

MODIFIED/DOWNGRADED RESPONSE PRACTICES

Incidents involving Emergency Services Vehicles occur frequently, resulting in injuries and fatalities among emergency responders and citizens each year. These incidents can be costly to manage, impacting budgets, operations, and public relations for the organization. A significant number of these occurrences happen during emergency responses, particularly when lights and sirens are in use.



KEY ACTION ITEMS

Implementing a modified or downgraded response in an Emergency Services Organization requires a comprehensive approach and ongoing monitoring to ensure optimal outcomes for all stakeholders. Below are some key action items to consider:

Emergency Medical Services (EMS) experience a higher call volume than Fire Department Operations, leading to a greater frequency of such incidents. Additionally, the high cost of fire equipment can contribute to substantial overall losses that affect the organization.

The critical question is: *when is the use of lights and sirens warranted, necessary, and appropriate?* Numerous studies conducted by the EMS and Fire communities over the years have reached a similar conclusion: overall, emergency response does not significantly improve arrival time.

Furthermore, studies indicate that the use of lights and sirens increases the risk of an accident by 50% compared to a routine response without them (Douglas F. Kupas, 2022). Another key statistic reveals that emergency response (utilizing lights and sirens) only reduces response time by 30 seconds to 3 minutes (Alliance, 2022).

Prepare your responders. Educated members on the risks and rewards of emergency response. Facilitate open discussions about how your organization intends to respond to specific call types (e.g., automatic alarms, vehicle accidents with no injuries, CO alarms with no symptoms). It is essential that administrative staff support this initiative as a change in agency culture.

Prepare your stakeholders. Inform elected officials, policymakers, legal representatives, Communications Center personnel, (for Emergency Medical Dispatch or Emergency Fire Dispatch), Medical Directors, and other local responders (law enforcement, support agencies, etc.) of the new response plan. This ensures effective agency coordination.

Prepare the community. Address any pre-conceived notions within the community regarding when and how emergency responses are warranted. Consider launching a public relations campaign to educate citizens prior to implementing any changes.

Revise protocols. Update Standard Operating Guidelines to reflect the expectations of the modified response. Consider additional supporting SOG's such as Sterile Cab and Distracted Driving.

Utilize technology. Leverage all available technology to track patient outcomes, response metrics, and any other relevant data that will support or challenge the new concept. Make this an on-going process similar to or included in a regular Quality Assurance program.

This concept cannot be implemented in isolation. It requires collaboration among various agencies, support from all levels of supervision and a commitment to fostering a Safe Culture within your Emergency Services Organization.

References

Alliance, N. E. (2022). Improving Safety in EMS: Reducing the Use of Lights and Siren. Irving, TX: National EMS Quality Alliance.
Douglas F. Kupas, M. Z. (2022, February 14). Joint Statement of Lights & Siren Vehicle Operations on EMS Responses.