

Rapid Lesson Sharing

Event Type: Emergency Medical Services System
Challenges on Wildland Fire Incidents

Date: August 22, 2024

Location: California

This Story Focuses on EMS System Challenges for Wildland Fire Incidents in California

“For incidents which do not have a MEDL assigned, or even for those that do, navigating the Emergency Medical Services (EMS) system can be daunting for anyone.”

Background

Today we are seeing more incidents managed at the Type 3 level with higher complexities, more resources, and for longer periods of time.

Medical Unit Leaders (MEDL) are often not rostered or available to support these smaller organizations. Therefore, the unique challenges associated with that position are being placed on individuals with little to no background on the EMS program, systems, ordering procedures, best practices, and how to utilize Cooperator resources.

For incidents that do not have a MEDL assigned, or even for those that do, navigating the Emergency Medical Services environment can be daunting.

Many avenues exist to obtain EMS resources. For those people without experience and knowledge of the system, confusion and consternation is unavoidable.

This ongoing issue is especially burdensome for Incident Commanders, Logistics, and/or Safety positions who often assume the role of Medical Unit Leader in the absence of a dedicated person. These positions may not have any EMS experience or knowledge.

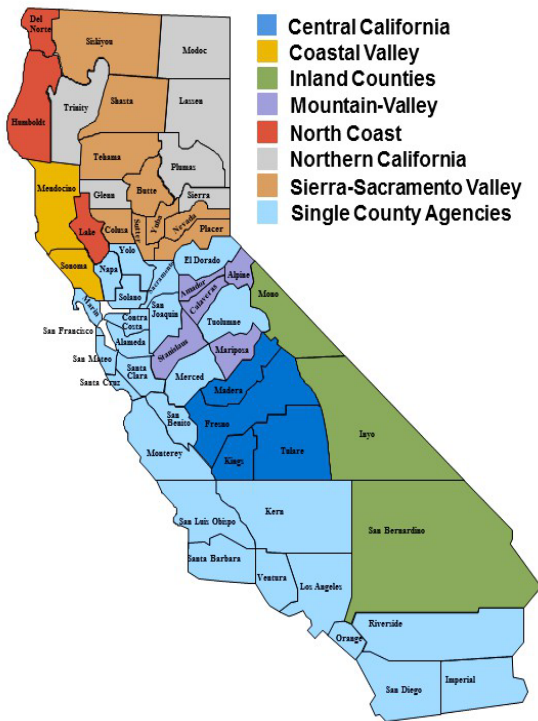




“The state of California EMS office has 34 Local Emergency Medical Service Agency (LEMSA) offices and these entities each have unique rules regarding EMS.”

Dr. Michelle Curry
National Medical Director, USDA FS EMS

Local EMS Agency/County Information – Map



Local Emergency Medical Service Agencies

- Specifically, in the state of California, in addition to state laws, there exist entities called Local EMS Agencies (LEMSAs). Some are single county and several are conglomerations of counties. These entities each have unique rules regarding EMS.
<https://emsa.ca.gov/local-ems-agency-administrators/local-ems-agencies/>
- The EMS Compact is a legal agreement between various states, enacted by state legislation in 24 states, that facilitates the day-to-day movement of EMS personnel across member state boundaries in the performance of their duties.
<https://www.emscompact.gov/>

Type 3 Team Perspective

“At this time, I am going to have to UTF the Type 3 REMS order. Without LEMSA reciprocity none of the 4 vendors who responded can work in California.” - Contracting Officer, AIMS

Without a MEDL, do you know what medical resources you need? How do you verify you have the right resources for the job? Can they legally work in the state where you are located, and do they have the experience and equipment necessary to do the job?

So, what are the next steps if you have 300 personnel assigned to your incident that you need EMS staff to support? What's the breaking point and are you relying on the current 911 system because you can't get orders filled? Who can you call to help in the system to assist with these challenges?

Expanded dispatchers are not responsible for knowing standards and requirements of EMS resources. VIPR resources should meet these standards, but local area rules change and not all resources stay current. Local resources are always the best first source to start with.

Learning and navigating all the systems to access, approve the use of, and assign the appropriate medical personnel is both complicated and complex. Bottom line is we have both standing and ad hoc Type 3 IMTs that will continue to staff their incidents with the proper EMS personnel to meet the operational tempo of each incident. There are sources at the regional and national level that can help you navigate this.



From the lens of an experienced Medical Unit Leader, consider:

- Do you need a transport unit (an ambulance)? Does it need to be dedicated to the incident? Do you need Advanced Life Support (ALS) or will a Basic Life Support (BLS) unit work? Do you need Hazmat? This may depend on the type of work happening on your Divisions. Consider reaching out to the local unit's fire and/or EMS resources. Can they transport for you? If so, what are their capabilities as far as level of care and 24-hour coverage. How will you contact them in an emergency and what do they need from you?

- Do you need high or low angle rescue capabilities? If not, a Rapid Extraction Module (REMS) may not be the appropriate resource.
- Where are resources working in relation to access roads? Do you need Line Medics located with crews who may need them in an emergency? Do you need a Paramedic or will an EMT Basic (EMTB) be sufficient? Either way, make sure they are line qualified [Emergency Paramedic Fireline (EMPF) or Emergency Medical Technician Fireline (EMTF)]. If you order an EMTB or EMTP (without the “F” — Fireline), they may not be able to be on the line and will have to sit at a Drop Point and wait for the patient to be transported to them.

Once you determine what you need, reach out to the local or regional EMS Coordinators to help work with the Local Emergency Medical Services Agency (LEMSA) in California, or the region or state in other states where the incident is located to **discuss the following**:

- What do medical resources coming into that region or state need to practice?
- Do they need National Registry?
- Do they need a state license? If so, does it need to be from that state or is their home state license enough? Do they need limited recognition or a “limited right to practice” and how long is it good for?
- Do they need Physician medical direction within the state where you are located?
- Are there specific requirements for someone coming from a “Compact state”?
- Ask the person you are speaking with to put something in writing and send it to you so you can refer back to it.

Once you have this information, **complete the ICS 213 General Message Form** and submit it through ordering so resource orders may be placed. Order early and order often. **Be specific regarding the needs, for example**:

- If you want an ambulance, specify ALS or BLS, 4X4 or 2-wheel drive and fireline qualified if required.
- These are ambulance types: T1=ALS+Hazmat, T2=ALS, T3=BLS+Hazmat, T4=BLS. Order the type you need.
- If you want a Line Medic, specify a Paramedic or an EMT who is line qualified (EMPF) and is licensed in the state you are working in with a physician sponsor licensed in that state (if required).
- Consider adding to your resource order that you will take Bureau of Land Management or USDA Forest Service credentialed resources as they are licensed by their agency and have a Physician sponsor.

Key Lessons to Share

1. Try to maintain a MEDL/Safety Officer on the incident when possible and understand the duties and capabilities of MEDL and Safety.
2. Reach out to the local or regional EMS Coordinators.
3. Know what county the fire is in and know which LEMSA it falls under in California.
4. Educate yourself and learn to speak the language of EMS. When in doubt, ask questions. LEMSAs in California, and both regional and state offices, are very helpful if you are willing to reach out and ask questions.
5. When Transitioning ensure you receive a good briefing from outgoing MEDL on what is ordered and what has been filled, what was canceled and why, is the resource still needed? Lastly, ensure you get a current roster of resources currently on the fire.
6. EMS on the fireline has come a long way in the last decade. Medical providers are now considered an integral part of any incident and should be held to the same standards as all other medical professionals. If you hold them to these standards they will be prepared when you need them.

Conclusion

The EMS System in Wildland Fire is a complex system to understand. There are many different aspects to comprehend and they can change annually. Incident leaders should ensure that the role of EMS/MEDL is clearly defined on the team if a qualified MEDL is not assigned. As issues arise, ensure that you can collaborate with local, regional, or national EMS folks. They will be able to provide guidance for most questions and are able to coordinate at higher levels to get you answers. In the end, ensure that Incident EMS needs are being met and when in doubt, phone a friend.

As EMS questions arise where do we turn?

- A local Forest or Regional EMS coordinator is a great person to reach out to. They have the local knowledge and expertise to help. To find contact information for a specific region send an email to SM.FS.EMS@usda.gov or reach out to those listed below.
- The USDA Forest Service National EMS program office is available to help federal and non-government personnel. Reach out to Dr. Michelle Curry michelle.curry@usda.gov or Bob Ehrlich robert.ehrlich@usda.gov. They can connect anyone with local EMS coordinators and offer assistance from local EMS physicians.
- This website has some helpful links: <https://www.fs.usda.gov/about-agency/emergency-medical-service-program>
- Know your local County or State EMS Agency: [National EMS Agency Map](#)
For California: [CA LEMSA MAP](#)

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