EMS COMMISSION RECOMMENDATIONS FOR EMS PROVIDER ORGANIZATIONS REGARDING EMPLOYEE FATIGUE

STATEMENT OF INTENT:

The Indiana EMS Commission recognizes fatigue is a challenge and risk in EMS as does national bodies like the National Association of EMS Officials. Because there are many variables in EMS operations (run volume, availability of alternate resources, location of hospitals, length of shifts), each EMS provider organization should be analyzing their system of operations regarding fatigue to determine if they safely are providing medical care to their patients.

EMS PROVIDER ORGANIZATIONS ARE STRONGLY ENCOURAGED TO CONSIDER, WHERE APPLICABLE:

1. Implement the use of fatigue/sleepiness survey instruments to measure and monitor fatigue in EMS personnel.

2. Implement a policy restricting EMS personnel to work shifts no more than 24 hours in duration, but if more is necessary, limit working hours to a maximum of 48 hours consecutively, followed by at least eight (8) hours of time off from any EMS/fire related work.

3. Ensure that EMS personnel have access to caffeine as a fatigue countermeasure.

4. Implement policies that allow EMS personnel to nap while on duty to mitigate fatigue, including allowing for sleep throughout the day when duties are completed.

5. Implement policies that creates education and training for EMS personnel to mitigate fatigue and fatigue-related risks.

6. Implement agreements between medical facilities to reduce the number of non-emergency interfacility transfers between the hours of midnight and 7 a.m., so that overnight transfers are for life-threating or time-sensitive emergencies only, leaving those that are low acuity to a fresh on-coming crew.

7. Implement policies that reduce back-to-back long-distance transports for each crew, including reducing the ability of dispatch to stack calls to avoid a back-log for any crew that prevents a meaningful break or rest.

**Initiatives #1-5 are taken from National Association of EMS Officials "Fatigue Implementation Guidebook"