Overview

This procedure identifies parking practices for Fire Department apparatus that will provide maximum protection and safety for personnel operating in or near moving vehicle traffic. It also identifies several approaches for individual practices to keep firefighters safe while exposed to vehicle traffic.

IT SHALL BE THE POLICY OF THE REGIONAL FIRE DEPARTMENT TO POSITION APPARATUS AT THE SCENE OF EMERGENCIES IN A MANNER THAT BEST PROTECTS THE WORK AREA AND PERSONNEL FROM VEHICLE TRAFFIC AND OTHER HAZARDS.

All personnel should understand and appreciate the high risk that firefighters are exposed to when operating in or near moving vehicle traffic. We should always operate from a defensive posture. Always consider moving vehicles as a threat to your safety. Each day, emergency personnel are exposed to motorists of varying abilities, with or without licenses, with or without legal restrictions, and driving at speeds from creeping to well beyond the speed limit. Some of these motorists are the vision impaired, the alcohol and/or drug impaired. On top of everything else, motorists will often be looking at the scene and not the road.

Nighttime operations are particularly hazardous. Visibility is reduced, and the flashing of emergency lights tends to confuse motorists. Studies have shown that multiple headlights of emergency apparatus (coming from different angles at the scene) tend to blind drivers as they approach.

Safety Benchmarks

Emergency personnel are at great risk while operating in or around moving traffic. There are approaches that can be taken to protect yourself and all crewmembers:

1. Never trust the traffic
2. Engage in proper protective parking
3. Wear high visibility reflective vests
4. Reduce motorist vision impairment
5. Use traffic cones and flares

Listed below are benchmarks for safe performance when operating in or near moving vehicle traffic.

1. Always maintain an acute awareness of the high risk of working in or around moving traffic. Never trust moving traffic. Always look before you step! Always keep an eye on the traffic!

2. Always position apparatus to protect the scene, patients, emergency personnel, and provide a protected work area. Where possible, angle apparatus at 45 degrees away from curbside. This will direct motorist around the scene (See Figure 1). Apparatus positioning must also allow for adequate parking space for other fire apparatus (if needed), and a safe work area for emergency personnel. Allow enough distance to prevent a moving vehicle from knocking fire apparatus into the work areas.

3. At intersections, or where the incident may be near the middle of the street, two or more sides of the incident may need to be protected. Block all exposed sides. Where apparatus is in limited numbers, prioritize the blocking from the most critical to the least critical (See Figures 2, 3 and 4).
4. For first arriving engine companies where a charged hoseline may be needed, angle the engine so that the pump panel is "down stream," on the opposite side of on-coming traffic. This will protect the pump operator (See Figure 5).

5. The initial company officer (or Command) must assess the parking needs of later-arriving fire apparatus and specifically direct the parking and placement of these vehicles as they arrive to provide protective blocking of the scene. This officer must operate as an initial safety officer.

6. During daytime operations, leave all emergency lights on to provide warning to drivers.

7. For NIGHTTIME operations, turn OFF fire apparatus headlights. This will help reduce the blinding effect to approaching vehicle traffic. Other emergency lighting should be reduced to yellow lights and emergency flashers where possible.

8. Crews should exit the curb side or non-traffic side of the vehicle whenever possible.

9. Always look before stepping out of apparatus, or into any traffic areas. When walking around fire apparatus parked adjacent to moving traffic, keep an eye on traffic and walk as close to fire apparatus as possible.

10. Wear the safety vest any time you are operating in or near vehicle traffic.

11. When parking apparatus to protect the scene, be sure to protect the work area also. The area must be protected so that patients can be extricated, treated, moved about the scene, and loaded into Rescues safely.

12. Once enough fire apparatus have "blocked" the scene, park or stage unneeded vehicles off the street whenever possible. Bring in Rescue/Ambulance companies one or two at a time and park them in safe locations at the scene. This may be "down stream" from other parked apparatus, or the Rescue may be backed at an angle into a protected loading area to prevent working in or near passing traffic. At residential medical emergencies, park Rescue in driveways for safe loading where possible. If driveways are inaccessible, park Rescue to best protect patient loading areas. (See Figures 6 and 7).

13. Place traffic cones at the scene to direct traffic. This should be initiated by the first company arriving on the scene and expanded, if needed, as later arriving companies arrive on the scene. Always place and retrieve cones while facing on-coming traffic.

14. Placing flares, where safe to do so, adjacent to and in combination with traffic cones for nighttime operations greatly enhances scene safety. Place flares to direct traffic where safe and appropriate to do so.

Listed below are general recommendations for the start of traffic cones/flares:

<table>
<thead>
<tr>
<th>Speed</th>
<th>Distance</th>
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<tbody>
<tr>
<td>25 mph</td>
<td>65 feet</td>
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<tr>
<td>40 mph</td>
<td>105 feet</td>
</tr>
<tr>
<td>60 mph</td>
<td>160 feet</td>
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15. At major intersections a call for police response may be necessary. Provide specific direction to the police officer as to exactly what your traffic control needs are. Ensure the police are parking to protect themselves and the scene. Position Rescues to protect patient loading areas. (See Figure 8)
Freeway Operations

Freeway emergencies pose a particularly high risk to emergency personnel. Speeds are higher, traffic volume is significant, and motorists have little opportunity to slow, stop or change lanes.

The Department of Public Safety will also have a desire to keep the freeway flowing. Where need be, the freeway can be completely shut down. This, however, rarely occurs.

For freeway emergencies, we will continue to block the scene with the first apparatus on the scene to provide a safe work area. Other companies may be used to provide additional blocking if needed.

The initial company officer, or command, must thoroughly assess the need for apparatus on the freeway and their specific positions. Companies should be directed to specific parking locations to protect the work area, patients, and emergency personnel.

Other apparatus should be parked downstream when possible. This provides a safe parking area.

Staging of Rescue companies off the freeway may be required. Rescues should be brought into the scene one or two at a time. A safe loading area must be established.

Traffic cones should be placed farther apart, with the last cone approximately 160 feet "upstream," to allow adequate warning to drivers. Place and retrieve cones while facing the traffic.

Command should establish a liaison with the Department of Public Safety as soon as possible to jointly provide a safe parking and work area and to quickly resolve the incident.

The termination of the incident must be managed with the same aggressiveness as initial actions. Crews, apparatus, and equipment must be removed from the freeway promptly, to reduce exposure to moving traffic.
Where possible, angle apparatus at a 45 degree angle from the curb.

Often times two or more sides may need to be protected. Prioritize placement of the apparatus by blocking from the most critical to the least critical side.
To protect pump operator, position apparatus with the pump panel on the opposite side of on-coming traffic.

Where possible, park rescues in driveways or position rescue to protect patient loading area.
Provide specific direction to police as to what traffic control needs you have. Position rescues to protect patient loading areas.