

Texas Fire Chiefs Association
DOCUMENT SUBMISSION FORM

Candidate Department: **Irving Fire Department**

Best Practice Standard: 1.16 Risk Management Program

Proofs of Compliance Submitted:

1. IFD Risk Management Plan
2. Copy of email disseminating the IFD Risk Management Plan

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Date:

Evaluator's Review

Evaluator:

Date Accepted:

Irving Fire Department Risk Management Plan



Fiscal Year 2013 - 2014

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Irving Fire Department

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Introduction

EVERYONE GOES HOME!!!

The first ever National Fire Fighter Life Safety Summit was convened on March 10th and 11th 2004 to bring the leadership of the fire service together for two days to focus all of their attention on one critical concern.

Every year over 100 firefighters lose their lives in the line of duty in the United States; that's one approximately every 80 hours.

In cooperation with the United States Fire Administration, the National Fallen Firefighters Foundation has established the objectives of reducing the fatality rate by 25% within 5 years and by 50% within 10 years. The purpose of the Summit was to produce an agenda of initiatives that must be addressed to reach those milestones and to gain the commitment of the fire service leadership to support and work toward their accomplishment.

The Summit provided an opportunity for all of the participants to focus on the problems, jointly identify the most important issues, agree upon a set of key initiatives, and develop the commitments necessary to move forward with their implementation.

The Summit was designed to produce a single combined agenda for change that all of the participants, individuals, and organizations could agree to support and promote. The product of their effort has provided the basis for a joint strategy to produce the desired results over the next ten years.

This is the first step along the path that has required a huge commitment of energy and resources over the coming years. Some of the initiatives that were agreed

upon involved radical changes for the fire service. Any revolutionary movement requires committed and unwavering leadership to bring about major change. The summit resulted in a single consolidated set of sixteen key initiatives and implementation strategies.

16 Key Initiatives and Implementation Strategies

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. Empower all firefighters to stop unsafe practices.
5. Develop and implement national standards for training, qualifications, and certifications (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. Ensure grant programs support the implementation of safe practices and/or mandate safe practices as an eligibility requirement.
11. Develop and champion national standards for emergency response policies and procedures.
12. Develop and champion national protocols for response to violent incidents.
13. Provide firefighters and their families' access to counseling and psychological support.
14. Provide public education more resources and champion it as a critical fire and life safety program.
15. Strengthen advocacy for the enforcement of codes and the installation of home fire sprinklers.
16. Make safety be a primary consideration in the design of apparatus and equipment.

The third of these key initiatives calls for us to, "Focus greater attention on the integration of risk management with incident management at all levels, including strategic, tactical, and planning responsibilities." *NFPA 1500: Standard on Fire Department Occupational Safety and Health Program* also calls for the implementation of a risk management plan to guide the fire department in identifying, evaluating, and mitigating the risks commonly associated with the fire service.

The eleventh of these strategies also calls for us to, "Develop and champion national standards for emergency response policies and procedures." *NFPA 1710: Standard for the organization and deployment of fire suppression operations, emergency medical operations, and special operations to the public*

by career fire departments is backed by the empirical data provided in the National Institute of Standards and Technology Report on Residential Fireground Field Experiments.

The Irving Fire Department has done an admirable job of putting programs and procedures into place to make the job as safe and supportive as possible. However, a better system of identifying and evaluating current risks needs to be established and consistently practiced.

This document is intended to initiate the process of creating a risk management plan for the Irving Fire Department to ensure that...

EVERYONE GOES HOME!!



STRUCTURE

A FRAMEWORK FOR CHANGES IN SAFETY

The structure of the risk management plan includes the following sections:

Risk Management

The section on risk management is a brief primer on basic risk management concepts and practices

Identified Risks Highlighted for Action in Fiscal Year 2013-2014

This section contains a discussion of identified risks needing attention to reduce the exposure to hazards experienced by members of the Irving Fire Department. It highlights actions and initiatives already in place, including a discussion of the Incident Command System, Personnel Accountability System, and Workers Compensation System used to control and transfer the risks we encounter. This section also makes recommendations for improvements in hazard mitigation and reduction.

Assignment of Duties and Safety Practices

This section contains an assignment of duties as directed by the City of Irving Department of Risk Management. Also included in this section is a set of safety practices prescribed by the Department of Risk Management.

Organization

This Risk Management plan has been developed by collecting available data on Irving Fire Department line of duty injuries and illnesses, interviews with officers and members of the fire department, review of Irving Fire Department Procedure Manuals and Rules and Regulations, and consultation with the City of Irving Department of Risk Management.

The data collected on injury and illness was organized, analyzed, and combined with the interviews to identify the risks addressed in this plan. This information is organized in table form in Appendix "A".

It was found that the fire department has a very complete set of control measures already in place to address most risks. Each section begins with the portions of those procedures that address the risks identified for action in fiscal year 2013-2014.

Following the procedures are discussions and recommendations for action during the next fiscal year.

Synopsis of Findings

In Brief...

Procedures

The fire department has done an excellent job putting programs and procedures into place to address the risks faced by members of the fire service. The Rules and Regulations, General Procedures, and Emergency Procedures are quite complete and already contain control measures for the potential risks and the risks identified for action during the next fiscal year.

The Risk Management Plan

The primary recommendation for action in fiscal year 2013-2014 is the formalized implementation of a risk management plan for the Irving Fire Department. The City of Irving has a Risk Management Plan that covers every department in the city. However, NFPA 1500 calls for each fire department to have a risk management plan that deals specifically with their department.

As previously stated, the fire department has already done the difficult job of identifying the risks and putting control measures into place. The task at hand for the coming fiscal year is developing a risk review and analysis process, and addressing the action list of identified risks highlighted for fiscal year 2013-2014.

Department of Risk Management

The final section includes portions of the procedures established by the City of Irving Department of Risk Management that deal with the duties assigned to various members of the fire department and the safety practices that have been established for each employee.

Risk Management

A Brief Overview

Risk Management

A COMMON SENSE APPROACH TO MANAGING RISK

Risk management involves the following five steps:

- Risk Identification
- Risk Evaluation
- Establishing Priorities
- Risk Control
- Program Monitoring

Risk Identification

The first step in the risk management process is the identification of the various risks faced by the fire department. This is probably the most important step since a risk that is not identified will often not be properly managed.

There are a number of methods and techniques that can be useful in identifying risks. Some of the more important ones are interviews with staff officers and operations personnel; physical inspections; budget analysis; loss and claims analysis.

Interviews

Interviews with staff officers and operations personnel reveal many risks. Operations personnel know what happens on emergency scenes and can provide information about techniques, safety consciousness, hazardous operations and practices. Staff officers can provide information about current operations, management practices, future plans, risks they currently recognize, how well current risk management systems are working, and how well proposed programs might work.

Physical Inspections

Physical inspections of emergency scenes, fire stations, storage areas, and other premises provide information about construction and operating procedures, existing hazards, and protective systems. Unannounced on-site inspections provide a true picture of normal job and safety procedures.

Data Collection

Data should be collected and retained on all line of duty accidents, injuries and illnesses. This data should include hours or days of work missed, days or hours of hospitalizations, reassignment to light duty (etc...)

Budget Review

Budget review can provide information about current, proposed, and discontinued programs.

Additional sources of information are interviews with legal counsel, statistics, publications of professional associations, computerized inventory management systems, and procedures manuals.

Risk Evaluation

The interviews, physical inspections, data collected, and budget review should be synthesized into a form that allows for the evaluation of identified risks. The evaluation has two parts. The first part evaluates the *FREQUENCY* of the risk. The second part evaluates the *SEVERITY* of the risk. *Frequency* identifies how often an accident, injury or other loss will occur as a result of an identified risk. *Severity* is a measure of the cost, direct and indirect, associated with an identified risk.

Establishing Priorities

Once evaluated on the basis of frequency and severity, the risks need to be prioritized so that an action list can be initiated. The priority list can be established on a cost/benefit basis, on an insurance premiums basis, on a purely cost basis, on an ease of implementation basis, on a time for implementation

basis, on a time for results basis, or on the basis of a combination of these factors.

Risk Control

Techniques used to handle risk include:

- **Avoidance of the risk**
- **Risk retention**
- **Loss prevention and control**
- **Risk transfer**

In actual practice, rarely is a single one of these techniques used alone to handle a particular risk. It is much more common to combine several techniques in combination for each type of risk.

Risk Avoidance

Risk avoidance is probably the least used of all the risk management techniques because it usually requires substantial changes in the way of doing business. It involves avoiding risks associated with a particular operation by not engaging in the operation.

Risk Retention

Risk retention includes self-insurance and deductible retention and can create substantial cost savings. It is best used when:

- The potential annual loss is small enough to be conveniently treated as a normal operating expense
- The probability of loss is sufficiently determinable that the predicted loss can be quantified and budgeted for
- The costs of insurance is disproportionately high when compared to the costs of retention.

Risk retention is often selected by accident. If a risk is not identified and managed through one or more of the other techniques, it will often be retained by default. Risks should not be retained without a conscious decision to do so.

Loss Prevention and Control

Loss prevention and loss control programs decrease the chance of a loss occurring and minimize the effects of losses that do occur. Insurance premium costs are at least partially a reflection of loss costs.

Risk Transfer

Risk transfer includes purchasing insurance policies and providing hold harmless or indemnity clauses and other stipulations in contracts. It may also include transferring risk to third party contractors, such as, hazardous materials clean-up companies.

Program Monitoring

The Fire Chief shall monitor the various techniques used to handle risks on an ongoing basis and adjust them when necessary to compensate for changes in risk levels. Different aspects of program monitoring should be ongoing, as well as, scheduled monthly, annually, and tri-annually.

Identified Risks Highlighted for Action in Fiscal Year 2013-2014

An Action List

MOTOR VEHICLES

Roadways are dangerous places, don't add to the hazards.

The use of vehicles and fire apparatus is indispensable to conducting fire department operations. Vehicular collisions are potentially the most costly losses we can incur. Likewise damage to apparatus will reduce the department's ability to carry out its mission and objectives. Unless safe driving is the rule, accidents can adversely affect the fire department in efforts to accomplish its mission and maintain a good public image.

Article XII of the Irving Fire Department Rules and Regulations addresses the safety concerns of fire department apparatus.

SPEED

Getting there is half of the battle.

1. The following speed limits are established for all Fire Department vehicles when responding Code 3:
 - a. On congested streets or narrow residential streets not more than five (5) mph over the speed limit.
 - b. On major streets and thoroughfares not more than ten (10) mph over the speed limit.
 - c. In center lanes, or oncoming traffic, maximum speed twenty (20) mph.
2. All maximum speed limits should be adjusted down to compensate for road, weather and traffic conditions.

3. Apparatus drivers shall be able to stop at all red lights and stop signs if conditions warrant.

FALLS FROM MOVING VEHICLES

Stop...Until everyone is seated and belted.

Irving Fire Department Rules and Regulations quite simply state...

“Seatbelts shall be worn by all vehicle occupants.”

Seat belts save lives!

DRIVING SAFETY PROGRAM

The City of Irving Risk Management Department has established the following Driving Safety Program:

A. The Fire Chief shall:

1. Require personnel to fully adhere to safe driving policies and frequently monitor compliance;
2. Review each collision with the employee and a supervisor and take all steps necessary to prevent a recurrence ;
3. Establish policies on disciplinary actions against employees and their supervisors who show a disregard for good driving practices and apply them consistently;
4. Maintain all assigned vehicles adequately for safe operation by inspecting them periodically for safety discrepancies, malfunctions, signs of abuse, unreported damage, and cleanliness and have repairs made as soon as possible;
5. Support the fire department’s driver training program;
6. Support the department’s accident review board;

7. Determine if an employee has demonstrated the ability to operate fire apparatus; and
8. Insist that employees wear seat belts while operating or riding in a fire department vehicle.

B. Supervisors shall:

1. Only allow an employee to drive a vehicle who:
 - a. has a valid State of Texas driver's licenses for the type of vehicle he or she is to drive;
 - b. has satisfactorily demonstrated complete familiarity with its functions; and
 - c. thoroughly understands the manufacturer's operating instructions, vehicle limitations, and emergency procedures.
2. Observe driving practices of employees and take action immediately to improve driving behavior;
3. Review all vehicle collisions with employees at safety meetings;
4. Report unsafe vehicles and deliver them to Fleet Maintenance to be repaired;
5. Follow the decisions and recommendations of the accident review board;
6. Require employees to follow defensive driving practices;
7. When appropriate, compel a driver to attend defensive driving class.

C. Each employee driving a city vehicle shall:

1. Obey all pertinent traffic laws related to the operation of the fire department vehicle at all times;
2. Conduct an inspection of the vehicle before driving it and if there is damage or if the vehicle is unsafe, report it to his or her supervisor immediately;
3. Notify the supervisor if his or her driver's license is rescinded permanently or for a certain time period;

4. Notify their supervisor in writing of any condition noted that might cause an accident.;
5. Understand fire department safety policies and promote safe operations;
6. Ensure safe operation of the vehicle, the safe condition of any auxiliary equipment attached to the vehicle, and the safety of cargo placed in or on the vehicle; and
7. Call police to investigate **all** collisions involving fire department vehicles and report details to the immediate supervisor as soon as possible in accordance with departmental guidelines.

D. Department Safety Officers will:

1. Provide training for fire department employees in the safe operation of vehicles, as well as, schedule and mandate participation in the Defensive Driving Course;
2. Give road tests to determine competency of drivers in jobs primarily requiring considerable driving or driving special vehicles or apparatus;
3. Understand fire department safety policies and promote safe operations;
4. Observe and report to supervisors unsafe occurrences involving fire department vehicles;
5. Observe the conditions of the vehicles within the department and:
 - a. follow preventive maintenance schedules;
 - b. ensure state vehicle inspections are made each year; and
 - c. ensure that drivers and operators check vehicles daily for proper servicing and conditions for safe operations.
6. Ensure all employees possess and maintain a current, valid and appropriate operator's license for the type of vehicles being operated; and
7. Develop programs to effect safe and courteous operation of motor vehicles by employees.

DRIVER CERTIFICATION AND STANDARDS

A. Employees who drive fire department vehicles shall:

1. Be at least 21 years of age;
2. Possess the appropriate license for the type of vehicle to be operated.
3. Have successfully completed the requirements of the fire department's road test within thirty (30) calendar days from the date of hire.
4. Have successfully completed a defensive driving course within ninety (90) calendar days from the date of hire;
5. Have successfully completed a defensive driving course at least once every three (3) years after the date of hire; and
6. Be able to perform the tasks required for full operational and safe use of the apparatus as determined by the guidelines of the DOT and the State of Texas statutes.

ACCIDENT AND INCIDENT REVIEW BOARD

A. A City Accident and Incident Review Board shall review motor vehicle and occupational accidents and incidents in which:

1. Death(s) occurred;
2. One or more persons was injured to the extent that:
 - a. hospitalization for twenty-four (24) hours or longer was required; or
 - b. a period of recuperation longer than seven (7) days was required;
3. Damage of \$3,000 or more was done to property or equipment; or
4. A city employee committed willful violation of federal, state, or local policies or law.

B. A fire department review board will review all other motor vehicle and occupational accidents and incidents. The departmental review board will use the same guidelines for reviewing accidents and incidents as the city

Accident and Incident Review Board and will forward its results to the Risk Management Office.

C. If the fire department review board wants the city Accident and Incident Review Board to review an event, the department head shall:

1. Request a review by the city Accident and Incident Review Board in a notice to the Risk Manager; and
2. Forward all documentation concerning the event to be reviewed to the Risk Manager.

D. The Risk Manager shall schedule the review for a meeting of the city Accident and Incident Review Board.

E. Responsibilities

1. The Accident and Incident Review Board will review motor vehicle or occupational accidents and incidents monthly considering the circumstances involved in each event, testimony given by witnesses, and written reports.
2. Board Members will render a decision as to whether the Accident or Incident is:
 - a. Non Preventable/Non Chargeable
 - b. Preventable/Non Chargeable
 - c. Preventable/Chargeable
3. Discipline is at the discretion of the Fire Chief.
4. The Fire Chief will convey his approval of the board's recommendation. Any action taken will be conveyed, in writing, to the board chairperson on or before the tenth working day after he receives the review board's decision.

WORKING SAFELY NEAR MOVING TRAFFIC

Don't play in the street.

Emergency Procedure 23.2 deals with the risks associated with working near moving traffic. It is the policy of the Irving Fire Department to position apparatus and other emergency vehicles on streets, roads, highways or expressways to protect the incident scene including Fire Department personnel, law enforcement officers, tow service operators and the public.

It is our goal to mitigate the incident as quickly and safely as possible with the least amount of traffic disruption.

Since members are exposed to high risk when operating in or near moving vehicle traffic, we will operate to provide a protected environment at any roadway incident.

Procedures for creating a PROTECTED ENVIRONMENT include:

- A. Apparatus and Emergency Vehicle Guidelines – These procedures are for safe parking of apparatus and emergency vehicles when operating in or near any moving traffic.

Position first-arriving apparatus to protect the scene, patients, and emergency personnel.

- a. Initial apparatus placement should create a “block” establishing a physical barrier between the incident scene and approaching traffic.
- b. Use apparatus placement to slow approaching motorists and redirect them around the scene.

- c. Use Fire Department apparatus to block at least one additional traffic lane more than that already obstructed by the involved vehicle(s).
- d. Position apparatus to protect the Driver from being exposed to approaching traffic while operating at the pump panel.
- e. Park large apparatus to create a safe parking area for MICUs and other Fire Department vehicles. Operating personnel, equipment and patients should remain in the “shadow” created by the blocking apparatus.
- f. Establish a temporary work zone sufficient to include all patient vehicles, roadway debris, the patient triage and treatment area, the extrication work area, personnel, tool staging area and the MICU loading zone.
- g. Position the MICU within the temporary work zone. Angle the rear patient loading door area away from the nearest lanes of moving traffic.
- h. Stage unneeded emergency vehicles off the roadway or return these units to service whenever possible.
- i. At intersections, or where the incident is near the middle lane of the roadway, protect two or more sides of the incident.
 - i. Position police vehicles to expand the initial temporary work zone from traffic approaching from opposing directions with a goal of effectively blocking all exposed

sides of the work zones. Prioritize the order of “blocking” from most dangerous to the least critical traffic direction.

- ii. The police have several traffic control priorities. Provide specific directions to police officers relative to **your** traffic control needs.

 - j. Place (or have the police place) traffic cones at 15’ – 30’ intervals for a distance of 75’-150’ from the rear of the blocking apparatus toward approaching traffic to provide advance warning to approaching motorists. The faster and higher the traffic volume, the greater the cone separation distance. Cones identify the transition and tapering actions expected of the approaching motorist.

 - k. If necessary, in order to extend the advance warning area for approaching motorists, obtain additional traffic cones from police units.
- B. Highway Operations – High-volume limited access highways include expressways, toll-ways and multi-lane roadways. The Police Department and Department of Transportation (DOT) have a desire to keep the traffic moving on these high-volume thoroughfares. For the safety of operating personnel and the patients involved, any or all lanes, shoulders, and entry/exit ramps of these limited access highways can be completely shut down if necessary. However, this should rarely occur and only for as long as absolutely necessary. Safe parking procedures at expressway, toll-way, and limited-access, high-volume multi-lane roadway incidents include:

- a. The first-arriving engine company apparatus should establish an initial block of the lane(s) occupied by the vehicle(s) plus one additional traffic lane.

- b. A truck company will be automatically dispatched to all incidents on all limited-access, high-volume expressways, toll-ways, and highways within the City in order to:
 - i. Establish an upstream block occupying a minimum of two lanes plus the paved shoulder of the highway or blockage of three driving lanes of traffic upstream of the initial block provided by the first-arriving apparatus.
 - 1. Position this apparatus considering all factors that limit sight distances of the approaching traffic including ambient lighting conditions, weather-related conditions, road conditions, design curves, bridges, hills and over or underpasses.

 - 2. This truck shall be positioned far enough upstream of the initial block to provide a safe distance in case of the truck being struck from the rear but not so far upstream as to allow vehicles to pass the truck, enter the lanes they are blocking, and endanger either the company providing the initial block or the companies inside the temporary work zone.

- c. Place (or have the police place) traffic cones on limited-access, high-volume roadways thirty (30') feet apart, with the last cone approximately one hundred fifty (150') feet "upstream".

- d. If the police are not handling traffic control, assign a “flagger” to monitor the response of approaching motorists as they are directed to transition to a slower speed and taper into merged lanes of traffic.
 - e. Notify the Incident Commander (IC) on the incident operating channel of any approaching traffic that is not responding to the speed change, transition, tapering and merging cautions. A series of long horn blasts should be used to audibly warn all operating personnel of a concern for the actions of an approaching motorist.
 - f. The truck company will maintain their blocking assignment until relieved by the IC or the fire company providing the initial block.
- C. Remove crews, apparatus, and equipment from the highway promptly to reduce exposure to moving traffic and minimize traffic congestion.

Discussion and Recommendations

Speed

While speed does not appear to be a major contributing factor in recent fire department vehicle accidents, informal interviews with members assigned to drive fire department vehicles and apparatus exposed a lack of familiarity with the rules regarding speeds while responding to emergencies. These rules should be readdressed in training exercises, during station inspections, and on the individual company level.

Seatbelts

Falls from vehicles cause the deaths of several firefighters every year. Since 1984, 20% to 25% of the annual line of duty death toll results from motor vehicle collisions.

Some companies on the Irving Fire Department will not move the vehicle until everyone is seated and belted-in. Other companies observe partial or no compliance with the mandatory seatbelt rule in Article XII of the Rules and Regulations. A major contributing cause of this non-compliance is the cultural need for expediency to get enroute. Members will partially gear-up before mounting the apparatus and finish dressing while enroute to the location. This cultural need for expediency leaves the members exposed to injury or death if involved in a collision.

The addition of seatbelt alarms on recently purchased apparatus has increased seatbelt usage but the practice of buckling the seatbelt behind the occupant to circumvent the alarm does still exist. The mandatory seatbelt rule should be reemphasized. The cultural need for expediency should also be addressed with cost/benefit analysis of the time saved getting dressed enroute vs. arriving alive. Response times are very important in the fire

service; however, members without seatbelts, who are involved in a collision, may not arrive at all.

Blocking on major roadways.

The implementation of apparatus blocking on the highway has greatly reduced the exposure that fire department personnel experience while working near moving traffic. Initially the program was not completely accepted by police officers desiring to keep traffic moving. There has, since the inception of the program, been a gradual cultural shift in the attitude of the police officers, as well as, the members of the fire department. The safety zone created by multiple fire apparatus blocking oncoming traffic has become not only welcome, but an expected addition to the protective equipment used to secure the scene on highways and other roadways.

HEALTH & WELLNESS

Making sure you are... “Fit For Duty.”

Firefighting is one of the nation’s most hazardous jobs, with heart attacks, high physical stress levels, sprains, and strains being all too common. The leading cause of Line of Duty Death among firefighters is heart attacks. The leading cause of injuries for all firefighters is overexertion and strain.

The prevalence of cardiovascular illness, deaths, and work-inhibiting strains and sprains among firefighters illustrates the need for a comprehensive health and wellness program in every department. The fire service realizes that health and wellness programs benefit individual firefighters and the fire service as a whole; such programs can yield safer and more effective action by first responders to emergencies.

Many organizations have addressed the issue of health and wellness in the fire service. The National Fire Protection Association (NFPA) has redeveloped its health and wellness standards. Since 1997, several career departments have worked with the International Association of Firefighters (IAFF) and the International Association of Fire Chiefs (IAFC) on a wellness initiative.

While heart attacks have not historically rated high in frequency on the Irving Fire Department, overexertion is a leading cause of injury and illness every year. The Irving Fire Department Physical Fitness Program is designed to improve and maintain the overall health and fitness of the members, assure physical ability to provide the highest level of service, reduce overall medical cost to the city and reduce the severity of injury to the members of the Fire Department.

Physical Fitness

The Physical Fitness Program shall apply to all Certified Firefighters and consist of three primary functions: Medical Examination, Physical Fitness Testing, and Fitness Assessment.

A. Medical Examination

1. Every other year, members shall be given a medical physical by a qualified physician. The results of this medical physical will be kept as a confidential matter between the individual member and the examining physician. Members found to have legitimate medical concerns will be contacted by that physician. The member may be requested to contact their primary care physician for further evaluation. Failure to contact the primary care physician and submit documentation to the original examining physician within sixty (60) calendar days will result in notification of Fire Administration of the need for further medical evaluation.
2. The Medical Physical will consist of the following components:
 - a. Full medical physical to include lab analysis of blood.
 - b. Treadmill Stress Test, Electron Beam Tomography (EBT), or equivalent test.
 - c. Hearing and Vision Tests.

B. Physical Fitness Testing

1. The Physical Fitness Testing will consist of the following components:
 - a. Muscular endurance
 - b. Peak strength
 - c. Aerobic capacity
 - d. Body fat percentage

C. Fitness Assessment

1. Every other year, the Firefighter's Task Test (FFTT) shall be administered by the Certified Fitness Coordinators to ALL of the Fire Operations members. The tests will be given in the months of March and April. The FFTT shall be the same course, less the aerial ladder climb, as given persons testing for employment with the Irving Fire Department. All members must complete the FFTT within the allotted time for his/her age group.

Times for age groups are as follows:

Members who are:	Must complete the test in this time
Under 45 Years Old	6 Minutes
45 to 50 Years Old	6 Minutes and 30 Seconds
Over 50 Years Old	7 minutes

2. Members passing the FFTT will be considered as fully fit for all duty and no further requirements will apply until it is time to take the next FFTT. However, members who pass their FFTT who desire to improve their physical fitness may contact a CFC for a workout regimen. A CFC will be assigned to each battalion as needed to assist members in reaching their fitness goals.
3. Members who fail to complete the FFTT through their own efforts will be prescribed a workout tailored to the needs of that member. The CFC in charge of the FFTT shall notify Fire Administration of such members. A form letter shall be sent by Fire Administration to the member, the member's Battalion Chief, the member's Immediate

Supervisor, the CFC in charge of the FFTT, and the CFC in charge of rehabilitation of such members.

4. Members needing a prescription workout shall be assigned a CFC by the CFC in charge of rehab to evaluate and prescribe a workout for such member. The member shall repeat the FFTT within one hundred twenty (120) calendar days of the member's last FFTT. This shall provide enough time for notifications, physical assessments, and up to ninety (90) calendar days on a workout program. This workout will be performed while on duty and monitored by the member's Immediate Supervisor or his/her designee. The monitor shall document the workout activity by completing the IFD Physical Fitness Workout Log and entering it in the station log. After ninety (90) calendar days of participating in a prescribed workout, the CFC shall give the member a FFTT. A re-test can be arranged earlier at the member's request. When the member successfully completes the FFTT, the member will no longer be required to perform mandatory workouts.
5. Should a member fail his/her re-test, the member shall remain under the care of the assigned CFC. The member shall again re-test within ninety (90) calendar days. This process shall continue until the member successfully completes the FFTT or twenty-four (24) months have passed.
6. Members returning to duty after being on sick leave, injury leave, or Worker's Compensation for more than forty-five (45) calendar days in succession shall be required to be administered the FFTT within fifteen (15) calendar days of their return to duty. The member, the member's Battalion Chief, the member's Immediate Supervisor, and the CFC in charge of the FFTT shall be notified of the member's return to duty by a form letter from Fire Administration that such member is in need of

the FFTT. The returning member is ultimately responsible for meeting the above FFTT deadlines. The member's Battalion Chief will insure that all deadlines are met. The FFTT shall be timed in accordance with current department standards. A CFC shall administer the test. The member's Immediate Supervisor shall be present to observe the test. Members who fail to complete the FFTT in accordance with department standards shall be assigned a CFC by the CFC in charge of rehab to evaluate and prescribe a workout for such member. The member shall re-test within ninety (90) calendar days. This process shall continue until the member successfully completes the FFTT or twenty-four (24) months have passed.

REHABILITATION

Purpose

R&R Group is the term used to refer to a multiple-function group operating within our ICS. It is established at the emergency scene by the Incident Commander (IC) and serves as an organizational tool that centralizes control of many formal and informal ICS functions utilized at most major incidents. These functions include:

1. Replenishment of SCBA air supply.
2. Medical evaluation, treatment, and transportation of personnel.
3. Rest area.
4. Fluid replenishment and food provisions.
5. Personnel protection.
6. Personnel accountability.

Medical

1. Company and Commanding Officers should monitor all situations and personnel closely and prepare to send personnel to R&R at regular intervals during incidents. Personnel suffering from fatigue

and stress can become ineffective, and worse, become victims themselves. Some factors that contribute to these conditions are work load, temperature, type of emergency, and the physical and mental conditions of personnel.

2. All personnel sent to R&R will have an initial, primary visual survey performed by the Paramedics before returning to work. Additionally, each Company Officer will assess each of their members to ascertain their physical conditions. Should either assessment indicate the need for additional monitoring, the Paramedics will perform those measures necessary. This may include vital signs, heart monitoring, and other medical assessment procedures.

Rest

1. Most often, R&R will be established for firefighters suffering from the effects of fatigue caused by sustained physical exertion. Company Officers will request relief for their crews through their Division or Group Officer.
2. Companies arriving at R&R shall have arrival times noted. As companies are requested for reassignment by the IC, the companies with the longest time in R&R shall be selected unless the Company Officer feels the members are not ready. Reassignments are made by the IC through the R&R Group Officer. The R&R Group Officer will inform the Company Officer when and where ("Division 2," for example) to report.

MANAGING STRESS

The Irving Fire Department provides three programs to help employees through emotional and stress related situations.

A. Employee Assistance Programs

1. The City has contracted with an outside agency to act as a source for employees to call upon for consultation in dealing with personal problems or stress-related situations.
2. The program is confidential. The only exception relates to situations where an employee presents an imminent risk of self-destructive behavior or violent behavior to others.
3. There is no cost to the employee for this program. It covers the employee, spouse, and dependents, as individuals or as a group. A member may contact Human Resources for further information.

B. Critical Incident Stress Debriefing (CISD)

The Irving Fire Department provides for assistance in the form of CISD when members have been subjected to serious stress in the performance of their duties. Department personnel are urged to report any such need, of their own or another member, to the Chief of Department or an Assistant Chief when such is recognized. Such need may be prompted by involvement in, but is not limited to, the following:

1. Death of a child.
2. Multiple deaths.
3. A multiple-injury accident with several victims.

4. When a member of the IFD recognizes the need for CISD intervention for themselves or another IFD member.

C. Chaplain Program

It is the policy of the IFD that Chaplain Services will be made available to all individuals. The services of the Chaplain are available to all department members at anytime, day or night. However, participation is strictly voluntary and should be in no way considered required.

Discussion and Recommendations

Health and wellness

A two-pronged approach works best for stress and heart-related fire-fighter deaths (44% of all fire-fighter deaths). First, medical exams as outlined in NFPA 1500 and 1582 should be scheduled for all members. Any indication of heart disease should be treated without delay. In most cases, the member should be completely evaluated before being allowed to participate in emergency operations duties.

Second, an ongoing physical fitness program has many beneficial outcomes. This type of training reduces the chance of a heart attack, lowers cholesterol, reduces body fat, and strengthens the heart. Also, those persons with stronger hearts as a result of aerobic exercise are more likely to survive a heart attack.

Rehabilitation is designed to rest, rehydrate, and reevaluate each member for fitness to return to work. The reevaluation process is the responsibility of the individual, the company officer, and the paramedics managing the R&R Group. Any indication that a member is physically or emotionally distressed should warrant additional monitoring.

The health and wellness program implemented by the Irving Fire Department has been quite successful in early detection and treatment of heart and other medical conditions. While not historically experiencing a high rate of heart attacks on duty, overexertion does lead the list of causes for injury and illness every year on the Irving Fire Department. **This high frequency of injury and illness related to overexertion raises warning flags in the area of physical fitness and R&R at emergency incidents.**

The fire department implemented the Firefighter Task Test in 1994. When first implemented, the physical fitness standard for incumbents recognized that some fire fighters had not exercised for many years, and so for fairness, were allowed a phase-in period to meet standards. For nineteen years the department has provided personal trainers and workout programs for those members who have not completed this fitness test in the allotted time. Most fire fighters who found themselves identified as not able to meet the standards of the physical fitness evaluation were able to work their way up to the standards with the appropriate training. However, some members of the department are still struggling to meet the minimum standards.

It is recommended that a firefighter who fails to meet the minimum levels of physical fitness should, for the good of himself and his co-workers, be prevented from participating in physically demanding work. In the *Fire Department Occupational Health and Safety Handbook*, Stephen Foley writes “Members must not be allowed to begin or resume suppression duties until they pass the physical performance requirements” (Foley, 1998, p. 87). A voluntary or non-punitive physical fitness program guarantees that there will be members in poor physical fitness.

Fire Service Joint Labor Management Wellness-Fitness Initiative

On October 1, 2006 the Texas Commission on Fire Protection implemented the *Fire Service Joint Labor Management Wellness-Fitness Initiative* (Appendix “B”). This initiative requires Texas fire departments to assess the wellness and fitness

needs of the personnel in the department and requires that a wellness and fitness procedure be written and available for inspection by the commission.

Critical Incident Stress

Based on Chapter 12 of *NFPA 1500: Standard on Fire Department Occupational Safety and Health Program*, Irving Fire Department *General Procedure 13.2 Managing Stress Related Situations* is designed to help members of the department become more aware of the options available for dealing with stress and the complications of job related stress.

While the options are readily available to deal with stress related situations, a cultural stigma still exists in the minds of individuals and crews faced with admitting that they are not dealing well with a stressful event. A moderate culture shift is needed to allow members of the fire department to see these options as “getting stronger” instead of viewing them as a “weakness” or a “crutch”. Recent research has also indicated that “overemphasizing” the need for a Critical Incident Stress Debriefing (CISD) or other such interventions may even be detrimental to the mental health of those they are intended to help.

MANAGEMENT SYSTEMS

PEOPLE TAKING CARE OF PEOPLE

Incident Command Systems

The Irving Fire Department uses the Incident Command System (ICS) on all emergencies to which it responds. This system is detailed in Emergency Procedure 9.1 and was developed specifically for use by the Fire Service, but is structured so that it may be used for multi-agency, multi-jurisdictional, all-risks emergency operations of all types.

It is intended that the procedures of this ICS be utilized on every emergency to which fire department units respond. The ICS organization should be developed to the level necessary to effectively manage each incident. This organizational development may consist of the Fire Company Officer performing all necessary functions of the system on a single unit response, or a full-blown organizational development to manage a multi-jurisdictional, multi-agency response to a natural disaster such as a tornado.

Personnel Accountability Systems

As detailed in Emergency Procedure 5.3 the purpose of the personnel accountability system is to account for all personnel, at any given time within the “hazard zone” of an incident. Use of the system will provide enhanced personnel safety for the individual member, and will provide the Incident Command Staff an improved means to track and account for all personnel working in the hazard zone.

The hazard zone will be defined as any area that requires an SCBA or in which a member is at risk of becoming lost, trapped, or injured by the environment or structure. This would include entering a structure reported to be on fire, operating in close proximity to the structure during exterior operations, confined space or trench rescue, and the hot zone at a hazardous materials incident, etc.

Workers Compensation Systems

The workers compensation system is administered by the city in compliance with state law. The following is a brief overview of the procedures and responsibilities associated with the Workers Compensation System.

Workers Compensation Benefits

The benefits available to an injured employee under the City program and the Texas Workers' Compensation Act include:

- Medical Benefits
- Temporary Income Benefits
- Impairment Income Benefits
- Supplemental Income Benefits
- Survivor Benefits

Occupational Injuries

Injuries will be considered as occupational when they are incurred in the **Course and Scope** of an employee's employment as specified under the administration of the Texas Department of Insurance, Division of Workers' Compensation (DWC).

Employee Responsibilities

1. Employees injured in the course and scope of their employment shall report the injury to a supervisor immediately or at the earliest opportunity before the end of the work shift, but in no event later than the start of the next work shift.

If the employee fails to notify the supervisor by the end of the work shift, the City may deny the employee's benefits under the Salary Continuance Program.

2. Employees injured in the course and scope of their employment shall prepare the necessary reports with assistance from a supervisor or designated person.

Verbally reporting the injury does not constitute fulfillment of the requirements of dutifully reporting an injury.

3. Injured employees must comply with the directions given to them by the treating physicians.
4. Employees shall schedule follow-up appointments at the beginning or end of the work shift.
5. Employees shall obtain Medical Status Reports (TWCC 73) from the attending physician and see that one copy is given to his department and risk management after each visit to a medical provider. Forms must be delivered as soon as possible after the medical treatment.
6. Employees shall keep treatment appointments.

Supervisor Responsibilities

1. If an employee is unable to complete an injury report within the first twenty-four (24) hours of the injury, the supervisor shall complete the injury report and send it to risk management within the second twenty-four (24) hours of the injury.
2. Supervisors shall forward a copy of each TWCC 73 to Risk Management.
3. Supervisors shall report fatalities and severe injuries to the Fire and Police Dispatchers immediately, then to the Fire Chief and Risk Management.
4. Upon notification that an employee has been injured during the course and scope of his or her employment, the supervisor shall:
 - a. Administer first aid if necessary;
 - b. Make transportation to a medical facility available for the employee;
 - c. Make sure the injured employee receives initial medical treatment;
 - d. Retrieve a Medical Status Report form TWCC 73 for each visit to the physician and medical facility if subsequent medical treatment is required;
 - e. Inform the physician of any modified duty work available; and
 - f. Cooperate with Risk Management and other agencies authorized by Risk Management to investigate the employee injury.

The Fire Chief's Responsibilities

The Fire Chief shall notify Risk Management immediately of any fatality or severe accident.

Risk Management Responsibilities

Risk Management shall coordinate the Workers' Compensation program by:

1. Receiving reports of injuries from the various departments and generating the necessary forms for the Texas Workers' Compensation Commission and the Third Party Administrator;
2. Maintaining communication with the injured employee to ensure he or she receives proper compensation and salary continuation payments;
3. Maintaining communication with the payroll coordinator about compensation payments, salary continuation payments, return to work of injured employees, and workers' compensation claims;
4. Monitoring and providing the necessary claims management with the TPA;
5. Acting as liaison between claims personnel of the TPA and City departments;
6. Assisting the TPA department and injured employee when necessary;
7. Monitoring and reviewing claims for the Salary Continuation program;
8. Representing the City during DWC conferences;
9. Notifying departments of developments in the injured employees' status;
10. Establishing injury records for claims management procedures and report preparation;
11. Conducting training sessions on workers' compensation;

12. Monitoring prior workers' compensation injuries for approval or denial of expenses incurred;
13. Retaining control of the selection of rehabilitation services, private investigations, and other services; and
14. Providing management information reports to departments.

Emergency Medical Treatment for Serious Injuries and Illnesses

Serious injuries/illnesses requiring immediate medical treatment will warrant emergency treatment at the nearest medical facility.

1. For serious injuries, call for an ambulance through the Fire Dispatcher.
2. If qualified, administer first aid until help arrives.
3. Full emergency treatment may be obtained on a twenty-four (24) - hour basis at Baylor (Irving) Healthcare Systems or at the Las Colinas Medical Center.
4. Immediately reported to the Risk Management Office:
 - a. If a serious injury occurs during normal work hours call telephone number 972-721-3649.
 - b. If the serious injury occurs after 5:00 PM, contact should be made with the individual listed below.

David Davenport, Risk Management- 972-721-8017

- c. If the serious injury is not life threatening and occurs after 5:00 PM, Risk Management should be notified not later than 10:00 AM of the next workday.

Injuries not classified *Emergency* but requiring a physician's treatment.

Treatment for injuries occurring during the course and scope of employment can be obtained at any of the following facilities:

- Concentra
5910 N. Macarthur #133
Telephone No. 972-554-8494
8:00 AM - 8:00 PM (Monday through Friday)
10:00 AM – 5:00 PM (Saturday)

- Baylor Medical Center At Irving
1901 N. MacArthur Blvd
Irving Phone No. 972-579-8167
24 Hours - 7 Days a week

- EcCare Emergency Care Centers
2233 E. Grauwylers #110
Telephone No. 972-659-1234
8:00 AM - 8:00 PM (Monday through Friday)
10:00 AM – 6:00 PM (Saturday)

NOTE: If an employee is dissatisfied with the treatment rendered at any of the above-mentioned facilities, they can contact Risk Management to make arrangements to see another physician.

First Aid Treatment for Superficial Injuries

Superficial injuries such as minor cuts, bruises, small punctures and scratches can be treated in the field when an employee qualified to administer first aid is present and the injured employee requests the treatment. If necessary call 911 and request emergency medical services. DO NOT USE HOSPITAL EMERGENCY ROOMS FOR SUPERFICIAL INJURIES.

Discussion and Recommendations

Incident Command System

The incident command system is well used and practiced on the fire department. Since its implementation several years ago, it has been incorporated into the culture and practice of officers across the city. Freelancing has been diminished and control of fire crews has increased dramatically.

This system does; however, rely upon enough staff at the command post to adequately direct, monitor, and respond to the needs of the fire crews on scene. One person cannot adequately fulfill the responsibilities of the incident command system. It is recommended that a full time Command Technician (CT) be assigned to each Battalion Chief to facilitate the administrative, as well as, command and control needs of each battalion.

Personnel Accountability System

This system is vital to the health and well-being of every individual in the hazard zone. It has increased personnel accountability and has eliminated most span of control issues.

This system relies on passports to account for individuals and crews at a glance. These passports are not always available to the accountability officers upon a crews arrival at their assigned sector. This lack of availability is generally due to a failure of the crew to remove the passport from their apparatus. Training in use of

the Personnel Accountability System is recommended to engrain these procedures in the minds of the officers and their crews. A review of the roles and responsibilities of every member should be conducted and these procedures should be practiced at every working incident regardless of its scope or size.

Workers Compensation System

The workers compensation system is mandated by state law. It is administered through the Human Relations and Risk Management Departments of the city. Most of the fire department employees know that the system exists but are unfamiliar with the procedures used to access and properly use the system. This system seems difficult to use and very intimidating to most employees. Once accessed, the systematic bureaucracy frustrates not only the employees, but also the doctors and administrators.

Training on the proper use of the workers compensation system would alleviate some of the frustration experienced by all parties. This training should incorporate available benefits, proper use of forms, filing deadlines and releases required to return to work.

Assignment of Duties and Safety Practices

Who Does What

Duties

RISK MANAGEMENT IS EVERYONE'S RESPONSIBILITY

The City of Irving Risk Management Department has established the following assignment of duties and safety practices. Every member of the fire department shall prevent accidents and injuries and comply with all safety programs.

The FIRE CHIEF shall:

1. Appoint a safety officer to establish and maintain an effective safety program;
2. Request sufficient funds to adequately support the department's safety program;
3. Require employees to comply with applicable provisions of the safety rules;
4. Require employees to consider safety factors in all operations or activities and to prevent accidents;
5. Discuss safety matters with employees at regularly scheduled meetings;
6. Ensure that employees are not killed or injured in preventable accidents;
7. Observe safety operations, conditions, and practices;
8. Take appropriate actions when an employee violates safety rules, regulations, and SOPs;
9. Coordinate the safety program for the department;
10. Assist the Risk Manager in carrying out his or her duties and responsibilities.;
11. Require officers to attend safety-training classes to keep abreast of current safety and health activities;
12. Ensure that accidents, injuries, and the associated costs are reduced;
13. Comply with the Texas Hazard Communications Act ;

14. Train employees in department safety directives on hazards inherent to the fire department and hazardous emergency scenes ; and
15. Review the minutes of safety committee meetings and actions taken on recommendations.

Each OFFICER shall:

1. Participate in and fully support the fire department safety program;
2. Ensure that accidents do not occur by:
 - a. recognizing hazards before the operation or activity is started;
 - b. instructing employees in safety requirements, rules and regulations;
 - c. providing appropriate items of protective clothing and equipment; and
 - d. taking any other action necessary to ensure an accident free operation or activity;
3. Ensure that the safety of personnel is always their first priority;
4. Conduct safety orientations for newly assigned personnel before assigning them actual work tasks to familiarize them with the safety program, hazards inherent in their operations or activities, and safety rules and regulations required to prevent accidents;
5. Enforce safety rules and regulations;
6. Conduct frequent training for employees in accident prevention;
7. Inspect and observe work practices and physical conditions and promptly correct deficiencies;
8. Require employees to immediately report all accidents and injuries;
9. Thoroughly investigate all accidents involving his or her employees, prepare reports properly and quickly, and take corrective action to prevent recurrences;
10. Know applicable safety rules and regulations;
11. Consider the safety performance of employees when evaluating them;
12. Consider the safety aspects of all jobs, operations, and activities important;

13. Provide appropriate items of clothing, tools, equipment, and materials to employees who perform hazardous operations;
14. Inform employees about hazardous materials with which they may come in contact;
16. Train employees to comply with the Rules and Regulations, General Procedures, and Emergency Procedures and enforce the requirements in them;
17. Ensure that employees are fully trained and aware of their duties and responsibilities within the safety and health program; and
18. Encourage employees injured on the job to have injuries treated promptly;

The FIRE DEPARTMENT SAFETY OFFICER shall:

1. Assist other officers in carrying out assigned duties and objectives for safety and health issues;
2. Prepare safety program correspondence and maintain it in a file;
3. Help the supervisors prepare the safety budget each year;
4. Make safety analyses and prepare safety SOPs and other safety directives;
5. Assist other officers to conduct safety training;
6. Assist line Battalion Chiefs with the inspection of physical conditions and work practices and maintain a record of the inspections;
7. Help line Battalion Chiefs investigate accidents, complete the reports, and take appropriate action to prevent recurrences;
8. Ensure that officers investigate all accidents promptly, report each accident on an accident report form, and complete and submit it to the Risk Manager;
9. Maintain a log of all accidents;
10. Determine accident causes, trends, and other data; prepare a monthly report for the fire chief and make recommendations to prevent recurrences;

11. Suggest items for inclusion in the department's safety committee meeting agendas;
12. Coordinate safety activities within the department and with other personnel;
13. Ensure that employees know safety program activities and requirements and fully participate in the program;
14. Ensure that employees fully implement the safety policy and program; and
15. Ensure that the department accident and injury rate is as low as possible.

Each EMPLOYEE shall:

1. Participate in the fire department's Safety and Health Program;
2. Know the fire department's Rules and Regulations, General Procedures, Emergency Procedures, safety and health programs and SOPs;
3. Report to his or her supervisor hazards in the work environment;
4. Attend scheduled safety-training classes;
5. Be able to safely perform assigned duties;
6. Inform the supervisor when not able to perform his or her duties;
7. Not start any job, operation, or activity until thoroughly familiar with all accident potentials, hazards involved, and safety requirements necessary to perform the job or activity in a safe manner;
8. Use protective clothing and equipment provided or required to perform the job safely;
9. Contact his or her supervisor for instruction when in doubt about how to perform a job or activity safely;
10. Serve on a safety committee when required;
11. Prevent accidents; and
12. Report all accidents and injuries to a supervisor the day they occur.

SAFETY PRACTICES

The safety of the members of the fire department comes first at all times.

General safety practices that apply to all workplace environments include:

1. Employees will report all illnesses and injuries, damage to equipment, incidents, suspected or identified hazards, and unsafe conditions in the workplace to a supervisor immediately.
2. Training is required for employee safety. Each employee is expected to retain essential safety related information and demonstrate that they can perform their job assignments safely and without undue risk to themselves or others.
3. Employees are expected to follow all safety rules while working for the fire department.
4. Employees must not attempt to operate tools or equipment that they have not been specifically trained and authorized to use.
5. Do not attempt to make unauthorized repairs, service, or maintenance on any equipment or facilities. All equipment, machinery or facilities in need of repair should be reported to a supervisor immediately.
6. Always use personal protective equipment as required or when instructed by a supervisor.
7. Appropriate uniforms must be worn at all times.
8. Employees should keep their workspace as clean as possible. Observation of spills or debris should be responded to immediately by personally cleaning or clearing the location. Cleanliness and housekeeping is the responsibility of all employees.
9. Always be aware of your surroundings.

10. Plan your work carefully, especially when unfamiliar with tasks or in unfamiliar surroundings. Inspections of the tasks or locations should be performed, when possible, prior to commencement of work.
11. Horseplay, throwing objects or scuffling are not allowed.
12. Removal or disabling of safety equipment is prohibited.
13. Do not distract other employees or become distracted yourself while operating machinery, equipment or power tools.
14. Appropriate shoes or boots will be worn at all times.
15. Employees are responsible for the care of property, equipment, and vehicles in their custody and control. All property must be used in a safe and appropriate manner at all times.

APPENDICIES

***Irving Fire Department
Identified Risks and Control Measures***

Identification		Frequency	Severity	Priority	Action Required/ Ongoing	Control Measures	
Personnel						Non-Emergency Operations	
1	Airborne Pathogen	Low	Medium	Low	Ongoing	RC	We are all exposed to airborne pathogens in everyday life. Just going to the grocery store exposes us to the diseases of others. The Irving Fire Department recommends that all Firefighters, Paramedics and EMTs be immunized against Hepatitis B, Tetanus, Diphtheria, Rubella, Rubeola, Polio, and Influenza. In an effort to assure that all members are thoroughly informed about this subject, it will continue to be a subject of the Medical Continuing Education programs on an annual basis. Procedures are also detailed to prevent contact with airborne or bloodborne pathogens, as well as pathogens transmitted by other body fluids.
2	Bites	Low	Low	Low	Ongoing	RC	Care should be taken to maintain awareness of the surroundings. Awareness of animals, insects, or combative patients should be maintained at all times. Animal control should be notified of dangerous animals (RT). Building Maintenance should be notified of insect infestations at city facilities (RC).
3	Burns (Fire or Chemical)	Low	Low	Low	Ongoing	RC	Burns caused by cooking or proximity to hot objects (small engines, apparatus engines or exhaust systems) can be avoided by the individual member focusing his attention on the task at hand. In the same manner burns caused by chemicals (cleaning or other) can be avoided by using only as directed on the packaging and attention to the task at hand.
4	Dislocation, Fracture	Low	Medium	Low	Ongoing	RC	While maintaining a history of low frequency, Dislocations and Fractures have the potential to increase their frequency and severity. In each year evaluated, the IFD experienced several slip and fall injuries and several injuries from contact with objects. These injuries could be categorized as near-miss dislocations or fractures .

5	Falls From Moving Vehicles	Low	High	High	Action Required	RC	Seat belts save lives! Article XII of the Rules and Regulations, Section 5 states, "Seatbelts shall be worn by all vehicle occupants."
Identification		Frequency	Severity	Priority	Action Required/Ongoing	Control Measures	
6	Eye Injury	Low	Low	Low	Ongoing	RC	Eye protection is available in the tool rooms of all IFD facilities. All members shall wear eye protection when engaged in activities that could potentially cause flying particles, such as sharpening lawn mower blades. Eye protection should also be worn to protect against splash injuries from household chemicals.
7	Heart Attack or Stroke	Low	High	High	Action Required	RC	While heart attacks have not historically rated high in frequency, overexertion is a leading cause of injury every year. Based on NFPA 1583: Standard on Health-Related Fitness Programs for Fire Fighters, the IFD Physical Fitness Program (General Procedure 16.4) is designed to improve and maintain the overall health and fitness of the members, assure physical ability to provide the highest level of service, reduce overall medical cost to the city and reduce severity of injury to the members of the Fire Department. It shall apply to all Certified Firefighters and consist of three primary functions: Medical Examination, Physical Fitness Testing, and Fitness Assessment.
8	Respiratory Distress (Other)	Low	Medium	Low	Ongoing	RC	See control measures for <i>Heart Attack or Stroke</i> .
9	Sprain, Strain, or Muscle Pain	Medium	Low	Medium	Ongoing	RC	" <i>Work Smarter Not Harder!</i> " In cooperation with General Procedure 16.4 "Physical Fitness Program", <i>Teamwork</i> and <i>Innovation</i> are values identified in the Irving Fire Department Rules and Regulations. These values and procedures should be put into practice whenever members of the IFD are confronted with situations that challenge the physical abilities of an individual or crew. Physical and skills training should be brought to bear on the situation leading to a solution that reduces the possibility of risk to the lowest possible levels.

10	Wound, Cut, Bleeding, or Bruise	Medium	Low	Low	Ongoing	RC	See control measures for <i>Sprain, Strain, or Muscle Pain</i> .
11	Struck by Vehicle	Low	High	Medium	Ongoing	RC	When backing into the station, apparatus should be used to shield traffic while the spotter dismounts and takes his position at the rear of the apparatus. Once the spotter has positioned himself on the apparatus approach, the driver will begin to move apparatus out of the traffic lanes.
Identification		Frequency	Severity	Priority	Action Required/ Ongoing	Control Measures	
Facilities							Non-Emergency Operations
1	Act of God (Weather Related)	Low	High	Low	Ongoing	RT	Acts of God are beyond the control of the IFD, aside from normal maintenance of utilities and trees no other control measures are available. Risks will be transferred to insurance.
2	Contamination (BioHazardous)	Low	Low	Low	Ongoing	RC	All MICU's and equipment should be decontaminated prior to returning to the station. Facilities contaminated by a biohazardous substance should be decontaminated using the same procedures detailed for MICU's in Emergency Procedure 8 "Emergency Medical Service"
3	Fire	Low	High	Low	Ongoing	RC	Fire safety should be exemplified in all fire department facilities. Fire extinguishers should be inspected and maintained. Care should be taken when cutting or grinding metal and sparks should be accounted for. When finished cooking or when dispatched on an emergency, all flames should be extinguished when not attended.
4	Use / Abuse	Medium	Low	Low	Ongoing	RC	Fire department facilities should be kept clean and maintained to reflect a professional appearance. Regular maintenance and repairs should be directed to the city facility maintenance department.

5	Vanadlism	Low	Low	Low	Ongoing	RC	See control measures for <i>Use / Abuse</i> .
6	Acts of Violence	Low	High	Low	Ongoing	RT	In the event of a civil disturbance in the vicinity of fire department facilities, all electrical and gas utilities should be turned off and all doors and windows should be locked. In the event of a Level III Civil Disturbance, all PPE stored at that facility should be loaded onto apparatus assigned to the facility and the facility abandoned.

***TEXAS COMMISSION ON FIRE PROTECTION
WELLNESS – FITNESS RULE***

TEXAS COMMISSION ON FIRE PROTECTION

WELLNESS – FITNESS RULE

435.21. Fire Service Joint Labor Management Wellness-Fitness Initiative

- a) A fire department shall assess the wellness and fitness needs of the personnel in the department. The procedure used to make this assessment shall be written and made available for commission inspection.
- b) A fire department shall develop and maintain a standard operating procedure to address those needs.
- c) The approach to the fitness needs of the department shall be based on the local assessment and local resources.
- d) The standard operating procedure shall be made available to the commission for inspection.
- e) The effective date of this rule is October 1, 2006.

Starting October 1, 2006 TCFP compliance officers will ask to see:

- A document that describes the procedure the department used for assessing the wellness and fitness needs of the personnel in the department. **(Note: TCFP will not evaluate the procedure used, only that the department did an assessment)**
- A written Standard Operating Procedure to address wellness and fitness needs of the department based on local resources. **(Note: TCFP will not evaluate the SOP, only that the department has an SOP)**

Fire Service Joint Labor Management Wellness Fitness Initiative

This program was designed by the IAFF/IAFC Fire Service Joint Labor Management Task Force for incumbent fire service personnel. It requires a commitment by labor and management to a positive, individualized wellness-fitness program.

The manual includes information on these topics:

- Fitness evaluation
- Medical evaluation
- Rehabilitation
- Behavioral health
- Data collection

A copy of the Fire Service Joint Labor Management Wellness Fitness Initiative may be obtained through the International Association of Fire Fighters or International Association of Fire Chiefs.

The Ernest A. Emerson Fire Protection Resource Library has a copy of the Fire Service Joint Labor Management Wellness Fitness Initiative and it is available for viewing at the library during normal office hours.

Departmental Directive*

TO: All Members of the Fire Department
FROM: Russell Wilson, Assistant Fire Chief
DATE: November 13, 2013
DISPOSITION: Retain until otherwise directed
SUBJECT: IFD Risk Management Plan FY 2013-2014

The new Irving Fire Department Risk Management Plan for Fiscal Year 2013-14 has been added to the J: drive.

You can find the Irving Fire Department Risk Management Plan for Fiscal Year 2013-14 on the J: drive: [J:\IFD Risk Management Plan FY 2013-14](#).



Russell Wilson, Assistant Fire Chief
Irving Fire Department

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