Category V

Criterion 5L: Tactical Medic Program

The agency operates an adequate, effective, efficient, and safe Tactical Medic program that operates as part of the Lawrence Police Department’s Crisis Response Team to perform medical support for high-risk law enforcement activities in the City.

This criterion report should be completed by agencies that have direct responsibility for operating programs that provide Tactical Medic services or that has identified a Tactical Medic emergency in the immediate area as a highly probable hazard in Category II to determine the need for specific Tactical Medic services program.

If the agency determines this criterion is not applicable, the agency should still provide a brief explanation of why it does not provide this program.

Summary:

Lawrence Douglas County Fire Medical Department utilizes seven tactical medics comprised of a Division Chief and six department members. Tactical Medic Program was developed with the Lawrence Police Department to address the increased risks associated with tactical law enforcement high-risk operations. Tactical Medic operates as part of the Lawrence Police Departments Crisis Response Team (CRT) performing medical support for high-risk law enforcement activities. The primary mission is to provide emergency medical care in the field to law enforcement officers and citizens, injured or taken ill during high-risk incidents. The six Operations Tactical Medics receive an incentive and report to the Division Chief of the program. Tactical medics work independently from the standard department structure, alongside representatives of law enforcement. Department Standard Operating Procedure (SOP) guide the performance of the tactical medics. Continual program monitoring and evaluation ensure quality performance and allow for program improvements.
Performance Indictors:

CC 5L.1 Given its standards of cover and emergency deployment objectives, the agency meets its staffing, response time, station(s), extinguishing agency requirements, apparatus, and equipment deployment objectives for each type and magnitude of tactical medic incident.

Description
Six incentive appointed members provide staffing as Tactical Medics. Tactical Medic selection occurs through a competitive application process, and is open to fulltime AEMT or paramedic members. Tactical Medics receive specialized training from the Lawrence Police Department and the Kansas City Metro Tactical Officers Association Tactical Emergency Medical Support (TEMS) program. Tactical Medics receive a 5% compensation of base salary and overtime for training and CRT activations. A minimum of three Tactical Medics will be assigned to CRT activations.

Tactical medic’s deployment objectives are dependent of the Law Enforcement operation. Tactical Medics will be notified through the department paging system of any activation. A minimum Three Tactical Medics will be assigned for activation per SOP 109.31 Non-Emergency Call Back. Tactical Medics will respond to the page to the Division Chief of the Program or his/her designee. The Division Chief of the Program will notify the CRT Commander of the members assigned and they will respond to the briefing location 30 minutes prior to the established briefing time. The Division Chief of the Tactical Medic Program or his designee will contact the on duty Shift Commander to inform him/her of the activation, and possible additional resources.

Each Tactical Medic is issued specialized EMS and law enforcement uniform and equipment that is utilized for activations and training. Tactical medics will respond to activations in their personal vehicle, if off duty, assigned utility, if on duty; one tactical medic in a secondary medic unit assigned by the Shift Commander.
Appraisal
Adequate supplies and equipment are available to accomplish the mission of the law enforcement operation. The Lawrence Police Department issues each tactical medic the CRT uniform, including tactical ballistic vest, ballistic helmet, and communications equipment. Lawrence-Douglas County Fire Medical issues each member a combat causality care kit, and supplies the team with two combat causality care backpacks, extrication devices, and EMS training supplies related to combat causality care. The department needs determine how CRT activations and training are tracked and reported in Firehouse.

Plan
The plan is to maintain a minimum of six Tactical Medics trained by the Lawrence Police Departments CRT, and the Kansas City Metro Tactical Officers Association Tactical Emergency Medical Support (TEMS) program. A competitive process of department member determines Tactical Medic selection. Through incident activations and training the teams capabilities will be evaluated and monitored, identify any training and resource needs. The Tactical Medic SOP will be reviewed annually. The Division Chief of the Tactical Medic Program will work with the Division Chief of Administration to develop a coding system in Firehouse® to document CRT activations and training. The Division Chief of the Tactical Medic Program will ensure CRT activations and training are documented into Firehouse®.

References
SOP 111.21 Tactical Medic

Lawrence-Douglas County Fire Medical Roster

Meeting Agendas

SOP 102.20 Program Management- Assignments
CC 5L.2 The agency conducts a formal and documented appraisal, at least annually, that includes an analysis of response procedures, equipment, training, and after action reports to determine the effectiveness of the tactical medic program and meeting the agency's goals and objectives.

Description
The Tactical Medic Program is an external agency partnership with the Lawrence Police Department which was developed in January of 2014 and became a functional team in October of 2014. During the development stages, weekly meetings were held between Law Enforcement and the Lawrence-Douglas County Fire Medical to discuss the concept, and make-up of the team. SOP and medical protocol were developed and approved prior to implementation of the program. Tactical Medic applicants completed a selection process that included a formal application, interview, physical fitness (obstacle course), and law enforcement background check. Selected members completed a 40 hour Tactical Emergency Medical Service (TEMS) training, and 80 hour handgun and long gun training prior to integrating with the Crisis Response Team. Tactical Medics attend monthly training with the CRT operators which consists of combat causality care and tactical operator skills and function training for the Tactical Medics and Law Enforcement Operators. Informal meetings are conducted during monthly training and between the CRT Commander and the Division Chief of the Tactical Medic program.

The Lawrence-Douglas County Fire Medical Department is responsible for all EMS equipment, salary, overtime pay and supplies for the team. The Lawrence Police Department is responsible for uniforms, ballistic equipment, and communications equipment. Informal after action briefings area conducted after each callout by the CRT Commander. Tactical Medic meetings are conducted periodically usually on a as need basis regarding equipment, training. Agenda meeting minutes are kept and stored under the Chief of the Tactical Medic Programs firemed/shared personal files.

Annually, the Division Chief who oversees the Tactical Medic Program conducts a formal and documented program appraisal at the monthly manager’s meeting. The appraisal includes an analysis of response procedures, equipment and training to determine the
effectiveness of the program on meeting the department’s goals and objectives. At least two goals and objectives are identified for the next program appraisal cycle.

**Appraisal**

The SOP is reviewed annually by members of the Tactical Medic team to review the response procedures, and our equipment, and training needs. Members attend monthly training with CRT operators and attend outside training when offered/supported by the department. The Tactical Medics have completed a number of requirements as outlined in the SOP with the exception of oleoresin capsicum (OC) spray certification, electronic control weapon (ECW) certification (Tactical Medics will receive initial certification in the use of an ECW), defensive tactic training, and empty hand control training (Tactical Medics will receive yearly instruction in the application of soft and hard empty hand techniques). The department currently does not document Tactical Medic training hours or incident activations in *Firehouse*.

**Plan**

The Tactical Medic SOP will continue to be reviewed each year by Tactical Medic members and a formal review plan will be implemented by the department. Members will continue to train on a monthly basis with the CRT operators. A monthly combat causality care training plan will be developed for each year by the Division Chief of the Tactical Medic Program for the Tactical Medics and CRT operators. The Division Chief of the Tactical Medic Program will schedule quarterly meetings for the tactical medic members to evaluate training, equipment, and team operations. The Division Chief of the Tactical Medic Program will work with the CRT Commander to schedule training for oleoresin capsicum (OC) spray certification, electronic control weapon (ECW) certification, defensive tactic training, and empty hand control training. The department will identify how to document training and activations into *Firehouse* and identify a location to store Tactical Medic information on the department’s network. A formal review of the program will be conducted on an annual basis with the department, tactical medics and the CRT Commander to ensure the program meets the mission of the team.

**References**

SOP 111.21 Tactical Medic
Meeting Agendas

Firehouse Software- Training Records (Available on site)

Tactical Medic Annual Program Appraisal