RISE – ALONG PROGRAM

I. PURPOSE

The purpose of this policy is to establish a citywide procedure for citizens to ride along with various departments to observe and understand the department’s functions.

II. SCOPE

This policy will apply to all Civil City and City Utilities departments. The Ride Along Program will allow citizens the opportunity to voluntarily accompany various department employees while performing their day-to-day duties.

III. PROCEDURES

1. Citizens expressing an interest in the Ride-Along Program shall fill out the request form at least one week prior to the date they wish to participate. This form will then be sent to the Manager of the Department that the citizen has expressed an interest in riding with one of the employees.

2. The Department Head will review the request form and if the request is approved, will sign the form and send it to the Director Public Safety for his final approval.

3. Individuals requesting Ride-Along, must be 18 years of age. Police and Fire student’s cadets under the age of 18 must have a parent or guardian sign the request form and waiver.

4. Citizens requesting to Ride-Along with police or fire officers, shall have a criminal history check completed within 24 hours prior to the date of the ride-along, which shows no felony arrests, recent misdemeanor arrest, criminal warrants or summons.

5. Citizens receiving approval to ride-along shall wear appropriate attire:
   a. Males shall wear clean and neat shirt with collars, slacks and dress style shoes.
   b. Females shall wear dress, slacks, skirt and a blouse or jacket with low heels.
   c. Shorts, cutoffs, tank tops etc. Shall not be allowed

6. Citizens participating in the Ride-Along Program shall sign a waiver releasing the City of Fort Wayne and their employees from liability.
7. Citizens participating in the Ride-Along Program shall be prohibited from carrying a deadly weapon; including persons holding a firearm license.

8. The citizen shall at all times follow the instructions of the employee with whom they are riding with.

9. Citizens may participate in the Ride-Along Program only three (3) times in a calendar year.

10. Citizens that participate in the Ride-Along Program involving departments that are covered under the OSHA Regulation 29CRF 1910.1030, Bloodborne Pathogens Standard shall be provided with information regarding this policy.

11. At no time shall a police officer, while accompanied by a citizen participating in the Ride-Along Program, engage in a pursuit, response to a crime in progress reportedly involving violence. It is understood that situation change and these above-mentioned situations may occur from minor infractions. If this occurs, the observer shall follow the direction of the officer immediately. Communications shall be notified when an officer has a citizen riding along during his shift. It should also be understood that any citizen riding along with Fire Department personnel would participate as an observer only.

12. Citizens participating in the Ride-Along program shall not indulge in any alcoholic beverage prior to or during their Ride-Along shift.

13. As a part of the this ride along process with the FWFD, comes a legal and ethical responsibility to maintain the privacy and confidentiality of any health-related information, potentially relating to our employees or patients. Confidentiality must be maintained whether stored on paper, electronically, or communicated orally or through any other means. By taking part in this process, you are agreeing to comply with the confidentiality procedures set in place by the FWFD.
REQUEST FOR RIDE-ALONG PROGRAM
FORM MUST BE COMPLETED ONE WEEK PRIOR TO RIDE

The following person is requesting approval to ride with an employee of the ___________________________________________________________________________________________.

Name: __________________________  DOB: ______________________  
Please Print
Address: ______________________________________________________________
Soc Sec #: ____________________________________________________________
Home Phone: ________________________  Work Phone: _____________________
Reason for Ride Along: ___________________________________________________
Date and Time to Ride: ___________________________________________________
In Case of Emergency Contact: ____________________________________________
Phone: ________________________  Address: ______________________________

__________________________________ ________________________________
Signature of Applicant    Date

__________________________________ ________________________________
Signature of Parent/Guardian    Date

A criminal history must be completed within 24 hours of the date of the Ride-Along for those riding with a Police or Fire Officer.

_________________________________ ________________________________
Date & Time      Officer Conducting Criminal History

Approved:       Yes                   No   ________________________________
Department Head Signature and Date

Approve:       Yes                   No  ________________________________
Public Safety Director Signature & Date
FORT WAYNE FIRE DEPARTMENT
VISITOR’S IDENTIFICATION
WAIVER OF LIABILITY

Date: ____________

To Whom It May Concern:

The Chief of the Fort Wayne Fire Department has granted permission for me to work with various units and members of his Departments. In consideration hereof, I have waived all claims of liability against the City of Fort Wayne, the Fire Department or any member thereof for personal injuries I might incur while in or adjacent to Fire department quarters and facilities or while riding or being on Fire Department apparatus. It is further understood that my presence in these various locations is granted subject to the discretion of officers of the Fire Department, and may be summarily, revoked at any time.

This permission is valid from ______________________ am/pm on ____________.  
To ______________________ am/pm on _______________________________.

Approved by ____________________________  
Title ____________________________

Applicants Signature ____________________________  
Applicants Name (please print) ____________________________

Parents Signature ____________________________
I. SCOPE
This policy applies to all personnel both City and Utilities including Police and Fire, who have a potential for occupational exposure to blood or other infectious materials.

II. PURPOSE
The purpose of this policy is to minimize or eliminate employee exposure to communicable diseases as set out in OSHA Bloodborne Pathogen Standard, 29 CFR 1910.1030.

III. GENERAL
The City of Fort Wayne has established a written Bloodborne Pathogen Policy that is available in all Department and Worksites.

The City of Fort Wayne is committed to full compliance with applicable laws and policies dealing with the Bloodborne Pathogen Standard, 29 CFR 1910.1030.

Each employee is responsible for following the policies and procedures outlined in the Bloodborne Pathogen Policy.

The Bloodborne Pathogen Program will be reviewed and updated on an annual basis or as necessary to reflect significant changes in tasks or procedures.

IV. POLICY
1. Definitions
For the purposes of this section, the following shall apply:


b. Bloodborne Pathogens means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

c. Contaminated means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface

d. Contaminated laundry means laundry which has been soiled with blood or other potentially infectious materials or may contain sharps.

e. Contaminated sharps means any contaminated sharps means any combined object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed of dental wire.
f. Decontamination means the use of physical or chemical means to remove, inactive, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.

g. Engineering Control means controls (e.g. sharps disposal containers, self sheathing needles) that isolate or remove the bloodborne pathogen hazard from the workplace.

h. Exposure Incident means a specific eye, mouth, other mucous membrane, non-intact skin, or parental contact with bloodborne or other potentially infectious materials that results from the performance of any employee’s duties.

i. Handwashing Facilities means a facility providing an adequate supply of running portable water, soap and single use towels or hot air drying machines.

j. Licensed Healthcare Professional is a person whose legally permitted scope of practice allows him or her to independently perform the activities required by paragraph (f) hepatitis B vaccination and Post exposure Evaluation and Follow up.

k. HBV means Hepatitis B virus.

l. HIV means immunodeficiency virus.

m. Occupational Exposure means reasonably anticipated skin, eye, mucous membrane, or parental contact with blood or other potentially infectious materials that may results from the performance of any employee’s duties.

n. Other Potentially Infectious Materials means:
   1. The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluid in situations where it is difficult or impossible to differentiate between body fluid.
   2. Any unfixed tissue or organ (other than intact skin) from a human (living or dead).
   3. HIV-containing cell or tissue cultures, organ cultures, and HIV or HBV containing cultures medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

o. Parental means piercing mucous membranes or the skin barrier through such events as needle sticks, human bites, cut, an abrasions.
p. Personal Protective Equipment is specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (e.g. uniforms, pants, shirts, or blouses) not intended to function as protection against a hazard are not considered to be personal protective equipment.

q. Source Individual means, any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee. Example include, but are not limited to, hospital and clinic patients; clients in institutions for the developmentally disabled; trauma victims; clients of drug and alcohol treatment facilities; residents of hospices and nursing homes; human remains; and individuals who donate or sell blood or blood components.

r. Sterilize means the use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores

s. Universal Precautions is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

t. Work Practice Controls means controls that reduce the likelihood of exposure by alerting the manner in which a task is performed (e.g. prohibiting recapping of needles by a two handed technique.)

2. Precautions and Prevention: The City of Fort Wayne Requires
a. That employees disinfect their hands with towelettes if running water is not present, otherwise, wash their hands after removal of gloves or other personal protective equipment that have contacted blood or other potentially infectious materials.

b. Removal of personal protective equipment when possible upon leaving the scene; and placed in an appropriately designated area or container for storage, washing, decontamination or disposal.

3. Personal Protective Equipment: The City of Fort Wayne will:
 a. Provided, and assures that employees use appropriate personal protective equipment where hazards are possible.

b. Provide at no cost to the employee, appropriate personal protective equipment such as, but not limited to, gloves, gowns, laboratory coats, face shields (or masks, eye goggles, protections), mouthpieces, resuscitation bags, pocket masks or other ventilation devices for job classifications required under OSHA Bloodborne Pathogen Standard.

c. Assure that the appropriate personal protective equipment in the appropriate sizes is readily accessible at the worksite, or individually issued to the employee.
4. Cleaning and Disinfection: The City of Fort Wayne will:
   a. Provide for the cleaning, laundering or disposal of required contaminated personal protective equipment.
   b. Repair or replace personal protective equipment as needed to maintain its effectiveness.
   c. Require all contaminated city vehicle be cleaned and disinfected at the worksite as soon as possible. Police vehicles contaminated will use the nearest Fire Station in decontaminating said vehicle.
   d. Require all contaminated uniforms, clothing and personal protective equipment be removed before leaving the work area.
   e. Require all employees having an occupational exposure to have a change of clothing at the duty station, which will enable them to continue working the balance of their shift.

5. Infectious Waste Disposal: The City of Fort Wayne will:
   a. Assure that personnel place all infectious waste needing disposal in a closable, leak-proof container or bag that is marked, color coded, or labeled, as required by law.
   b. Assure that personnel dispose of infectious waste according to applicable Federal, State and local regulations.

6. Immunizations: The City of Fort Wayne will:
   a. Make available at no cost to the employee, Hepatitis B vaccination to all employees who have a potential for occupational exposure.
   b. Provide vaccination by or under the supervision of a licensed physician in the State of Indiana or another licensed healthcare professional.
   c. Provide all evaluations, procedures, vaccinations, and post exposures management to the employee at a reasonable time and place, and according to standard recommendations for all medical practice.
   d. Require an employee declining the Hepatitis B vaccination to sign a Declination Form (appendix A).
   e. Provide the Hepatitis B vaccination to an employee who initially declines but later decides to accept the vaccination at no cost to the employee.
   f. Require part-time employee not completing immunization during their employment must complete series of shots, at the City’s cost within specified immunization schedule. Immunizations can be completed with Mutual Healthcare provided if employee is not within area of City’s designated provider. If immunization is provided by Mutual Healthcare Provider, documentation must be forwarded on to the City. If these employees fail to complete the immunization schedule, they will not be considered for future City part-time employment.
7. Exposure Determination: The City of Fort Wayne Establishes an
Exposures Policy as one of the following:
   a. Contaminated needle stick injury
   b. Blood or body fluid contact with mucous membrane of eyes, nose,
      or mouth.
   c. Cuts with sharp objects covered with blood or body fluid.
   d. Injury sustained while cleaning contaminated equipment.
   e. Employees in the following departments have occupational
      exposure and some occupational exposure:
      1. Neighborhood Code Enforcement
      2. Police
      3. Fire
      4. Technical Services
      5. Animal Control
      6. Water Maintenance & Services
      7. Filtration
      8. Water Pollution Control Maintenance
      9. Board of Safety
     10. Water Pollution Control Plant
     11. Park Department

8. Post Exposure: The City of Fort Wayne will:
   a. Provide post exposure and follow up for all employee with an
      occupational exposure
   b. Assure that a licensed physician does, or supervises, all medical
      evaluations and procedures.
   c. Assure that the employee is informed of the results of the medical
      evaluation; and that employee is told about any medical conditions
      resulting from exposure to blood, or other potentially infectious
      materials, that requires further evaluation or treatment.

9. Record Keeping: They City of Fort Wayne will:
   a. Maintain accurate medical records for each employee for at least
      duration of employment plus thirty years.
   b. Keep all employees medical records confidential, and will not
      release them to any person within, or outside the workplace, except
      as required by law.
   c. Maintain all training records for five years in compliance with

10. Training: The City of Fort Wayne will:
    a. Assure that all employees who are at risk for potential occupational
       exposure participate in a training program.
    b. Provide training at the time of initial employment, and at least
       annually after that.
c. Assure that the training program contains those elements required by law.

d. Assure that new employee and transfer employees having a potential for an occupational exposure receive training and immunization within 10 days of employment.

e. Require Ride-Along in the Police Department must show documentation that they meet the requirement of the Standard