



MEDICAL CARE POLICY AND TRAINING – ESSENTIAL FOR OFFICER SAFETY AND WELLNESS

Providing comprehensive policy guidance concerning a police officer's role during medical emergencies is essential. Access to proper training and equipment ensures officers can take an active role in achieving the agency's mission of helping others, and it is also a critical step in an agency's commitment to officer safety and wellness.

A critical tenet of officer safety and wellness is ensuring that officers have adequate equipment, supplies, and training to assist community members when necessary. When the agency commits to taking medical care seriously and reinforces this with strong policy guidance and training, it also ensures that officers retain the essential knowledge and skills to care for their fellow officers and themselves, which might mean the difference between life and death for officers.

A clear policy also defines the roles and responsibilities of officers during medical emergencies, ensuring seamless coordination with EMS personnel and other first responders.

Considerations for the Chief of Police

Establish a Medical Care Workgroup and work collaboratively to implement the sample Medical Care Policy, available in the [Law Enforcement Accreditation Plus Portal](#).

The Medical Care Sample Policy contains numerous key areas that can be utilized as discussion points for the Medical Care Workgroup, which include but are not limited to:

Key Definitions (Specific definitions are in the Sample Medical Care Policy):

- Agency Medical Care Equipment Coordinator: Ordering and restocking medical supplies for officers is essential. Every agency should have a designated person responsible for ensuring adequate supplies are available.
- Casualty Evacuation (CASEVAC): Although it is unlikely that such a practice will be utilized, officers should be provided with a clear definition of it if it is deemed necessary.
- Emergency Medical Responder: Every officer should know what training they have had concerning medical care to ensure they maintain the required skills.
- Stop the Bleed Training: It is imperative that all people responsible for training agree on a mutual definition of critical terms to ensure all officers are adequately prepared for a life-threatening emergency.

Procedures:

- Determine what medical equipment must be in each vehicle and by vehicle type, such as vehicles assigned to Patrol, Detectives, or Command Staff. Such considerations include a suitable first aid kit, oxygen kit, bag valve masks for various age levels, tourniquets, trauma dressings or hemostatic products, chest seals, and trauma shears.
- Determine what medical equipment must be carried by each officer on their person and when. Such considerations include a tourniquet, trauma dressings or hemostatic products, chest seals, and trauma shears.

- Provide guidance concerning how an officer can summon EMS services, including Advanced Life Support (ALS). Officers face unpredictable situations that may require immediate medical intervention for themselves, fellow officers, or civilians.
- Ensure officers are aware of the agency's policy that officers should provide medical care until relieved by a person with a higher level of medical training.
- Provide guidance to officers on maintaining crime scene integrity but not to the extent that it interferes with a patient's care.

Reporting and Documentation:

- Ensure officers understand the value of obtaining the patient's name for agency records and how this assists EMS personnel with treatment.
- Provide guidance to officers concerning how to properly document any care provided by the officer.
- Officers should understand their role as witnesses, if applicable to patients refusing medical care, and that an officer should not encourage patients to refuse medical care.

Sick or Injured Arrestee and Persons in Custody:

- The agency's Medical Care Policy should reference the agency's applicable policies governing care for people in custody, medical clearance, and the required care of a person after using force. Although the Medical Care Policy might not be specific to such situations, it still provides critical overarching policy guidance concerning an officer's role with medical care, equipment, EMS notification, and more.

Juvenile Considerations:

- EMS personnel and officers might have to handle an incident involving an injured juvenile without a parent or guardian present, and officers must have policy guidance concerning such instances.

Death Situations:

- Law enforcement agencies should have a specific policy governing death investigations. Still, officers must also understand the importance of always permitting EMS personnel to evaluate an apparently deceased person, except in very few circumstances.

Lifting Assists:

- Policy direction should be provided concerning when or if it is permitted to assist with lifting patients. Officers should also understand that they can request additional assistance when necessary.

CASEVAC – "Scoop and Run":

- The transportation of an injured person by an officer in a vehicle other than a BLS Ambulance is an extraordinary measure that is an absolute last resort. Prohibiting such a method of transport may be unrealistic and dangerous, as there may be situations where officers must make split-second decisions that might result in a CASEVAC transport. Without policy guidance, officers may be unsure how to act in certain situations, and providing policy guidance to assist officers in reaching an informed decision is essential.

Equipment and Supply Maintenance:

- It is imperative that all personnel know the person responsible for the supply function. The law enforcement agency could suffer reputation damage or be subject to litigation if there is a critical medical incident and the

officer does not have the proper supplies. The damage could be exacerbated if it's later learned that no one had been designated to ensure the agency has ordered the necessary supplies. Furthermore, ensuring officers are equipped with adequate supplies to handle medical emergencies is essential to officer wellness and safety, as a medical incident might involve an officer.

Training:

- Ensuring officers are adequately trained is imperative, and a key outcome of the workgroup should be to determine current and future training needs.
- Incorporate medical treatment evolutions into other training programs, such as the use of force and defensive tactics. Strive to have the locations, layout, and type of medical equipment as consistent as possible throughout the organization so that officers can build muscle memory retention, which might be highly valuable during life-saving events.
- Include stress-induced training scenarios when providing medical care for oneself and others.
- Partnering with local EMS agencies for joint training and familiarization with BLS Ambulance equipment so that if an officer is asked by EMS personnel to bring equipment to a patient, they may understand what that entails.
- Encourage supervisors to conduct an after-action review of some medical calls to identify areas for improvement and recognize exemplary actions.

Implementing a comprehensive Medical Care Policy will equip officers to handle medical emergencies confidently and competently, enhance community trust, minimize legal risks, help ensure officers act within the scope of their training and authority, and be a key component of the agency's commitment to officer safety and wellness.

If you have any questions, please contact your Law Enforcement Risk Control Consultant.