from the system's automated dispensing cabinet.

Controlled substances shall not be resupplied on scene. Each unit is responsible for documenting the administration, proper disposal, and resupply of any controlled substance administered from their unit's inventory in the medication inventory system.

505.10.2 RESUPPLY FROM AN AUTOMATED DISPENSING CABINET

Access to medications stored in the system's automated dispensing cabinets requires a provider whose scope of practice includes that medication and an authorized witness for controlled substances. The ALS provider withdrawing controlled substances from an automated dispensing cabinet shall document the reason for the withdrawal (incident number it was administered on or expired) in the validation field.

The administration, disposal, and resupply of controlled substances will also be documented in the medication inventory system. Immediately following the resupply of a controlled substance an inventory shall be completed and the kit resealed with the supplied blue seal. The ALS provider and witness shall attest to the administration, disposal, inventory check, and new seal number by entering their PIN code and signature in the department's medication inventory system.

505.10.3 EXPIRED OR DAMAGED MEDICATIONS

Medications that have expired or been damaged shall be returned to the designated return bin located at each automated dispensing cabinet before requesting a replacement. Providers are prohibited from retaining expired medication for any purpose.

Controlled substance that are expired or damaged shall be placed in the designated envelope with the date and unit number written on the outside of the envelope. The sealed envelope shall then be deposited in the return bin. Removal of the controlled substance from the kit shall be documented in the medication inventory system. The ALS provider and witness shall attest that the controlled substance was removed from the kit and placed in the return bin by entering their PIN code and signature in the department's medication inventory system.

Once the return process has been completed, a replacement medication can be requested as outlined above.

505.11 DESTRUCTION OF EXPIRED OR DAMAGED MEDICATIONS

The Medication Supply Manager shall collect expired or damaged medications monthly and return them to central supply where they will be separated from other stock. A third-party vendor shall be used for the destruction of all expired or damaged medications.

505.12 COMPLIANCE MONITORING

The following activities shall be completed on a regular basis to ensure compliance with system policy and procedure:

(a) Review the controlled substance daily reports and verify that each issuance of a controlled substance matches either a patient administration or an expired dose that was returned.

(b) Review controlled substance administrations in which the full amount was not administered to verify the remaining controlled substance was properly disposed of and documented correctly.

(c) Randomly inspect controlled substance inventory reports for completeness and compliance with established procedure.

(d) Randomly inspect medication kits to verify their location, security, consistency with the standard inventory, and any other issues that may require follow-up or investigation.

(e) Notify the responsible Battalion Chief or Volunteer Chief of any item that deviates from this policy.

Routine or willful non-compliance with this policy may result in a provider's access to system medications being restricted and/or disciplinary action.

505.13 DIVERSION

If the seal number doesn't match the previously recorded seal, the integrity of a container or tamper-evident packaging has been compromised, or the inventory of any controlled substance results in a discrepancy, the ALS provider(s) must immediately attempt to reconcile the amount missing. If the discrepancy cannot be reconciled, immediate notification shall be made to the Company Officer, the volunteer Chief, the on-duty Battalion Chief, and the Medication Supply Manager.

The Medication Supply Manager shall attempt to reconcile the discrepancy. If the discrepancy still can not be reconciled, then an investigation shall be initiated and the following notifications made within 24 hours.

(a) Fire Rescue Chief, or designee

(b) Volunteer Chief, if applicable

(c) EMS Physician

(d) Albemarle County Police Department

(e) VA Office of EMS

(f) VA Board of Pharmacy

(g) Drug Enforcement Agency (DEA Form 106)

505.14 RECORD KEEPING

The Medication Supply Manager shall ensure that the system's standing patient care protocols, including all authorized medications, are signed by the EMS Physician and stored at central supply.

The following medication records shall be maintained for a minimum of two years. Documentation for Schedule 2 medications shall be maintained separately from all other medications.

(a) Invoices

(b) Receipts

(c) Delivery confirmations

(d) Transfer between locations

(e) Administration

(f) Disposal of partially used controlled substances

(g) Destruction of expired or damaged medications

505.15 RESPONSIBILITIES

All members and agencies are responsible for complying with these policies and procedures. Additionally, all members are responsible for fully cooperating with compliance monitoring activities and diversion investigations.

505.15.1 EMS PROVIDERS

All EMS providers shall be responsible for the following:

(a) Protect their login credentials.

(b) Conduct inventory checks of medication kits.

(c) Resupply medication kits.

(d) Clean and decontaminate medication kits.

(e) Document the administration, disposal, and resupply of medications.

(f) Report any potential diversions.

505.15.2 COMPANY OFFICERS

Company officers shall be responsible for the following:

(a) Accountability of all medication kits assigned to their station.

(b) Ensure inventory checks for their station's assigned kits are documented.

(c) Ensure storage areas are locked and alarms are armed.

505.15.3 CHIEF OFFICERS

Chief officers shall be responsible for the following:

(a) Report changes in membership status.

(b) Report medication errors.

(c) Address issues of non-compliance with assigned personnel.

505.15.4 MEDICATION SUPPLY MANAGER

The Medication Supply Manager shall be responsible for the following:

(a) Procure system medications.

(b) Determine the standard medication inventory and communicate deviations.

(c) Manage user access.

(d) Restock automated dispensing cabinets and collect expired medications.

(e) Conduct inventory checks of automated dispensing cabinets and central inventory.

(f) Ensure expired and damaged medications are disposed of by third party vendors.

(g) Conduct compliance monitoring.

(h) Maintain records as required.

505.15.5 LOGISTICS BATTALION CHIEF

The Logistics Battalion Chief shall be responsible for the following:

(a) Serve as the responsible party for the VA Board of Pharmacy controlled substance registration (CSR).

(b) Serve as the DEA Registrant.

(c) Verify inventory of controlled substances at central supply.

(d) Conduct diversion investigations and make appropriate notifications.

505.15.6 EMS PHYSICIAN(S)

The EMS Physician shall be responsible for the following:

(a) Approve standing patient care orders.

(b) Approve medications, including their concentration, for purchase.

(c) Authorize EMS providers to practice and determine their scope of practice.

(d) Authorize personnel to procure, receive, and manage the medications in central supply.

505.16 ISSUE AND REVIEW

ISSUE	EFFECTIVE	REVIEW	REVIEWER

Medication Storage, Use, and Accountability

Attachments

Medication Kit Standard Inventory.pdf

Medication Kit Standard Inventory

As of September 24, 2024

Access (Left Side)

- Saline flush (3)
- Veni-Gard (1)
- Tegaderm (1)
- Extension set (2)
- IV Catheters: 16, 18, 20, 22, 24 (1 ea)
- Alcohol preps (12)
- Blue constriction bands (2)
- 1” tape (transpore & paper 1 ea.)
- IO stabilizer (1)
- Blue IO (2)
- Yellow IO (1)
- Red IO (1)
- IO drill (1)
- Iodine prep (2)

ALS Medications (Top)

See back for inventory

Misc. (Right Side)

- Normal Saline 1 L Bag
- Sharps Container

Fluids/Supplies (Front)

D5 100 mL (1)	18g needle (4)
D10 250 mL (1)	21g needle (4)
Normal Saline 250 mL (1)	25g needle (4)
10 drop sets (4)	3cc syringe w/ needle (4)
60 drop sets (2)	1cc syringe w/ needle (4)
3 way stopcock (2)	20cc syringe (2)
	60cc syringe (2)

BLS Meds (Back)

- Aspirin bottle (1)
- Narcan spray (1)
- Nitro tablets (1)
- Nitro paste tube (1)
- Nitro paste paper
- Zofran tablets (6)
- Certa-dose epi (1)
- Acetaminophen 2-tab packets (2)

Problems? Contact the Med Supply Manager

434-440-8865

ACFRPharmacy@albemarle.org

Nebulizer Kit (Back)

- Nebulizer setup (1)
- Albuterol (6)
- Atrovent (2)

Narcotic/RSI Medications (Top)

Fentanyl (3) 100mcg/2mL	**Etomidate (2)** 20mg/10mL	**Rocuronium (1)** 100mg/10mL
Midazolam/Versed (4) 5mg/1mL	**Ketamine (2)** 200mg/20mL	
Ketamine (1) High-Conc. 500mg/5mL	**Syringes/RSI Labels/Temporary Seal**	

Sodium Bicarb (1) (Top)

Cardiac Medications (Top)

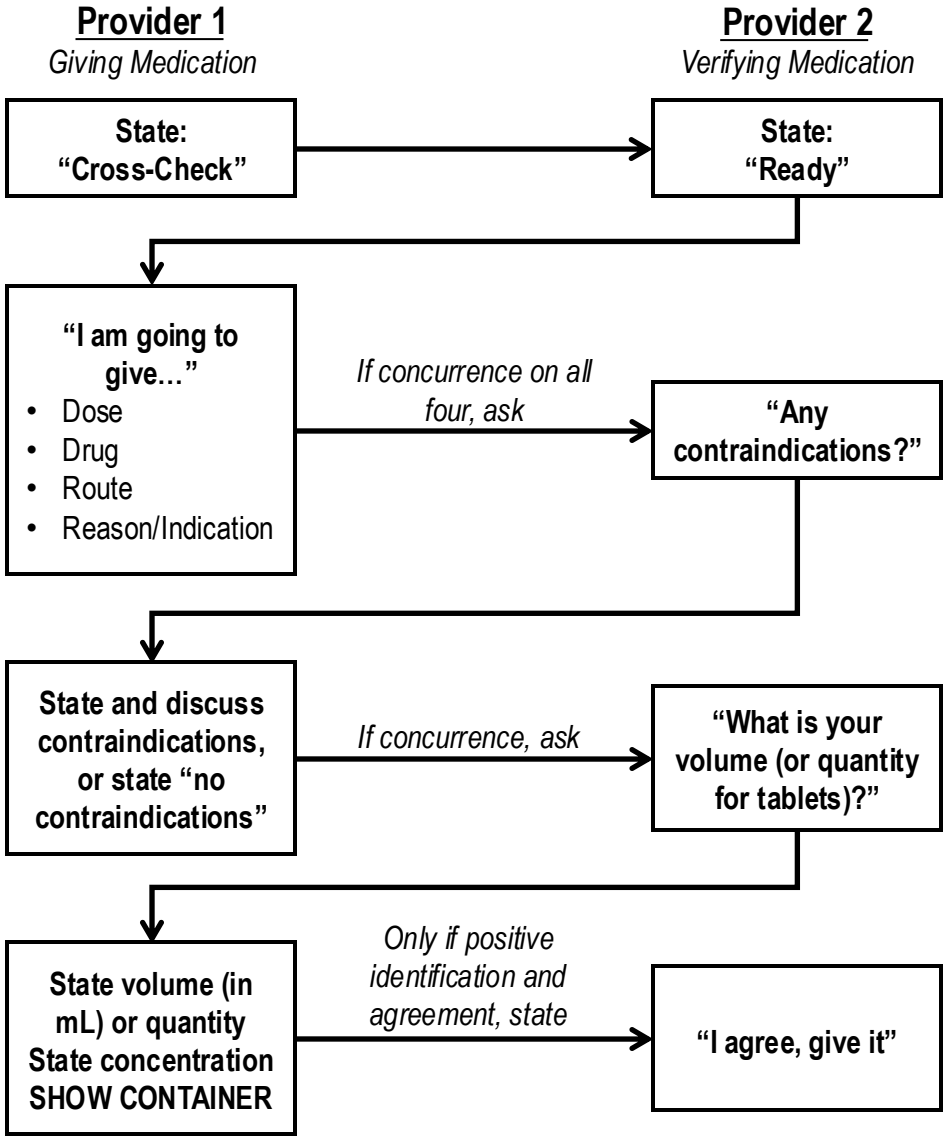
Atropine (3) 1mg/10mL				
Epinephrine (4) 1mg/1mL	**Amiodarone (3)** 150mg/3mL	**Adenosine (3)** 6mg/2mL	**Metoprolol (3)** 5mg/5mL	**Norepineph-rine (1)** 4mg/4mL
Cardiac Epinephrine (6) 1mg/10mL			**Luer-jets (2)**	
Luer-jets (4)				

General Medications (Top)

Cefazolin/Ancef (2) 1g		**Tranexamic Acid/TXA (1)** 1g/10mL	**Calcium Chloride (2)** 1g/10mL	
NS Flush (1) 10mL		**Dexame-thasone (1)** 10mg/1mL	**Benadryl (2)** 50mg/1mL	**Glucagon (1)** 1mg
Naloxone/Narcan (2) 2mg/2mL	**Magnesium Sulfate (1)** 5g/10mL	**Haldol (2)** 5mg/1mL	**Ondansetron (3)** 4mg/2mL	**Ketorolac (1)** 30mg/1mL

Medication Administration Cross-Check Tool.pdf

Medication Administration Cross Check (MACC) Tool



- **Contraindications** include: 1) verification of appropriate vital signs, 2) known patient allergies, and 3) expiration date
- If discrepancy, disagreement, or need for clarification is encountered at any step, **STOP** and resolve prior to continuing.
- Only Provider 2 can authorize administration of the medication.
- The Medication Administration Cross Check **must be completed prior to the administration of any medication when two EMS providers are available**. If the second provider is unavailable, the administering provider should verbalize all steps out loud to themselves.
- If there is an interruption or change in patient condition, the process must be stopped and re-started by Provider 1.
- Avoid ambiguous statements such as "okay"

RED RULE
Never give the contents of an unlabeled syringe without verifying the medication vial it came from

Adapted from the Wichita-Sedgwick County (KS) EMS System

ALBEMARLE COUNTY DEPARTMENT OF FIRE RESCUE