Fireline Emergency Medical Technician – Paramedic (FEMP)

Frequently Asked Questions

The Fireline Paramedic position (FEMP) is like any other single resource position requested for incident management and is ordered at the discretion of an Incident Commander through normal ordering channels. The following list of frequently asked questions may be pertinent to both a fire chief and a fireline paramedic.

1. Under what authority are paramedics allowed to function when assigned to an out of county assignment?

Authority is granted by: California Code of Regulations Title 22, Division 9, Section 100165 (l):

“During a mutual aid response into another jurisdiction, a paramedic may utilize the scope of practice for which s/he is trained and accredited according to the policies and procedures established by his/her accrediting local EMS agency.”

Paramedics are authorized by their Local Emergency Medical Services Agency (LEMSA) to practice within their own county. It is the stated intent of the Emergency Medical Services Administrators Association of California (EMSAAC) to direct LEMSAs to write policy which will provide for sending paramedics out of county expressly for FEMP assignments. The FIRESCOPE EMS Specialist Group has created a policy template to assist LEMSAs with this task.

2. How is my department reimbursed for personnel costs when paramedics are sent on FEMP assignments?

Reimbursement for the FEMP would be exactly the same as any other single-resource position.

3. How do I manage controlled substances?

Paramedics will bring with them the amount and type outlined on the inventory located within the Position Manual. This may be adjusted as required by LEMSA policies. Use of a controlled substance on a patient will be consistent with the provider agency/home unit LEMSA protocol. All required documentation will be completed as per the provider agency and/or LEMSA policy.

In the event there is a need to restock controlled substances, agencies may elect to transfer medication directly to the FEMP through established policies. If restock is not possible, the FEMP can continue to function without access to the controlled substances.

The security of controlled substances must follow the existing policies established by the home agency and or LEMSA.
4. How do I participate in the system? How do personnel get placed into ROSS?

Once an individual meets the requirements outlined in the position manual and they are approved by their fire chief, they can be entered into ROSS and assigned to an incident. There is no provision for “grandfathering” in paramedics that have been assigned to an incident in the past as a paramedic.

5. What courses/qualifications are required for this position?

Qualifications and requirements are listed in the FEMP position manual.

6. How does a home agency contact their FEMP deployed on a fireline assignment?

Contact with the FEMP can be made through the incident communications or by direct contact with the individual. The FEMP will report to the Medical Unit Leader (MEDL) while assigned to an incident.

7. What training is available for this position?

Currently there is no NWCG or California State Fire Training approved class for this position. Personnel wishing to fill assignments as an FEMP should have completed the requirements as outlined in the position manual and gained approval from their Fire Chief.

8. Will the FEMP ever work alone? What is the purpose of the two person team?

Due to safety, weight and operational considerations, FIRESCOPE recommends that the FEMP be assigned ONLY in teams of two. This pairing may consist of one FEMP and one FEMT. This provides for increased accountability, safety, and the management of (packing) of EMS equipment and supplies.

9. Will my agency be reimbursed for the services provided by the FEMP?

Generally speaking, yes. Reimbursement is based on negotiated or contracted rates as established by the involved parties. Rates may vary from area to area and whether the request is based on assistance by hire or CFAA.

10. Can I send an FEMP trainee?

There is no “Trainee” position for FEMP. Individuals are deemed “Qualified” by their fire chief.
11. What would be the expected length of commitment?

Most agencies limit their personnel to a 14-day assignment with an optional seven day extension. Personnel should expect to be assigned to the incident for at least 14 days.

12. What pack should I use to carry the medical equipment and supplies?

Any pack that will carry the required equipment and supplies detailed in the position manual is acceptable. It is desirable to have a pack that is suitable for use on the fireline, that can be integrated with safety equipment (web gear), that is scalable and comfortable, with a capacity of about 4500 cubic inches. Packs that allow you to quickly jettison medical gear from safety gear are recommended. FIRESCOPE does not recommend specific vendors for line packs. Care should be taken to minimize the overall weight of the pack carried by the FEMP. Pack weight should not exceed 45 lbs.

13. Is there a recommended equipment list?

Yes. It can be found in the position manual.

14. How does an agency recover costs for equipment and supplies used or damaged on the incident?

Medical supplies may be replaced by the incident through the MEDL. Medical supplies not restocked by the incident can be documented on an ICS 213 (general message), signed by the MEDL. This documents that they were expended. Reimbursement will require you to seek a “claim” from the incident comp/claims unit.

15. How is CQI managed on an incident?

Providers should utilize their internal policies to ensure that CQI practices are followed. This will vary from agency to agency.

16. Does a Patient Care Record (PCR) need to be completed for each patient contact?

A PCR must be generated for all patient contacts.
- Provide a copy of the PCR:
  - to home agency for disposition per home policy
  - to MEDL for incident documentation
  - to follow patient to receiving facility