

Guide to NYFD Health and Wellness Programs

First Edition, Spring, 2017

Adam D. Corrado, MD, Editor

In April of 2004, fire service leaders from across the United States gathered in Tampa Florida. At this summit meeting these leaders began to design a new fire service culture. This new culture is built on the 16 Firefighter Life Safety Initiatives so that

EVERYONE GOES HOME®

Firefighter Life Safety Initiatives by the National Fallen Firefighters Foundation

- 1. Define and advocate the need for a cultural change within the fire service relating to safety; incorporating leadership, management, supervision, accountability and personal responsibility.**
- 2. Enhance the personal and organizational accountability for health and safety throughout the fire service.**
3. Focus greater attention on the integration of **risk management** with incident management at all levels, including strategic, tactical, and planning responsibilities.
4. All firefighters must be empowered to **stop unsafe practices**.
- 5. Develop and implement national standards for training, qualifications, and certification (including regular recertification) that are equally applicable to all firefighters based on the duties they are expected to perform.**
- 6. Develop and implement national medical and physical fitness standards that are equally applicable to all firefighters, based on the duties they are expected to perform.**
7. Create a national research agenda and data collection system that relates to the initiatives.
8. Utilize available technology wherever it can produce higher levels of **health and safety**.
- 9. Thoroughly investigate all firefighter fatalities, injuries, and near misses.**
10. Grant programs should support the implementation of safe practices and/or mandate safe practices as an eligibility requirement.
11. National standards for emergency response policies and procedures should be developed and championed.
12. National protocols for response to violent incidents should be developed and championed.
- 13. Firefighters and their families must have access to counseling and psychological support.**
14. Public education must receive more resources and be championed as a critical fire and life safety program.
15. Advocacy must be strengthened for the enforcement of codes and the installation of home fire sprinklers.
16. Safety must be a primary consideration in the design of apparatus and equipment.

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“The guide is dedicated, with gratitude, to those who answer the call, those who support us, and our families, for whom we serve and protect.”

-Adam D. Corrado, MD, FACEP

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Overview of the AVFD Health and Safety Program

Avon Volunteer Fire Department, through a series of progressive and visionary measures put in place over two decades through the administrations of Fire Chiefs James DiPace and Michael Trick, has established and maintains a comprehensive health and wellness program for its most valuable resource, its volunteer members, that complies with the requirements of the National Fire Protection Association.

In 2004, based upon recommendations of the National Fallen Firefighters Foundation, 16 Firefighting Life Safety Initiatives were published, and fully 50% of the initiatives were based in the promotion of fire department preventive health and wellness programs, with the remaining 50% targeting department operational safety programs.

The cost of maintaining such a program is frequently out of reach of many volunteer organizations. Nevertheless, just as indispensable as the maintenance and regular inspection of our apparatus and safety equipment is the regular examination and health maintenance of our personnel, for without them operating at peak performance, the mission of the fire department is compromised, and the lives of our members and those whom we are sworn to protect are jeopardized. For this reason, the Board of Directors, and the leadership of the AVFD have prioritized this program by committing necessary funds, and supporting essential initiatives, to ensure that *"Everyone Goes Home."* The components of this program include:

- a physical examination program for candidate and incumbent members,
- a preventive medical services program to include seasonal vaccinations,

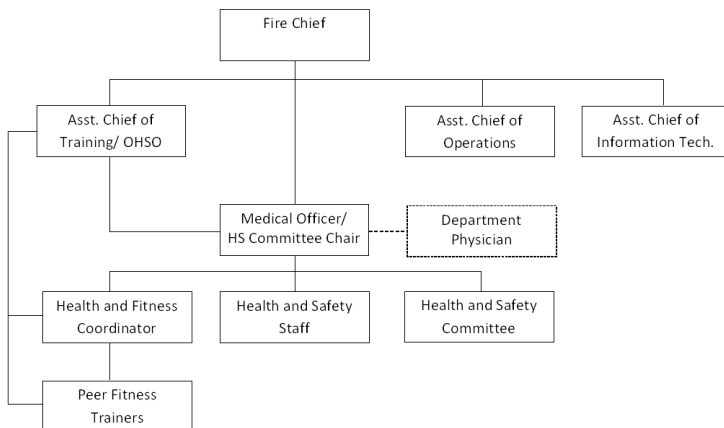
- a health-related fitness program including a periodic physical fitness monitoring program,
- an employee assistance program to include behavioral health services and access to critical incident stress management services,
- periodic assessment of physical and mental job skills,
- a fire incident and training rehabilitation program,
- monitoring of rehabilitation in cases of injury and acquired disability,
- a comprehensive infection control program,
- a comprehensive occupational safety program that complies with the requirements of Title 29 CFR 1910, parts .95, .120, .134, .1020, and .1030 (pertaining to noise exposure, hazardous waste and emergency response, respiratory protection, exposure and medical records access, and blood-borne pathogens), and
- a wellness program, to address lifestyle choices and physiologic optimization (tobacco cessation, alcohol moderation, regular exercise, healthy eating habits and weight management, glycemic and blood pressure control, injury rehabilitation).

The NFPA places responsibility for health and safety programs under the auspices of the fire department health and safety officer. AVFD's protocols have placed the responsibility for administering health and wellness programs under the medical officer, who in turn is supervised by the health and safety officer, or the chief officer charged with those responsibilities should the health and safety officer position be vacant. Safety programs, as they pertain to medical issues, also fall under the authority of the medical officer, while non-medical and other operational safety issues are the responsibility of the safety officer.

Administration and Program Elements

Medical Division

Administration of the health and wellness programs is the responsibility of the medical division of the AVFD, led by the medical officer. Because the component programs of the medical division have both training and operational elements, oversight of the medical division is shared between both the Assistant Chief for Training and the Fire Chief directly. The Assistant Chief for Training serves as the department's Health and Safety Officer, the officer specifically responsible for oversight of the medical aspects of the health and safety programs of the department per NFPA Standard 1521. In addition to the medical officer, the organizational structure of the medical division includes the department physician, the health and fitness coordinator, peer fitness trainers, members of the health and safety staff, and the Health and Safety Committee. To accomplish the many tasks within its area of responsibility, the medical division is staffed by both operations and administrative personnel, supervised by the medical officer.



Health and Safety Staff

Health and Safety Staff-members are both administrative and operational personnel that are assigned to projects and duties under the supervision of the medical officer.

Health and Safety Committee

An advisory body composed of a chief officer, two line officers, and two non-officer operations personnel, the HSC reviews departmental needs, develops, and makes recommendations that pertain to the health and safety programs of the department. The medical officer serves as the HSC chair.

Department Physician

The department contracts with local healthcare providers to act in the capacity of the department physician, to provide professional expertise in the areas of occupational safety and health as they relate to emergency services, as well as physician services for candidate and incumbent physical examinations, work-related injury and illness examination, treatment, follow up, and return to work clearance. In addition, the department physician provides input and guidance regarding the health and wellness programs and policies of the department, and serves as a member of the health and safety committee.

Physical Examination Program for Candidate and Incumbent Members

AVFD provides comprehensive candidate physical examinations to new recruits free of charge during the application period, and annual examinations to incumbent firefighters and fire police officers at no cost to the member. While it has long been recognized that it is prudent to put new recruits through a physical exam

before being hired to a fire department, it has historically been less commonplace, and often beyond reach financially for many volunteer departments to provide annual firefighter examinations for incumbent members. It is, however, becoming more and more recognized and accepted that regular annual examinations are essential to maintaining an effective firefighting force, and in identifying medical conditions that may put the incumbent firefighter at risk for permanent disability or death from activities routinely faced in the line of duty. Regular cancer screening and early detection of common firefighting-related cancers is indispensable in reducing potentially preventable morbidity and mortality. This is an achievable goal, and a worthwhile endeavor to protect those who put their lives at risk for the benefit of their neighbors. Information regarding exam components, scheduling procedures, and a copy of the letter authorizing member access to their medical records are provided later in this booklet.

Preventive Medical Services Program

Each new recruit is offered vaccination against Hepatitis B, a blood-borne communicable disease that might be encountered on emergency scenes, whose transmission can be effectively prevented through vaccination. In accordance with NFPA recommendations, AVFD also offers as part of its annual physical examination process several age-appropriate preventive medical screening services, such as mammography for female members over 40, PSA screening for male members over 50, and occult blood colon cancer screenings for members over 50. An annual flu vaccination program is made available to all members and their immediate family to help reduce the transmission of flu within our members' households, and thereby minimize lack of firefighter availability due to personal illness or the need to care for ill family members during flu season. Confidential HIV and Hepatitis C screenings are also available with

annual department examinations if desired. **Members are encouraged to maintain a regular relationship with their own personal primary care provider and seek preventive services through the private office.**

Illness and Injury Reporting, and Return to Duty

A comprehensive workers compensation program is available to all fire department members for injuries and/or illness sustained while in the line of duty. In addition, a supplemental insurance policy is maintained by the department and also covers members for line of duty issues that may arise. Work related injuries may be evaluated and treated by the department physician at the discretion of the member. Should physical therapy or rehabilitation be necessary, the department physician and medical division will coordinate with those services to ensure a smooth return to duty. In addition, the AVFD Health and Fitness Coordinator may work with members to improve their conditioning after prolonged absence or periods of disability to meet the physical performance requirements of the department.

Wellness and Fitness Initiative

The AVFD Wellness and Fitness Initiative is our NFPA-compliant Health-Related Fitness Program (HRFP), and exists to enhance the members' ability to perform operational activities efficiently and safely, and reduce the risk of injury, disease, and premature death. Administered under the department's health and fitness coordinator, the intent of the program is to enable members to develop and maintain a level of health and fitness to safely perform their assigned functions, and it includes a periodic fitness assessment for all members (the Physical Monitoring Program), guidance in exercise training that is available to all members, education and counseling regarding health promotion for all

members, and a quality assurance process for collecting and maintaining health-related fitness program data. In addition to physical training, the initiative seeks to encourage a heart-healthy lifestyle by addressing and educating members about lifestyle choices and medical optimization (tobacco cessation, alcohol moderation, regular exercise, healthy eating habits and weight management, glycemic and blood pressure control, as well as injury rehabilitation). A variety of methods are employed, including outreach by our department physician, and expert presentations. Specially trained and certified Peer Fitness Trainers are central to the success of this initiative.

Physical Monitoring Program

The physical monitoring program is periodic assessment of the physical fitness of operational members as recommended by the NFPA, to guide members in developing and maintaining physical strength, flexibility, and endurance, as well as optimal physiologic capacity for work. The assessment is designed to provide feedback to the member, track progress, help set achievable goals, and identify changes in physiologic conditioning that may place the member at risk for disability. Physical monitoring measures aerobic capacity, body composition, and muscular strength, endurance, and flexibility, and is performed at least annually. The physical monitoring program is part of a total health-related fitness program that is being implemented over a ten-year phase in period that balances retirements with recruitment.

Physical Performance Qualification

As part of AVFD's commitment to ensuring members are able to perform basic skills on the fireground, each member shall be qualified annually as meeting the physical performance requirements established by the fire department. While the

department physical examination certifies that one is healthy enough to perform their duty, the physical performance qualification, or PPQ, verifies that one is adequately conditioned and physically capable of performing their duty. This may be accomplished through completion of the AVFD in-house evaluation course specifically designed and validated for this qualification. The physical performance requirements were developed from the essential job tasks for operational members. The essential job tasks are listed in section 8.4 of the Operations Manual, and the description of the physical performance requirements is listed in section 24.4.

Health Risk Exposure Reduction and Mitigation

AVFD complies with applicable OSHA regulations that pertain to respiratory protection, exposure to blood-borne pathogens, and numerous other regulatory issues. Firefighters are routinely exposed to carcinogenic materials. Annual respirator medical evaluation questionnaires are completed by all members who use self-contained breathing apparatus, and these members also undergo annual fit testing as part of the respiratory protection program. Specific procedures are delineated for minimizing the risk of acquiring blood-borne pathogens and spreading contaminants, and infection control. In addition, the department is actively developing ground-breaking procedures to address the threats posed to personnel by carcinogenic gasses and particulate contaminants, based on emerging evidence and scientific research.

Fire Police Incident and Training Rehabilitation Program

The AVFD Fire Police members have been charged with the responsibility for, and are trained and equipped to provide, rehabilitation services to operational members both at emergency scenes and during prolonged training events. Rehabilitation

includes rest and rehydration periods, cooling or warming depending on ambient conditions, protection from environmental exposure, light skin decontamination, calorie and fluid replacement, and monitoring of vital signs prior to reassignment to work. Fire police maintain two vehicles which can deploy shade, shelter, cool misting, seating, and nutrition/hydration, as well as provide first aid services to members as needed.

Employee Assistance Program

First responders face special challenges – including heightened stress and pressure that can take a toll on mental and emotional well-being. Employee Assistance Programs (EAP's) are designed to alleviate burdens that make life more difficult, and to help members find help and support for situations that increase emotional stress, such as financial difficulties, problems with interpersonal relationships, or virtually any obstacle to a smooth, stress-free life. The Public Safety EAP offered through The ESI Group is the primary program offered by AVFD to address behavioral health in our members for whom other sources of support may not be readily apparent, and is specifically designed to address the situations that commonly affect fire department personnel.

Operational Considerations

Department Physicals

Each member is responsible for ensuring that their physical examinations are current by the deadline set forth in section 8.2 of the Operations Manual. Firefighter members' exam deadlines coincide with the calendar quarter that corresponds to their company assignment. For example, Company 1 members must be current by the end of the first quarter, March 31st, Company 2 members must be current by the end of the second quarter, June 30th, etcetera. Likewise, chief officers must be current by the end of the quarter that corresponds with their radio call sign: Avon-1 with the first quarter, Avon-2 with the second quarter, etcetera. Fire police members individually maintain an annual expiration date. Explorers need only have their initial exam throughout their uninterrupted participation as Explorers. Administrative members have no recurrent exam requirements, but may avail themselves of the department examination should they choose. In order to be considered "current," clearance must be received and logged into the department Firehouse records-keeping management system.

Emergency Medical Services (EMS)

Avon Volunteer Fire Department does not provide emergency medical services as a primary response activity, but does provide limited support as a first-responder agency in medical emergencies. Despite being staffed with medical professionals with a broad range of expertise, State law limits the activities in which our members may engage, regardless of training level, certification, or licensure. It is important to note that as long as one is acting in any official capacity as member of the AVFD, medical services that may be rendered are limited to those that are commensurate with the EMR scope of practice, as delineated by the State of

Connecticut. Examples of services members with appropriate training may be expected to provide include cardiopulmonary resuscitation of fire victims or rescue personnel, basic first aid to accident victims, primary patient assessment of trauma victims and patients with medical complaints, and basic life-saving interventions for victims of multi-casualty incidents. In any case where medical care is indicated or rendered, police dispatch must be notified and appropriate resources ordered. Complete details regarding EMS are found in Chapter 20 of the Operations Manual.

Infection Control

Members who become exposed to potentially infectious blood or body fluids are to decontaminate and report their exposure using the procedures outlined in Section 8.10 of the Operations Manual. Follow up medical evaluation may be necessary, and any occupational exposure will be considered for workman's compensation claim, and evaluated by the department physician at the department's expense. Members may choose to utilize their primary care provider for post-exposure examination or follow up, but are encouraged to take advantage of the occupational medicine expertise of the department physician services for all duty-related exposures.

Injury and illness Reporting

Section 8.8 of the operations manual details the process for reporting illnesses and injuries sustained in the line of duty, and those sustained off duty that may affect member readiness. Any member who sustains an injury in the line of duty must report the injury to their supervising officer, and complete the appropriate reports. Injuries that result in the need for a member to limit or stop his or her activity must be reported on AVFD Form 12, which in turn must be forwarded to the medical officer for follow up. AVFD

Form 5 Personal Injury/Illness Investigation Report may be required. Refer to the Operations Manual for details and instructions.

Multi-Casualty Incidents

The State of Connecticut has ordered that a standardized triage system be employed statewide for MCI response. The designated statewide system is called the SMART-Triage system, which is a proprietary system commercially available, and similar in design to the START system that is common nationwide. All operations personnel must receive training on the use of the SMART-Triage materials, and are expected to be able to deploy the system when needed on the scene of a multi-casualty incident. Red SMART-Triage packs about the size of a child's shoebox are stowed on every front-line vehicle in the AVFD fleet, and are co-located with an orange Primary Triage Response Kit, which may be deployed by appropriately trained personnel to render rapid life-saving intervention to trauma victims during triage. Multi-casualty incident response triage procedures are detailed in Section 20.5 of the Operations Manual.

Operations Manual Content

Policies and procedures applicable to department medical services, health, wellness and safety can be found in the department Operations Manual. Chapter 8 **Health and Safety** contains the majority of information related to department health and wellness programs, respiratory protection, carcinogen exposure risk mitigation, blood-borne pathogen exposure information, etcetera. Chapter 20 contains information related to emergency medical services and multi-casualty incidents. Content is added and updated constantly as programs are being developed and refined. Notifications are distributed via the department email

system whenever content is updated. An electronic version is maintained online as the main up-to-date resource for member reference, until a permanent resource is ultimately published. Individual print version station copies may be produced from time to time, but for up to date information, please consult the online manual published in the *MEMBERS ONLY* section of the department website avonvfd.org.

Applicable sections include:

- 6.8-6.12 Duty Statuses and Leaves
- 7.11, 7.16-7.18 Job Descriptions
- Chapter 8 Health and Safety
- 9.5 Emergency Incident Rehabilitation (Rehab)
- Chapter 20 Emergency Medical Services (EMS) Response
- Chapter 24 Reference Documents

Physical Performance Qualification (PPQ)

All firefighters must be qualified annually to perform the physical performance requirements of the fire department. June has been designated PPQ month on the training calendar. An annual deadline will be established by the Assistant Chief for Training, and will generally fall in the early autumn.

Respiratory Protection and Fit Testing

Every member who uses Self-Contained Breathing Apparatus (SCBA) or N95 Particulate Respirators, as well as air purifying or cartridge respirators are required to undergo mask fit-testing annually. Fit tests must be preceded by respiratory certification at least bi-annually for firefighters, and before starting training using SCBA for Explorers. In addition, an OSHA Respiratory Medical Questionnaire must be completed and approved within 6 months prior to fit

testing. Complete details regarding the AVFD Respiratory Protection Plan are contained in Sections 8.11 through 8.13 of the operations manual. Fit testing must be completed annually by the end of the month following the company's physical exam scheduled deadline.

The AVFD Wellness and Fitness Initiative

The history of the fire service is replete with examples of advances and improvements in the ability to fight fire and protect lives and property. While firefighting has no doubt grown safer, and more scientific in its approach, whether through strategies, tactics, or technology, the rates and causes of death and injury in the line of duty have remained somewhat constant for decades.

The Board of Directors made a bold commitment to the membership in early 2016 by formally resolving to support the Wellness and Fitness Initiative as a departmental priority for the safety and well-being of our members, and improved service to our community.

When one considers that the statistics regarding heart disease and heart attack prevalence in the fire service mirrors that of the general population instead of a healthier, more fit subgroup of the population such as professional athletes, one has to wonder why that remains the case in the twenty-first century. In a profession (volunteer or career, it is nevertheless a profession) that demands discipline as much as it demands bravery, how is it that we as a profession have not universally accepted that force adherence to a heart-healthy lifestyle, and athletic conditioning are as indispensable when it comes to force readiness as a functioning pumper and pressurized water at the tip? If the humans that do the work are "the most valuable resource," why are municipalities, departments, and leadership all too willing to invest funds in equipment and other costs *at the expense* of health and safety programs, physicals, fitness training and monitoring, and real attention to reduction of cancer risks and suicide prevention?

If the subject comes down to personal responsibility, the same that can be said for equipment maintenance can be said for physical

readiness. If it's fair that a fire chief can demand that equipment be maintained in a specific level of ready condition, it is likewise fair that a chief can demand that his personnel themselves maintain a specific level of ready conditioning. However, just as the fire department provides the means necessary to maintain the equipment and train on its use, a department should likewise provide the means necessary to maintain a ready level of conditioning, and training necessary to be fit for duty.

In-house health and safety programs instituted across the nation have demonstrated positive results in decreasing costs associated with workman's comp and disability claims, lost work days, and line of duty injuries. While AVFD thankfully does not suffer from high injury rates, nor have we yet suffered the tragedy of a line of duty death, or loss of a member to major depression, we are not immune to the risks that are inherent to the business at hand. It is the very reason we train as we do, and maintain our equipment as we do, for were there not the risks, what would be the point? Our robust training program, and health and safety programs have no doubt played an instrumental role in keeping our members safe, and as our call volume increases, and community risks evolve, so must our membership and our programs likewise evolve.

AVFD Fitness Program Elements

Vision

Fitness in the Fire Service – It's About Preparedness, Community Service, and Volunteerism

Service in the volunteer fire department always has an impact upon one's family, primary occupation, and community, and most often that impact is a positive one. Unhealthy lifestyle and fitness choices, however, jeopardize each, as injuries and illnesses sustained in the line of duty can affect each as well. Active participation in fire department health and wellness initiatives maximizes longevity and minimizes disability not only in the fire service, but in our primary occupation and in the lives of our families, and indeed maximizes our effectiveness as public servants, and our ability to pursue our own happiness injury and illness-free.

The AVFD fitness program mission is to sow and grow a permanent culture of physical and mental readiness, **to promote the philosophy of the occupational athlete in every volunteer**, and to motivate each member to a lifetime of healthy habits for themselves and their loved ones. Firefighters nationwide lead the citizenry in many things – among these are valor, courage, humanitarianism, but unfortunately also in rates of obesity, death from sudden heart attack, and cancer rates that exceed those of the general population. The fact that these are preventable conditions makes this mission all the more urgent. We firefighters, the members who support us, the families who count on us to come home after every call alive and well, and the citizens who depend on us to answer the call every time with skill and determination, deserve nothing less than our full commitment to total readiness.

The leadership of the AVFD has decided to demonstrate its commitment to these ideals by prioritizing member fitness among its most important endeavors, for without healthy, ready, professional operators our mission as a whole is incomplete and at greater risk for failure.

Essential components of a total Wellness and Fitness Program include: recruit and incumbent member physical examinations, annual skills assessment, quarterly fitness assessments, ongoing skills training, ongoing fitness training, lifestyle modification including healthy eating habits, tobacco cessation, blood pressure and blood sugar control, continuous recruiting and retention efforts aimed at fitness-minded individuals to balance retirements, maintenance and availability of exercise equipment and peer fitness trainers.

Having a robust physical fitness program reflects on the attitudes and priorities of the organization. A visibly supported wellness program tells potential recruits that they are valued as a resource and that their efforts are worth investing in. Just as how a member wears his uniform and gear in the public eye reflects on the culture and professionalism of the organization, so does the fitness and attitude of the individual carry a similar message about himself and his peers. When a community admires the professionalism and discipline of its organizations, it is more likely to support them as members and donors. Potential recruits are more willing to be associated with an organization that values its members, and with whose members value their own well-being.

Key Concepts Driving the AVFD Wellness and Fitness Initiative

The driver for incorporating a fire department fitness program is statistical – cardiovascular stress continues to kill young and seasoned firefighters alike in a way that would seem preventable,

predictable, and out of proportion to the general population; cancer also affects firefighters disproportionately among the general population, which also appears to be preventable through changes in departmental work practices.

The single biggest problem facing the volunteer fire service is low responder turnout. Having a small number of responders per call puts stress and burden on those who do respond, increases the risk of making unsafe tactical decisions, and decreases a department's ability to adequately accomplish its mission. Increasing AVFD responder turnout has to be among the department's top priorities, and this initiative is poised to be a key component in recruiting, retention, and improved responder turnout.

To address these issues, in part, the 16 Firefighting Life Safety Initiatives championed by the National Fallen Firefighters Foundation places a particular emphasis on fitness, wellness, training, and procedure modification.

To maximize effectiveness during the implementation period, our program is to consider, incorporate, and motivate lifestyle change as a means of improving member fitness and preparedness by emphasizing benefits that extend beyond the fire service. By improving blood pressure, glycemic control and diabetic management, and cholesterol levels, decreasing excess weight, eliminating tobacco use, moderating alcohol use, improving tolerance of exertion and stress response, and decreasing risk of injury from musculoskeletal strain and preventable injury, it is reasonable to conclude, and likely, that our members would decrease lifetime medical expenses, decrease life insurance rates, maximize family life participation and enjoyment, and decrease lost productivity and income due to illness and injury.

Methods

The fitness program is to be supportive, never punitive – with recruiting and retention so key to a volunteer department's success, the goal of any fitness program should never be to remove members from duty, but to help every member be the best-prepared and most effective responder he or she can be.

The fitness program is to provide feedback to members to assist them in deciding the best way to reach their program goals.

“The Occupational Athlete” - The fitness program is to help motivate members toward an athletic philosophical approach to firefighting, to challenge traditional philosophies and attitudes that impede wellness, and to embrace a new paradigm of health and preparedness.

Peer Fitness Trainers and the HFC will assist members in setting reasonable and achievable program benchmarks and goals.

Program Goals

- Maintain and support heart-healthy lifestyle and condition of fit members
- Motivate and support less fit members toward peak conditioning
- Increase force productivity and longevity, and minimize disability
- Increase operational membership numbers and responders per call

WFI Implementation and Facilitation

As part of the WFI, AVFD may provide access to certain resources and/or equipment to help members reach and maintain their goals, but in all cases, members are individually responsible for

maintaining themselves in a ready state for their duty assignment. At no time shall AVFD establish any particular fitness activity as a condition of service or membership. This is differentiated, however, from the essential job tasks which all operational members are expected to be able to perform as a condition of Active Duty status.

The WFI is not to be viewed or administered under any circumstance as a mechanism for removal of any member from the line of duty, either temporarily or permanently, but as a proactive structured program to help motivate individuals toward self-determined physical conditioning and healthy lifestyle choices.

The program is not punitive in nature, but is intended to assist members in achieving their fitness goals by providing monitoring, guidance, support and education

AVFD-Supported Gym Facilities

PD Gym

AVFD Members are welcome to use the facilities maintained by the Avon Police Department for the physical training of their officers. The facilities and equipment are located in Building 8 just north of the police headquarters building on the property of the Town offices at 60 West Main Street. The building is accessible 24 hours, and is unstaffed. A liability waiver must be completed and filed in police dispatch prior to the first use. AVFD supports the facility by periodically donating equipment for use by authorized personnel. There is no charge to use this facility. Facility use is limited to fire department members only; family members and friends are not permitted in the facility.

Healthtrax - Avon

AVFD has negotiated a discounted membership rate program with Healthtrax, which is available to all AVFD members. Physical training is as essential to firefight readiness as is fire skills training, and the services and equipment provided by Healthtrax can help our members achieve and maintain their fitness goals conveniently, and with a variety and availability unmatched in the local area. All members are encouraged to take advantage of this member benefit. Discounted rates are available for family members as well, as part of this program.

Health and Fitness Coordinator

The HFC serves as the administrator of the health and fitness program, and will oversee the day-to-day operation and make sure that the program does not wither or become neglected.

Peer Fitness Trainers – “Encourage, Support, Coach, Counsel”

Peer fitness trainers are fire service personnel specifically trained to assist other fire department personnel in setting and achieving their fitness goals safely and effectively as part of a structured health and wellness program. Among their many responsibilities, PFT's are accessible as a resource for our members who have questions regarding their fitness and exercise routines, and injury prevention during exercise. The PFT is to be the "buddy" that helps fitness partnerships succeed. The PFT works under the direction of the health and fitness coordinator, or may assume that role if necessary. The PFT may perform individual exercise revisions and coaching. This is a valuable resource for the promotion of preventative and corrective exercises, as well as for those members who have recently returned to work from an injury and may benefit from some continued supervision during exercise.

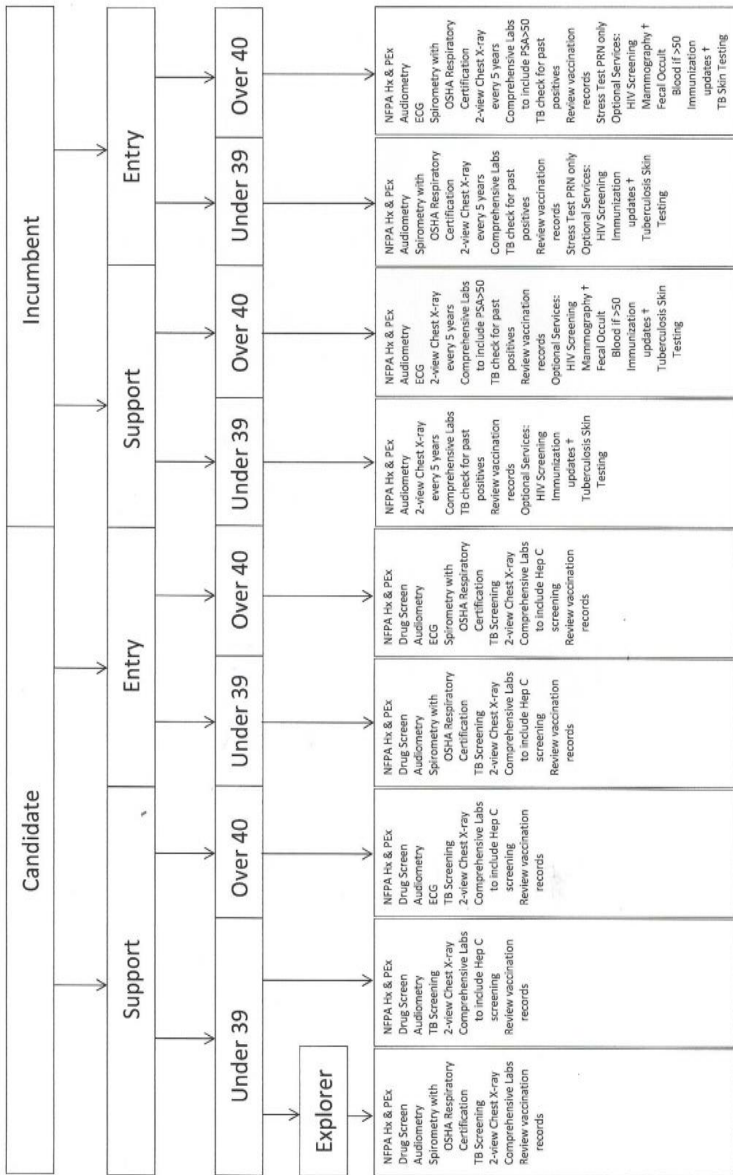
DriveTrain Athletics

AVFD has partnered with DriveTrain Athletics, a wellness and fitness organization based in Granby, CT, to help administer the physical training program of the fire department. DriveTrain's philosophy of instituting lifestyle modification and organizational culture change by focusing on the factors that drive and support personal motivation and achievable goals matches perfectly with the objectives of fire service health and wellness initiatives. Program offerings include weekly group fitness activities, monthly "Truck Trainer" activities, periodic education sessions, personal coaching, and an online community "FF365" to maintain communication and motivation among members in a protected and confidential environment.

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AVFD Physical Exam Content Decision Tree



Revised 4/18/17 All previous forms are obsolete.

†Note: Immunization updates, mammography, and stress testing require prior written approval from the fire department medical officer or Fire Chief.

AVON VOLUNTEER FIRE DEPARTMENT
Avon, Connecticut 06001

MEMO

To: All Personnel	From: Medical Officer	Date 3/29/16
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Subject:
Instructions for Scheduling Department Physicals

Physical exam by Hartford Healthcare Medical Group

1. Call HHC MG, obtain an appointment time.
2. Complete the necessary exam paperwork packet for Entry or Support personnel.
3. Fax to HHC MG a completed Appointment Confirmation Form as cover sheet along with the entire packet.
4. Members may choose to hand deliver their records, but must include the Appointment Confirmation Form in that delivery.

Physical exam by private primary care provider (PCP) of members choice

1. Complete PCP packet
2. Have PCP complete AVFD Form 25 at the time of your examination, and obtain copies of all necessary medical records for review by the department physician at HHC MG.
3. Fax to HHC MG a completed Appointment Confirmation Form, with "Private Physician Medical Record Review" circled, as cover sheet along with the entire packet and supporting examination documents (History, Exam, Labs test results, ECG, Spirometry, Audiometry, vaccination records, etc.). Be sure to indicate if the exam is for "Support" or "Entry."
4. Members may choose to hand deliver their records, but must include the Appointment Confirmation Form, with "Private Physician Medical Record Review" circled, in that delivery.
5. The AVFD Form 25, either the original or the copy, must be routed to the medical officer. That is how we know that a packet has been submitted for review, and are able to track its progress toward clearance.
6. If AVFD Form 30, Refusal of Preventive Occupational Medical Services is completed, either the original or a copy of that form must be routed to the medical officer for inclusion in the member's permanent medical file.

Physical exam through work (for career firefighter members or governmental employees)

1. Obtain complete examination records from your department examiner
2. Complete the **PCP** packet
3. Fax to HHC MG a completed Appointment Confirmation Form, with "Private Physician Medical Record Review" or "Outside Fire Department" circled, as cover sheet along with the entire packet and supporting examination documents from your work examiner (History, Exam, Labs test results, ECG, Spirometry, Audiometry, vaccination records, etc.)
4. Members may choose to hand deliver their records, but must include the Appointment Confirmation Form, with "Private Physician Medical Record Review" or "Outside Fire Department" circled, in that delivery.
5. The AVFD Form 25, either the original or the copy, must be routed to the medical officer. That is how we know that a packet has been submitted for review, and are able to track its progress toward clearance.
6. If AVFD Form 30, Refusal of Preventive Occupational Medical Services is completed, either the original or a copy of that form must be routed to the medical officer for inclusion in the member's permanent medical file.

Avon Volunteer Fire Department, Inc.

25 Darling Dr.
Avon, CT 06001
Ph. (860) 677-2644

January 27, 2016

Hartford Healthcare Medical Group
c/o Peter Kowalski, PA-C
Manager, Occupational Medicine Services
Hartford HealthCare Medical Group
via Electronic Mail

Dear Mr. Kowalski,

On behalf of the leadership of the Avon Volunteer Fire Department, Inc., I would like to authorize all members' access to their individual medical records upon appropriate request and valid identification. This is effective immediately and until further notice rescinding this authorization. Please do not hesitate to contact me should you require further assistance.

Thank you.

Sincerely,

Adam D. Corrado, MD, FACEP
Captain, Medical Officer
(860) 622-9216

FITNESS FOR DUTY EVALUATION/RETURN TO DUTY LOG

Fire Chief Approval: _____ Approval Date: _____

Advisory Committee Charter

Health and Safety

I. Purposes

The Committee is created by the Board of Directors in accordance with NFPA 1500 Chapter 4, NFPA 1582 Chapter 4, and AVFD Operations Manual Section 8 for the purpose of reviewing and making recommendations regarding the implementation of the department occupational health and safety programs.

II. Committee Charge

The committee is expected to conduct research, develop recommendations, and study and review matters pertaining to occupational safety and health within the fire department, with particular emphasis on the implementation of the wellness and fitness initiative; to offer recommendations for health and safety programs, and to provide information relevant to policy about the health and safety programs to the Fire Chief and the Board of Directors.

III. Membership

Members are appointed by the Fire Chief, serve voluntarily, and shall be composed of the fire department physician or his/her physician representative, a chief officer, two company officers, two non-officer operational members, and the medical officer. The medical officer shall serve as permanent chair of the committee. Other members may be permitted to serve on the committee with the consent of the Fire Chief and the regular Committee Members.

IV. Procedural Rules

Meetings: The committee shall meet at least semiannually, and may meet as frequently as required to complete assigned tasks. Procedure shall be informal but collegial, and not Parliamentary.

Subcommittees: Subcommittees may be formed at the discretion of the committee chair and may be composed of non-committee members, but supervised by committee members, for the purpose of research, analysis, task completion, drafting of proposals, and other purposes as may from time to time become advantageous.

Quorum: A quorum for holding a meeting will be established with the attendance of one chief officer, one line officer, one non-officer operational member, and the chair (4/7 members minimum). Alternates other than chief officers are not approved. Meetings must be rescheduled if a quorum cannot be established.

Minutes: Minutes of each meeting will be kept, and stored electronically on fire-department designated equipment. Minutes must be made available to the general membership within 14 days of meeting adjournment.

Consent Resolution
of the
Directors
of the
Avon Volunteer Fire Department, Inc.

The undersigned, being all the directors of the Avon Volunteer Fire Department, Inc., hereby consent to and adopt in writing the following resolution as of the 1st day of March, 2016.

Whereas, the Avon Volunteer Fire Department provides fire and rescue services to the community and residents of, and visitors to the Town of Avon, Connecticut and surrounding communities through mutual aid agreements via a trained corps of volunteer men and women, and

Whereas, the safety and well-being of our members must be of paramount concern as we provide service to the community, and

Whereas, firefighter health and wellness, as a means to achieve and maintain a constant state of readiness, is central to the success of the department's mission, and inherent to the 16 Life Safety Initiatives of the National Fallen Firefighters Foundation which is championed by fire service leadership, and

Whereas, the AVFD has established a comprehensive health and safety program that includes a physical examination program for candidate and incumbent members, a preventive medical services program to include seasonal vaccinations, plans for a periodic physical fitness monitoring program, an employee assistance program to include behavioral health services and access to critical incident stress management services, periodic assessment of physical and mental job skills, a fire incident and training rehabilitation program, a program for monitoring of rehabilitation in cases of injury and acquired disability, a comprehensive occupational safety program that complies with the requirements of Title 29 CFR 1910, parts .95, .120, .134, .1020, and .1030 (pertaining to noise exposure, hazardous waste and emergency response, respiratory protection, exposure and medical records access, and blood-borne pathogens), and a comprehensive infection control program, and

Whereas, the leading cause of death of fire service personnel remains heart disease and sudden death related to physical exertion and physiologic as well as psychological stress, and

Whereas, among the top preventable causes of death and disability among fire service personnel and retirees are heart disease, lung disease, cancer, musculoskeletal injury, motor vehicle trauma, and suicide, and

Whereas, health and wellness initiatives are aimed at reducing disability and maximizing longevity by taking active steps to reduce injury, prevent death and disability associated with cancer, heart disease, and suicide through targeted training, behavior modification, maintenance of physical fitness, and adoption of heart-healthy life styles, and maintaining an environment in which members in need of behavioral health assistance may receive the support needed to remain healthy and productive, and

Whereas, expenditures in support of firefighter health and wellness are as essential and indispensable as those for training and equipment, and must be measured proportionally with the other expenses in support of the mission of the corporation, and

Whereas, the efforts put forth to date must survive changes in board rosters and operational leadership to be effective;

Now, therefore, be it resolved that we, the sitting Board of Directors of the Avon Volunteer Fire Department, Incorporated, hereby support the Health and Safety program as essential to meet the needs of our members and our community; and

Be it further resolved to formally adopt and support the AVFD Wellness and Fitness Initiative, and

Be it further resolved to support the Wellness and Fitness Initiative as an essential component of the department's Health and Safety plan, and

Be it further resolved to work within the annual budget process to ensure necessary funds are available to develop and maintain an effective program, and

Be it further resolved to establish an initial annualized budget of \$1000 to be administered by the appointed Health and Fitness Coordinator, to be adjusted annually with the regular budget cycle, and

Be it further resolved to support the training and funds required to maintain the staffing of at least one certified Peer Fitness Trainer, and also to support the appointment of additional peer fitness trainers, certified or uncertified, and

Be it further resolved that Peer Fitness Trainers may be awarded 50 points, and the Health and Fitness Coordinator may be awarded 20 points annually according to a schedule to be reflected in AOG EX-4, for duties and activities specified and approved by the Board of Directors in AOG JD-3, and

Be it further resolved that the appointed Health and Fitness Coordinator and Peer Fitness Trainers should be eligible for bonus point awards regardless of point system values already awarded for other activities under AOG EX-4.


The officers of this corporation are authorized to perform the acts to carry out this corporate resolution.

 Robert Shillington 3/1/2016

Director, President Printed Name Date

 RAMONA MANSFIELD 3/1/16


Director Printed Name Date

 Joe Kowalsky 3/1/2016

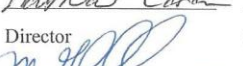
Director Printed Name Date

 William Green 3-1-16

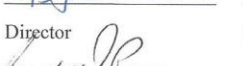
Director Printed Name Date

 Matthew Coran 3/1/16


Director Printed Name Date

 MICHAEL CALLIFER 1 MAR 2016

Director Printed Name Date

 James D. Pace 3/1/16

Director Printed Name Date

 Jean Barton 3/1/16

Director Printed Name Date

Director Printed Name Date

Director Printed Name Date

Director Printed Name Date

The Secretary of the Corporation certifies that the above is a true and correct copy of the resolution that was duly adopted at a meeting of the dated meeting of the board of directors.

 3/1/16

Signature of Secretary Date

Jean Barton

Printed name of Secretary

AVFD Wellness and Fitness Initiative:

A Ten-Year Progressive Plan for Culture Change

Purpose of the AVFD Wellness and Fitness Initiative

To motivate incumbent personnel toward, and replace retiring personnel with new members that are recruited with the expectation of, development and maintenance of a constant state of readiness, that values and maintains an athletic level of fitness (strength, flexibility and endurance), physiologic health (blood pressure control, glycemic control, weight management), heart-healthy lifestyle choice (avoidance of tobacco use, abstinence from drugs, moderation in use of alcohol), and adherence to best practices for uniform and personal decontamination after occupational exposure, respiratory protection, and protection from transmission of infectious disease.

Components of the AVFD Wellness and Fitness Program

Based on **NFPA 1583 Standard on Health-Related Fitness Programs for Fire Department Members**, tailored to meet the needs, and operate within the resources, of our department and community, and intended to ensure a ready force of well trained and physically fit rescuers, the WFI is composed of six main elements:

I. Health/Fitness Coordinator

Implementation of the fitness program begins with the appointment of the health and fitness coordinator (HFC). The HFC serves as the administrator of the health and fitness program, and will oversee the day-to-day operation and make sure that the program does not wither or become neglected. The **NFPA 1583 Standard on Health-Related Fitness Programs for Fire Department Members** states that the HFC shall have specific academic course

work relevant to the program components as well as formal certification from a professional organization. The department may from time to time have a member or members with the requisite training and experience (e.g., a member who majored in exercise physiology in college). However, if an existing staff member cannot be identified, the standard allows for the department to contract with an outside agent. Physical therapists, athletic trainers, and nurse practitioners are choices readily available in the local area. Besides the academic requirements, department officers should identify someone who demonstrates leadership and is approachable, since peer fitness trainers and the individual members may occasionally wish to consult with this individual regarding personal health matters.

II. Peer Fitness Trainer Program

Peer fitness trainers are fire service personnel specifically trained to assist other fire department personnel in setting and achieving their fitness goals safely and effectively as part of a structured health and wellness program. Among their many responsibilities, PFT's will be accessible as a resource for our members who have questions regarding their fitness and exercise routines, and injury prevention during exercise. The PFT is to be the "buddy" that helps fitness partnerships succeed. There is a PFT certification program through the American Council on Exercise (ACE) that was developed in conjunction with the International Association of Fire Chiefs and the International Association of Fire Fighters. PFT's attain certification by attending a five-day workshop and taking an examination to become certified. The PFT works under the direction of the health and fitness coordinator, or may assume that role if necessary. The PFT may perform individual exercise revisions and coaching. This is a valuable resource for the promotion of preventative and corrective exercises, as well as for those members who have recently returned

to work from an injury and may benefit from some continued supervision during exercise.

III. Periodic Fitness Assessment Program

Periodic fitness/physical assessments are important in any industry where manual work is deemed an essential job function, but especially so with the fire service. Here, not only is one's own health at stake but also that of team members, patients, and fire victims. NFPA 1583 states that the fitness assessment will be conducted at least annually and will be composed of five elements: aerobic capacity, body composition, muscular strength, muscular endurance, and flexibility. The AVFD ten-year plan for implementing this program calls for a graded, step-wise process by which members will initially be invited to participate in a voluntary assessment program. In years 3-5, a rewards-based program will be structured to incentivize members and increase participation. Starting in year 5, new recruits will be brought on board with mandatory participation in a structured assessment program, which will eventually become mandatory for all incumbent members by year ten. Quality review and program improvements based on participant feedback and data analysis will guide program development over the implementation period, and present and future recruitment and retention efforts will put a particular focus physical preparedness.

IV. Exercise Training

The exercise program component of NFPA 1583 has several sub-elements but in general will include an educational component regarding the benefits of exercise, guidelines on warm-up and cool-down periods, aerobic exercise availability, muscular flexibility, strength and endurance, and a component on healthy back exercises. The standard also dictates that members will receive an

individualized exercise prescription based on the results of the fitness assessment. This is where we see the importance of the Peer Fitness Trainer (PFT).

V. Education and counseling regarding health promotion

In addition to periodic presentations from the department's medical contractor Hartford Healthcare Medical Group which we currently enjoy, the department will continue to make available information regarding health risk reduction, fitness, and the prevention of occupational injury. Presentations at corporate meetings, and general email messaging is currently used to do this, but another convenient and effective way to do this is through a bulletin board. General or fire industry-specific information is readily available and can be posted on the board along with take-away pamphlets and brochures. Annual or semiannual training seminars on lifting, materials handling, and ergonomics are also a popular method of reducing injury and meeting the standard.

VI. Collecting and maintaining program data

Demographics, fitness assessment results, and program participation data are collected and saved to allow comparison at a future date--i.e. the next fitness assessment or the next year's group data. Although the department may wish to create a custom database using an available tool such as Microsoft Access, using Excel spreadsheets will also work and takes less technical savvy. A separate page for fitness assessment results should be created for each member and a separate page for group results. Although simple to implement, this process creates powerful information which allows the leadership to know if the program is working and where improvements need to be made. Positive outcomes also help to justify budget decisions such as the training and certification of PFTs or the purchase of new exercise equipment.

Overview Plan and Timeline for AVFD Wellness and Fitness Initiative Implementation

Phase I Promotion and Encouragement of Individual Adoption of Program Goals

Phase II Voluntary Participation in Quarterly Fitness Assessments

Phase III Required Participation of New Recruits in Quarterly Fitness Assessment Program (QFAP)

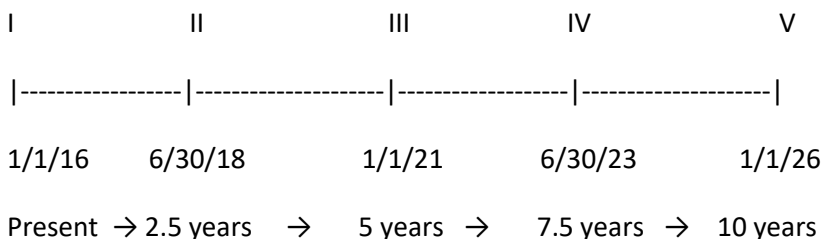
Phase IV Required Participation of All Members with < 10 Years of Service in Quarterly Fitness Assessment Program

Phase V Required Participation of All Personnel in QFAP

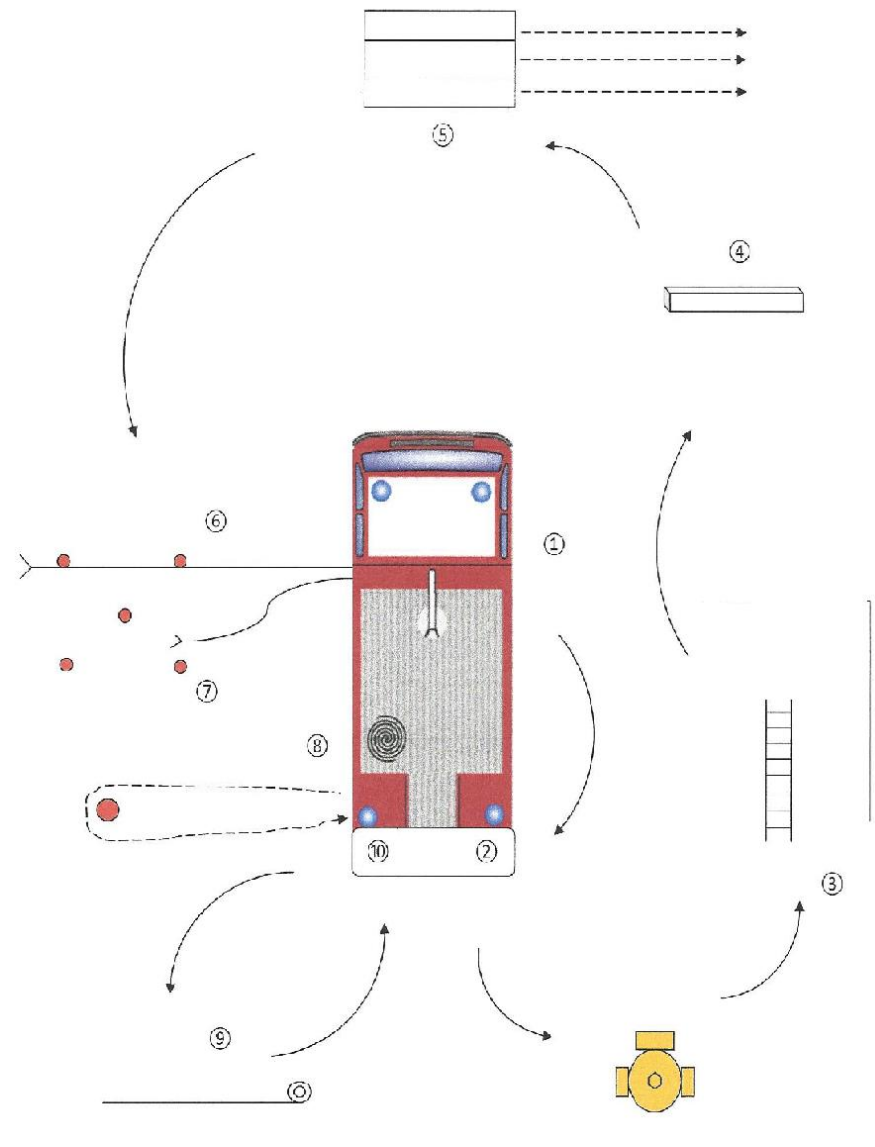
Components:

1. Quarterly Fitness Assessment: BMI, Muscular Strength, Flexibility, cardiovascular and muscular endurance, blood pressure, weight
2. Annual Physical Performance Qualification
3. Recruit Fitness Assessment
4. Fitness Program (crew workouts, individual programs, gym memberships)
5. Incentive Program

Timeline for Phase Implementation:



Physical Performance Qualification Course Layout



AVFD Physical Performance Qualification Course Description

Station ① Donning and Mounting Prop

Firefighter dons protective clothing including gloves and helmet, and mounts apparatus. Entry firefighters don SCBA without mask and wear SCBA for remainder of tasks. When ready to proceed, firefighter dismounts apparatus and proceeds to Station ②

Station ② Hydrant Prop

Firefighter removes hydrant valve device or LDH from stowage on engine company and connects to hydrant. (OPTIONAL: qualification may include opening of the hydrant to ensure secure connection) Firefighter proceeds to Station ③.

Station ③ Ladder Prop

Firefighter lifts and carries 24' extension ladder to deployment site 20 feet distant, deploys and raises ladder, positions ladder for climbing. Entry firefighter climbs ladder with forcible entry tool, then returns to ground. (OPTIONAL: qualification may include lock-in demonstration, support firefighter may be instructed to climb ladder as well). Ladder is then lowered and carried back to starting point. Firefighter proceeds to Station ④

Station ④ Forcible Entry Prop (OPTIONAL ALTERNATIVE TO EXTRICATION TOOL PROP)

Firefighter strikes a weight with simulated firefighting axe (a supplied sledge), driving it down a track to a designated finish point, as many or as few strikes as are required to complete the task. Firefighter then proceeds to Station ⑤.

Station ⑤ Crosslay Hose Bed Prop

Firefighter fully extends 200' of uncharged hoseline from simulated speedlay or crosslay hose bed, then proceeds to Station ⑥.

Station ⑥ Hoseline Repositioning Prop

A charged hoseline is laid out on the ground. Firefighter advances, withdraws, and/or repositions hose around simulated obstacles (traffic cones) as instructed during course briefing. Firefighter proceeds to Station ⑦.

Station ⑦ Attack Line Operation Prop

Firefighter advances charged hoseline and demonstrates operation of the line with T-Z-O pattern applications, then retreats, while still flowing water, to the starting point. Firefighter proceeds to Station ⑧.

Station ⑧ Vent Fan/Power Saw Carry Prop

Firefighter removes designated equipment from compartment, carries equipment around traffic cone placed 25' away from truck and returns it to the compartment, then proceeds to Station ⑨.

Station ⑨ Hose Roll and Storage Prop

Firefighter doffs SCBA and coat, rolls hose for stowage, then stows hose roll on tailboard of apparatus at Station ⑩.

Station ⑩ Apparatus Climb

Firefighter climbs to hose bed of apparatus from tailboard, then returns to ground and retrieves coat. This completes the evolution.

Frequently Asked Questions About the Physical Performance Qualification

Below are the ten most frequent questions that we receive relative to the qualification process:

Why are we doing this? There are several reasons, but the bottom line is that ensuring that every responding firefighter is physically capable of performing the essential job tasks is a life safety issue, and annual qualification is an important and valid requirement of NFPA 1500* that the department will adhere to moving forward. Determining that a person is or is not capable of performing the essential job tasks must happen in a controlled and non-emergency setting. The fireground operation, where lives are at risk, is not the time to discover there is a problem. We check our safety equipment and apparatus regularly for operational readiness. We need to check our people regularly too. No one would accept a faulty SCBA or broken pump as meeting safety standards. Why would any of us tolerate a physically incapable firefighter on the fireground?

Isn't that what the annual physical is for? No, it is not. The annual physical verifies that one is healthy enough to engage in firefighting operations, but in no way measures a person's capability (strength, endurance, flexibility, coordination and conditioning) to engage in emergency operations. The two assessments in conjunction are necessary for determining force readiness.

Why can't skills be checked off as they are performed during routine training instead of completing a separate course? Just as important as having the strength, coordination and flexibility to perform each individual task is having the conditioning and

endurance to complete multiple tasks in succession. The ten-station course effectively assesses each of these physiologic parameters in a way that is reproducible every year, and standardized for every participant.

What if I don't pass? There is no grading for the qualification - no pass or fail. Members only need to complete the qualification. Individual time is kept on the course only for data collection and quality assurance purposes, and is kept confidential.

What if I don't complete the qualification? The qualification is composed of 13 routine fireground tasks that may typically be encountered in the first 15 minutes of a fire suppression incident. There should be no reason why anyone should not be able to perform these tasks. If, however, a firefighter lacks the physical capability to perform each of these tasks, they must rehabilitate themselves and improve their readiness to respond and do the job before being permitted to engage in emergency operations.

What if I don't perform a task correctly? The qualification is a physical capability evaluation under the medical division, not a skills competency evaluation under the training division. For the purposes of the PPQ, we are less concerned with whether the skill is proficient than that the task can be completed. Remember, this is a life safety issue.

How often will I have to do this? As of 2017, every firefighter is required to be qualified annually as meeting the physical performance requirements by the deadline set by the training chief.

How often will qualification be offered? There are several ways to be qualified, including as a drill night activity, or as an arranged activity among company members outside of the regular training schedule. June is currently designated the PPQ month on the

training calendar. A final make-up course will be offered in the fall for members who are unable to complete the course in June, to coincide with community recruiting efforts.

What if I miss the qualification when it is offered? It is the shared responsibility of the individual and the company officer to ensure that each member meets all requirements for operational response. Nevertheless, the medical officer is authorized to assign inactive duty status to any firefighter who does not meet this requirement by the annual deadline, until such time as they have been qualified.

It's not just about strength and conditioning. The PPQ also supports the will to do the job, not just the strength. It gives the member confidence that he or she can indeed perform the tasks. One needs both the strength and conditioning, as well as the heart and mind to be able to do this work. When one completes the course, one feels a sense of accomplishment, and takes away a renewed sense of confidence that lasts long after the course is demobilized. It is as much a confidence course as it is a physical challenge, which translates directly to the fireground. When a member finds himself challenged on the fireground, he will remember his success on the qualification course, and will gain that extra boost of confidence needed to be successful in their task.

***NFPA 1500 STANDARD ON FIRE DEPARTMENT OCCUPATIONAL SAFETY AND HEALTH**

10.2.3 Members who engage in emergency operations shall be annually qualified as meeting the physical performance requirements established by the fire department.

10.2.4 Members who do not meet the required level of physical performance shall not be permitted to engage in emergency operations.

10.2.5 Members who are unable to meet the physical performance requirements shall enter a physical performance rehabilitation program to facilitate progress in attaining a level of performance commensurate with the individual's assigned duties and responsibilities

Safety & Health: Preparing for “The First Five Minutes”

By Jake Rhoades, EFO, CFO, CMO, CTO, Fire Chief, Kingman (AZ)
Fire Department

The topic of this year's Safety Stand Down is “The First Five Minutes! Stretching the Initial Hose Line—Water on the Fire.”

This is a tremendous topic and one we often take for granted. However, as we all know, getting water on the fire can be a dynamic process that requires decision making on multiple levels, the ability to properly use the equipment at hand and the physical and mental capacity to carry out the mission at hand for a successful outcome.

Every member of the organization has a role in an incident's outcome, including the fire chief, incident commander, company officer and firefighter. However, if we consider arriving on scene as the start of the First Five Minutes, what are we doing to even arrive at the starting line from a health-and-wellness perspective?

The ability to operate both strategically and tactically on scene is our overall mission, but as we all know, this encompasses a multitude of

factors before we even arrive. Developing a comprehensive health-and-wellness program ensures members are physically and mentally capable of the First Five Minutes, but more importantly, it ensures they're prepared for every minute of their retirement, something we all work very hard for and deserve to enjoy.

So what's your department doing to ensure you arrive ready to perform? It starts with NFPA 1582 physicals. Many departments have these in place as a hiring requirement, but they often go by the wayside for incumbents due to a variety of factors, including funding, a lack of prioritization and even culture.

All of the groups mentioned earlier should demand these physicals on an annual basis. If they're not already happening in your organization, work together to achieve the most important factor in awareness and recognition: annual physicals for every member of your organization—fire chief to firefighter.

The next factors are pretty easy: allotting time for working out and ensuring our personnel have access to the equipment they need to work out. We're all busy and allotting time for daily workouts can be difficult, but with proper time

management and accountability, this can be easily achieved.

Do you have members who don't want to work out today or are too sick or they're in pain, preventing them from working out while on duty? Why are they on duty?

The logic is simple; if they're unable to work out, how are they able to perform their duties on the fire scene during the First Five Minutes?

Having the equipment is seemingly easy, as many departments have treadmills and weights, and with functional fitness programs like the one offered by The First Twenty, the cost of equipping a gym for our firefighters is becoming even cheaper. We work very hard budgeting for other priorities; we should do the same for our fitness equipment so our members have what they need while on duty.

Having the ability to perform an annual health assessment is simple because it's a baseline examination measuring the five components of fitness:

- Body composition
- Muscular strength

- Muscular endurance
- Aerobic capacity
- Flexibility

This assessment provides our members with ongoing measurements that can be used to track long-term health and fitness levels.

Using department PEER trainers for individual exercise prescriptions can serve as a great tool for the overall health of members and can identify trends in your organization that need to be addressed.

Providing individual prescriptions allows for personalization and attention on every level of fitness, because no two members are the same and they shouldn't be treated that way when it comes to their health-and-wellness goals.

Educational information on the latest trends, nutrition and other health topics should be incorporated into training plans and delivered to all members on a regular basis. Providing the tools and knowledge in educational formats through subject-matter experts provides members information they may not have been aware of previously. This is an opportunity to look at the latest factors affecting the fire service in

order to overcome the *superman* or *invincibility* mindset. There are plenty of informative topics available today.

The final component is the physical-agility test (PAT). This is often a contentious topic if it isn't used or implemented correctly.

Having all members—fire chief to firefighter—perform a PAT annually to assess the skills performed on the fireground, also known as the essential job functions, is critical in preparing for the First Five Minutes.

Having the PAT validated for your specific organization is a necessary buy-in as well as a liability standpoint, but it's well worth it. Many members are afraid of this component and many fire chiefs are afraid of going down this avenue, but with an open dialogue and constant communication, you can also solve these issues before they arise.

Many other elements of a comprehensive program should be maintained in your organization, such as return-to-work physicals including functional capacity examinations and mental and behavioral health programs.

As we all know, the First Five Minutes is our mission and what we're known for. However, the First Five Minutes starts long before you ever arrive on scene, and each and every one of us has a stake in organizational success. It isn't easy, but it is necessary for our success and the success of the First Five Minutes.

[Jake Rhoades](#), EFO, CFO, CMO, CTO, is the fire chief of Kingman (Ariz.) Fire Department. He's a member of the IAFC's [Safety, Health & Survival Section](#) board, and he has been a member of the IAFC since 2007.

16 FIREFIGHTER LIFE SAFETY INITIATIVES

1. Define and advocate the need for a cultural change within the fire service relating to safety; incorporating leadership, management, supervision, accountability and personal responsibility.
2. Enhance the personal and organizational accountability for health and safety throughout the fire service.
3. Focus greater attention on the integration of risk management with incident management at all levels, including strategic, tactical, and planning responsibilities.
4. All firefighters must be empowered to stop unsafe practices.
5. Develop and implement national standards for training, qualifications, and certification (including regular recertification) that are equally applicable to all firefighters based on the duties they are expected to perform.
6. Develop and implement national medical and physical fitness standards that are equally applicable to all firefighters, based on the duties they are expected to perform.
7. Create a national research agenda and data collection system that relates to the initiatives.
8. Utilize available technology wherever it can produce higher levels of health and safety.
9. Thoroughly investigate all firefighter fatalities, injuries, and near misses.
10. Grant programs should support the implementation of safe practices and/or mandate safe practices as an eligibility requirement.
11. National standards for emergency response policies and procedures should be developed and championed.
12. National protocols for response to violent incidents should be developed and championed.
13. Firefighters and their families must have access to counseling and psychological support.
14. Public education must receive more resources and be championed as a critical fire and life safety program.
15. Advocacy must be strengthened for the enforcement of codes and the installation of home fire sprinklers.
16. Safety must be a primary consideration in the design of apparatus and equipment.

LEARN MORE: www.EveryoneGoesHome.com

