

Snohomish County Fire District 15

7812 Waterworks Road Tulalip WA 98271 (360) 659 – 2416 | (360) 653 – 7387 www.tulalipbayfire.org Ride-Along Program

Thank you for your interest in Tulalip Bay Fire Department's Ride-Along Program. We look forward to providing you an interesting experience. Our aim is to expose you to the wide range of operations handled by your Fire Department. Obviously, we sometimes find ourselves in difficult, if not dangerous situations, however your safety as well as all others involved is the priority. You will be provided a Captain and a "Ride-Along Supervisor" whose responsibility will be to ensure your safety.

This information packet will explain the process of application and some of the safety rules that will ensure a valuable experience. Included in your packet you will find the following:

- 1) Introduction Letter
- 2) Ride-Along Policy
- 3) A Ride-Along Application
- 4) Rider/Confidentiality and Non-Disclosure Agreement
- 5) Participants Waiver, Release and Hold Harmless

Please read carefully all the information provided and complete any written requirements. Pages 4, 5 and 6 should be returned to Tulalip Bay Fire Department.

Tulalip Bay Fire Department

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Thank you once again for your interest. If you have any questions please call the Tulalip Bay Fire Department at (360) 659 – 2416 and request to speak with the "Captain"* or "Ride-Along Coordinator"*.



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RIDE-ALONG POLICY

- A. Application forms may be obtained from the Tulalip Bay Fire Department during regular office hours (Mon through Fri, 9 am 5 pm). Riders must be at least 16 years of age to participate in this program (all under 18 may ride with parent/guardian permission). This age limit will be exempted only for controlled functions (i.e. parades, etc.)
- B. After receiving and completing all forms in the ride along packet, **Riders** should deliver all required documentation (pages 4-6 in this packet) to the Tulalip Bay Fire Department. After receiving the completed forms, a ride along shift will be scheduled. Shifts will be scheduled at least **one week** in advance.
 - 1. All ride time must be scheduled in advance with the Ride-Along Coordinator at the TBFD office during regular office hours (Mon through Fri, 9 am 5 pm).
 - 2. Hours for ride times are limited to **9:00 AM through 6:00 PM**. The Tulalip Bay Fire Chief must approve any additional hours in advance.
 - 3. The shift hours may be restricted due to fire department operational or training needs.
 - 4. Ride times are limited to **five (5) rides** each twelve-month period from the date of your application. Riders are limited to one (1) day per week. Additional ride time must be requested in writing and approved in advance by the Tulalip Bay Fire Chief.
 - 5. Only **one** (1) **Rider per unit** will be allowed.
 - 6. Candidates in hiring process shall have priority in rider assignments.
- C. All **Riders** must follow all guidance given by the Captain or Rider's Supervisor, which will include:
 - 1. Remaining in the fire apparatus until told to do otherwise.
 - 2. Wearing all safety equipment as directed.
 - 3. Not entering any hazardous or restricted area unless accompanied by fire department personnel.
 - 4. Not interfering with operations unless specifically directed to participate under the supervision of the Supervisor.
 - 5. Riders will not be involved in active firefighting operations nor be allowed in any area deemed hazardous by the Supervisor or Incident Commander.
 - 6. No photography or recording devices may be utilized without specific authorization from the ride along supervisor.
 - 7. **Riders** may not enter any private residence, hospital emergency department or other facility without the permission of the ride along supervisor, emergency department staff or facility representative.
 - 8. Under supervision, Riders may assist with routine station and equipment maintenance as directed.



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- 9. All Riders must have completed HIPPA & Disease Prevention Training prior to scheduled ride-along hours.
- D. Riders will be encouraged to remove themselves from any situation where that person is uncomfortable with the graphic or hazardous nature of a scene. The Rider's Supervisor will ensure a safe retreat.
- E. **Riders** must comply with the Ride-Along Program's dress code.
 - 1. The dress code will be strictly enforced. On-duty Tulalip Bay Fire Department personnel will determine if attire is appropriate.
 - 2. The Ride-Along Coordinator has the final authority on the appropriate attire of the Rider.
 - 3. **Riders** must report to the station with clean and neat clothing. Good personal hygiene and grooming are essential.
 - 4. Students will wear the uniform dictated by their affiliating/sponsoring program. At a minimum, (provided by affiliating/sponsoring program) work type pants, shirt and hard-toed shoes will be worn during ride along hours.
 - 5. All other Riders will wear dark slacks, collared shirt and sturdy shoes. No jewelry, no hats, no tee shirts, no shorts, no skirts, no dresses, no high heels, no sandals or beach shoes will be allowed.
 - F. Failure to comply with requests or orders from Rider's Supervisor and/or Captain will result in revocation of rider privileges.

Any exposure to blood-borne or air-borne pathogens must be reported immediately to on-duty Tulalip Bay Fire Department personnel. Tulalip Bay Fire Department personnel will report exposures to the Medical Services Designee and/or the Fire Chief.

- * "Rider's Supervisor" One assigned individual whose responsibility will be to ensure your safety during the scheduled ride along hours. Rider's Supervisor may not be same individual as Captain.
- * "Captain" whose responsibility is to ensure safety of all on-duty Fire Department personnel. Captain acts as Shift Supervisor and assumes the duties as officer in charge if first on scene of emergency. Captain maintains discipline and insures that personnel follow department rules and regulations. Implements department goals and objectives, establishes work priorities, schedules and coordinates work to be accomplished per shift.
- * "Ride-Along Coordinator" Appointed by Tulalip Bay Fire Chief. Who is ultimately responsible for all decisions made pertaining to Ride-Along Program. Only Ride-Along Coordinator is responsible for scheduling ride along hours.



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RIDE-ALONG APPLICATION

Rider's Full Name:		
Address:		
City:	State:	Zip Code:
Phone ()	Date of	Birth:
Occupation/Training Program:		
Purpose of the Ride-Along:		
Requesting to ride with:		
E	mergency Contact Info	rmation
E ll Name:	mergency Contact Info	rmation Relationship:
E ill Name: Address:	mergency Contact Info	rmation Relationship:
Full Name:Address:City:	mergency Contact Info State:	rmation Relationship: Zip Code:
E ll Name: Address: City:	mergency Contact Info State:	rmation Relationship:
E ll Name: Address: City:	mergency Contact Info State:	rmation Relationship: Zip Code:
Example 18	mergency Contact Info State:	rmation Relationship: Zip Code:
Endl Name:	mergency Contact Info State: Cell Phone (rmation Relationship: Zip Code:
Endl Name:	mergency Contact Info State: Cell Phone (rmation Relationship: Zip Code:) Program" Policy

TULALIP BAY

Tulalip Bay Fire Department

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RIDER/CONFIDENTIALITY AND NON-DISCLOSURE AGREEMENT

AND NON-DISCLOSURE AGREEMENT		
I Tulalip Bay Fire Department (Snohomish County Fire Proconfidential information verbally, in writing and through information pertaining to patients is strictly confidential a will not use or disclose patient information in any way, ur County Fire Protection District #15) authorizes me to do s	digital means. I understand and agree that any nd protected by federal and state laws, and that I nless Tulalip Bay Fire Department (Snohomish	
I agree that I will comply with all HIPAA policies. Department (Snohomish County Fire Protection District # time I knowingly or inadvertently breach patient confident procedures of Tulalip Bay Fire Department (Snohomish Countify Rider's supervisor immediately.	tiality or violate the HIPAA policies and	
I also understand that I may be exposed to other of Bay Fire Department (Snohomish County Fire Protection information to anyone at any time, unless I am authorized County Fire Protection District #15) to do so. This means Tulalip Bay Fire Department's (Snohomish County Fire Fother information that Tulalip Bay Fire Department (Snohmight consider to be confidential or proprietary.	District #15) and agree not to reveal any of that by Tulalip Bay Fire Department (Snohomish that I will not disclose information about Protection District #15's) business practices or	
Failure to uphold these obligations may result in a privilege to gain clinical experience or observe the activit County Fire Protection District #15). Upon termination of upon request, I agree to return any and all patient information my possession. I understand that any patient or confidenti Rider/rider will stay here at Tulalip Bay Fire Department #15) when I leave.	ies of Tulalip Bay Fire Department (Snohomish f the privilege for any reason, or at any time tion or confidential or proprietary information in al information that I see or hear while a	
I have been given an overview of Tulalip Bay Fir Protection District #15) HIPAA policies and procedures a policies and I agree to abide by them. I also understand the under the law if I breach confidentiality of any patient ide	and have been given access to review those at civil and criminal penalties are permitted	
Rider Signature:	Date:	
Parent/Guardian Signature:	Date:	
*If Rider is under 18 years of age Parent/Guardian signature	is required.	



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PARTICIPANT'S WAIVER, RELEASE AND HOLD HARMLESS

I have read and clearly understand the Tulalip Bay Fire Department Rider Policy and my role as a participant either as a Rider or Student Rider.

I clearly understand that I could be placed in varying degrees of jeopardy by exposure to communicable diseases and blood-borne pathogens, and such contact could result in my personal health being harmfully affected. In addition, I understand that communicable diseases that I might come into contact with could be transmitted by me to my family and friends.

I clearly understand that due to the nature of emergency responses by Emergency Medical Services to medical/trauma scenes, the apparatus is operating in an emergency mode that could increase the possibility of a vehicular accident; thus endangering my life and/or physical well being.

I clearly understand that due to the varying types of calls in which the apparatus responds, I could be endangering my physical and/or mental well being and/or life by hostile/violent patients, dangerous scenes such as downed electrical wires, hostile crowds, exposure to traffic, etc., as well as psychological impairment due to abnormally gross injury, death scenarios, and such.

I declare that I have read the above waiver and I voluntarily assume all of the risks and accept total personal responsibility for the above stated hazards and the other unmentioned and unforeseen hazards that are related to this type of work. Further, I agree to defend, indemnify, and hold the Tulalip Bay Fire Department (Snohomish County Fire Protection District #15), its Board of Directors and Officers, its employees and its medical staff, harmless from and against any and all claims, demands, liabilities, damages, and expense, including attorney's fees and other legal costs, for injury and/or illness to myself or my family, caused, or asserted to have been caused, by my personal choice to participate as Rider or Student Rider with the Tulalip Bay Fire Department (Snohomish County Fire Protection District #15) including any future claim or suits brought by, or on my behalf of myself, or family and friends.

Print Name	
Rider's Signature	Date Signed
If Participant is under 18:	
I certify that I am the parent or legal guardian of the and understood the foregoing release; and that I joinfull consent and authorization for the above-named	in in the release without reservation, granting
Print Name	
Parent/Guardian Signature	Date
Approved this day of,	20