



Regular Meeting - May 08 2025 Minutes

Thursday, May 8, 2025 at 6:00 PM

Fire Station 21, 86 E Center St., Coalville, UT 84017

Page

1. Meeting Opening

1.1 Call to Order

Vice-Chair Dallin called the meeting to order at 6:04 PM

1.2 Roll Call

Board Members Present:

Steven Dallin, Louise Willoughby, Aristides Ioannides, and
Corey Ann Blonquist

Board Members Absent:

Don Donaldson

Staff Present:

Tyler Rowser, Nick Jarvis, Benjamin Nielson, and Ryan Stack

2. Closed session in compliance with Utah Code §52-4-205(1) as needed, to discuss


2.1 Purchase, exchange, or lease of real property

2.2 Pending or reasonably imminent litigation

- 2.3 Personnel – to discuss the character, competence, or physical or mental health of an individual
- 2.4 Deployment of security personnel, devices, or systems
No closed session was called for.

3. Pledge of Allegiance


4. Work Session

- 4.1 Chiefs operations update.
Chief Nielson when over the calls, training and other matters of the district for April.
- 4.2 Quarter 1 2025 financial report. 6 - 9
[Q1 2025 Budget v acutal.pdf](#) 
Chief Nielson went over the budget report for Q1 2025.

5. Public Input

None

6. Consent Agenda

- 6.1 Accounts Payable for 10 - 14
[AP APRIL 2025.pdf](#) 
- 6.2 Minutes of 15 - 24
[Regular Meeting - Mar 13 2025 - Minutes - Html](#) 
[Special Meeting - Mar 26 2025 - Minutes - Html](#) 
[Regular Meeting - Apr 10 2025 - Minutes - Html](#) 
Motion to approve the consent agenda 15 - 24

Moved by: Aristides Ioannides

Seconded by: Louise Willoughby

Aye Steven Dallin, Louise Willoughby, Aristides Ioannides, and Corey Ann Blonquist

7. Consideration of Approval

- 7.1 Discussion and possible approval of Resolution 2025-02 25 - 26

A RESOLUTION OF THE ADMINISTRATIVE CONTROL BOARD OF NORTH SUMMIT FIRE SERVICE DISTRICT TO HOLD A SECTION 218 REFERENDUM FOR THE PURPOSE OF DETERMINING WHETHER NORTH SUMMIT FIRE SERVICE DISTRICT WILL PARTICIPATE IN THE STATE'S SECTION 218 AGREEMENT AND PROVIDE SOCIAL SECURITY BENEFITS TO NORTH SUMMIT FIRE SERVICE DISTRICT EMPLOYEES

[Resolution 2025-02 to Allow Social Security Referendum Template\[18\].pdf](#) 

The board discussed the resolution.

Motion to approve the resolution 2025-02 to call a Social Security section 218 referendum election. 25 - 26

Moved by: Louise Willoughby

Seconded by: Aristides Ioannides

Aye Steven Dallin, Aristides Ioannides, Louise Willoughby, and Corey Ann Blonquist

Carried 4-0

[Resolution 2025-02.pdf](#) 

- 7.2 Discussion and possible approval of Resolution 2025-03 31 - 32

RESOLUTION ESTABLISHING THE URS RETIREMENT STATUS OF APPOINTED MEMBERS OF THE ADMINISTRATIVE CONTROL BOARD

[Resolution 2025-03 re ACB members and URS.pdf](#) 

Board members discussed the resolution and what it meant for the board.

Motion to approve resoluiothn 2025-03 to opt out of URS 31 - 32

Moved by: Aristides Ioannides

Seconded by: Louise Willoughby

Aye Steven Dallin, Louise Willoughby, Aristides
Ioannides, and Corey Ann Blonquist

Carried 4-0

[Resolution 2025-03.pdf](#) 

- 7.3 Review and possible recommendation to the County Council 37 - 75
for approval of policy sections 314, 316, 318, 400, 401, 402,
413, 500, 501, 502, 503, 504, & 505

[Polices.pdf](#) 

The board discussed the polices and withdrew sections 402
and 413 to be brought back at a later meeting with changes.
Minor technical changes were made to section 505.

- Motion to recommend policies 314, 316, 318, 400, 401, 500, 37 - 75
501, 502, 503, 504, & 505 with stated changes.

Moved by: Aristides Ioannides

Seconded by: Corey Ann Blonquist

Aye Steven Dallin, Louise Willoughby, Aristides
Ioannides, and Corey Ann Blonquist

Carried 4-0

8. Board Comments.

none

9. Adjournment

- 9.1 Adjourn Meeting
Motion to adjourn

Moved by: Louise Willoughby

Seconded by: Corey Ann Blonquist

Aye Steven Dallin, Louise Willoughby, Aristides

Ioannides, and Corey Ann Blonquist

Carried 4-0

Meeting adjourned at 7:02 PM

Board Chair

District Clerk



Benjamin L. Nielson
Fire Chief

Nicholas G. Jarvis
Deputy Fire Chief

Tyler J Rowser
Administrative Battalion Chief

Staff Report

Reporting Period: January 1 – March 31, 2025

Prepared for: North Summit Fire District Board

Date: May 2, 2025

Summary

As of the end of Q1 FY2025, the District has received approximately **36.7%** of its annual budgeted income and expended **19.0%** of its total budgeted expenses. The district reports a **net income of \$571,566.59**, largely due to the timing of revenues and conservative spending across all departments.

Income Highlights

- **Total Income:** \$1,315,809.16 (36.7% of budgeted \$3,585,500)
- **County EMS ILA:** \$1,000,000 received (100% of budget)
- **Ambulance Transport Revenue:** \$72,459.59 (32.9%)
- **Fee in Lieu:** \$25,881.41 (25.9%)
- **Property Taxes:** \$175,356.51 (8.4% of budget, seasonal timing expected)
- **Interest Income:** \$26,047.08 (104.2%) – exceeds projection.

Expense Highlights

- **Total Expenses:** \$679,643.00 (19.0% of annual budget)
- **Operations:** \$132,575.94 (16.7% of operations budget)
 - **Building and Grounds:** \$31,933.99 (31.9%)
 - **PPE/Uniforms:** \$18,967.54 (27.1%)
 - **Fleet Maintenance & Fuel:** \$17,718.27 combined.
- **Payroll:** \$547,067.06 (19.6% of payroll budget)
 - **Salaries:** \$336,713.91 (17.1%)
 - **Fringe Benefits:** \$207,786.87 (25.7%)

North Summit Fire District
PO Box 187 | 86 Center Street
Coalville, Utah 84017
435-336-2221 | Emergency 9-1-1
www.NorthSummitFireUT.gov

Operations and payroll expenses are tracking conservatively, with no unexpected overruns. Legal, & insurance have not yet been incurred or posted.

Conclusion & Outlook

The district is in a strong financial position at the close of Q1, with revenues meeting expectations for the period and expenditures managed effectively.

Staff recommends no budget amendments currently.

North Summit Fire District

Budget vs. Actual

January through March 2025

	Jan - Mar 25	Budget	\$ Over Budget	% of Budget
Ordinary Income/Expense				
Income				
10003 · Operating Fund Deposit				
1027 · Fund Balance from year Prior	0.00	21,250.00	-21,250.00	0.0%
1016.5 · Fee in Lieu	25,881.41	100,000.00	-74,118.59	25.9%
1026 · Ambulance Transport Revenue	72,459.59	220,000.00	-147,540.41	32.9%
1022 · County EMS ILA	1,000,000.00	1,000,000.00	0.00	100.0%
1025 · Impact Fees	12,160.47	28,750.00	-16,589.53	42.3%
1007 · Cost Recovery	0.00	25,000.00	-25,000.00	0.0%
1009 · Grants	0.00	40,000.00	-40,000.00	0.0%
1010 · Equipment Sales	0.00	5,000.00	-5,000.00	0.0%
1013 · Visa Card Cash Back	174.00	500.00	-326.00	34.8%
1016 · Property Taxes	175,356.51	2,100,000.00	-1,924,643.49	8.4%
1019 · Inspection Fee	3,730.10	20,000.00	-16,269.90	18.7%
1020 · Interest	26,047.08	25,000.00	1,047.08	104.2%
Total 10003 · Operating Fund Deposit	1,315,809.16	3,585,500.00	-2,269,690.84	36.7%
Total Income	1,315,809.16	3,585,500.00	-2,269,690.84	36.7%
Gross Profit	1,315,809.16	3,585,500.00	-2,269,690.84	36.7%
Expense				
6500 · Operations				
6526 · Legal	0.00	30,000.00	-30,000.00	0.0%
6525 · Grants				
G24.01 · 2024 Mental Heath Grant (DP...	9,900.00	21,250.00	-11,350.00	46.6%
Total 6525 · Grants	9,900.00	21,250.00	-11,350.00	46.6%
6524 · EMS Supplies	2,798.95	10,000.00	-7,201.05	28.0%
6523 · Transfer to Impact Fees	0.00	28,750.00	-28,750.00	0.0%
6522 · Community Relations/Outreach	123.50	7,800.00	-7,676.50	1.6%
6521 · Transfer to Capital	0.00	119,700.00	-119,700.00	0.0%
6518 · Office Supplies	1,955.39	10,000.00	-8,044.61	19.6%
6510 · Building and Grounds	31,933.99	100,000.00	-68,066.01	31.9%
6506 · Background Checks	357.44	3,000.00	-2,642.56	11.9%
6505 · Contract Services	7,465.74	35,000.00	-27,534.26	21.3%
6501 · Insurance	0.00	75,000.00	-75,000.00	0.0%
6502 · Accounting other.	550.00	25,000.00	-24,450.00	2.2%
6509 · Utilities	11,484.96	35,000.00	-23,515.04	32.8%
6512 · Fleet Maintenance	11,299.87	100,000.00	-88,700.13	11.3%
6511 · Fuel	6,418.40	35,000.00	-28,581.60	18.3%
6513 · PPE / Equipment / Uniforms	18,967.54	70,000.00	-51,032.46	27.1%
6515 · Minor Equipment	9,070.95	30,000.00	-20,929.05	30.2%
6516 · Training Expenses	2,898.26	15,000.00	-12,101.74	19.3%
6517 · Employee Food and other	1,054.03	10,000.00	-8,945.97	10.5%
6519 · Subscriptions/Memberships/Publi	16,296.92	35,000.00	-18,703.08	46.6%
Total 6500 · Operations	132,575.94	795,500.00	-662,924.06	16.7%
6600 · Payroll Expenses				
6621 · Fringe Benifits	207,786.87	810,000.00	-602,213.13	25.7%
6601 · Salaries	336,713.91	1,970,000.00	-1,633,286.09	17.1%
6613 · Payroll Processing Fee	2,566.28	10,000.00	-7,433.72	25.7%
Total 6600 · Payroll Expenses	547,067.06	2,790,000.00	-2,242,932.94	19.6%
Total Expense	679,643.00	3,585,500.00	-2,905,857.00	19.0%
Net Ordinary Income	636,166.16	0.00	636,166.16	100.0%

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05/02/25

Accrual Basis

North Summit Fire District
Budget vs. Actual
January through March 2025

	<u>Jan - Mar 25</u>	<u>Budget</u>	<u>\$ Over Budget</u>	<u>% of Budget</u>
Other Income/Expense				
Other Expense				
7500 · Capital Purchase				
25.03 · Sta 23 Dorm Addition	8,160.00			
25.02 · Sta 22 Dorm Addition	8,160.00			
25.01 · Admin Office	48,279.57			
Total 7500 · Capital Purchase	64,599.57			
Total Other Expense	64,599.57			
Net Other Income	-64,599.57			
Net Income	<u>571,566.59</u>	<u>0.00</u>	<u>571,566.59</u>	<u>100.0%</u>

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05/06/25

Accrual Basis

North Summit Fire District

Accounts Payable

April 2025

Date	Num	Memo	Account	Amount
Adobe				
04/06/2025	CC	ANNUAL SUBSCRIPTIONS	6519 · Subscriptions/Membe...	257.03
Total Adobe				257.03
All West Communications				
04/01/2025	383...	INTERNET SERVICE	6509.2 · Internet	422.55
Total All West Communications				422.55
Allied Mechanical				
04/16/2025	158...	RESET FIRE DAMPER IN AIR DUCT	6510 · Building and Grounds	440.00
Total Allied Mechanical				440.00
Amazon Business				
04/01/2025	13F...	30 sheets Cardstock Paper 8 1/2 x 11 Inches	6518 · Office Supplies	6.99
04/01/2025	13F...	SHARPIE S-Gel, Gel Pens, Drawing Pens, Gel Ink Pe...	6518 · Office Supplies	31.33
04/01/2025	13F...	Erasable Gel Pens, 15 Pack Retractable Erasable Pen...	6518 · Office Supplies	14.98
04/02/2025	1Q...	Personalized Name Plates, Solid Brass Engraved Pla...	6522 · Community Relations/...	241.78
04/02/2025	1Q...	Nightstick XPP-5566RX Intrans Intrinsically Safe Dual ...	6513 · PPE / Equipment / Un...	74.95
04/04/2025	19...	6x10 Shadow Box Frame Black 1 Inch Deep Solid W...	6522 · Community Relations/...	666.82
04/17/2025	1Y...	Tork 105065 PeakServe Continuous Hand Towel, 7.91...	6510.3 · Sanitation Supplies	141.60
04/17/2025	1W...	AquaCare High Pressure 8-mode Handheld Shower H...	6510 · Building and Grounds	29.94
04/17/2025	1W...	Georgia-Pacific Angel Soft Toilet Paper, 16880, Bulk C...	6510.3 · Sanitation Supplies	84.95
04/17/2025	1W...	Lysol Toilet Bowl Cleaner, Max Strength Bathroom Cle...	6510.3 · Sanitation Supplies	32.58
04/17/2025	1W...	Pine-Sol Multi-Surface Cleaner, CloroxPro, 2x Concent...	6510.3 · Sanitation Supplies	41.97
04/17/2025	1W...	MATTHEW CLEANING Heavy Duty Mop Head Comm...	6510.3 · Sanitation Supplies	26.99
04/17/2025	1W...	Amazon Basics Disinfecting Wipes, Lemon Scent, for ...	6510.3 · Sanitation Supplies	33.87
04/18/2025	1Q...	Amazon Basics 6-Pack LR44 Alkaline Button Coin Cell...	6518 · Office Supplies	5.22
04/18/2025	1Q...	Rite in the Rain Weatherproof Side Spiral Notebook, 4....	6518 · Office Supplies	52.32
Total Amazon Business				1,486.29
Ameritas Life Insurance Corp				
04/14/2025	010...	VISION INSURANCE	2400.9 · Benefits Accrual	217.12
Total Ameritas Life Insurance Corp				217.12
Badge and Wallet				
04/18/2025	CC	UNIFORM NAME PLATES	6513 · PPE / Equipment / Un...	86.00
Total Badge and Wallet				86.00
Betos				
04/15/2025	CC	FOOD FOR STAFF MEETING	6517 · Employee Food and o...	109.01
Total Betos				109.01
Burt Brothers				
04/04/2025	124...	OIL CHANGE 2402	6512 · Fleet Maintenance	209.81
04/04/2025	124...	OIL CHANGE 107	6512 · Fleet Maintenance	209.17
04/14/2025	124...	REPLACE TIE ROD ENDS #2401	6512 · Fleet Maintenance	644.38
Total Burt Brothers				1,063.36
ChatGPT				
04/26/2025	CC	CHAT CPT MEMBERSHIP	6519 · Subscriptions/Membe...	21.43
Total ChatGPT				21.43
Clinton Velocity Car Wash				
04/19/2025	CC	CAR WASH MEMBERSHIP	6512 · Fleet Maintenance	10.00
Total Clinton Velocity Car Wash				10.00
Crown Promotions				
04/10/2025	B8...	UNIFORMS T. ROWSER	6513 · PPE / Equipment / Un...	227.00
Total Crown Promotions				227.00

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Accrual Basis

North Summit Fire District

Accounts Payable

April 2025

Date	Num	Memo	Account	Amount
Debs Spicy Pie				
04/10/2025	CC	PIZZA FOR BOARD MEETING	6517 · Employee Food and o...	188.58
Total Debs Spicy Pie				188.58
Enbridge				
04/07/2025	723...	GAS SERVICE STA 23	6509.4 · Gas	205.78
04/07/2025	741...	GAS SERVICE STA 21	6509.4 · Gas	635.17
04/07/2025	599...	GAS SERVICE STA 22	6509.4 · Gas	175.13
Total Enbridge				1,016.08
First Responders First				
04/13/2025	NS...	THERAPY	G24.01 · 2024 Mental Heath ...	2,050.00
Total First Responders First				2,050.00
Fuel Network				
04/02/2025	F25...	FUEL	6511 · Fuel	2,175.07
Total Fuel Network				2,175.07
Gold Cross Services				
04/01/2025	4092	EMS BILLING SERVICE	6505.6 · EMS Billing Service	1,307.38
Total Gold Cross Services				1,307.38
Google				
04/01/2025	CC	EMAILS	6509.3 · Email	30.86
Total Google				30.86
Health Equity				
04/08/2025	xe3...	EMPLOYEE PAID LPHCRA FUNDING	2400.9 · Benefits Accrual	206.00
04/08/2025	59P...	EMPLOYEE PAID DCRA FUNDING	2400.9 · Benefits Accrual	60.00
04/11/2025	ACH	HEALTH SAVINGS PAYROLL ENDING 03.28.25	2400.9 · Benefits Accrual	1,835.42
04/11/2025	ACH	FSA'S PAYROLL ENDING 03.28.25	2400.9 · Benefits Accrual	70.00
04/21/2025	17e...	IMPLEMENTATION FEE FOR FSA	6519 · Subscriptions/Membe...	250.00
04/25/2025	ACH	HEALTH SAVINGS PARYOLL ENDING 04.11.25	2400.9 · Benefits Accrual	1,835.42
Total Health Equity				4,256.84
Home Depot				
04/02/2025	CC	AIR COMPRESSOR PARTS	6510 · Building and Grounds	4.32
04/11/2025	CC	RETRACTBLE CORDS FOR BAY AT STA 23	6510 · Building and Grounds	305.97
04/15/2025	CC	COMPRESSOR SUPPLIES FOR STA 23	6510 · Building and Grounds	45.04
Total Home Depot				355.33
IntelliPay				
04/14/2025	ACH	ACH FEE'S	6505.7 · Credit Card Service ...	12.90
Total IntelliPay				12.90
Intermountain Health				
04/22/2025	EA...	Q1 EAP	6505.5 · EAP	295.80
04/25/2025	143...	MEDICAL DIRECTOR SERVICES	6505.2 · Medical Control	320.25
Total Intermountain Health				616.05
Leagle Shield				
04/01/2025	303...	EMPLOYEE PAID BENIFIT	2400.9 · Benefits Accrual	149.55
04/10/2025	303...	EMPLOYEE PAID BENIFIT	2400.9 · Benefits Accrual	149.55
Total Leagle Shield				299.10
Les Olson Company				
04/14/2025	MN...	IT SUPPORT	6505.4 · IT Support	630.00
04/29/2025	EA...	COPIES	6518 · Office Supplies	73.63
Total Les Olson Company				703.63

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Accrual Basis

North Summit Fire District

Accounts Payable

April 2025

Date	Num	Memo	Account	Amount
loco Lizard				
04/10/2025	CC	LUNCH	6517 · Employee Food and o...	48.41
Total loco Lizard				48.41
Mister Clucker				
04/16/2025	CC	TREATS FOR DISPATCHERS	6517 · Employee Food and o...	42.44
Total Mister Clucker				42.44
Mortys Car Wsh				
04/03/2025	CC	CAR WASH MEMBERSHIP	6512 · Fleet Maintenance	16.99
Total Mortys Car Wsh				16.99
Outpost				
04/09/2025	CC	PROPAIN TANK FOR BBQ	6510 · Building and Grounds	29.99
Total Outpost				29.99
Oxygen Utah, LLC				
04/01/2025	213...	OXYGEN	6524 · EMS Supplies	161.17
04/30/2025	216...	OXYGEN	6524 · EMS Supplies	98.78
Total Oxygen Utah, LLC				259.95
Paylogics				
04/10/2025	ACH	PAYROLL ENDING 03.28.25	2500 · Accrued salaries	75,764.84
04/10/2025	ACH	PAYROLL ENDING 03.28.25	6613 · Payroll Processing Fee	280.67
04/24/2025	ACH	PAYROLL ENDING 04.11.25	2500 · Accrued salaries	76,886.96
04/24/2025	ACH	PAYROLL ENDING 04.11.25	6613 · Payroll Processing Fee	280.67
Total Paylogics				153,213.14
Peopletrial				
04/01/2025	682...	BACKGROUND CHECKS	6506 · Background Checks	496.44
Total Peopletrial				496.44
Post Master				
04/10/2025	CC	STAMPS	6518 · Office Supplies	73.00
Total Post Master				73.00
Republic Service				
04/26/2025	086...	TRASH SERVICE STA 21	6510.1 · Trash	29.09
04/26/2025	086...	TRASH SERVICE STA 23	6510.1 · Trash	209.25
Total Republic Service				238.34
Rocky Mountain Power				
04/01/2025	356...	POWER SERVICE STA 23	6509.5 · Power	288.74
04/02/2025	345...	POWER SERVICE STA 21	6509.5 · Power	495.06
04/07/2025	352...	POWER SERVICE STA 22	6509.5 · Power	137.93
Total Rocky Mountain Power				921.73
Siddons-Martin Emergnecy Group				
04/04/2025	700...	6 SETS OF TURNOUTS	6513 · PPE / Equipment / Un...	12,741.75
Total Siddons-Martin Emergnecy Group				12,741.75
Skaggs Public Safety Uniforms				
04/30/2025	285...	UNIFORM D. BULOW	6513 · PPE / Equipment / Un...	135.00
Total Skaggs Public Safety Uniforms				135.00
Streamline				
04/01/2025	30A...	WEBSITE HOSTING	6505.3 · Web Site Hosting	374.00
Total Streamline				374.00

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05/06/25

Accrual Basis

North Summit Fire District

Accounts Payable

April 2025

Date	Num	Memo	Account	Amount
Summit Auto Repair				
04/22/2025	9720	REPLACED FAILED STARTER #2401	6512 · Fleet Maintenance	700.61
Total Summit Auto Repair				700.61
Summit County Health Insurance				
04/16/2025	582...	HEALTH INSURANCE	2400.9 · Benefits Accrual	20,486.00
04/16/2025	582...	DENTAL INSURNACE	2400.9 · Benefits Accrual	1,434.00
Total Summit County Health Insurance				21,920.00
Summit Merc.				
04/02/2025	023...	RETURN PARTS FOR AIR COMPRESSOR	6510 · Building and Grounds	-4.58
04/03/2025	012...	HARDWARE	6510 · Building and Grounds	17.99
04/09/2025	012...	SCOTCH TAPE	6518 · Office Supplies	4.29
04/09/2025	012...	UTILITY KNIFE	6518 · Office Supplies	14.99
04/10/2025	023...	VINEGAR FOR DISHWASHER	6510.3 · Sanitation Supplies	4.69
04/14/2025	012...	APPLIE CIDER VINEGAR FOR DISWASHER	6510.3 · Sanitation Supplies	19.56
04/16/2025	023...	HARDWARE	6510 · Building and Grounds	3.07
04/18/2025	012...	BATTERY FOR DOOR OPENER	6510 · Building and Grounds	4.99
04/22/2025	012...	DRYER VENT PARTS	6510 · Building and Grounds	18.36
04/22/2025	012...	DRYER VENT SUPPLIES	6510 · Building and Grounds	26.16
04/24/2025	023...	HEX WASHER	6510 · Building and Grounds	2.98
Total Summit Merc.				112.50
Sun Life				
04/14/2025	246...	LIFE INSURANCE	2400.9 · Benefits Accrual	927.80
Total Sun Life				927.80
URS				
04/11/2025	ACH	RETIRMENT PAYROLL ENDING 03.28.25	2400.9 · Benefits Accrual	11,567.64
04/25/2025	ACH	RETIRMENT PAYROLL ENDING 04.11.25	2400.9 · Benefits Accrual	11,391.07
Total URS				22,958.71
Utah HHS				
04/21/2025	25h...	Q1 2025 MEDICARE ASSESMENT	6505.8 · Medicaid Assessment	2,018.96
Total Utah HHS				2,018.96
Utah Valley University				
04/03/2025	AC...	HAZMAT ATARENESS AND OPS TESTING X 2	6516 · Training Expenses	40.00
04/09/2025	A29...	FIREFIGHTER RECERT	6516 · Training Expenses	10.00
04/11/2025	A29...	FIREFIGHTER RECERTIFICATION FEE	6516 · Training Expenses	10.00
Total Utah Valley University				60.00
VASA				
04/25/2025	CC	EMPLOYEE PAID BENIFT	2400.9 · Benefits Accrual	179.91
Total VASA				179.91
Verizon Wireless				
04/02/2025	610...	TELEPHONE SERVICE	6509.1 · Telephone	151.40
04/02/2025	610...	INTERNET/DATA SERVICE	6509.2 · Internet	521.68
Total Verizon Wireless				673.08
Wanship Irrigation Company #2				
04/11/2025	197	ANNUAL IRRIGATION SHARES FEE	6509.6 · Water	135.00
Total Wanship Irrigation Company #2				135.00
Waxie Sanitary Supply				
04/11/2025	831...	LEONINE ANTIBACTERIAL FOAM HAND SOAP 1250...	6510.3 · Sanitation Supplies	84.84
Total Waxie Sanitary Supply				84.84

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05/06/25

Accrual Basis

North Summit Fire District

Accounts Payable

April 2025

Date	Num	Memo	Account	Amount
Weber State				
04/03/2025	CC	PALS CARDS	6516 · Training Expenses	32.00
04/14/2025	CC	CPR CARD	6516 · Training Expenses	6.00
Total Weber State				38.00
Whites Auto Parts				
04/02/2025	391...	DEF AND 20 AMP FUSE	6512 · Fleet Maintenance	28.77
04/02/2025	391...	ARMOR ALL TIRE FOAR AND DE-ICER	6512 · Fleet Maintenance	9.87
04/04/2025	392...	PREMIXED FUEL	6511 · Fuel	29.74
04/22/2025	392...	BATTERY FOR COLORADO	6512 · Fleet Maintenance	129.14
Total Whites Auto Parts				197.52
TOTAL				235,949.72



Regular Meeting - Mar 13 2025 Minutes

Thursday, March 13, 2025 at 6:00 PM

Fire Station 21, 86 E Center St., Coalville, UT 84017

1. Meeting Opening

1.1 Call to Order

Chair Donaldson called the meeting to order at 6:00 PM

1.2 Roll Call

Board Members and Staff Present:

Tyler Rowser, Benjamin Nielson, Aristides Ioannides, Don Donaldson, Ryan Stack, and Corey Ann Blonquist

Board Members Absent:

Nick Jarvis, Steven Dallin, and Louise Willoughby

Public present

Claus & Susan Nielson

2. Closed session in compliance with Utah Code §52-4-205(1) as needed, to discuss

2.1 Purchase, exchange, or lease of real property

2.2 Pending or reasonably imminent litigation

2.3 Personnel – to discuss the character, competence, or physical or mental health of an individual

2.4 Deployment of security personnel, devices, or systems

No closed session was called for.

3. Pledge of Allegiance

4. Work Session

4.1 Chiefs Operations update

[2025 Statistics.pdf](#) 

Chief Nielson when over the operations report for February and interduced new employees.

4.2 Yearend 2024 unaudited Financial report.

[FY 2024 Budget v. Actual.pdf](#) 

Chief Rowser went over the unaudited financial report for 2024.

5. Public Input

Susan Nielsen, commended the station is no longer able to be used for a community room, and that is hard for the community.

Claus Nielsen, asked how they get a cross walk put in from the rail trail parking lot to the community garden.

6. Consent Agenda

6.1 Accounts Payable for February 2025

[February 2025 AP.pdf](#) 

6.2 Minutes of

[Regular Meeting - Feb 13 2025 - Minutes - Html](#) 

Motion to approve the consent agenda as presented.

Moved by: Aristides Ioannides

Seconded by: Corey Ann Blonquist

Aye

Aristides Ioannides, Don Donaldson, and Corey Ann Blonquist

Carried 3-0

7. Consideration of Approval

- 7.1 Discussion and possible approval of the License and Site Use Agreement between the District and Heber Valley Self Reliance Group for a community garden at Station 23.

[Wanship Gardens License and Site Use Agreement \[3-4-25\].pdf](#)



Chief Nielson went over the agreement that Ryan had updated form last year. Chief Nielson also stated that he would like to see it continue.

[NSFD License and Site use Agreement 03.27.25 - Signed.pdf](#)



Motion to approve a contract with a 1 year term.

Moved by: Aristides Ioannides

Seconded by: Corey Ann Blonquist

Aye Aristides Ioannides, Don Donaldson, and Corey Ann Blonquist

Carried 3-0

- 7.2 Discussion and possible approval of the Mountain West Modular purchase price and funding for the Admin office.

[North Summit Fire 24x56 Proposal Package 2.28.25.pdf](#)



Table to the special meeting on March 26, 2025.

- 7.3 Discussion and possible appointment of new member to the Personal Policy Subcommittee.

[NSFD Staff report 2-27- Policy Subcommittee.pdf](#)



Board Member Blonquest will serve on the subcommittee.

- 7.4 Discussion and possible approval of the Fire Recovery USA agreement.

[Fire Recovery.pdf](#)



Chair Donaldson moved this item to before the consent agenda. Merryll with fire recover gave the information on there system.

Chair tabled the item to a future meeting.

- 7.5 Discussion and possible approval of an Interlocal Cooperation Agreement for County Services (2025 - 2034)

Ryan explained that Margret wanted to be here, but here calendar didn't work with tonight. Tabled for a special meeting on March 26th

8. Board Comments.

Board Member Ioannides wanted to thank all the hard work staff has been putting in to get ready for these meetings.

9. Adjournment

9.1 Adjourn Meeting

Motion to adjourn

Moved by: Corey Ann Blonquist

Seconded by: Aristides Ioannides

Aye Aristides Ioannides, Don Donaldson, and Corey Ann Blonquist

Carried 3-0

Adjourned at 7:23 PM

Board Chair

District Clerk



Special Meeting - Mar 26 2025 Minutes

Wednesday, March 26, 2025 at 5:00 PM

Fire Station 21, 86 E Center St., Coalville, UT 84017

1. Meeting Opening

1.1 Call to Order

Chair Donaldson called the meeting to order at 5:02 PM

1.2 Roll Call

Board Members and Staff Present

Tyler Rowser, Nick Jarvis, Benjamin Nielson, Steven Dallin, Louise Willoughby, Aristides Ioannides, Don Donaldson, Ryan Stack, and Corey Ann Blonquist

2. Closed session in compliance with Utah Code §52-4-205(1) as needed, to discuss

2.1 Purchase, exchange, or lease of real property


2.2 Pending or reasonably imminent litigation

2.3 Personnel – to discuss the character, competence, or physical or mental health of an individual

2.4 Deployment of security personnel, devices, or systems
No closed session was called for.

3. Pledge of Allegiance

4. Consideration of Approval

- 4.1 Discussion and possible approval of the Mountain West Modular purchase price and funding for the Admin office.
[North Summit Fire 24x56 Proposal Package 2.28.25.pdf](#) 

Chief Nielson stated that after Ryan reviewed the procurement policy, the change order was less than 10% and the change is in compliance.

[North Summit Fire 24x56 Final Contract - signed.pdf](#) 

Motion to approve the final contract

Moved by: Aristides Ioannides

Seconded by: Steven Dallin

Aye Steven Dallin, Louise Willoughby, Aristides Ioannides, Don Donaldson, and Corey Ann Blonquist

Carried 5-0

- 4.2 Discussion and possible approval of an Interlocal Cooperation Agreement for County Services (2025 - 2034)
[Interlocal Agreement - Legal Services \(2025 NS Fire\)..pdf](#) 

County Attorney Margaret Olsen went over how the proposal came about and answered questions.

[Interlocal Cooperation Agreement \(2025-2034\) NSFSD - Signed.pdf](#) 

Motion to approve the ILA for county services.

Moved by: Louise Willoughby

Seconded by: Corey Ann Blonquist

Aye Steven Dallin, Louise Willoughby, Aristides Ioannides, and Corey Ann Blonquist

Nay Don Donaldson

Carried 4-1

5. Board Comments.

6. Adjournment

6.1 Adjourn Meeting
Moiton to adjourn.

Moved by: Louise Willoughby

Seconded by: Corey Ann Blonquist

Aye Steven Dallin, Louise Willoughby, Aristides
Ioannides, Don Donaldson, and Corey Ann
Blonquist

Carried 5-0

Board Chair

District Clerk

Adjourned at 6:16 PM



Regular Meeting - Apr 10 2025 Minutes

Thursday, April 10, 2025 at 6:00 PM

Fire Station 21, 86 E Center St., Coalville, UT 84017

1. Meeting Opening

1.1 Call to Order

Board Chair Donaldson called the meeting to order at 6:05 PM

1.2 Roll Call

Staff and Board Members Present:

Tyler Rowser, Nick Jarvis, Benjamin Nielson, Louise Willoughby, Aristides Ioannides, Don Donaldson, and Corey Ann Blonquist

Staff Board Members Absent:

Steven Dallin and Ryan Stack

2. Closed session in compliance with Utah Code §52-4-205(1) as needed, to discuss

2.1 Purchase, exchange, or lease of real property

2.2 Pending or reasonably imminent litigation

2.3 Personnel – to discuss the character, competence, or physical or mental health of an individual

- 2.4 Deployment of security personnel, devices, or systems
No one called for a closed session

3. Pledge of Allegiance

4. Work Session

- 4.1 Chiefs operations update.

[March 2025 Statistics.pdf](#) 

Chief Jarvis went over the monthly calls and training.

Chief Nielson went over other operation matters.

- 4.2 Discussion on social security tax.

[Social Security.pdf](#) 

Chief Nielson went over how this error was found Becky Yorgason with the State Social Security Admin give more indepth information.

5. Public Input

None

6. Consent Agenda

- 6.1 Minutes of

Table until next meeting.

- 6.2 Accounts Payable for

[March 2025 AP.pdf](#) 

Motion to approve accounts payable for March 2025

Moved by: Louise Willoughby

Seconded by: Corey Ann Blonquist

Aye

Louise Willoughby, Aristides Ioannides, Don

Donaldson, and Corey Ann Blonquist

Carried 4-0

7. Board Comments.

8. Adjournment

8.1 Adjourn Meeting
Motion to adjourn.

Moved by: Louise Willoughby

Seconded by: Corey Ann Blonquist

Aye Louise Willoughby, Aristides Ioannides, Don
Donaldson, and Corey Ann Blonquist

Carried 4-0

Adjourned at 7:00 PM

Board Chair

District Clerk

NORTH SUMMIT FIRE SERVICE DISTRICT

Resolution No. 2025-02
(Holding a Section 218 Referendum)

A RESOLUTION OF THE ADMINISTRATIVE CONTROL BOARD OF NORTH SUMMIT FIRE SERVICE DISTRICT TO HOLD A SECTION 218 REFERENDUM FOR THE PURPOSE OF DETERMINING WHETHER NORTH SUMMIT FIRE SERVICE DISTRICT WILL PARTICIPATE IN THE STATE'S SECTION 218 AGREEMENT AND PROVIDE SOCIAL SECURITY BENEFITS TO NORTH SUMMIT FIRE SERVICE DISTRICT EMPLOYEES

PREAMBLE

WHEREAS, prior to 1951, state and local government employees were excluded from Social Security coverage because of a legal issue regarding the right of the federal government to tax state and local governments; and

WHEREAS, in 1951, Congress authorized states to enter into voluntary agreements known as Section 218 Agreements with the federal government to provide Social Security coverage to state and local government employees; and

WHEREAS, government entities, such as NORTH SUMMIT FIRE SERVICE DISTRICT, are not automatically covered by Utah's Section 218 Agreement; and

WHEREAS, because NORTH SUMMIT FIRE SERVICE DISTRICT participates in the Utah Retirement Systems ("URS"), Utah's Section 218 Agreement could be extended to NORTH SUMMIT FIRE SERVICE DISTRICT employees; and

WHEREAS, in order for the state's Section 218 Agreement to be extended to NORTH SUMMIT FIRE SERVICE DISTRICT employees, NORTH SUMMIT FIRE SERVICE DISTRICT must hold a referendum by secret ballot on the question of whether employees covered by the URS should be included in the Social Security system; and

WHEREAS, such referendum must be conducted under the supervision of the State Social Security Administrator; and

WHEREAS, eligible NORTH SUMMIT FIRE SERVICE DISTRICT employees must be given at least 90 days notice of said referendum; and

WHEREAS, the ADMINISTRATIVE CONTROL BOARD has determined that the NORTH SUMMIT FIRE SERVICE DISTRICT employees should be the ones to determine whether NORTH SUMMIT FIRE SERVICE DISTRICT participates in the Social Security system; and

BE IT, THEREFORE, RESOLVED by the ADMINISTRATIVE CONTROL BOARD that the NORTH SUMMIT FIRE SERVICE DISTRICT administration is directed to work with state officials to schedule a Section 218 referendum for all eligible NORTH SUMMIT FIRE SERVICE DISTRICT employees on the question of whether NORTH SUMMIT FIRE SERVICE DISTRICT will participate in Utah's Section 218 Agreement and provide Social Security.

APPROVED AND ADOPTED this 8th day of March, 2025.

ADMINISTRATIVE CONTROL BOARD
NORTH SUMMIT FIRE SERVICE DISTRICT

By: _____
Don Donaldson, Chair

ATTEST:

District Clerk, NORTH SUMMIT FIRE SERVICE DISTRICT

APPROVED AS TO FORM

Ryan Stack, Deputy County Attorney

VOTING

Don Donaldson, Chair	voting	<u> (Y or N) </u>
Steve Dallin, Vic Chair	voting	<u> (Y or N) </u>
Ari Ioannides, Treasurer	voting	<u> (Y or N) </u>
Louise Willoughby, Board Member	voting	<u> (Y or N) </u>
Corey Blonquist, Board Member	voting	<u> (Y or N) </u>

NORTH SUMMIT FIRE SERVICE DISTRICT

Resolution No. 2025-02
(Holding a Section 218 Referendum)

A RESOLUTION OF THE ADMINISTRATIVE CONTROL BOARD OF NORTH SUMMIT FIRE SERVICE DISTRICT TO HOLD A SECTION 218 REFERENDUM FOR THE PURPOSE OF DETERMINING WHETHER NORTH SUMMIT FIRE SERVICE DISTRICT WILL PARTICIPATE IN THE STATE'S SECTION 218 AGREEMENT AND PROVIDE SOCIAL SECURITY BENEFITS TO NORTH SUMMIT FIRE SERVICE DISTRICT EMPLOYEES

PREAMBLE

WHEREAS, prior to 1951, state and local government employees were excluded from Social Security coverage because of a legal issue regarding the right of the federal government to tax state and local governments; and

WHEREAS, in 1951, Congress authorized states to enter into voluntary agreements known as Section 218 Agreements with the federal government to provide Social Security coverage to state and local government employees; and

WHEREAS, government entities, such as NORTH SUMMIT FIRE SERVICE DISTRICT, are not automatically covered by Utah's Section 218 Agreement; and

WHEREAS, because NORTH SUMMIT FIRE SERVICE DISTRICT participates in the Utah Retirement Systems ("URS"), Utah's Section 218 Agreement could be extended to NORTH SUMMIT FIRE SERVICE DISTRICT employees; and

WHEREAS, in order for the state's Section 218 Agreement to be extended to NORTH SUMMIT FIRE SERVICE DISTRICT employees, NORTH SUMMIT FIRE SERVICE DISTRICT must hold a referendum by secret ballot on the question of whether employees covered by the URS should be included in the Social Security system; and

WHEREAS, such referendum must be conducted under the supervision of the State Social Security Administrator; and

WHEREAS, eligible NORTH SUMMIT FIRE SERVICE DISTRICT employees must be given at least 90 days notice of said referendum; and

WHEREAS, the ADMINISTRATIVE CONTROL BOARD has determined that the NORTH SUMMIT FIRE SERVICE DISTRICT employees should be the ones to determine whether NORTH SUMMIT FIRE SERVICE DISTRICT participates in the Social Security system; and

BE IT, THEREFORE, RESOLVED by the ADMINISTRATIVE CONTROL BOARD that the NORTH SUMMIT FIRE SERVICE DISTRICT administration is directed to work with state officials to schedule a Section 218 referendum for all eligible NORTH SUMMIT FIRE SERVICE DISTRICT employees on the question of whether NORTH SUMMIT FIRE SERVICE DISTRICT will participate in Utah's Section 218 Agreement and provide Social Security.

APPROVED AND ADOPTED this 8th day of March, 2025.

ADMINISTRATIVE CONTROL BOARD
NORTH SUMMIT FIRE SERVICE DISTRICT

By: Steven Dallin
Steven Dallin (May 9, 2025 10:03 MDT)
Steven Dallin, Vice-Chair

ATTEST:

John S. Pearson

District Clerk, NORTH SUMMIT FIRE SERVICE DISTRICT

APPROVED AS TO FORM

Ryan Stack
Ryan Stack (May 8, 2025 18:48 MDT)
Ryan Stack, Deputy County Attorney

VOTING

Don Donaldson, Chair	voting	<u>Absent</u>
Steve Dallin, Vice-Chair	voting	<u>YES</u>
Ari Ioannides, Treasurer	voting	<u>YES</u>
Louise Willoughby, Board Member	voting	<u>YES</u>
Corey Blonquist, Board Member	voting	<u>YES</u>











4 - NSFPSD Resolution to Allow Social Security Referendum Template[18]

Final Audit Report

2025-05-09

Created:	2025-05-09
By:	Tyler Rowser (trowser@northsummitfireut.gov)
Status:	Signed
Transaction ID:	CBJCHBCAABAA2VigAhN1LkACkrrlg9Gs1D7q4ODJcGQi

"4 - NSFPSD Resolution to Allow Social Security Referendum Template[18]" History

-  Document created by Tyler Rowser (trowser@northsummitfireut.gov)
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-  Document emailed to Ryan Stack (rstack@summitcountyutah.gov) for signature
2025-05-09 - 0:37:00 AM GMT
-  Email viewed by Ryan Stack (rstack@summitcountyutah.gov)
2025-05-09 - 0:48:16 AM GMT- IP address: 104.47.66.126
-  Document e-signed by Ryan Stack (rstack@summitcountyutah.gov)
Signature Date: 2025-05-09 - 0:48:30 AM GMT - Time Source: server- IP address: 216.250.46.22
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2025-05-09 - 0:48:32 AM GMT
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2025-05-09 - 7:38:13 AM GMT- IP address: 104.28.48.173
-  Document e-signed by Steven Dallin (sdallin@northsummitfireut.gov)
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2025-05-09 - 4:12:19 PM GMT- IP address: 216.117.231.30
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Signature Date: 2025-05-09 - 4:12:37 PM GMT - Time Source: server- IP address: 216.117.231.30

✔ Agreement completed.

2025-05-09 - 4:12:37 PM GMT

**NORTH SUMMIT FIRE SERVICE DISTRICT
RESOLUTION ESTABLISHING THE URS RETIREMENT STATUS OF APPOINTED
MEMBERS OF THE ADMINISTRATIVE CONTROL BOARD**

May 8, 2025

THIS RESOLUTION ESTABLISHING THE URS RETIREMENT STATUS OF APPOINTED MEMBERS OF THE ADMINISTRATIVE CONTROL BOARD is made this 8th day of May, 2025, by the North Summit Fire Service District Administrative Control Board (“NSFSD ACB”) for the NORTH SUMMIT FIRE SERVICE DISTRICT (the “District”), a special service district duly organized under the laws of the State of Utah as a public body corporate and politic (the “Resolution”).

WHEREAS, North Summit Fire Service District (the “**District**”) is a political subdivision of the State of Utah, authorized and organized under the provisions of Utah law; and

WHEREAS, the District is governed by the NSFSD ACB, as established in Title 2, Chapter 25 of the Summit County Code; and

WHEREAS, the NSFSD ACB consists of a minimum of five (5) and up to nine (9) members, all of whom are appointed; and

WHEREAS, appointed members of the NSFSD ACB are classified in Utah Retirement Systems (URS) as either Tier 1 or Tier 2 members based on their employment start date under URS standards and eligibility criteria; and

WHEREAS, members of the NSFSD ACB are part-time appointed officials working less than twenty (20) hours per week and are deemed ineligible for retirement benefits with URS, pursuant to established URS guidelines; and

NOW, THEREFORE, BE IT RESOLVED by the Administrative Control Board of the North Summit Fire Special Service District, that the NSFSD ACB formally acknowledges the retirement status of all its appointed officials, both Tier 1 and Tier 2, as part-time ineligible.

APPROVED, ADOPTED, and ENACTED this 8th day of May, 2025.

[signatures on following page]

NORTH SUMMIT FIRE SERVICE DISTRICT
ADMINISTRATIVE CONTROL BOARD

By: _____
Don C Donaldson
Board Chair

By: _____
Steven Dallin
Board Vice-Chair

APPROVED AS TO FORM:

By: _____
Ryan P.C. Stack
Deputy County Attorney

**NORTH SUMMIT FIRE SERVICE DISTRICT
RESOLUTION ESTABLISHING THE URS RETIREMENT STATUS OF APPOINTED
MEMBERS OF THE ADMINISTRATIVE CONTROL BOARD**

May 8, 2025

THIS RESOLUTION ESTABLISHING THE URS RETIREMENT STATUS OF APPOINTED MEMBERS OF THE ADMINISTRATIVE CONTROL BOARD is made this 8th day of May, 2025, by the North Summit Fire Service District Administrative Control Board (“NSFSD ACB”) for the NORTH SUMMIT FIRE SERVICE DISTRICT (the “District”), a special service district duly organized under the laws of the State of Utah as a public body corporate and politic (the “Resolution”).

WHEREAS, North Summit Fire Service District (the “**District**”) is a political subdivision of the State of Utah, authorized and organized under the provisions of Utah law; and

WHEREAS, the District is governed by the NSFSD ACB, as established in Title 2, Chapter 25 of the Summit County Code; and

WHEREAS, the NSFSD ACB consists of a minimum of five (5) and up to nine (9) members, all of whom are appointed; and

WHEREAS, appointed members of the NSFSD ACB are classified in Utah Retirement Systems (URS) as either Tier 1 or Tier 2 members based on their employment start date under URS standards and eligibility criteria; and

WHEREAS, members of the NSFSD ACB are part-time appointed officials working less than twenty (20) hours per week and are deemed ineligible for retirement benefits with URS, pursuant to established URS guidelines; and

NOW, THEREFORE, BE IT RESOLVED by the Administrative Control Board of the North Summit Fire Special Service District, that the NSFSD ACB formally acknowledges the retirement status of all its appointed officials, both Tier 1 and Tier 2, as part-time ineligible.

APPROVED, ADOPTED, and ENACTED this 8th day of May, 2025.

[signatures on following page]

NORTH SUMMIT FIRE SERVICE DISTRICT
ADMINISTRATIVE CONTROL BOARD

Steven Dallin

Steven Dallin (May 9, 2025 10:04 MDT)

Steven Dallin
Board Vice-Chair

ATTEST:

Tyler Rowser

Tyler Rowser
District Clerk

APPROVED AS TO FORM:

By: R.P.C. Stack
Ryan P.C. Stack (May 8, 2025 18:48 MDT)
Ryan P.C. Stack
Deputy County Attorney











NSFSD Resolution 2025-03 re ACB members and URS

Final Audit Report

2025-05-09

Created:	2025-05-09
By:	Tyler Rowser (trowser@northsummitfireut.gov)
Status:	Signed
Transaction ID:	CBJCHBCAABAAomH9_NvuKd_dziw2OPX06qstlOYeE2Gx

"NSFSD Resolution 2025-03 re ACB members and URS" History

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-  Document e-signed by Ryan Stack (rstack@summitcountyutah.gov)
Signature Date: 2025-05-09 - 0:48:53 AM GMT - Time Source: server- IP address: 216.250.46.22
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2025-05-09 - 0:48:55 AM GMT
-  Email viewed by Steven Dallin (sdallin@northsummitfireut.gov)
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-  Document e-signed by Steven Dallin (sdallin@northsummitfireut.gov)
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-  Email viewed by Tyler Rowser (trowser@northsummitfireut.gov)
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-  Document e-signed by Tyler Rowser (trowser@northsummitfireut.gov)
Signature Date: 2025-05-09 - 4:12:14 PM GMT - Time Source: server- IP address: 216.117.231.30

✔ Agreement completed.
2025-05-09 - 4:12:14 PM GMT

Confined Space Rescue Response

314.1 PURPOSE AND SCOPE

State

This policy provides guidance on various confined space entries pursuant to Utah and federal Occupational Safety and Health Administration rules (29 CFR 1910.146; UAC R614-1-4).

314.1.1 DEFINITIONS

Best Practice

Definitions related to this policy include:

Attendant - An individual stationed outside one or more permit spaces to monitor the authorized entrants and who performs all duties assigned.

Confined space - A space that:

- (a) Is large enough and so configured that a person can bodily enter and perform work.
- (b) Has limited or restricted means for entry or exit.
- (c) Is not designed for continuous human occupancy.

Entry - The action by which a person passes through an opening into a permit-required confined space. Entry includes ensuing work activities in that space and is considered to have occurred as soon as any part of the entrant's body breaks the plane of an opening into the space.

Entry permit - Written or printed document that is provided by the District to allow and control entry into a permit-required confined space to perform work in the space pursuant to Utah Occupational Safety and Health (Utah OSHA) regulations.

Entry supervisor - The person responsible for determining if acceptable entry conditions are present at a permit space where entry is planned, for authorizing and overseeing entry operations, and for terminating entry as required.

Permit-required confined space - A confined space that has one or more of the following characteristics:

- (a) Contains or has a potential to contain a hazardous atmosphere.
- (b) Contains a material that has the potential for engulfing an entrant.
- (c) Has an internal configuration such that an entrant could be trapped or asphyxiated by inwardly converging walls or by a floor that slopes downward and tapers to a smaller cross-section.
- (d) Contains any other recognized serious safety or health hazard.

314.2 POLICY

State

It is the policy of the North Summit Fire District to establish permit-required confined space incident response guidelines in compliance with applicable regulations and Utah OSHA, and the required

Confined Space Rescue Response

training and equipment to reasonably ensure members' safety while they are performing permit-required, confined space rescues.

314.3 GENERAL REQUIREMENTS

State

District procedures shall meet the standards and requirements set forth in 29 CFR 1910.146 as adopted by reference in Utah (UAC R614-1-4) and this policy.

District standards and procedures will include, but are not limited to:

- (a) The requirements of an entry permit.
- (b) Training requirements for members entering into confined spaces.
- (c) Equipment requirements.
- (d) Notification to members entering a confined space of any known or suspected hazards that the member may face during entry and any other information necessary to enable the attendant to monitor safe entry by the member.
- (e) Requirements for members entering confined spaces.
- (f) Requirements of the entry supervisor.
- (g) Requirements for members who are assisting others within the confined space.

314.4 PROCEDURES

Best Practice

District members should be trained to identify and measure atmospheric hazards within confined spaces. Reasonably practicable attempts at self-rescue or nonentry rescue should be made prior to any entry.

District members should adhere to National Institute for Occupational Safety and Health (NIOSH) guidance when performing a confined space rescue.

Any time there is questionable action or lack of movement by the worker inside the confined space, a verbal check should be made. If there is no response, District rescue personnel should conduct a survivability profile and a risk analysis, based on the information documented on the entry permit.

314.4.1 PRECAUTIONS

Best Practice

No ignition sources should be introduced into the confined space when atmospheric hazards are attributable to flammable or explosive substances or to lighting and electrical equipment.

Members should perform continuous atmospheric monitoring during all confined space rescue operations. If atmospheric conditions change adversely, members should exit the confined space until appropriate precautions for any new hazards are developed and implemented.

Confined Space Rescue Response

Work time should be closely monitored because heat stress emergencies may be caused by a warm atmosphere inside a confined space.

314.4.2 HAZARD EVALUATION/PERMIT REQUIREMENTS

State

If members of the District respond to an incident requiring permit-required confined space entry, a written hazard evaluation shall be performed. The hazard evaluation shall include, but is not limited to:

- (a) Recognition, determination and declaration of the situation as a permit-required confined space incident, including the date, time and location.
- (b) Denial of entry to unprotected persons.
- (c) Assessment of all readily available confined space documentation (e.g., Safety Data Sheets, any existing permits, plans or blueprints of the space).
- (d) Assessment of the purpose of the entry, number of victims, locations and injury conditions.
- (e) Discussions with witnesses, a supervisor and other sources of information.
- (f) Assessment of any current or potential space hazards, in particular, any hazards that led to the necessary rescue.
- (g) Measures used to isolate the space and eliminate or control the hazards.
- (h) Communications procedures used by entrants and attendants.
- (i) Determination and declaration if a body is recovered or a victim is rescued.

314.5 TACTICAL GUIDELINES

Best Practice

314.5.1 PRIMARY ASSESSMENT

Best Practice

Upon arrival, the first-in company should:

- Establish command and provide a report of conditions.
- Assess immediate hazards to rescuers, contact witnesses or otherwise look for clues as to the cause of the confined space emergency.
- Conduct a survivability profile of the victims, including the number, location and condition of the victims and how long they have been trapped.
- Establish communication with the victims, if possible.
- If applicable, locate any confined space permit that has information about the space.
- Determine whether the operation will be a rescue or a recovery.

Confined Space Rescue Response

314.5.2 SECONDARY ASSESSMENT

Best Practice

After completing the primary assessment, the first-in company should:

- Determine the type of confined space and what type of products are used or stored in the space.
- Identify any known hazards (e.g., electrical, mechanical, stored energy).
- Determine the stability of the confined space and conduct a hazardous materials size-up.

314.5.3 INCIDENT COMMANDER RESPONSIBILITIES

Best Practice

- Determine if adequate technician-level trained personnel are on-scene to safely complete the rescue.
- Determine whether the proper equipment is at the scene to safely complete the rescue (e.g., atmospheric monitoring equipment, intrinsically safe lighting and communications, self-contained breathing apparatus (SCBA), ventilation equipment, victim removal equipment).
- Establish a perimeter and ventilation, if needed.
- Assign resources, which should include a hazards officer.
- Ensure all utilities are locked-out, including electrical, gas and water.
- Evaluate the structural stability of the confined space and surrounding area.
- Remove or restrict the flow of any product in or flowing into the confined space.
- Ensure all entry and backup personnel are wearing the proper level of personal protective equipment (PPE) (e.g., helmet, gloves, proper footwear, eye protection, appropriate skin protection, a Class III harness and safety tag line, SCBA) and any additional equipment deemed necessary for the safety of personnel, given the totality of the circumstances.
- Ensure the appropriate method of extrication is determined and constructed.
- Ensure District-approved procedures are followed to perform the rescue.

314.5.4 VICTIM ASSISTANCE

Best Practice

- If possible, the entry team should bring a supply of breathable air for the victims.
- Rescuers shall not remove their SCBA and give them to the victims.
- If indicated and practicable, complete C-spine precautions should be taken.

Confined Space Rescue Response

- After treatment for immediate life-threatening injuries, the victims should be packaged appropriately for extrication (e.g., backboard, rescue basket).

314.5.5 VICTIM TRANSFER

Best Practice

Immediately after reaching the point of egress, the victims should be decontaminated if necessary and transferred to awaiting medical personnel.

314.6 TERMINATION OF THE RESCUE

Best Practice

At the conclusion of the rescue, the Incident Commander should:

- Account for all personnel.
- Ensure all tools and equipment used for the rescue/recovery are removed (unless there has been a fatality, then consideration may be given to leaving tools and equipment in place for investigative purposes).
- Ensure proper decontamination procedures are implemented if personnel or equipment have been contaminated during the operation.
- Determine if a formal critical incident stress debriefing or a routine debriefing and Post-Incident Analysis (PIA), in accordance with the Post-Incident Analysis Policy, is warranted and, if so, implement as appropriate.

Trench Rescues

316.1 PURPOSE AND SCOPE

State

Trench rescue operations involve a complex system of shoring, digging and special resources, and can be a critical danger to fire personnel. The purpose of this policy is to minimize member exposure to hazardous conditions during trench rescues through the safe and efficient management of operations (29 CFR 1926.650 et seq.; UAC R 614-1-4).

316.1.1 DEFINITIONS

State

Definitions related to this policy include:

Excavation - Any man-made cut, cavity, trench or depression in the ground.

Trench - A narrow (in relation to length) excavation made below the surface of the ground that is generally deeper than it is wide and is not wider than 15 feet (29 CFR 1926.650).

316.2 POLICY

Best Practice

It is the policy of the North Summit Fire District to adopt and maintain a written response program with standardized procedures and relevant training to minimize the exposure to hazardous conditions to rescue personnel during trench or excavation rescues.

316.3 PROCEDURES

State

Secondary collapse must always be considered as a potential hazard during trench rescues. Suffocation, extreme pressure and trauma can all occur due to the weight of a cave-in. There may be times when it is necessary to place the safety of the firefighter above the rescue of a victim who clearly has no chance of survival.

- (a) Using the Incident Command System (ICS), the first-in company shall attempt to determine the following:
 1. Who is in charge at the site and what happened?
 2. How many victims are trapped and where are they located?
 3. Is a rescue possible or is this a body recovery?
 4. What kind of material is covering the victims (e.g., dirt, sand, rock)?
- (b) An extrication and safety officer should be assigned to:
 1. Monitor the status of all personnel involved in the rescue.
 2. Monitor the site for signs of potential secondary collapse (e.g., surface cracks, shoring with signs of bending, falling debris).

Trench Rescues

- (c) A hazard zone should be established within a 50-foot perimeter around the incident site using ICS methods. Apparatus, equipment, traffic and staging distance should be set at a distance that will minimize vibrations at the site.
- (d) Minimally, the equipment required to be available for rescue personnel to enter a trench or excavation should include (29 CFR 1926.651):
 - 1. A self-contained breathing apparatus (SCBA).
 - 2. A safety harness or line, or a basket stretcher.
 - 3. A helmet.
- (e) When determining whether the trench or excavation is safe for emergency responders to enter, the following will be considered (29 CFR 1926.651; 29 CFR 1926.652):
 - 1. Adequate ventilation has been established.
 - 2. When ventilation is in place, the air quality is being periodically tested.
 - 3. If water accumulation is a factor, protection from water hazards is in place.
 - 4. Adequate protection for people working in the trench or excavation, in the form of shields, supports or sloping, and benching systems have been established.
- (f) If the rescue effort is protracted, personnel may need to be rotated and/or additional alarms requested for appropriate relief.

Hazardous Materials Response

318.1 PURPOSE AND SCOPE

Best Practice

Hazardous materials (HAZMAT) may include toxic, flammable, corrosive, explosive, radioactive, or reactive materials; materials that can cause health hazards; or a combination of these materials. The purpose of this policy is to provide a general framework for handling a HAZMAT incident.

Training related to HAZMAT response is addressed in the Hazardous Materials Training Policy.

318.2 POLICY

State

It is the policy of the North Summit Fire District to protect the safety of the public and responders to HAZMAT incidents and to comply with all applicable state and federal laws during the management and mitigation of all HAZMAT incidents (29 CFR 1910.120; Utah Code 53-2a-702).

318.3 RESPONSIBILITIES

Best Practice

All HAZMAT responses should be managed using the National Incident Management System (NIMS) and the Incident Command System (ICS) in accordance with Utah Division of Emergency Management (DEM) regulations for emergency response and applicable federal laws.

318.3.1 INITIAL ACTIONS

Best Practice

If available, information should be provided by the Dispatch Center to the units responding to a HAZMAT incident including the name and type of the material involved (e.g., hydrochloric acid, corrosive), the size and quantity of the containers involved, the nature of the problem (e.g., spill, leak), and any known dangerous properties of the materials.

The first-arriving unit approaching the incident should use caution, approach from upwind and upgrade of the incident, establish Incident Command, and begin a size-up of the situation. The purpose of the size-up by the first-in company is to determine the nature and severity of the HAZMAT incident and formulate an initial Incident Action Plan (IAP). While it may be necessary to take immediate action to make a rescue or evacuate an area, any action should be taken with an awareness of the risk to District personnel and making appropriate use of available protective equipment. It is important to avoid the premature commitment of personnel to potentially hazardous locations. In some cases, isolating the incident and denying entry until more resources arrive may be the safest approach.

In assessing the incident, all available references should be used to determine the hazards that are or potentially could be present. These references may include but are not limited to the U.S. Department of Transportation (DOT) Emergency Response Guidebook, the National Institute for Occupational Safety and Health (NIOSH) Pocket Guide to Chemical Hazards, Safety Data

Hazardous Materials Response

Sheets (SDS), HAZMAT business plans, shipping papers, National Fire Protection Association (NFPA) placards, U.S. DOT placards, and United Nations substance identification numbers. Other sources of information may be available, such as the Chemical Transportation Emergency Center (CHEMTREC®), facility personnel, District specialists, or manufacturers of the materials involved.

The hazards presented by a HAZMAT incident may change significantly as the materials interact with other materials, the surrounding environment, and the actions taken by responders. Responders should consider site topography, surroundings, other potential hazards, and prevailing weather conditions. The initial perimeter established for the incident may need to be expanded to establish the appropriate control zones for the response (e.g., exclusion zone, contamination reduction zone, support zone).

318.4 INCIDENT ACTION PLAN

Best Practice

The primary goal of the IAP will be to protect the safety of the public and responders. The initial IAP should focus on identifying a safe approach for other arriving units, determining the type of hazard and the scope of the incident, isolating the area and denying entry to the public, determining incident-specific personal protective equipment (PPE), and initiating notifications. The initial IAP may be a written document or may be notes kept and controlled by the Incident Commander (IC). The initial IAP should include the following minimum information:

- (a) Incident name, agency or unified command, and command post location.
- (b) Information for responding units on the best route of travel, staging locations, and minimum isolation distances to maintain the safety of responding members.
- (c) The information available on the products involved or an indication that the products are not yet known.
- (d) The incident control objectives and goals.
- (e) An incident site safety plan and designation of an Incident Safety Officer.
- (f) A communications plan including radio frequencies and contact telephone numbers.

When a HAZMAT incident response will be prolonged and will extend beyond an initial operational period, a written IAP should be developed. The written IAP should utilize standard NIMS/ICS forms that may include but are not limited to:

- ICS-201 Incident Briefing.
- ICS-202 Incident Objectives.
- ICS-203 Organization Assignment List.
- ICS-204 Assignment List.
- ICS-205 Incident Radio Communications Plan.
- ICS-206 Medical Plan.
- ICS-207 Incident Organization Chart.

Hazardous Materials Response

- ICS-208 Safety Message/Plan.

318.5 RESOURCE CONSIDERATIONS

Best Practice

Most HAZMAT incidents will require the IC to request additional resources in order to implement the IAP and safely mitigate the hazard.

The response to a HAZMAT incident may require numerous specialized resources to achieve incident stabilization and return to normal operations. The IC should consider involving:

- (a) Specialized HAZMAT teams at the technician and/or specialist levels for assistance with mitigating the release of material. Teams may be operated by local or regional fire agencies, military, or private industry.
- (b) Specialized operators or contractors to address post-response mitigation, removal, cleanup, and required disposal of material.
- (c) Local law enforcement for assistance with scene security and evacuation, if necessary.
- (d) Activation of local, regional, or Utah HAZMAT emergency response teams for assistance.
- (e) United States Coast Guard assistance for spills affecting waterways.
- (f) Public works and road departments for diking, diversion, or other activities.

Resources shall be coordinated using NIMS/ICS as the response is reinforced. It is important that duties assigned to personnel are suitable for their level of training. It is also important to consider the limitations of available PPE and the limitations of chemical detection or monitoring equipment on hand when preparing to commit personnel to a potentially hazardous area.

318.6 NOTIFICATIONS

Best Practice

Managing the response to a HAZMAT incident may involve required notifications to various local, regional, state, or federal agencies. ICs should consider notifying the following agencies when applicable or required:

- (a) The public, media, and other affected entities, such as schools and businesses
- (b) Adjoining jurisdictions that may be impacted by incident activities
- (c) Local and regional elected officials and emergency management personnel
- (d) Utah DEM
- (e) Utah State Fire Marshal's Office Hazardous Materials Section
- (f) Utah Department of Health (UDOH)
- (g) Utah Department of Environmental Quality (DEQ)
- (h) Utah Department of Transportation (UDOT)
- (i) Utah Highway Patrol (UHP)

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- (j) United States Coast Guard National Response Center

Fire Inspections

400.1 PURPOSE AND SCOPE

Best Practice

This policy provides guidance for the enforcement of fire codes through periodic inspection within North Summit Fire District's jurisdiction.

400.2 POLICY

State

The North Summit Fire District is committed to improving public safety through the enforcement of building standards relating to fire and public safety as adopted by Utah and known as the State Fire Code, and any other regulations or ordinances that have been formally adopted by the Utah State Fire Marshal or the District for the prevention of fire or the protection of life and property against fire (Utah Code 15A-5-103).

400.3 RESPONSIBILITIES

State

The Fire Chief or the authorized designee shall develop a periodic inspection program based on the risks to life and property for occupancies within the North Summit Fire District's jurisdictional boundaries. The inspection program will comply with the Utah State Fire Code and any local amendments or ordinances specific to the District. The District fire inspection program will be administered by the Fire Prevention Division under the responsibility of the North Summit Fire District Fire Marshal (Utah Code 53-7-104).

400.4 INSPECTION PROGRAM GUIDELINES

Best Practice MODIFIED

The Fire Chief [and](#)/or Fire Marshal should develop an inspection program based on community risk reduction through education and enforcement. Inspections should be identified by risk, hazard, occupancy, frequency, and required state law and local code or ordinance.

The District shall conduct fire inspections in compliance with the Utah State Fire Code and any other applicable District law or local ordinance.

400.5 HAZARDOUS OCCUPANCIES

State

Facilities that handle, store, or use hazardous materials should be inspected for compliance with the Fire Code or local codes or ordinances. See the Hazardous Materials Disclosures Policy regarding hazardous materials submittal and inspections.

400.6 RIGHT OF ENTRY

State

Fire Inspections

If a building or premise to be inspected is occupied, the inspector shall present credentials to the occupant and request entry. If the building or premise is unoccupied, the inspector shall first make a reasonable effort to locate the owner or other person having charge or control of the building or premise and request entry (Utah Code 53-7-209).

If no permission to enter is granted, the inspector should work with legal counsel to secure entry in a manner provided by law, such as obtaining an administrative search warrant.

400.7 INSPECTION FEES

Federal **MODIFIED**

The District may charge any fire inspection fees adopted by the District. The fee assessed shall not exceed the estimated reasonable cost of providing the service for which the fee is charged. [A permit shall not be issued until the fees have been paid, nor shall an amendment to a permit be released until the additional fee, if any, has been paid. \[IFC 107.1\]](#)

400.7.1 RE-INSPECTION FEES

Best Practice

If a violation is discovered during an inspection, the follow-up inspection to ensure the corrections have been made should be conducted at no cost to the owner or occupant. Should the owner or occupant fail to comply with inspection requirements on the follow-up visit and an additional visit is required, a fee as adopted by the District may be assessed.

Permits

401.1 PURPOSE AND SCOPE

State

The purpose of this policy is to provide guidance for issuing permits that are required by the Utah State Fire Code and local ordinances (Utah Code 15A-5-103).

401.2 POLICY

State

In order to provide for the safety of the community, it is the policy of the North Summit Fire District that permit requirements are appropriately observed and enforced (Utah Code 53-7-104).

401.3 PERMIT PROCESS

State MODIFIED

A list of permits requiring approval should be available to the public on the District website, located at [North Summit Fire Website](#). The District shall provide adequate guidance to assist the public in obtaining approval for a particular permit.

A plan review shall be conducted prior to permit issuance.

A permit does not constitute authority to violate, cancel or set aside any of the provisions of the Utah State Fire Code or other applicable local regulations.

401.3.1 PERMIT APPLICATIONS

State

Applications for permits should be submitted to the North Summit Fire District Fire Marshal or the authorized designee and should include adequate documentation of the intent to comply, including, but not limited to:

- A site plan showing the location of storage, use, handling or processes associated with the permit.
- The floor plan approved by the North Summit Fire District depicting the storage of hazardous materials and the use of equipment or processes, including proof of compliance with all applicable codes and standards.
- A current hazardous materials emergency plan, if applicable.
- A chemical classification inventory, if applicable.

401.3.2 PERMIT FEES

Best Practice

Permit fees should be collected at the time of application. The fees are established by the District governing body and are applicable to each permit application.

Permits

401.3.3 PERMIT ISSUANCE

Best Practice

A permit may be issued for a specific or an indefinite period of time, depending on the circumstances. A permit may be extended upon showing good cause if the permittee applies for an extension in writing before the expiration of the permit. A permit is not transferable. Any change in ownership, operation, occupancy or use shall require a new permit.

Construction permits shall automatically become invalid unless the work authorized by such permit is commenced within 180 days after its issuance. If the work is suspended or abandoned for a period of 180 days after the time the work is commenced, the permit shall become invalid.

When applicable, all permits shall bear the signature of the Fire Chief or the authorized designee and contain a general description of the operation or occupancy and its location.

401.4 SITE REQUIREMENTS

State

Permits should be posted in a visible location at the permitted premises or in a location approved by the Fire Chief or the authorized designee. Permits are subject to inspection at any time by any firefighter acting in an official capacity pursuant to the Utah State Fire Code.

401.5 SUSPENDED OR REVOKED PERMITS

Best Practice

Permits may be suspended or revoked any time it is determined that:

- The permit is being used by someone other than the person who was issued the permit.
- The permit is being used at a location other than the permitted location.
- Any condition of the permit has been violated.
- The work being performed is out of compliance with applicable code requirements.
- The permit was obtained by the use of false statements on the application.
- The issuance of the permit was an error or in violation of a regulation, code or law.

401.6 REQUIRED OPERATIONAL PERMITS

State

Permits are generally required for all items, locations and activities as described in the Utah State Fire Code.

Fire Investigations

402.1 PURPOSE AND SCOPE

Best Practice

The purpose of this policy is to ensure that all fires and explosions responded to by the North Summit Fire District and occurring within this jurisdiction are investigated and properly documented in accordance with state and federal laws as well as national standards.

402.2 POLICY

Best Practice

It is the policy of the North Summit Fire District to promptly investigate the cause, origin, and circumstances of fires and explosions occurring in this jurisdiction that involve the loss of life or injury to a person, or the destruction of or damage to property.

402.3 RESPONSIBILITIES

Best Practice

The Fire Chief has overall responsibility for fire investigations. The Fire Marshal is responsible for management of the fire investigations program. The Incident Commander (IC) of each incident is responsible for ensuring that each fire is investigated for origin and cause.

402.4 PRELIMINARY INVESTIGATION

Best Practice

The first-in Captain should conduct a preliminary investigation of each fire or explosion to identify the origin, cause, and circumstances. The Captain will notify the IC of the results of the preliminary investigation.

If the origin of a fire or explosion appears to be suspicious, the IC should take immediate charge of all physical evidence relating to the fire or explosion, coordinate with investigators, and contact local law enforcement.

The IC is responsible for determining when fire investigators, fire investigators with arrest authority, or sworn law enforcement investigators, from this or another agency, are appropriate to investigate an incident.

The immediate response of an appropriate investigator should be requested when any of the following circumstances exist:

- (a) Major or unusual fires that exceed the investigative abilities of a Captain
- (b) Any fire resulting in a major injury or death
- (c) Incidents involving special circumstances, such as an especially high dollar loss, extensive damage, political sensitivity, or any other circumstance deemed appropriate by the Battalion Chief or Officer in Charge

Fire Investigations

- (d) Arson and/or incendiary devices are involved, or the origin of the fire is otherwise suspicious
- (e) There has been an explosion
- (f) There is evidence or suspicion that a crime has occurred in connection with a fire or explosion
- (g) A fire has been started by a juvenile
- (h) Any illegal activity that potentially could cause a fire and/or explosion has occurred

402.5 FIRE INVESTIGATORS

Best Practice

Fire investigators assigned to an incident are responsible for pursuing the investigation through its completion and providing complete written documentation.

In cases where a fire investigator reasonably believes that arson or an unlawful act may be involved in a fire, the investigator should consult with the Fire Marshal and request the assistance of an investigator with arrest authority, if appropriate.

402.5.1 FIRE INVESTIGATOR QUALIFICATIONS

State

Fire investigators should:

- (a) Meet the job performance requirements of the National Fire Protection Association's (NFPA) standards for fire investigators.
- (b) Complete the certification requirements of the Utah Fire Service Certification System for Fire Investigator.
- (c) Comply with all federal and state statutory and constitutional investigatory requirements, including limitations on searches and seizures.

402.6 FIRE INVESTIGATORS WITH ARREST AUTHORITY

Best Practice

Fire investigators with arrest authority assigned to an incident are responsible for conducting a thorough investigation and providing complete written documentation.

Fire investigators who reasonably anticipate an arrest in connection with an investigation should arrange to have a law enforcement officer from a law enforcement agency with jurisdiction present. If a law enforcement officer is unavailable to assist with an arrest, investigators should consider delaying the arrest until such time that law enforcement can be present.

In situations where a fire investigator finds it necessary to arrest a suspect without the assistance of local law enforcement, the investigator should notify the local law enforcement agency that an arrest is being made and, if possible, arrange to have another investigator from this District present on the scene at the time of arrest.

Fire Investigations

402.6.1 FIRE INVESTIGATORS WITH ARREST AUTHORITY QUALIFICATIONS

State

In addition to the general qualifications for fire investigators required by this policy, fire investigators with arrest authority shall be sworn and certified as a peace officer who has completed an approved basic training program approved by the state Fire Marshal.

Before the investigator may exercise peace officer authority, the Fire Chief must certify to the state Fire Marshal that the investigator has completed the approved basic training program for special function officers (Utah Code 53-13-105).

402.7 DUTY FIREARMS

Best Practice

Fire investigators with arrest authority who are authorized to carry a firearm shall also comply with the Duty Firearms and Use of Force Policy.

402.8 EQUIPMENT

Best Practice

The fire investigator's vehicle should be stocked with the following equipment to help investigate fire cause, origin, and circumstance:

- Digital camera
- Spare batteries
- Voice recording device and spare media
- Fire investigator toolbox
- Shovels, rake, broom, and sifter
- Disposable latex evidence collection gloves
- Evidence collection markers and labels for canisters

402.8.1 USE OF PROTECTIVE GEAR

Best Practice

Fire investigators are responsible for using personal protective equipment (PPE) and respiratory protection appropriate for the conditions present at an investigation scene.

When entering any fire scene during the fire, before or during overhaul, or when there is a chance of reignition, fire investigators shall wear full structural PPE and self-contained breathing apparatus (SCBA).

See the Respiratory Protection Program Policy and the Personal Protective Equipment Policy for additional guidance.

402.8.2 LOGBOOK

Best Practice

Fire Investigations

Each investigator should maintain a logbook of field training, continued professional training hours, and investigative experience. The purpose of this log is to assist in establishing the member as an expert witness in court appearances.

402.9 INCIDENT REPORTS

Best Practice

To ensure District incidents are documented in the National Fire Incident Reporting System (NFIRS), investigators should complete and submit a report to the Fire Marshal for each investigation conducted. All areas of the report are to be filled out, and when an item is not applicable, N/A is to be placed in the box. For additional information, see the National Fire Incident Reporting System (NFIRS) Policy.

The Fire Marshal is responsible for reviewing and approving the investigative reports.

Code Enforcement

403.1 PURPOSE AND SCOPE

State

The purpose of this policy is to establish the process by which the North Summit Fire District will enforce the Utah State Fire Code and District fire and life-safety codes during inspections (Utah Code 53-7-104).

403.2 POLICY

Best Practice

It is the policy of the North Summit Fire District to use inspections to help reduce the risk of injury or death due to fire and life-safety code related violations, and increase the safety of building occupants, the community and emergency responders.

403.3 PROCEDURE

State

The North Summit Fire District may issue correction notices when violations of the Utah State Fire Code or local ordinances are found during fire and life-safety inspections.

Any violation determined by an inspector to pose an immediate fire danger or threat to life-safety should be referred to the Fire Marshal as soon as practicable.

403.3.1 INITIAL INSPECTIONS

Best Practice

An initial inspection should be made to determine if any violations exist and identify the code sections violated. A notice of correction should be issued for violations. The written correction notice should describe the conditions deemed to be unsafe, identify the code section violated and, when compliance is not immediate, specify a time for re-inspection, typically to occur within two weeks. This time frame may be adjusted at the inspector's discretion and based on the type of violation.

All inspections, meetings and telephone conversations should be documented and an inspection report completed including names, telephone numbers, dates, violations and any other pertinent information related to the inspection. All documentation should be maintained in an inspection file.

A copy of the inspection report should be left with the responsible party.

403.3.2 RE-INSPECTIONS

Best Practice

Violations that pose an immediate hazard to life or property should be corrected before the inspector leaves the premises (e.g., a required exit being chained or locked).

All other violations should be corrected by the date identified in the correction notice for re-inspection.

Code Enforcement

Generally, no more than two re-inspections should be conducted before escalating the process as provided in this policy.

403.3.3 TIME EXTENSIONS FOR COMPLIANCE

Best Practice

An inspector may extend the compliance period if reasonable progress is being made toward correcting the violation, or if a plan is established for completion and life and property are not being compromised. Extensions should only be granted when the inspector believes there is a high probability of obtaining complete compliance. The inspector may request the responsible person submit a statement in writing, detailing the reason for the extension and the new compliance date.

403.3.4 FINAL NOTICES

Best Practice

A final notice may be used as the last warning notice issued prior to civil or criminal action. A final notice is not required prior to initiating legal action.

A final notice of violation should be provided to the violator by certified mail return receipt requested and should:

- Set a date by which the violator must correct the violation.
- Notify the violator of the date of the final re-inspection to verify code compliance prior to initiating legal action.

403.3.5 ADMINISTRATIVE CITATION

Best Practice

If compliance is not achieved by the time of the final re-inspection, an administrative citation may be issued. An administrative citation informs a business that repeated attempts to gain compliance for outstanding violations were unsuccessful. The administrative citation may be delivered to the business owner in person or mailed via certified mail return receipt requested.

Administrative citations may continue to be issued until compliance is achieved or the matter is referred to legal counsel for legal action. Copies of all administrative citations should be sent to the District's legal counsel as soon as practicable.

Patient Care Reports

500.1 PURPOSE AND SCOPE

State

The purpose of this policy is to establish the requirements for documentation of patient responses, and the related document distribution, storage, and disclosure (UAC R911-7-1 et seq.).

500.1.1 DEFINITIONS

State

Definitions related to this policy include:

Patient - A person who meets any one of the following criteria:

- Has a chief complaint
- Has obvious symptoms or signs of injury or illness
- Has been involved in an event that the average first responder would believe could cause an injury
- Appears to be disoriented or to have impaired psychiatric function
- Has evidence of suicidal intent
- Is deceased

Patient Care Report (PCR) - A record of the response by each responding Emergency Medical Services (EMS) provider unit to each patient during an EMS incident (UAC R911-1-200).

Patient refusing medical care against medical advice (AMA) - A competent patient who is determined by an Emergency Medical Technician (EMT) or base hospital to have a medical problem that requires the immediate treatment and/or transportation capabilities of the EMS system, but who declines medical care despite being advised of their condition and the risks and possible complications of refusing medical care.

500.2 POLICY

Best Practice

It is the policy of the North Summit Fire District to follow the patient documentation and distribution guidelines developed by the local or regional authority or the Utah Bureau of Emergency Medical Services.

500.3 PROCEDURE

State

A PCR should be completed for every patient response. This includes a patient who is released at the scene, meets the criteria for pronouncing death in the field, is an inter-facility transport, or is involved in a multi-casualty incident.

Patient Care Reports

A PCR and a patient release form should be completed for all patients who refuse evaluation, treatment, and/or transport.

Contact with persons who do not meet the criteria required for the definition of a patient should be recorded in the District's incident reporting system to document that assistance was offered and declined. The District's reporting requirements concerning personal identification information, including a person's name, age, date of birth, and sex, should be followed.

The PCR should be completed as soon as possible after providing patient care. A report of the patient's status, including information critical to the ongoing care of the patient, shall be provided to the receiving hospital upon transfer (UAC R911-7-2).

An EMS evaluation, performed minimally by a qualified District member, may or may not be required for non-medical requests for assistance, such as "service calls" or "back-to-bed" requests. A PCR shall be completed for any person meeting the patient criteria.

For continuous quality improvement, the local or regional EMS authority, District EMS supervisors, and the designated hospital receiving center shall review their copies of the PCR and discuss any areas of concern.

500.4 DISTRIBUTION OF PCR COPIES

State **MODIFIED**

- (a) If a patient is transported to a licensed acute care facility or a specialty hospital with an emergency department, copies should be distributed as follows:
 - 1. Copy retained by the District
 - 2. Copy left at the facility or hospital
 - 3. Copy sent to the local EMS authority
- (b) If a patient is not transported or refuses care and leaves AMA, copies should be distributed as follows:
 - 1. Copy retained by the District
 - 2. Other copies sent per local EMS authority policy
- (c) If a patient is declared dead and is not transported, copies should be distributed as follows:
 - 1. Copy retained by the District
 - 2. Copy left with the body for the coroner's office
 - 3. Copy sent to the local EMS authority
 - 4. Other copies sent per local EMS authority policy
- (d) NEMSIS EMS incident data elements shall be submitted for each PCR within seven days of the EMS incident (UAC R911-7-2).

Patient Care Reports

500.5 PCR STORAGE

Best Practice

PCRs shall be maintained and secured in a manner consistent with the Patient Medical Record Security and Privacy Policy.

Medical Supplies

501.1 PURPOSE AND SCOPE

Best Practice

The purpose of this policy is to establish a Periodic Automatic Replenishment (PAR) level system for medical supply inventories for the safety and welfare of patients and employees. Adequate PAR levels for ordering medical supplies assist with budgeting and waste management. Adherence to this policy is intended to prevent the depletion of protective supplies for employees and supplies for the treatment of patients, while reducing inventory overstock and the inability to obtain critical supplies.

For controlled medications see the Controlled Substance Accountability Policy.

501.2 POLICY

Best Practice

It is the policy of the North Summit Fire District to use a PAR level system for medical supply inventories.

501.3 PROCEDURES

Best Practice

The PAR level should be based on normal inventory usage for a two-week period at career stations and a four-week period at reserve stations. The PAR level should include all medical supplies maintained in fire stations and carried on apparatus.

A delivery schedule for supplies should be created and distributed to all stations one month in advance.

501.3.1 MEDICATIONS

Best Practice

The following guidelines should be observed with regard to medication storage, security, distribution and disposal:

- (a) Only District members who have received medication distribution training may handle and distribute medications.
- (b) Medications shall be kept secure from unauthorized handling or use. No medications shall be sent via the District mail system.
- (c) All medications should be inventoried daily by the designated paramedic for each facility or station.
- (d) All medications should be kept in their original packaging.
- (e) All medications shall be protected from high temperatures by utilizing shaded areas for prolonged parking of vehicles.

Medical Supplies

- (f) Medication packaging shall be protected to ensure the integrity of the medication and that the lot numbers and expiration dates are legible.
- (g) Medications with expiration dates indicating only a month and year shall be removed from the inventory on the last day of the month shown with the exception of any extensions authorized or permitted by UT Bureau of Emergency Medical Services (BEMS) policy.
- (h) Out-of-date medications should be exchanged for current medications.
- (i) The Emergency Medical Services (EMS) supervisor should provide direction to members regarding the disposition of medications that are subject to product alerts or recalls.

501.4 SUPPLY OVERSTOCK

Best Practice

Overstock should be returned to the supplier. Items should be properly packaged and labeled. A written list of items being returned should be attached to the box or container with the returned items. Do not return individual items that are normally supplied as units in a case, bottle or box.

501.5 BACK-ORDERED SUPPLIES

Best Practice

If the supplier is unable to fill an order, the supplier may indicate that the supply is back-ordered. Do not continue to order items that are on back-order. Any questions concerning back-ordered supplies should be directed to the supplier. If the needed items cannot be obtained in the normal manner, contact the EMS supervisor.

Patient Refusal of Pre-Hospital Care

502.1 PURPOSE AND SCOPE

Best Practice

This policy establishes guidelines to be followed any time a patient refuses pre-hospital emergency medical evaluation, care, and/or transport.

502.1.1 DEFINITIONS

State

Definitions related to this policy include:

Competent - The patient has the capacity to understand the circumstances surrounding their illness or impairment and the risks associated with refusing treatment or transport. The patient is alert and their judgment is not significantly impaired by illness and/or injury. Mental illness, drugs, alcohol intoxication, or physical/mental impairment may significantly affect a patient's competence. Patients who have attempted suicide or verbalized suicidal intent, or if other factors lead pre-hospital care personnel to suspect intent, should not be regarded as competent.

Emancipated minor - An individual under the age of 18 years who is married, on active duty in the military, or 16 years of age or older and emancipated by declaration of a court (Utah Code 80-7-102).

Mental health hold - A patient who due to mental illness may pose a substantial danger to themselves or others and who may be subject to involuntary commitment pursuant to Utah Code 26B-5-331.

Patient - A person who meets any one of the following criteria:

- Has a chief complaint
- Has obvious symptoms or signs of injury or illness
- Has been involved in an event that the average first responder would reasonably believe could cause an injury
- Appears to be disoriented or to have impaired psychiatric function
- Has evidence of suicidal intent
- Is deceased

Patient refusing medical care against medical advice (AMA) - A competent patient who is determined by an Emergency Medical Technician (EMT) or base hospital to have a medical problem that requires the immediate treatment and/or transportation capabilities of the Emergency Medical Services (EMS) system, but who declines medical care despite being advised of their condition and the risks and possible complications of refusing medical care.

502.2 POLICY

Best Practice

Patient Refusal of Pre-Hospital Care

It is the policy of the North Summit Fire District that a Patient Care Report (PCR) and a patient release form be completed any time a patient refuses emergency medical evaluation, care, and/or transportation.

502.3 PROCEDURE

Best Practice

In the pre-hospital setting of the sick and injured patient, these guidelines may be interpreted and applied broadly. The EMT should err on the side of providing patient care, even if the patient is later found to have been competent to refuse care. Patients who likely have a serious medical problem should be evaluated more carefully for their decision-making capacity.

- (a) A competent adult or an emancipated minor has the right to determine the course of their own medical care and shall be allowed to make decisions affecting their medical care, including the refusal of care.
- (b) Spouses or relatives, unless they are a legal representative, cannot necessarily consent to the refusal of care for their spouse or relative. They may provide insight into what an incompetent relative would desire and may be used as surrogates for decision-making after an incompetent patient enters the hospital. Patients less than 18 years old must have a parent or legal representative present to refuse evaluation, medical care and/or transport unless they are an emancipated minor. The parent or legal representative must be competent to make this decision. If the parent or legal representative's decision seems to grossly endanger the minor or the parent or legal representative does not appear to be competent, the EMT should make contact with online medical control for further guidance.
- (c) The EMT must evaluate and document the patient's ability to comprehend and whether their ability to do so is impaired by the medical condition. The EMT should assess the patient with particular attention to:
 - 1. The patient's complaint or the reason for the call.
 - 2. Any important circumstances surrounding the call for assistance.
 - 3. Significant patient medical history.
 - 4. Complete physical assessment, including vital signs and mental status.
 - 5. Signs of drug and/or alcohol use/intoxication and physical or mental conditions affecting judgment, such as injury, developmental disability, or mental illness. Examples of conditions affecting the patient's decision-making capacity include but are not limited to a significantly altered level of consciousness or blood pressure, hypoxia, or severe pain.
- (d) The EMT should establish to the best of their ability what treatment the patient requires and the potential risks/consequences if the patient refuses care, and should communicate to the patient the benefits and risks of the proposed medical care or transport.
- (e) If the patient refuses treatment or transport and the EMT believes the patient is competent, the EMT should make reasonable efforts to ensure that the patient

Patient Refusal of Pre-Hospital Care

understands the risks and consequences of refusing medical attention and to understand why the patient is refusing care. The EMT should present to the patient alternatives to obtaining care, transport or modification of services offered, and attempt to overcome the patient's objections, if reasonable. Any evaluation, including base hospital contact, should be thoroughly documented for conditions the EMT believes are potentially serious.

- (f) Online medical control should be contacted regarding any patient exhibiting symptoms meeting the base hospital criteria for treatment and transport. If the patient refuses treatment and/or transport and there is some question on the part of field personnel as to the capacity of the patient, online medical consultation should be obtained prior to leaving the scene.
- (g) A patient who meets the criteria for release at the scene may be released by an EMT. However, the patient should be advised, if applicable, to seek alternate medical care. If the patient requires additional medical advice, online medical control should be contacted.
- (h) When a patient exhibits signs of being a danger to themselves or others, is gravely disabled, or cannot care for themselves and cannot be treated and/or transported, the EMT should notify the proper law enforcement authorities who may take the patient into custody or obtain a temporary commitment and transport the patient to a designated facility. The EMT should remain with the patient until the proper authorities have made a determination regarding the hold. Patients on a mental health hold cannot be released at the scene.
- (i) If the base hospital and/or the EMT determine that the patient is not competent to refuse evaluation or transport, the following alternatives exist:
 - 1. The patient should be transported to an appropriate facility under implied consent. In this case a mental health hold is not necessary.
 - 2. If the base hospital determines it is necessary to transport the patient against their will and the patient resists or the EMT believes the patient will resist, the EMT shall call for law enforcement assistance in transporting the patient. Law enforcement may consider the placement of a mental health hold on the patient.
 - 3. At no time are members to put themselves in danger by attempting to transport or treat a patient who refuses treatment. At all times, good judgment should be used and appropriate assistance obtained.

502.4 DOCUMENTATION

Best Practice

The EMT should document the following for all patients who refuse medical care AMA:

- (a) All relevant patient medical history and assessment
- (b) A description of the patient that clearly indicates their decision-making capacity
- (c) Reasons given why the patient refused care, treatment, or transport
- (d) A statement that the patient was advised of the risks/consequences of refusing medical attention and that they acknowledged understanding those risks

Patient Refusal of Pre-Hospital Care

- (e) Any alternatives that were presented to the patient
- (f) A description of online medical control contact, including information given and received

After advising the patient and any associated witnesses concerning the consequences of refusing medical care, the EMT should obtain the signature of the patient and one witness on the patient release form. Preferably the witness should be a member of the patient's family, if available at the scene.

If the patient is a minor, the parent or legal guardian should sign the patient release form.

If the patient refuses to sign the patient release form, that fact should be documented on the form. The release should include the District-specific incident number, the signature of the field personnel, and that of any witnesses.

A PCR for a patient refusing care shall be reviewed by the EMS supervisor to ensure compliance with this policy. The patient release form and copy of the PCR should also be sent to the off-line medical control physician for review.

Advance Health Care Directives

503.1 PURPOSE AND SCOPE

State MODIFIED

This policy identifies the circumstances and types of documents or items required for District Emergency Medical Services (EMS) members to withhold or withdraw resuscitative or life-sustaining measures based on an [Physician](#) Order for Life-Sustaining Treatment (Utah Code 75A-3-106; UAC R432-31-1 et seq.).

Nothing in this policy should be interpreted to limit EMS members from relieving an airway obstruction.

503.1.1 DEFINITIONS

State MODIFIED

Definitions related to this policy include:

[Physician](#) Order for Life Sustaining Treatment (**POLST**) - An order related to life sustaining treatment, on a form designated by the Utah Department of Health and Human Services, that gives direction to health care providers, health care facilities, and EMS providers regarding the specific health care decisions of the individual to whom the order relates (Utah Code 75A-3-101).

An **POLST** may specify the level of life sustaining care to be provided to the patient or direct that life sustaining care be withheld or withdrawn from the individual (Utah Code 75A-3-106).

An **POLST** can be evidenced by a Department of Health and Human Services-approved bracelet or necklace (UAC R432-31-9).

503.2 POLICY

Best Practice

It is the policy of the North Summit Fire District that EMS members honor Orders for Life Sustaining Treatment.

503.3 PROCEDURES

Best Practice MODIFIED

The following guidelines should be used by members who are presented with a legitimate **POLST**:

- (a) All EMS members shall honor an **POLST** when it can be reasonably established that the patient is the subject of the order, including the presence of an approved bracelet or necklace.
- (b) All patients with an **POLST** should receive the level of medical intervention indicated on the order (e.g., full treatment, limited additional interventions, comfort measures).
- (c) An **POLST** shall be disregarded if the patient requests resuscitative measures.

Advance Health Care Directives

- (d) When EMS members honor an **POLST**, they should note on the Patient Care Report (PCR) that an **POLST** was presented and honored and shall document the circumstances surrounding the order on a PCR.
- (e) Online medical control contact should be consulted and resuscitation initiated:
 - 1. If there are any questions concerning the validity of an **POLST**.
 - 2. If an **POLST** is incomplete or not signed.
 - 3. When a document other than those noted in this policy is presented.
 - 4. Any time EMS members have concerns or require assistance.
- (f) Patients who are in cardiopulmonary arrest and who have an **POLST** directing life sustaining care to be withheld or withdrawn should not be transported. EMS members shall contact local law enforcement and/or the coroner's office to report the death and should support family members on-scene, as appropriate.
- (g) Patients with an **POLST** directing life sustaining care to be withheld or withdrawn and who decline transport to the hospital, including patients for whom transport is declined on their behalf, should not be transported. EMS members should make reasonable efforts to preserve the patient's privacy, dignity, and comfort before leaving the scene.
- (h) If a patient with an **POLST** is transported to a hospital, the following shall apply:
 - 1. The **POLST** shall be honored during transport of the patient.
 - 2. The **POLST** shall accompany the patient.
 - 3. If necessary, the health care agent (if applicable) should accompany the patient to the hospital.

Latex Sensitivity

504.1 PURPOSE AND SCOPE

Best Practice

The purpose of this policy is to establish procedures to ensure that all District members are aware of the potential for severe allergic reactions caused by contact with products containing latex and how to mitigate patient exposure.

504.1.1 DEFINITIONS

Best Practice

Definitions related to this policy include:

Latex sensitivity - Allergic reactions after exposure to products containing latex/natural rubber (e.g., balloons, rubber gloves, other consumable medical products or medical devices).

504.2 POLICY

Best Practice

It is the policy of the North Summit Fire District that members shall take precautions to minimize latex exposure any time members are advised that a patient is known to have a latex sensitivity. When the use of a latex product is unavoidable, reasonable precautions shall be taken to prevent a latex sensitivity reaction in a patient.

504.3 PROCEDURE

Best Practice

If treating members are aware that a patient has a history of latex sensitivity, efforts to minimize exposure should be initiated. If a patient begins exhibiting signs of latex sensitivity or anaphylaxis, members should immediately initiate medical treatment and make reasonable efforts to minimize additional exposure to latex products.

If time permits before loading the patient into the ambulance, the interior surfaces should be wiped down with a wet towel to reduce the presence of powder that contains latex proteins. All members wearing latex gloves should cover them with a pair of non-latex gloves. Latex gloves should not be removed as this can put dust or powder in the ambient environment for up to five hours. Members should provide a barrier between equipment and the patient by covering all latex-containing medical devices with stockinet or plastic wrap.

All nonessential equipment should be stored in closed compartments. Care should be taken to remove or replace latex-containing caps from medication vials and to keep intravenous (IV) ports covered to prevent injections. Latex dressings and IV tourniquets should not be used.

Treating members should notify the designated hospital receiving center that a latex-sensitive patient is en route to the facility, and should document the patient's sensitivity and patient management (e.g., Nitrile gloves, plastic wrap on blood pressure cuff) on the Patient Care Report

Latex Sensitivity

as appropriate. This information should also be communicated to the hospital staff immediately upon arrival.

Field units should strive to carry the following latex-free equipment:

- Nitrile exam gloves
- Airway equipment (e.g., bag valve masks, oxygen masks, nasal cannulas, oral airways, suction catheters)
- Plastic or soft cloth tape
- Stockinet or plastic wrap to use as a barrier on medical equipment (e.g., blood pressure cuff, splints, stethoscopes)

Care should be taken to avoid storing uncovered latex gloves with other medical and/or airway equipment.

Controlled Substance Accountability

505.1 PURPOSE AND SCOPE

Federal

The purpose of this policy is to establish the procedures for the supply, use and accountability of controlled substances administered by the North Summit Fire District.

505.1.1 DEFINITIONS

Best Practice

Definitions related to this policy include:

Controlled substance - A drug, substance or immediate precursor listed in any schedule of the federal Controlled Substances Act, including any substance added or rescheduled by the Utah Controlled Substances Advisory Committee.

Unit - Any ambulance, transport unit or first response engine or truck company.

505.2 POLICY

Federal

It is the policy of the North Summit Fire District 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; Utah Code 58-37-1 et seq.).

505.3 STORAGE AND INVENTORY

Federal **MODIFIED**

To prevent the unauthorized access of controlled substances during an incident, the controlled substances must either be in direct possession of a paramedic/AEMT or locked in a secured area.

The Emergency Medical Services (EMS) supervisor will determine the locking mechanism to be utilized on vehicles that contain controlled substances. Controlled substances should be secured in the locked mechanism any time the unit is parked and unattended.

All personnel authorized to handle controlled substances shall follow this procedure unless prior written permission to deviate is obtained from the EMS supervisor or the authorized designee:

- (a) All controlled substances are to be secured by District members in the designated locking mechanism provided by the District.
- (b) At each shift change, an incoming and outgoing paramedic/AEMT shall, in each other's presence, inspect the quantities, the integrity of the containers and the expiration dates of the controlled substance inventories. Each paramedic/AEMT shall attest to the quantity available by printing and signing his/her full name on a controlled substance daily report entering into district electronic tracking software. At no time shall an individual enter a name or signature on behalf of another person.

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Controlled Substance Accountability

- (c) If the inventory of any controlled substance results in a discrepancy, the paramedics/AEMT must immediately attempt to reconcile the amount missing. If the discrepancy cannot be reconciled, immediate notification shall be made to the Captain, the Battalion Chief or Officer in Charge and the EMS supervisor. The EMS supervisor shall be responsible for the completion and submission of the online DEA Form 106, Report of Theft or Loss of Controlled Substances (21 CFR 1301.76).
- (d) 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. If the outgoing paramedics/AEMT have already left the station, one on-duty paramedic/AEMT and the Captain from the on-duty shift may conduct the inventory and reconciliation process.
- (e) In the event that a paramedic/AEMT works two consecutive shifts on the same unit, the inventory shall be performed by the paramedic/AEMT and witnessed and verified by another paramedic/AEMT assigned to the station, a Captain ~~or an on-duty shift member~~.
- (f) A controlled substance daily report and a controlled substance disposition and restock record shall be maintained on [via district electronic tracking software](#) ~~board all units~~. These documents shall be available for random inspection and review by the EMS supervisor and local, state or federal regulatory representatives to ensure compliance.
- (g) ~~When a controlled substance daily report is completed on the last day of the month, the s from each shift shall review the report for completeness and sign the bottom of the record. After review, the shall forward a copy of the report, along with a copy of the corresponding controlled substance disposition and restock record, to the EMS supervisor as soon as practicable.~~
- (h) A copy of the controlled substance daily report and controlled substance disposition and restock record should be maintained in the station [electronic tracking software files](#).

505.3.1 STANDARD CONTROLLED SUBSTANCE INVENTORY

Best Practice **MODIFIED**

- (a) The standard complement of controlled substances shall be established by the off-line medical control physician.
- (b) Any modification to the standard complement of controlled substances shall be justified and approved by the EMS supervisor, the off-line medical control physician and the Utah Bureau of Emergency Medical Services (BEMS).
- (c) The supply of controlled substances will be obtained from any of the District's automated storage and retrieval units, the District's controlled substances vault or other authorized source.
- (d) Only paramedics/AEMT and EMS supervisors are authorized to remove controlled substances from the automated storage and retrieval unit and the controlled substances vault. A witness (paramedic, [AEMT](#) or other authorized member) is required in order to access the automated inventory control unit or controlled substances vault. When removing controlled substances from any automated

Controlled Substance Accountability

storage and retrieval unit, personnel shall record the following information in the designated fields: Information stored in ~~IQ Technologies as well as~~ the department current Electronic Reporting Software.

1. The patient's first and last name, sex and date of birth (when known)
 2. Unit identification number and Patient Care Report (PCR) number
 3. The incident number
 4. Any additional pertinent information may be entered into comments field
- (e) When a controlled substance is received, the paramedic/AEMT receiving the drug must immediately secure the drug into the locked mechanism on the unit and notify the EMS supervisor.

505.4 CONTROLLED SUBSTANCE ADMINISTRATION AND DOCUMENTATION

Best Practice

MODIFIED

- (a) Only paramedics/AEMTs shall administer controlled substances. Each time a controlled substance is administered to a patient, the drug, dose and administration route shall be documented on the PCR in compliance with the Utah State EMS Protocol Guidelines. In addition, the following information shall be recorded on the controlled substance disposition and restock record:
1. Date of administration
 2. Incident number associated with the event
 3. PCR number
 4. Patient's full first and last name (when known)
 5. Drug and dose administered
 6. Printed first and last name and signature of paramedic who administered the controlled substance
 7. Date and source of the medication resupply
- (b) If the entire amount of a controlled substance is not administered by the transporting paramedic/AEMT, a licensed staff member for the hospital that received the patient shall witness the proper disposal of the remaining amount. The hospital staff member's signature must be obtained on the controlled substance disposition and restock record. If waste of a controlled substance occurs at the incident, another paramedic/AEMT or Captain must witness the waste and sign the record in the PCR.
- (c) When a controlled substance is restocked, the following information shall be entered on the controlled substance disposition and restock record on the line immediately below the corresponding patient information:
1. The date and time
 2. The restock source
 3. The printed full name and signature of the paramedic/AEMT who restocked the controlled substance into the locked mechanism

Controlled Substance Accountability

505.4.1 ADDITIONAL DOCUMENTATION FOR TRANSFERS**Best Practice** **MODIFIED**

If a controlled substance is administered and the care of the patient is transferred to a transporting paramedic/AEMT who resupplies the administering unit, the information listed above must appear on the controlled substance disposition and restock record of the administering and transporting unit that provided the drug for restock, in addition to the unit identification of both the units.

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

505.5 CONTROLLED SUBSTANCE SUPPLY AND RESUPPLY**Federal**

- (a) The EMS supervisor shall submit a completed DEA Form 222 to the designated District supplier to order controlled substances in order to maintain established levels.
- (b) Upon receipt of the controlled substance from the supplier, the EMS supervisor or the designated paramedic 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 EMS supervisor or the designated paramedic will immediately place the controlled substance in the controlled substance vault or automated storage and retrieval unit and ensure that inventory is reconciled with any electronic data files.
- (d) The EMS supervisor or the designated paramedic will inventory the controlled substance vault and any automated storage and retrieval units weekly to ensure the existing inventory is reconciled with any electronic data files. The record of these inventories is to be printed and maintained as provided in the records retention schedule and for a minimum of two years (21 CFR 1304.04).
- (e) Any inventory or reconciliation discrepancies shall immediately be brought to the attention of the Battalion Chief or Officer in Charge and a DEA Form 106, Report of Theft or Loss of Controlled Substances, shall be completed and submitted, if required (21 CFR 1301.76).

505.5.1 UNIT RESUPPLY**Best Practice** **MODIFIED**

If a controlled substance is initially administered from the one unit, the transporting unit or another on-scene District unit may resupply the administering unit on-scene.

The transporting unit or other District unit on-scene shall then be responsible for obtaining the resupply from the District's automated storage and retrieval unit or other authorized supply source.

Controlled Substance Accountability

An administering paramedic/AEMT may opt to obtain the resupply of a controlled substance from the District's automated storage and retrieval unit or other authorized source any time it is operationally appropriate instead of resupplying from the transporting or other on-scene District unit.

Resupply from a non-District unit is not authorized. If the care of a patient is transferred to a non-District unit, the administering paramedic/AEMT will obtain the resupply from the District's automated storage and retrieval unit or other authorized source.

505.6 ACCOUNTING FOR EXPIRED OR DAMAGED CONTROLLED SUBSTANCES

Best Practice **MODIFIED**

Controlled substances due to expire or that are damaged may be replaced as follows:

- Note the expiration date or damage, the date of replacement and the source of restock on the District's controlled substance disposition and restock record [and then need to be destroyed per policy guidelines](#).
- ~~Place the expired drug or damaged container in the supplied envelope and label with the type of drug, dosage, unit identifier and name of the paramedic who returned the drug and the date.~~
- ~~Put the envelope in the locked return drug box to be returned to the designated supplier.~~

This process may also be used to replace controlled substances due to expire.

505.7 ACCOUNTABILITY

Federal

The EMS supervisor should:

- (a) Review the controlled substance daily reports and the controlled substance disposition and restock records monthly for completeness, compliance with established procedure, consistency with the data entered, comparison to the signatures on file and any other issues that may require follow-up or investigation.
- (b) Create, complete, maintain and annually update the District's signature log.
- (c) Randomly inspect controlled substance daily reports and the controlled substance disposition and restock records on units for completeness, compliance with established procedure, consistency with the data entered, comparison to the signatures on file and any other issues that may require follow-up or investigation.
- (d) Ensure copies of controlled substance daily reports and the controlled substance disposition and restock records are maintained as provided in the records retention schedule and for a minimum period of two years (21 CFR 1304.04).
- (e) Notify the responsible Battalion Chief or Officer in Charge of any item that deviates from this policy.