This document provides EXAMPLES of written Standard Operating Guidelines. It is not intended to supersede the requirements in SPS or OSHA standards. Some portions of this document contain language from SPS and OSHA standards or are composites of various policies that contain common language. Employers should consult the applicable SPS and OSHA standards when developing their own customized program tailored to their workplace.

Employers should also consult legal counsel or human resources to ensure that operating guidelines do not conflict with existing policies and procedures.

Fire Department Standard Operating Guidelines (SOGs)

SAMPLE

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Introduction

This manual establishes standard fire department specific policies. These policies are meant to provide guidance when dealing with fire department-specific issues and situations, and to help ensure department activities are consistent, effective, efficient and safe.

The Department shall provide for the safety, health and wellness of department members by establishing a fire department-specific policy manual and accompanying procedures.

All fire department personnel shall follow these policies and accompanying procedures to the best of their ability.

All members will understand and follow these policies and procedures. Officers of the department are responsible to ensure their subordinates understand and follow these policies and procedures. Officers will document and report deviations to the Fire Chief, or his/her designee, for review.

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Mission Statement

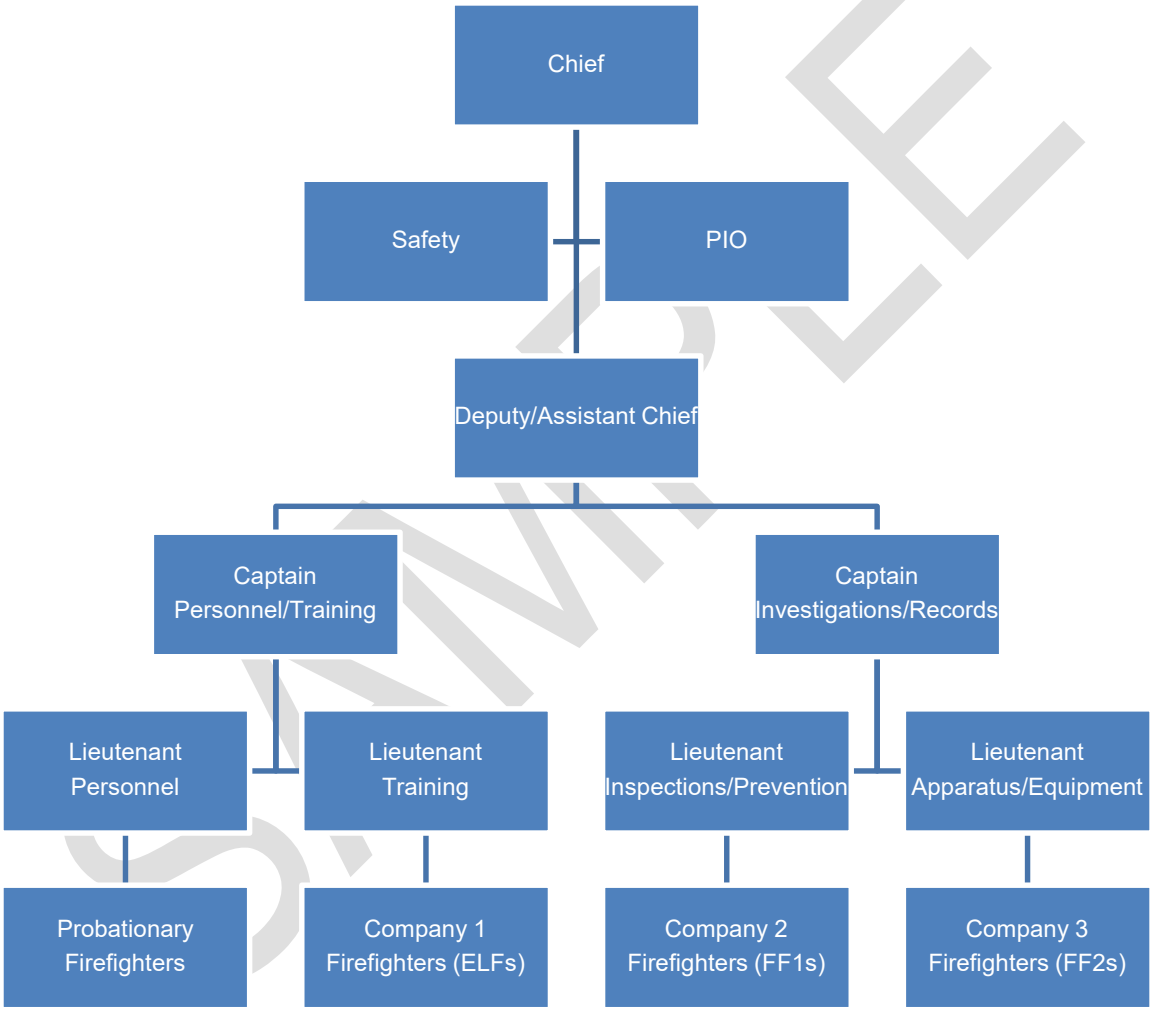
The mission of the Fire Department is to minimize loss of life, property and the environment from fires, natural disasters, life threatening situations, and to assist other emergency agencies.

Vision Statement

Risk Management Statement

SAMPLE

Chain of Command



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Job Descriptions

Chief
The Fire Chief provides administrative direction and leadership for all Fire Department functions, operations, and personnel through the supervision of staff and a review of their activities. Responsibilities include reviewing the general operation of the department to determine efficiency, providing direction on major projects or problem areas, planning for the future, developing and implementing policies and procedures, and providing policy guidance. In addition, the Fire Chief is responsible, through study and consultation with municipal officials, for developing recommendations for the protection of life and property in the municipality.

Deputy/Assistant Chief
Under direction of the Fire Chief, the Assistant Chief plans, organizes, directs, and administers all operations of the fire department assigned to him/her by the Fire Chief within the authority delegated. Also, in the absence of the Fire Chief, the Assistant Fire Chief shall perform ALL applicable duties of the Fire Chief in a sufficient manner until arrival/return of the Fire Chief. The Assistant Chief may also perform the same duties as a firefighter.

Captain
Under direction of the Assistant Chief, plans, organizes, coordinates and directs the emergency and non-emergency activities of a fire suppression company; commands emergency response scenes; directs and performs a variety of staff support functions; plans, organizes, coordinates and directs training, recruitment, fire inspection, and prevention programs; and performs related work as assigned. A Captain may also perform the same duties as a Firefighter.

Lieutenant
Under direction of the a Chief or Fire Captain, deploys, supervises and reviews the work of Firefighters, takes command of fires and other emergency incidents within the municipality unless relieved by a Captain or Chief, performs the full range of emergency response duties as a member of a response team; coordinates and participates in non-emergency inspection, training, maintenance and related activities; assists Fire Captains in providing administrative support for specified departmental programs; and performs related work as assigned. A Lieutenant may also perform the same duties as a firefighter.

Firefighter II
Under direction of a Lieutenant, Captain, or Chief, provides direct services, individually and as a member of a team in response to fire, rescue, hazmat and other incidents. The Firefighter II is certified by the State of Wisconsin as Firefighter II.

Firefighter I
Under direction of a Lieutenant, Captain, or Chief, provides direct services, individually and as a member of a team in response to fire, rescue, hazmat and other incidents. The Firefighter I is certified by the State of Wisconsin as Firefighter I.

Firefighter ELF (Entry Level Firefighter)
Under direction of a Lieutenant, Captain, or Chief, provides direct services, individually and as a member of a team in response to fire, rescue, hazmat and other incidents. The Firefighter ELF has completed Entry Level Firefighter courses.

Firefighter Probationary
Under direction of a Firefighter, Lieutenant, Captain, or Chief, provides direct services, individually and as a member of a team in response to fire, rescue, hazmat and other incidents. The Firefighter Probationary has not completed entry level firefighter coursework and may not be permitted to participate in structural firefighting activities which require the individual to enter or be in close proximity to the building, enclosed structure, vehicle or vessel.

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Probationary Period

All new recruits of the Fire Department are subject to a minimum of a month probationary period. Each probationary member will be required to successfully complete the Entry Level Firefighter courses. Probationary members are also required to attend in-house trainings.

Orientation and Probationary Training

All new members shall undergo an orientation program as set forth by the Training Division. The main intent of the probationary period for a new recruit is to learn the operational procedures of the Fire Department, as well as the location/operation of the small equipment used by the Fire Department, and to gain Entry Level Firefighter training provided by within the recruit's probationary period.

The orientation program shall cover the following topics:

Accountability
Apparatus
Auto Accident Operations
Bloodbourne Pathogens
Chain of Command
Communications
Community Involvement and Events
Driver Training
Extrication
Fire Scene Operations
Firefighter Survival
Geography
Hazmat Scene Operations
Helicopter Operations
Incident Command
Mutual Aid Operations
Operating Guidelines
Protective Clothing
Rapid Intervention Teams
Recordkeeping
Rescue Operations
Safety Equipment
SCBA Fit Test
Search and Rescue
Self-Contained Breathing Apparatus (SCBA)
Written Policies

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Training

Training is the single most important element for a safe, professional, and effective fire department. It is imperative that all members are properly trained on all aspects of firefighting to help safeguard his/her life, the lives of other firefighters and the lives of those we serve.

Training:

A. Prepares a fire fighter to safely perform his or her duties.
B. Prepares a fire fighter for any change in a procedure or technology or for any new hazard identified in his or her work environment.
C. Prepares a new fire fighter whose duties include emergency operations to perform emergency operations. The training will include training in the incident command system.
D. Gives a fire fighter whose duties include structural firefighting training consistent with established fire ground operating procedures.
E. Prepares a fire fighter for special hazards to which he or she may be exposed during fires and other emergencies
F. Includes procedures for firefighters engaged in fire ground operations to make his or her safe exit from a dangerous area if equipment fails or fire conditions change suddenly

Any training of fire fighters which includes live firefighting exercises will be conducted in compliance with NFPA 1001- Standard for Fire Fighter Professional Qualifications and NFPA 1403- Standard on Live Fire Training Evolutions.

No new fire fighter may be permitted to participate in structural firefighting activities or trainings which require the individual to enter or be in close proximity to the building, enclosed structure, vehicle or vessel until that individual has completed required training.

To maintain active status as a firefighter with the Fire Department, all members must attend at least training session(s) per month. Failure to do so may result in the member being placed on probation, at which time active status may only be regained after approval of the Chief or the Training Officer. If after months of probationary status a member does not satisfactorily meet training requirements, the member's status with the department should be terminated.

A member whose active status is in jeopardy due to failing to meet training requirements will receive a verbal and written warning from the Chief or Training Officer.

A member whose status is changed from active to probationary status will receive a written notification from the Chief or Training Officer. At this time a meeting will be scheduled with that member and the Chief or his/her designee, to discuss requirements and actions needed to regain active status.

Exceptions and petitions for minimum training requirements may be made to the Chief. Under special circumstances the Chief may alter department minimum training requirements. Training must meet the minimum requirements set forth by the Wisconsin Fire Department Safety and Health Standards (Wis. Stats. Chapter SPS 330.)

SAMPLE

Driving Requirements

State and local laws may provide certain exemptions for authorized emergency vehicles from regular traffic laws when responding on emergencies. However, neither state or local laws nor these guidelines are intended to absolve an emergency vehicle driver of the responsibility of due regard for the safety of others on the road.

Fire apparatus may only be operated by individuals meeting all of the following requirements:

A. Members of Fire Department.
B. Members who have a valid driver's license.
C. Members who have successfully completed training for operation of the apparatus based on NFPA 1002- Standard for Fire Apparatus Driver/Operator Professional Qualifications (Trainee drivers may operate apparatus when under the supervision of a qualified driver.)
D. Members over the age of . *Exception: Members over the age of 18 who hold a valid CDL
E. Members who have satisfied their probationary period.

Before entering a fire station:

A. A Spotter should always be used when backing, if available.
B. Consideration must be taken for the possibility of pedestrians within the fire station.

Before exiting from a fire station:

A. The driver will ensure all apparatus compartment doors are securely closed.
B. All personnel are seat belted in proper locations.
C. Ensure apparatus bay door is raised fully and enough clearance is available to clear apparatus height.
D. Test brakes before entering street.

Safe Driving:

A. All audible and visible warning devices shall be in operation when responding to an emergency incident.
B. The driver shall maintain a speed that is safe under the prevailing conditions.
C. When approaching a controlled intersection (i.e. stop sign, traffic light):
    1. The driver of an authorized emergency vehicle may proceed past a stop sign or red light only after slowing down or stopping to ascertain that the intersection is clear.
    2. The driver or an authorized emergency vehicle may disregard regulations governing the direction of movement and turning in specific directions as long as he/she does not endanger life and/or property.
D. School zone related driving:
    1. Observe the posted speed limit for school zones when children are present or when speed warning lights are flashing.
    2. Fire apparatus, both emergency and non-emergency traffic shall stop for school buses loading or unloading as indicated by the buses flashing lights and/or stop sign.
E. Upon first unit's arrival on an emergency scene:
    1. The scene should be evaluated.
    2. If the situation is not urgent, other responding units should be advised to continue to the scene "non-emergency mode" or disregard and return to their respective stations.
F. Drivers of fire apparatus shall be directly responsible for the safe and prudent operation of the vehicle at all times.
G. Any member of the Fire Department who is involved in an accident while responding to an incident shall remain on the scene of the accident and immediately notify the proper authorities and Fire Chief.

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Backing:
When backing an apparatus, a minimum of one spotter shall be at the rear of the apparatus. The spotter(s) is/are responsible for guiding the Driver and ensuring that any potential hazards are avoided.

The spotter shall position themselves to have an unobstructed view and be in visual and voice/radio contact with the apparatus driver. Spotters shall not ride the tailboard while backing the apparatus. If the Driver loses visual contact with the spotter(s), the Driver shall stop the apparatus immediately. Vehicle mounted cameras or other devices are not a substitute for a spotter.

In situations where assistance is not available and the apparatus must be immediately moved, the Driver shall first walk completely around the apparatus before backing to ensure no obstructions will interfere with vehicle operation.

Mandatory Seatbelts

The driver of any Fire Department vehicle or apparatus shall be directly responsible for the safe operation of the vehicle. When the driver is under the direct supervision of an officer or acting officer, that officer or acting officer shall also assume responsibility for the actions of the driver.

Drivers shall not move fire department vehicles or apparatus until all persons are seated and secured with seat belts in approved riding positions.

All persons riding in fire department vehicles or apparatus shall be seated and secured by seat belts or safety harnesses at any time the vehicle is in motion. Riding on tail boards, side steps, running boards, or in any other exposed positions, or standing while riding shall be specifically prohibited.

Department members are exempt from wearing seat belts while actively performing emergency medical care while the vehicle is in motion, where requirements to be seated and restrained with seat belts would jeopardize patient care. The driver shall take extraordinary precaution in recognition of the additional danger that exists while driving with unrestrained member(s). All other persons in the vehicle shall be seated and restrained with seat belts in approved riding positions while the vehicle is in motion.

SAMPLE

Incident Command System

Command procedures are designed to offer a practical framework for emergency operations and to effectively integrate the efforts of all members, officers, and firefighters. This will facilitate an organized and orderly tactical operation and a more effective effort. All members involved in emergency operations will be trained to the appropriate level in the National Incident Management System (NIMS.) Those who function in command staff positions shall train further to the advanced ICS levels.

The Incident Commander (IC) is responsible for managing and/or controlling resources by virtue of explicit legal, agency, or delegated authority. The individual responsible for the overall management of the response is called the Incident Commander.

The IC is responsible for all aspects for the response, including developing incident objectives and managing all incident operations both written and verbal. The IC sets priorities and defines the ICS organization for the particular response. Even if other positions are not assigned, the IC will always be designated.

The IC is faced with many responsibilities when he/she arrives on scene. Unless specifically assigned to another member of the Command or General Staffs, these responsibilities remain with the IC.

Responsibilities of Command

A. Stabilize the incident and provide for life safety
B. Conservation of property
C. Conservation of environment
D. Remove endangered occupants and treat injured
E. Assure the safety and welfare of department personnel

Function of Command

A. Assume Command
B. Size up the incident
C. Evaluate Conditions
D. Develop a plan
E. Assign units
F. Provide continuing command
G. Request additional units
H. Disregard and return units to service
I. Terminate Command

Assuming Command

The first department member or unit to arrive on the scene of an incident shall establish command of the incident. **THE INITIAL INCIDENT COMMANDER SHALL REMAIN IN COMMAND UNTIL COMMAND IS TRANSFERRED OR THE INCIDENT/COMMAND IS TERMINATED.**

Scene Size Up and Initial Report

The member or unit establishing command initiates the command process with an initial radio report. The initial radio report shall contain the following:

A. Identify unit arriving on the scene
B. Give a brief description of the incident
    1. Speak clearly
    2. Use common language
C. State any safety concerns
D. Establish and name command based on location

SAMPLE

Transfer of Command

A. The first arriving Unit on the scene will establish and CONTINUE COMMAND until transferred within the following guidelines:
    1. A face-to-face briefing between command, and the officer command is being transferred to, must be completed.
    2. The officer command is being transferred accepts the responsibilities of command.
    3. Under NO circumstances will command be transferred to a unit that is not on scene.
    4. Once the officer that command is being transferred to has been briefed, Incident Command will advise dispatch that the officer taking command has been briefed and is now in command of the Incident.

B. The arrival of a ranking officer on the incident scene does not mean "command" has automatically been transferred. Command is only transferred when the transfer of command process has been completed. In cases where an individual is effectively commanding the incident and satisfactory progress is being made to bring the incident under control, it may be desirable for that person to continue an active command role. If upon arrival a Higher Ranking Officer declares the command to be ineffective they can assume command as long as it is communicated to all involved in the incident. All officers will exercise their command prerogative in a supportive manner that will ensure a smooth transition and the effective ongoing function of command.

Communications

A reliable communications system is essential to obtain information on emergencies, and to direct and control our resources responding to those situations. A department's communication system can set the stage for efficient actions and improve effectiveness of tasks being performed on emergency scenes. County currently runs on a radio system that has both repeated and non-repeated channels. County Fire Dispatch is located at .

General Communication Guidelines

A. Any time you go in route, arrive on scene, or clear a call you must advise dispatch.
B. (Example: County Dispatch, is en route to .")
C. Be sure the receiver is ready to receive the transmission, make sure the message is acknowledged once the message has been sent. A brief repeat of the message is far better than just a "COPY". Repeating briefly what has been said lets the sender know the message has been received correctly.
D. Know what you are going to say before transmitting. Choose terms that communicate the desired message clearly without wasting air time. Per NIMS all radio traffic is to be done in a "common English" fashion, and try to control your emotions to prevent garbled transmissions.
E. Orders given over the radio should tell you what to do, not necessarily how to do it.
F. **DO NOT** interfere with other transmissions unless you have Emergency Traffic.

SAMPLE

Accountability

The purpose of this guideline is to provide for the tracking and inventory of all members operating at an emergency incident. It is the responsibility of all fire chiefs and officers to maintain a constant awareness of the position and function of all personnel assigned to operate under their supervision. This awareness shall serve as the basic means of accountability that shall be required for operational safety.

Incident Commander
The incident commander shall be responsible for overall personnel accountability for the incident.

The incident commander shall maintain an awareness of the location and function of all companies or units at the scene of an incident.

The incident commander shall initiate an accountability system at the very beginning of operations and shall maintain that system throughout operations (unless an accountability officer has been appointed.)

The incident commander shall provide for the appropriate control of access for all personnel and bystanders at the incident scene.

Where an accountability officer has been appointed, it shall be the responsibility of the accountability officer to ensure the accountability of all personnel and to initiate the accountability system. The accountability officer shall be responsible for collecting the firefighter accountability tags, and logging the appropriate names of personnel on the accountability board.

An accountability system shall be initiated at all incidents. Each firefighter shall be provided with a firefighter accountability tag. Each position on all apparatus shall be equipped with a firefighter accountability tag board. It shall be the responsibility of all personnel to remove their firefighter accountability tag from their protective equipment and place it on the appropriate position board.

Each apparatus shall be equipped with a firefighter accountability tag collection point. At emergency incidents, which have advanced beyond the incipient stage, it shall be the responsibility, as time allows, of the unit officer to collect the firefighter accountability tags from the boards and place them at the accountability tag collection point.

Personnel Accountability Report (PAR)
It is recommended that the officer in charge of accountability obtain a PAR every twenty to thirty minutes during fire ground operations. A PAR may be confirmed in person or through radio communication. A PAR should also be obtained immediately following a catastrophic fire ground event, such as a collapse, to ensure all personnel are accounted for. In the event of a catastrophic occurrence on the fire ground, the accountability and inventory board shall be made available to the incident commander. At the conclusion of an incident, department personnel shall be responsible for retrieving their firefighter accountability tags.

SAMPLE

Protective Clothing

It is the policy of the Fire Department to provide personnel with the appropriate protective clothing and equipment. This protective clothing and equipment shall be used whenever an individual is exposed or potentially exposed to workplace hazards. The protective clothing and equipment purchased by the department shall meet or exceed the requirements of NFPA 1971-Standard on Protective Ensembles for Structural Fire Fighting and Proximity Fire Fighting and department specifications in effect at the time of purchase. Each individual is responsible to utilize and maintain their protective clothing and equipment consistent with the manufacturer's instructions and department policy or guidelines.

Protective clothing shall not be modified in any manner without written approval from the Department and manufacturer. Only personal protective clothing or equipment issued by the fire department is authorized for use. Personal items such as hand lights, wire cutters, small tools, etc. may be utilized provided they do not reduce the level of protection provided by issued clothing/equipment.

Personnel shall not remove their protective clothing until such time that their company officer or the Incident Commander (IC) determines that such protection is no longer necessary. If operating conditions warrant, company officers may increase or decrease the required level of PPE but the responsibility to protect their personnel from injury remains with the officer.

Training:
All personnel shall have a working knowledge of their assigned Personal Protective Equipment (PPE.) Personnel shall be able to identify when the PPE is necessary, what PPE is necessary, how to properly don, doff, adjust, and wear the PPE, the limitations of the PPE, and how to properly care for, maintain, and dispose of the PPE.

Storage of PPE:
Protective clothing and equipment shall be stored in a designated location at the fire station. Protective clothing shall not be worn or stored in the living or office areas of the fire station. This includes the kitchen, dayroom, bunkroom, washrooms, or other areas.

Cleaning, Maintenance, and Inspection:
It is the responsibility of the company officer to ensure that their assigned personnel maintain clean turnout gear. Frequent cleaning may be required based on exposure to fire products, chemicals or bloodborne pathogens contamination. The equipment manufacturer's instructions must be followed when cleaning gear.

Washing of turnouts is to be done at a station equipped with a turnout gear washer. Turnout gear shall not be washed at home, at a Laundromat or dry cleaned. Turnout gear with bloodborne contamination may be first sprayed/rinsed with an approved product to help in removal of any stains, and then washed in a turnout gear washer.

For other than regularly scheduled inspections, if assigned gear becomes unserviceable, the individual shall notify their Company Officer. Any unserviceable turnout clothing is to be cleaned, removed from service, and repaired or replaced.

The following personal protective equipment assessment was completed and certified by .

SAMPLE

Level 1 Protective Clothing:
Department issued firefighting boots, bunker pants, coat, hood, helmet with chinstrap fastened and equipped with goggles, firefighting gloves, and SCBA.

Level 2 Protective Clothing:
Department issue firefighting boots, bunker pants, coat, hood, helmet with chinstrap fastened and equipped with goggles or safety glasses and helmet shield, and firefighting gloves.

Level 3 Protective Clothing:
Department issue firefighting boots, bunker pants, coat, hood, helmet with chinstrap fastened and equipped with goggles or safety glasses with helmet shield, and firefighting gloves or approved extrication gloves.

Level 4 Protective Clothing:
Department issued firefighting boots, bunker pants, coat, and helmet with chinstrap fastened.

Task	**Required PPE**
CO	1
EMS Assists	4 and Body Substance Isolation
HAZMAT (Fuel, LP, Ammonia, etc.)	1
High Dust (Hay, Grain, Woodworking)	1
Hose Test	4
Hybrid Vehicle Operations	3 and High Voltage Gloves
Ladder Operations, Fire	1 and Ladder Belt
Ladder Operations, Rescue	2 and Ladder Belt
Landing Zone	2
Pump Operations/Drivers	4 and Safety Vest
Saw Operations	2
Smoke/Gas Environment	1
Structure Fire, Attack/Back Up	1
Structure Fire, Support	2
Structure Fire, Ventilation	1
Technical Rescues	2
Traffic Control	4 and Traffic Safety Vest, Class III
Training	Set by Training Officer
Vehicle Fire	1
Vehicle Rescue with Tools	3
Water Rescue (In Water)	Water Rescue Suit
Water Rescue (On Bank)	Personal Flotation Device (PFD)
Wildland Fire	2

Traffic safety vests shall be stored on each vehicle/apparatus so that they are readily accessible by personnel. The vest shall be worn whenever personnel are operating in areas of vehicular traffic. The vest shall be donned immediately upon exiting the vehicle or apparatus and includes instances when turnout gear is worn. Turnout coats alone are not acceptable as high-visibility highway safety apparel. The exceptions to this requirement are:

A. When SCBA is worn
B. When wearing hazardous materials personal protective equipment
C. When wearing technical rescue personal protective equipment

SAMPLE

Exposure Control

This policy applies to all personnel within the Fire Department, who are involved in fire fighting, hazardous material incident control, rescue, or emergency medical services which involve occupational exposure to blood or other potentially infectious materials.

The Department recognizes the potential for transmission of certain bloodborne infections to firefighters through contact with blood and body fluids and requires that specific precautions to minimize the risk of exposures. Universal precautions as defined below will be used where there is potential exposure to blood or body fluids to protect firefighters, patients, and citizens against the spread of infectious diseases.

This plan will be reviewed annually beginning on and as needed to reflect changes in procedures, policies or work rules.

The Department recognizes that communicable disease exposure is an occupational health hazard. Communicable disease transmission is possible during any aspect of operations including emergency response, training and while in the station.
It is the Department's policy to:

A. Provide services to all persons requiring them without regard to known or suspected diseases in any patient.
B. Regard all patient contacts as potentially infectious and to take universal precautions at all times.
C. Provide Department personnel with the necessary training, immunizations and protective equipment to reduce the risk to firefighters and members of the public.
D. Recognize the need for infection controls in the workplace.
E. Prohibit discrimination of any Department member based on infection with HIV or HBV virus.
F. Regard all Department personnel medical information as confidential.

DEFINITIONS:
Blood: Human blood, human blood components and products made from human blood.

Bloodborne Pathogens: Pathogenic microorganisms that are present in human blood that can cause disease in humans. These pathogens include, but are not limited to Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV).

Contaminated: The presence or the reasonably anticipated presence of blood or other potentially infectious material on an item.

Contaminated Laundry: Laundry which has been soiled with blood or other potentially infectious materials or that may contain sharps.

Decontamination: The use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use or disposal.

Engineering Controls: Controls (e.g., sharps disposal containers, self sheathing needles) that isolate or remove the bloodborne pathogens hazard from the work place.
Exposure Incident - A specific eye, mouth, other mucus membrane, non-intact skin, or other contact with blood or potentially infectious materials that results from the performance of duties.

HBV: Hepatitis B Virus

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HIV: Human Immunodeficiency Virus
Occupational Exposure: Reasonably anticipated skin, eye, mucus membrane or parenteral contact with blood or other potentially infectious materials that may result from performance of an employee's duties.

Other Potentially Infectious Materials (OPIM):

A. The following human fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids where it is difficult or impossible to differentiate between body fluids.
B. Any unfixed tissue or organ (other than intact skin) from human (living and dead).
C. HIV containing cell or tissue cultures, organ cultures, and HIV or HBV containing medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

Parenteral: Piercing mucus membranes or the skin barrier through needle sticks, human bites, cuts, abrasions, etc.

Personal Protective Equipment: Specialized clothing or equipment worn for protection against a communicable disease. . Personal protective equipment will be considered "appropriate" only if it does not permit blood or other potentially infectious materials to pass through to or reach the employee's work clothes, street clothes, undergarments, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.

Source Individual: An individual, living or dead, whose blood or other potentially infectious materials may be a source of exposure.

Sterile: The use of a physical or chemical procedure to destroy all micro-organisms including highly resistant bacteria.

Universal precautions: An approach to infection control which calls for all human blood and certain body fluids to be treated as if they are known to be infectious for HIV, HBV and other pathogens.

Work Place Controls: Controls that reduce the likelihood of exposure by altering the manner in which a task is performed.

OCCUPATIONAL EXPOSURE CONTROL PLAN
Exposure Determination
All personnel within the Fire Department, who are involved in fire fighting, hazardous material incident control, rescue, or emergency medical services may be exposed to blood and other potentially infectious materials. Positions include:

Probationary Firefighter
Entry Level Firefighter
Firefighter I
Firefighter II
Lieutenant
Captain
Assistant Chief
Chief
Safety Officer

SAMPLE

Methods of Compliance

A. Universal precautions shall be observed to prevent contact with blood and other potentially infectious materials. All body fluids shall be considered potentially infectious materials.

B. Work Practices
   1. Impervious gloves will be worn for all patient/victim contact. Gloves will be worn for touching blood and body fluids, mucus membranes or non-intact skin of all patients, for handling items soiled with blood or body fluids, and for performing all cleaning of soiled surfaces. Gloves are to be removed and hands washed after contact with each patient or each use for cleaning or handling potentially infectious materials.
   2. All firefighters will wash hands and exposed skin with soap and water when feasible, or flush mucus membranes with water as soon as practical following contact with potentially infectious materials.
   3. Hands must be washed for a minimum of 15 seconds after doffing gloves, before eating or preparing food, and after contact with body fluids, mucus membranes or broken skin.
   4. When hand washing is not possible, firefighters will clean their hands with an antiseptic towel or hand cleanser, and then wash their hands with soap and water at the earliest possible time.
   5. Any other skin, mucus membrane, or body area that has come in contact with potentially infectious material must be washed as soon as possible.
   6. Immediately after use, sharp items such as needles and lancets shall be placed in a leak-proof, puncture-resistant container. Contaminated sharps shall not be recapped or otherwise manipulated by hand. Whenever possible, firefighters will leave handling and disposal of sharps to EMS. When firefighters must dispose of sharps or contaminated broken glassware, all handling will be with tongs or forceps. Also glass can be cleaned up with a brush and dustpan.
   7. All procedures involving blood or OPIM shall be performed to minimize splashing and spattering.
   8. Infectious waste, any disposable item which comes in contact with body fluids, shall be handled with gloves and shall be placed in an impermeable red bag.
   9. No potentially infectious waste will be left at the scene of an incident.
   10. A needle stick/sharps injury log shall be maintained and shall include the following information for each incident:
       - Period of time the log covers
       - Date of the incident
       - Date the incident is entered into the log
       - Type and brand of sharp involved
       - Department or area of incident
       - Description of the incident
   11. The log(s) shall be retained for five years after the end of the log year. Appendix F contains a sample Sharps Injury Log.

C. Personal Protective Equipment (PPE)
   1. When PPE is removed it shall be, decontaminated or disposed of in an appropriate container.
   2. Personnel in contact with patients/victims will have examination gloves and goggles with them at all times. These are available on each engine and ladder truck.
   3. Replace gloves if torn, punctured or contaminated, or if their ability to function as a barrier is compromised
   4. Never wash or decontaminate disposable gloves for reuse

SAMPLE

5. Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives will be readily accessible to those employees who are allergic to the gloves nominally provided.
6. Replace gloves if torn, punctured or contaminated, or if their ability to function as a barrier is compromised
7. Never wash or decontaminate disposable gloves for reuse
8. Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives will be readily accessible to those employees who are allergic to the gloves nominally provided.
9. Impervious gloves will be worn for all patient/victim contact. Gloves must be worn for touching blood and body fluids, mucus membranes or non-intact skin of all patients/victims, and for cleaning of soiled surfaces. Replace gloves if torn, punctured or contaminated, or if their ability to function as a barrier is compromised
10. Never wash or decontaminate disposable gloves for reuse
11. Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives will be readily accessible to those employees who are allergic to the gloves nominally provided.
12. Gloves are to be removed and hands washed after contact with each patient or each use for cleaning or handling potentially infectious items.
13. Structural fire fighting protective clothing will be worn for all incidents requiring this protection. Additionally latex or equivalent gloves will be worn under the firefighters gloves when infectious materials may be encountered such as during vehicle extrication. Because of the potential for burns, these gloves should not be worn under fire fighting gloves where there is exposure to extreme heat.
14. Masks shall be worn in combination with goggles or glasses with solid side shields whenever droplets of blood or OPIM may be splashed in the eyes, nose, or mouth. Face shields on structural fire fighting helmets shall not be used for exposure control; however, SCBA masks are acceptable.
15. Gowns, waterproof aprons or structural fire fighting gear shall be worn during procedures that are likely to generate splashes of blood or other body fluids.

D. Equipment Cleaning
   1. Routine cleaning of equipment will be done on a daily basis.
   2. Vehicles, tools and other equipment that is exposed to body fluids will be cleaned with soap and water followed by an antiseptic cleaner .

E. Contaminated Sharps
   1. A sharps container is carried in .
   2. The sharps container must be kept in an upright position when used and shall be replaced when ¾ full.
   3. Sharps will only be picked up with pliers or tongs, never by hand.
   4. Sharps containers should be closed to prevent spillage, placed in a second container if leaking, and handled with care.
   5. Used sharps containers shall be capped, taped, and dated for disposal.
   6. shall be called to pick up sharps from and to provide new sharps containers.

F. Contaminated materials shall be handled as little as possible. When handling contaminated linen or towels, firefighters will wear latex gloves and other appropriate PPE. All soiled linen shall be placed in red bags that prevent leakage.

G. Disposal of Waste
   1. All biohazardous waste will be placed in red plastic bags or labeled sharps containers. Biohazard bags will be red in color or affixed with a biohazard label and will be available at

SAMPLE

2. Whenever possible, contaminated waste will be given to an on-scene EMS crew for disposal.
3. Waste not given to an on-scene EMS crew will be transported back to the fire station in a non-passenger area of the vehicle. No more than 50 lbs of waste material may be transported.
4. The waste will then be double bagged, the bags sealed and placed in the station's outside trash container.
5. Heavily soiled waste materials, those with unabsorbed body fluids, will be double bagged, placed out of living areas and traffic areas at the fire station, and EMS shall be called to remove the waste.
6. EMS will respond to remove heavily soiled waste and sharps within 24 hours.

H. Hepatitis B Vaccination
1. All personnel who are at risk to occupational exposure will have the Hepatitis B vaccination, post exposure evaluation and follow up made available at no cost.
2. The Hepatitis B vaccination will be available after the firefighter receives training on the Hepatitis B vaccine, its safety, method of administration, the benefits of being vaccinated, and within ten working days of initial shift assignment (career personnel) or station acceptance (volunteer personnel). The vaccination will not be given to anyone who has received the complete Hepatitis B vaccination series, or if antibody testing shows that the firefighter is immune. If the individual is allergic to yeast, an alternate Hepatitis B vaccine will be offered.
3. Each firefighter must sign a consent/refusal form verifying that this vaccination was offered to him/her.
4. If an employee declines the vaccination, the employee must sign a declination form as provided in Appendix B. Employees who decline may request and obtain the vaccination at a later date at no cost.

I. Post-Exposure Evaluation and Follow-up
1. Following a report of an exposure incident, the employer shall make immediately available to the exposed employee a confidential medical evaluation and follow-up, including at least the following elements:
    a. Documentation of the route(s) of exposure, and the circumstances under which the exposure incident occurred;
    b. Identification and documentation of the source individual, unless the employer can establish that identification is infeasible or prohibited by state or local law
    c. Collection and testing of blood for HBV and HIV serological status;
        i. The source individual's blood shall be tested as soon as feasible and after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, the employer shall establish that legally required consent cannot be obtained. When the source individual's consent is not required by law, the source individual's blood, if available, shall be tested and the results documented.
        ii. When the source individual is already known to be infected with HBV or HIV, testing for the source individual's known HBV or HIV status need not be repeated.
        iii. Results of the source individual's testing shall be made available to the exposed employee, and the employee shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
        iv. After consent is obtained, the exposed employee's blood will be collected as soon as feasible and tested. If the employee consents to baseline blood collection, but does not consent at that time for HIV serological testing, the sample will be preserved

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for at least 90 days. If, within 90 days of the exposure incident, the employee elects to have the baseline sample tested, such testing will be done as soon as feasible.

1. Healthcare Professional's Written Opinion
    b. The employer shall obtain and provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation.
    c. The healthcare professional's written opinion for Hepatitis B vaccination shall be limited to whether Hepatitis B vaccination is indicated for an employee, and if the employee has received such vaccination.
    d. The healthcare professional's written opinion for post-exposure evaluation and follow-up shall be limited to the following information:
        i. That the employee has been informed of the results of the evaluation
        ii. That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment.
    e. All other findings or diagnoses shall remain confidential and shall not be included in the written report

J. Communication of Hazards to Personnel
    1. Warning labels shall be affixed to containers of regulated waste containing blood or OPIMs.
    2. Potentially infectious waste will be placed in red plastic bags.
    3. Food and drink will not be kept in refrigerators, freezers, cabinets, or on shelves, counter-tops or bench tops where blood or other potentially infectious materials are present.

K. Information and Training
    1. All personnel with the potential for occupational exposure shall participate in an exposure control training program.
    2. The training will be provided on initial assignment to a position that has potential for exposure and annually after that.
    3. Training will be provided when changes occur, such as modifications of procedures, and with the use of new products that may affect occupational exposure.
    4. The training program shall contain at least the following elements.
        a. Information on the where to obtain a copy of OSHA's Bloodborne Pathogens Standard, 29 CFR 1910.1030,
        b. A general explanation of the symptoms of bloodborne diseases.
        c. An explanation of the modes of transmission of bloodborne pathogens.
        d. An explanation of this exposure control plan and fact that a copy of the policy will be included in the SOG manual located in the watch room of each fire station.
        e. Training in recognizing activities that may involve exposure to blood or OPIMs.
        f. An explanation of methods and their limitations for reducing exposure including appropriate engineering controls, work practices, and PPE.
        g. Information on the types, proper use, location, removal, handling, decontamination and disposal of PPE.
        h. Instruction on how to select PPE for different situations.
        i. Information on the Hepatitis B vaccine, including its effectiveness, safety, method of administration, the benefits of being vaccinated, and the fact that the vaccination is offered at no charge to firefighters.

SAMPLE

j. Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIMs.
k. An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available.
l. Information on the post-exposure evaluation and follow up provided for the firefighter following an exposure.
m. An explanation of the labels and color coding required by the exposure control plan.
n. An opportunity for interactive questions and answers with the person conducting the training session.

L. Record keeping
1. Fire Department shall maintain a record for each employee who has occupational exposure in accordance with 29 CFR 1910.1020. The record includes:
a. The name and social security number of the firefighter, a copy of the firefighter's Hepatitis B vaccination status including the dates of all hepatitis vaccinations and any medical records relative to the firefighter's ability to receive the vaccination.
b. A copy of all results of examinations, medical testing, and follow up procedures as required.
c. The employer's copy of the health care professional's written opinion.
d. A copy of the information provided to the health care professional.
2. Medical records shall be kept confidential and shall not be disclosed to any person within or outside the Department, except as required by law, without the employee's written consent.
3. The records shall be maintained for the duration of employment plus 30 years in accordance with 29 CFR 1910.1020.

M. Training Records
1. Training records shall include the following information:
a. The dates of the training.
b. A summary of the training.
c. The names and qualifications of the persons conducting the training.
d. The names and job titles of all persons attending the training.
2. Training records shall be maintained for three years from the date on which the training occurred.
3. Firefighter training records will be provided upon request to the individual firefighter, and to anyone having written consent of the individual in accordance with 29 CFR 1910.20.

Responsibilities

A. The Chief of Department has overall responsibility for the operation of the Fire Department and for the Exposure Control Plan.

B. The Department Safety Committee has responsibility for reviewing and updating this plan, for reviewing administration of the infection control program and for making recommendations to the Chief of Department for improvements in procedures, equipment and training that will minimize the risk of occupational exposure.
1. The committee will meet at least annually to review the status of the infection control program and more often as needed.
2. The committee will conduct an annual evaluation and review the effectiveness of this exposure control plan and will coordinate corrective action and update the plan as needed.

SAMPLE

3. Written notes of all meetings will be maintained.
4. The is the Department's Infection Control Officer, and is responsible for administering the Department's Safety and Training programs and for ensuring that the Exposure Control Plan is current, all personnel with the potential for exposure are trained and understand the plan, and that training records are maintained properly.
5. The is responsible for coordinating the initial phase of training on bloodborne pathogens for personnel, for ensuring that Hepatitis B vaccinations are offered to firefighters who have potential for exposure, for coordinating post exposure protocols for career personnel and for administering exposure records.
6. Officers are responsible within the chain of command for following and enforcing infection control procedures in all phases of their areas of control.
7. All other personnel are responsible for complying with the infection control plan and with the training received.

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Respiratory Protection

This program provides procedures and protocols designed to prevent employee overexposure to atmospheric contaminants and oxygen deficient atmospheres, which are potentially harmful to health.

RESPONSIBILITIES:
Program Administrator:
The Fire Department shall serve as Program Administrator. This person has the training and experience to administer or oversee the respiratory program including evaluating its effectiveness.

A. Determines the need for respiratory protection.
B. Establishes and maintain a Respiratory Protection Program in compliance with all requirements of Wis Stats, Chapter SPS 330, Fire Department Safety and Health Standards.
C. Provides all employees in the program with respirators appropriate to the purpose intended.
D. Selects a physician or licensed health care professional to administer the medical evaluation program, as well as coordinating the medical evaluation program.
E. Fit tests applicable firefighters.
F. Responsible for breathing air quality.
G. Responsible for the information requirements of this program and ensuring that members are trained in the care and maintenance for the respirator.
H. Ensures that repairs are conducted according to the manufacturer's specifications.
I. Responsible for the record keeping requirements of this program.
J. May designate other members to carry out specific functions.

Fire Department Members:

A. Wear assigned respirator(s) when and where required and in the manner in which they were trained.
B. Care for, maintain and clean their respirators following the manufacturer's procedures and store them in a clean and sanitary location.
C. Inform their officer if the respirator no longer fits well, and request a new one that fits properly.
D. Inform their officer or the Program Administrator of any respiratory hazards that are not addressed in the workplace and of any other concerns regarding the program.
E. Each member is responsible for the cleanliness and operational readiness of their issued respirators/facepiece.

SELECTION OF RESPIRATORS

Fire Department members who respond to and function in toxic atmospheres shall be equipped with Self-Contained Breathing Apparatus (SCBA) and trained in its proper use and care. These respirators shall be used in accordance with the manufacturer's recommendations and appropriate governing performance testing guidelines.

Until an atmosphere has been found not to be so, it shall be considered IDLH (Immediately Dangerous to Life and Health). Where an atmosphere has potential to become IDLH it shall be entered under the assumption that it is ALREADY IDLH.

The Fire Department provides the following respirators for use in IDLH atmospheres:

SAMPLE

Respirators for IDLH (Immediately Dangerous to Life and Health) Atmospheres):
SCBA shall be used by all personnel operating:

A. In a contaminated atmosphere
B. In an atmosphere which may suddenly become contaminated
C. In an atmosphere which is oxygen deficient
D. In an atmosphere which is suspected of being contaminated or oxygen deficient

This includes all personnel operating:

A. In an enclosed, active fire area
B. In a potential explosion or fire area, including enclosed gas leaks and fuel spills
C. Where products of combustion are visible in the atmosphere and fire department personnel are exposed or potentially exposed to these products of combustion, including vehicle fires and dumpster fires
D. Where invisible contaminants are suspected to be present at levels above OSHA PELs (permissible exposure limits) (i.e. Carbon Monoxide during overhaul)
E. Where toxic products are present, suspected to be present, or may be released without warning (including Hazardous Material incidents (HazMat)
F. In any confined space which has not been tested to establish respiratory safety

In addition to the above, SCBA shall be worn by all personnel operating at fire incidents above ground, below ground or in any other area which is not, but which may become contaminated by products of combustion or other hazardous substances. In these circumstances, the SCBA may be worn with the face piece removed. The wearing of SCBA in these situations provides that it will be immediately available for use if conditions change or if personnel are to enter an area where the use of SCBA is required. Examples include but not limited to:

A. Atmospheres that have been reported to have a smoke or CO detector sounding but there are no signs of elements present or occupants feeling ill. Members shall investigate and if monitoring proves existence, members shall fully don SCBA face piece.
B. Atmospheres, scenes, or conditions that are potentially dynamic, changing and/or unknown.

Premature removal of SCBA must be avoided. This is particularly significant during overhaul when smoldering materials may produce increased quantities of carbon monoxide and other toxic products. In these cases SCBA must be used or the atmosphere must be changed.

In fire situations, the decision to remove SCBA shall be made by based on an evaluation and monitoring of atmospheric conditions. Prior to removal, fire areas shall be thoroughly ventilated and, where necessary, continuous ventilation shall be provided.

If there is any doubt about respiratory safety, SCBA use shall be maintained until the atmosphere is established to be safe by testing.

If a firefighter detects a vapor or gas breakthrough, changes in breathing resistance or leakage of the face piece the firefighter will notify his partner and Officer or the Incident Commander and leave the area immediately.

Respirators for atmospheres that are not IDLH:
For protection against particulates, the Fire Department will provide one of the following:

SAMPLE

PROCEDURES FOR RESPIRATORS FOR USE IN FIREFIGHTING
Procedures for IDLH (Immediately Dangerous to Life and Health) Atmospheres (2 In/ 2 Out):
The following are not meant to preclude an Incident Commander from starting suppression (not entering) or rescue operations (entering) in a structural incident. The requirement intends that the Rapid Intervention Team (RIT) be established as soon as practical to ensure safety of firefighters, yet not detract from the responsibility to provide rescue and suppression to citizens.

Rapid Intervention Team (RIT):

A. A rapid intervention team (RIT) shall consist of at least two members and shall be available for rescue of a department member or a team if the need arises. A RIT shall be fully equipped with the appropriate protective clothing, protective equipment, SCBA and any specialized rescue equipment that might be needed given the specifics of the operation under way.

B. The composition and structure of a RIT shall be permitted to be flexible based on the type of incident and the size and complexity of operations. The Incident Commander shall evaluate the situation and the risks to operating teams and shall provide one or more RITs commensurate with the needs of the situation.

C. In the early stages of the incident, which includes the deployment of a fire department's initial attack assignment, the RIT shall be of either one of the following:
    1. On-scene members designated and dedicated as rapid intervention team(s).
    2. On-scene members performing other functions but ready to re-deploy to perform rapid intervention team functions. The assignment of any personnel shall not be permitted as members of the rapid intervention team if abandoning their critical task(s) to perform rescue clearly jeopardizes the safety and health of any member operating at the incident.

D. While working in IDLH atmospheres, during interior firefighting operations in fires that have progressed beyond the incipient stage, or hazmat operations, employees entering will work in teams having a minimum of two (2) persons who remain in visual or voice contact at all times.

E. Two firefighters shall be located outside the IDLH atmosphere as the RIT. Visual, voice, radio, or signal line communication will be maintained between the firefighters in the IDLH atmosphere and the firefighters located outside the IDLH atmosphere (RIT).

F. The firefighters located outside the IDLH atmosphere as the RIT shall be trained and equipped to provide an effective emergency rescue of the firefighters inside the IDLH.

G. The Incident Commander is to be notified before the RIT located outside the IDLH atmosphere enters the IDLH atmosphere to provide an emergency rescue. The Incident Commander must immediately provide additional assistance, if necessary.

H. Once notified, the RIT provides necessary assistance appropriate to the situation.

NOTE: *Nothing in this rule is meant to preclude firefighters from performing emergency rescue activities before an entire team has assembled, however, such action is not to be considered a standard of operation.*

GENERAL USE PROCEDURES:

A. Employees will use their respirators under conditions specified by this program, and in accordance with training and the respirator manufacturer's recommendations they receive on the use of each particular model. In addition, the respirator shall not be used in a manner for which it is not certified by NIOSH or its manufacturer.

SAMPLE

B. All employees shall conduct user seal checks each time that they wear their respirator. Employees shall use either the positive or negative pressure check as specified by the manufacturer or as listed in Appendix B-1 of the OSHA Respiratory Protection Standard.

C. Employees may possess mustaches or other facial hair provided that it does not interfere with the face piece seal or valve function. Employees are not permitted to wear tight-fitting respirators if they have any condition such as facial scars or missing teeth or dentures that prevent them from achieving a good face piece seal. Employees are not permitted to wear tight-fitting respirators if they have facial hair that comes between the sealing surface of the face piece and their face These restrictions shall apply regardless of the specific fit test measurement that can be obtained under test conditions.

D. If a firefighter wears eyeglasses, the firefighter shall use frames that do not pass through the seal area of the face piece.

E. Employees are not permitted to wear headphones, jewelry, glasses, or other articles that may interfere with the face piece-to-face seal.

FIT TESTING PROCEDURE

A. All employees wearing respirators must be fit tested with the same make, model, style, and size of respirator that they will use on the job. The Respiratory Protection Program Administrator will oversee the fit testing of fire department employees.

B. Fit tests will be conducted on all employees who use respirators following their successful completion of an initial medical evaluation as a new employee, at least annually thereafter, or whenever the employer observes or receives a report of changes in the employee's physical condition that could affect respirator fit. Fit testing may also be repeated if the employee states that the fit of the respirator is unacceptable.

Some factors that may affect mask fit are:

- Significant weight change.
- Significant facial scarring in the area of the face piece seal.
- Significant dental changes.
- Reconstructive or cosmetic facial surgery.
- Any other condition that would interfere with mask fit.

Fit tests will be administered using an OSHA accepted qualitative or quantitative test. The protocol used will be stated on the fit test record for each employee.

MEDICAL EVALUATION OF FIREFIGHTERS REQUIRED TO USE RESPIRATORS

Using a respirator may place physiological burdens on firefighting personnel that vary with the type of work in which the respirator is used and the medical status of the employee. All new employees must undergo a medical evaluation prior to being fit tested or required to use a respirator. Medical evaluations shall be administered to employees of the fire department by the following Physician or other Licensed Health Care Professional (PLHCP):

The Department shall identify a Physician or other Licensed Health Care Professional (PLHCP) to administer a medical questionnaire to each employee who uses SCBA or other types of respirators. The questionnaire shall be administered confidentially during the employee's normal work hours. The questionnaire will determine the need for a follow-up physical examination. The department shall use the following PLHCP to administer the questionnaire:

Medical questionnaires shall be administered and successfully completed prior to a fit test for all firefighters required to use SCBA or other types of respirators

SAMPLE

The department will be using the following PLHCP for follow-up medical examinations, if needed:

The employee shall have the opportunity to discuss the questionnaire and examination results with the Physician or other Licensed Health Care Professional (PLHCP) if so requested.

After an employee has received clearance and begun to wear the respirator, additional medical evaluations will be provided under the following circumstances:

A. Employee reports signs and/or symptoms related to their ability to use a respirator, such as shortness of breath, dizziness, chest pains, or wheezing;
B. The physician or supervisor informs the Program Administrator that the employee needs to be reevaluated;
C. Information from this program, including observations made during fit testing and program evaluation, indicates a need for reevaluation;
D. A change occurs in workplace conditions that may result in an increased physiological burden on the employee.

The program administrator, employee and physician will arrange an appropriate time for the examination. The medical consultation and examination with the PLHCP will be at the department's expense.

CLEANING, DISINFECTING, STORING, INSPECTING, REPAIRING, DISCARDING, AND MAINTAINING RESPIRATORS

Cleaning:
The Fire Department shall provide personnel with a respirator that is sanitary, and in good working order. Fire department personnel shall ensure that respirators are cleaned and disinfected using the procedures recommended by the respirator manufacturer. The respirators shall be cleaned and disinfected at the following intervals:

A. Respirators issued for the exclusive use of a firefighter shall be cleaned and disinfected per the manufacturer's instructions as often as necessary to be maintained in a sanitary condition.
B. Respirators issued to more than one firefighter shall be cleaned and disinfected per the manufacturer's instructions after each use and the respirator cleanliness shall be ensured before being worn by different individuals.
C. Respirators used in fit testing and training shall be cleaned and disinfected after each fit test use.
D. The face piece shall be placed in a clean, dry container in a manner that prevents deformation of the face seal, other damage or contamination. The face piece will be stored with the head harness to the back, not over the lens – this will help prevent deformation of the face piece seal.

The Program Administrator or his/her designee will ensure an adequate supply of appropriate cleaning and disinfection materials at each station. If supplies are low, employees should contact their officer, who will notify the Program Administrator or designee.

Cleaning Procedures:
Operational Recommendations:
In order to decrease the possibility of contaminant entry into cleaned and stored respirators, it is recommended that face piece protective covers be in place to limit contamination of dust and particles. The manufacturer's recommendations for covered storage will be followed.

Cleaning Recommendations:
Cleaning is recommended after each usage where contaminants may come in contact with any part of the unit.

SAMPLE

Gross contamination should be washed off as soon as practical at the scene or station.

Prepare cleaning solution as described per manufacturer's instructions.

The cleaning solution should be effective against a number of gram positive and negative bacteria, fungi and viruses including HIV-1 and influenza.

Cleaning Procedure {Insert your manufacturer's instructions}:

Lung Demand Valve (LDV) and Face piece

1. Close cylinder valve
2. Remove pressure on entire system
3. Thoroughly rinse face piece and SCBA under clean running tap water to remove debris
4. Place face piece in cleaning solution and agitate solution. Use a circular motion.
5. Place face piece into a container of clean tap water and agitate
6. Finally rinse face piece under running clean tap water
7. Apply air pressure to remove interior liquids
8. Wipe out any excess rinse water with a clean, dry, towel. Allow to dry.
9. **DO NOT USE THE FIREHOUSE AIR COMPRESSOR TO DRY ANY PART OF THE SCBA! THE LUBRICATING OIL THAT MAY BE CONTAINED IN THE AIR STREAM MAY BE HAZARDOUS AND COULD DAMAGE THE RUBBER COMPONENTS**
10. Inspect SCBA and regulator for cleanliness and damage
11. Leak test SCBA.
12. Return to operation.

Harness Assembly and Air Cylinders

1. Wipe off dirt and grime with a lathered mild soap solution. Rinse thoroughly. Take care not to get water into the regulator.
2. Let harness air dry.
3. Inspect the harness for loose or missing buckles and fittings. Look for worn belts and connections. Check cylinder latching strap for proper operation.
4. Wipe off dirt and grime from air cylinders with a lathered mild soap solution. Rinse thoroughly.
5. Make sure each cylinder has a protective thread cap over the threads.
6. Check cylinders for deep scratches, gouges, and damaged threads. Check the gauge and cylinder hand wheel. **NOTE: Cylinder valves shall only be tightened hand tight. Do not forcefully tighten the cylinder valve. Damage to the nylon valve seat will result.**

Cases

1. Remove any loose dirt or debris
2. Sponge out with sanitizer/cleaner solution.
3. Rinse with water

Unit Inspection

1. Leak test SCBA
2. Return to operation

If anything questionable arises, or obvious repairs are needed, place the unit out of service. Mark unit with a repair tag and forward to . Please refer all repairs to the responsible repair person as soon as possible.

Maintenance:

Respirators are to be properly maintained at all times in order that they function properly and adequately protect the employee. Maintenance involves a thorough visual inspection for cleanliness and defects. Worn or deteriorated parts will be replaced prior to use.

No components will be replaced or repairs made beyond those recommended by the manufacturer. Repairs to regulators or alarms of atmosphere-supplying respirators will be performed by the manufacturer or a person certified by the manufacturer.

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Air cylinders shall be maintained in a fully charged state and shall be recharged when the pressure falls to 90% of the manufacturer's recommended pressure level. Fire department personnel shall determine that the regulator and warning devices function properly daily.

For fire department respirators, fire department personnel shall:

A. Inspect and certify that the respirator is ready for use by documenting the date the inspection was performed (at least monthly), the name (or a signature) of the person who made the inspection, the findings, required remedial action, and a serial number or any other means of identifying the inspected respirator.
B. Provide this information on inspection forms, specifically, weekly and after use inspection forms. This information shall be maintained in each station until replaced following a subsequent certification.
C. Inspection records shall be forwarded to the department designees responsible for record keeping.

Fire department personnel shall ensure that respirators that fail an inspection or are otherwise found to be defective are removed from service, and are repaired, adjusted, or discarded in accordance with the following procedures:

A. Repairs or adjustments to respirators are to be made only by persons appropriately trained to perform such operations and shall use only the manufacturer's NIOSH-approved parts designed for the respirator.
B. Repairs shall be made according to the manufacturer's recommendations and specifications for the type and extent of repairs to be performed; and
C. SCBA repairs including but not limited to reducing and admission valves, regulators, and alarms shall be adjusted or repaired only by the manufacturer or a Department technician trained by the manufacturer or vendor supplying the equipment to the fire department.
D. All SCBA requiring repairs, or SCBA that fail inspections shall be tagged with a red out-of-service tag indicating the following:
    1. Date
    2. Station location
    3. SCBA unit identification
    4. Name of person(s) reporting the problem
    5. Brief description of the problem
E. The SCBA unit with the red tag affixed will be forwarded to for repair by the manufacturer or a Department technician trained by the manufacturer.

INSPECTIONS

Each PASS (Personal Alert Safety System) must be tested weekly and prior to use.

Each SCBA is required to be inspected and tested at least monthly and prior to use. All air cylinders carried on the apparatus and spares in each station will be inspected for any damage, cleanliness and proper fills.

The following checklist will be used when inspecting respirators:

Face piece:
- Cracks, tears, or holes
- Facemask Distortion
- Cracked or loose lenses/face shield

Head straps:
- Breaks or tears
- Broken buckles

Valves:
- Residue or dirt
- Cracks or tears in valve material

Filters/Cartridges:
- Approval designation
- Gaskets
- Cracks or dents in housing
- Proper cartridge for hazard

Air Supply Systems:
- Breathing air quality/grade
- Condition of supply hoses
- Hose connections
- Cylinders
- Settings on regulators and valves

SAMPLE

The following functional tests are to be completed on each SCBA to ensure proper operation:

A. Pressure Gauge
B. PASS test
C. Leak Test
D. Warning bell test
E. Face piece Connection

Cylinder Pressure Gauge and Sentinel Reading Comparison
The purpose of this test is to compare the cylinder pressure gauge and the Sentinel pressure reading to make sure they read within +/- 10%.
Procedure:

1. Open the cylinder valve and note the pressure reading on the cylinder pressure gauge.
2. Compare the shoulder gauge pressure reading to the cylinder gauge reading. The two values must be within +/- 10% of the full scale

QUALITY AND QUANTITY OF BREATHING AIR
Breathing air in the SCBA cylinders shall meet the requirements of the Compressed Gas Association G-7.1-1989, COMMODITY SPECIFICATION FOR AIR, with a minimum quality of Grade D. Private vendors supplying the department with compressed breathing air shall provide a copy of the most recent inspection and certification.

The purity of the air from the Fire Department's compressor shall be checked by a competent laboratory quarterly.

The department shall assure that sufficient quantities of compressed air are available to refill SCBA for each incident. This shall be accomplished through the use of mobile air supplies or mutual aid from other fire departments.

Air cylinders for SCBA shall be filled only by trained personnel.

Compressed oxygen shall not be used in open-circuit SCBA.

Standards for breathing air and hazards associated include:

- Oxygen content of 19.5-23.5%.
- Hydrocarbons (condensed) content of 5 milligrams per cubic meter of air or less;
- Carbon monoxide (CO) content of 10 ppm or less;
- Carbon dioxide content of 1,000 ppm or less;
- Lack of a noticeable odor.

The fire department shall ensure that cylinders used to supply breathing air to respirators meet the following requirements:

- Cylinders are tested and maintained as prescribed in the Shipping Container Specification Regulations of the Department of Transportation (49 CFR part 173 and part 178) test requirements of five years for composite cylinders supplied to MSA and five years for steel or aluminum cylinders.
- Note: composite cylinders have a maximum use life of 15 years.
- The moisture content in the cylinder does not exceed a dew point of -50 degrees F. (-45.6 degrees C.) at one (1) atmospheric pressure, and a water vapor level of less than 25 ppm

RESPIRATORY HAZARDS AND TRAINING ON RESPIRATORY USE
The Fire Department is required to provide training to those who use respirators. The training must be comprehensive, understandable, occur annually, or more often if necessary. Documentation of this training shall occur.

SAMPLE

The Fire Department shall ensure that each firefighter can demonstrate knowledge of at least the following:

- Why the respirator is necessary and how improper fit , usage, or maintenance can compromise the protective effect of the respirator;
- What the limitations and capabilities of the respirator are;
- How to use the respirator effectively in emergency situations, including situations in which the respirator malfunctions;
- How to inspect, put on and remove, use, and check the seals of the respirator;
- What the procedures are for maintenance and storage of the respirator;
- How to recognize medical signs and symptoms that may limit or prevent the effective use of respirators;
- The general requirements of this program.

The training shall be conducted in a manner that is understandable to the firefighter.

Retraining shall be administered annually, **or** when the following situations occur:

- Changes in the workplace or the type of respirator render previous training obsolete;
- Inadequacies in the firefighter's knowledge or use of the respirator indicate that the firefighter has not retained the requisite understanding or skill;
- Any other situations arise in which retraining appears necessary to ensure safe respirator use.

PROCEDURES FOR EVALUATING THE RESPIRATOR PROGRAM

Each year the Program Administrator shall initiate a review of the procedures contained in this program. All employees who wear, service, or supervise employees wearing respirators shall periodically be asked to provide information on:

- Adequacy of the respirator(s) being used.
- Accidents or incidents in which the respirator failed to provide adequate protection.
- Adequacy of training and maintenance on respirator use.

The Program Administrator shall recommend changes in the program and its implementation based on this information.

RECORD KEEPING

The Department is required to keep the following records to assure compliance with this written program:

- Medical evaluation records
- Fit testing records

Medical records shall be maintained for member's entire career plus thirty years.

Fit test records shall be kept until the next fit test is administered.

The Department will also maintain records of employee training (e.g., date, attendees, trainer(s), subject matter).

SAMPLE

Apparatus and Equipment

This standard establishes schedule for the inspection and maintenance of all apparatus and equipment owned or operated by the department. It ensures that emergency response vehicles are maintained in a constant state of readiness. It implements a preventative maintenance schedule for all apparatus and establishes procedures for the daily inspection of apparatus, equipment, and support vehicles.

A. Apparatus and equipment shall be:
   1. Maintained in a constant state of readiness.
   2. Refueled whenever the fuel level drops below of a tank. Oil and ancillary fluid reservoirs shall also be kept full at all times.
   3. Kept clean at all times.

B. All maintenance, both preventative and repair, shall be recorded in the appropriate vehicle logbook.

C. After each use
   1. Every vehicle used shall be inspected. The member performing the inspection shall record his findings in the appropriate vehicle logbook.
   2. The member performing the inspection shall correct the defects that are found provided that the member has the expertise, tools, and supplies to do so. The items that are corrected shall be noted in the comments section of the vehicle logbook.
   3. Defects that cannot immediately be corrected shall be noted in the vehicle logbook and reported to the Chief or Officer in Charge.
   4. If a defect requires that a vehicle be placed out of service, the person doing the Inspection shall notify the Chief or Officer in Charge.

D. Weekly Inspections.
   1. All apparatus and equipment used shall be inspected . The member performing the inspection shall record his findings in the appropriate vehicle logbook.
   2. Refueled whenever the fuel level drops below of a tank. Oil and ancillary fluid reservoirs shall also be kept full at all times.
   3. All engine-powered equipment shall be run for a minimum of five minutes. Their fuel tanks shall be refilled whenever the level drops below of a tank. The oil will be checked and oil shall be added if necessary

SAMPLE

Lock Out/Tag Out

This policy is intended to provide specific practices and procedures to safeguard personnel from equipment becoming unexpectedly energized, the start-up of machinery and equipment, or the release of hazardous energy during emergency and non-emergency operations.

Personnel can be seriously or fatally injured if machinery or equipment they are working within becomes unexpectedly energized, starts-up or releases stored energy. The stored energy sources include electrical, mechanical, hydraulic, pneumatic, chemical, thermal, and others.

Situations requiring device lock-out:

A. When a device or piece of equipment is not operating in its designed capacity and could injury any employee who attempts to use the device. This includes department fire and rescue apparatus that are unsafe for travel on public ways or are unable to carry passengers safely.
B. When a device or piece of equipment is being serviced and/or the safety features have been disabled in any way.
C. When the department responds to an emergency scene where employees are required to interact with machines, devices, or utilities that are powered by electrical, chemical, thermal, hydraulic, or other energy types.

Emergency Incident Procedure:
This requires that designated fire department personnel (company officers, chiefs, etc.) work with facility personnel to turn off and disconnect the machinery or equipment from its energy source(s) before working in and around the equipment. This also requires that designated fire department personnel install lock-out/tag-out the energy isolating device(s) to prevent the release of hazardous stored energy and take steps to verify that the energy has been effectively isolated.

Upon arrival at an emergency incident involving machinery or equipment that was or is involved in fire or entrapment of victims, the company officer or crew leader shall retrieve the lock-out/tag-out equipment that is located on . The Officer in Charge must work closely with facility personnel familiar with the lock-out/tag-out procedures specific to the equipment or machinery that is involved to ensure the following:

A. All energy sources to the machinery or equipment have been de-energized.
B. The Officer in Charge places fire department lock-out/tag-out equipment to secure energy sources.
C. Verify that all energy sources have been secured.
D. The Officer in Charge holds the keys and controls the fire department's lock-out/tag-out equipment.
E. Once fire department operations have been completed, remove the fire department's lock-out/tag-out equipment and turn the machinery or equipment back over to facility personnel.

Non-Emergency/Servicing/Maintenance Procedure:

A. Notify all affected personnel that servicing or maintenance is required on a machine or equipment and that the machine or equipment must be shut down and locked out to perform the servicing or maintenance.
B. The authorized person shall refer to the manufacturer's procedure to identify the type and magnitude of the energy that the machine or equipment utilizes, shall understand the hazards of the energy, and shall know the methods to control the energy.
C. If the machine or equipment is operating, shut it down by the normal stopping procedure (depress the stop button, open switch, close valve, etc.).
D. De-activate the energy isolating device(s) so that the machine or equipment is isolated from the energy source(s).

SAMPLE

E. Lock out the energy isolating device(s) with assigned individual lock(s).
F. Stored or residual energy (such as that in capacitors, springs, elevated machine members, rotating flywheels, hydraulic systems, and air, gas, steam, or water pressure, etc.) must be dissipated or restrained by methods such as grounding, repositioning, blocking, bleeding down, etc.
G. Ensure that the equipment is disconnected from the energy source(s) by first checking that no personnel are exposed, then verify the isolation of the equipment by operating the push button or other normal operating control(s) or by testing to make certain the equipment will not operate.
H. **Caution: Return operating control(s) to neutral or "off" position after verifying the isolation of the equipment.**
I. The machine or equipment is now locked out.

Restoring Equipment to Service:

A. Check the machine or equipment and the immediate area around the machine to ensure that nonessential items have been removed and that the machine or equipment components are operationally intact.
B. Check the work area to ensure that all personnel have been safely positioned or removed from the area.
C. Verify that the controls are in neutral.
D. Remove the lockout devices and reenergize the machine or equipment. The removal of some forms of blocking may require repowering of the machine before safe removal.
E. Notify affected personnel that the operation is completed and the machine or equipment is ready for use.

Keeping Equipment Out of Service:

If equipment is deemed unsafe the equipment shall remain in the off position. The equipment shall be secured with tie wraps and a tag stating that the equipment should remain out of service until serviced by authorized personnel.

Authority

The only person that shall have the authority to remove the lock or tag from a piece of equipment or machine is the individual who originally locked out the device. In the event that this individual has left the immediate area, the Officer in Charge may authorize the removal of the locking device or tag, however only before:

A. Making a valid attempt to contact the individual who originally locked out the device.
B. If that person cannot be reached, the Officer in Charge must ensure that all tools have been removed, all guards have been replaced and all personnel are free from any hazard before the lock and tag are removed and the machinery, equipment or process are returned to service.

In the event that a lockout, tag-out situation occurs during normal operations (not at the scene of an emergency), the Chief of the Department or Safety Officer will fill the Officer in Charge's role described above.

Training:

Employees not authorized to perform LOTO procedures are referred to as "affected" employees. All affected employees shall be instructed in the purpose and use of the LOTO procedure. Instruction for affected employees will also include the prohibition of:

- Attempts to restart or re-energize machines or equipment that have been locked/tagged out by an authorized employee
- The use or removal of LOTO equipment by non-authorized employees

SAMPLE

Hazard Communication (Right to Know)

The purpose of this policy is to improve the level of information provided to staff regarding the chemicals that they may encounter during the course of their duties. Additionally, this written guideline will help ensure that the Fire Department is in compliance with applicable laws and regulations.

RESPONSIBILITIES
The individual assigned to ensure compliance is . This person responsible for the program shall be known as the "Program Administrator". The Program Administrator is responsible for:

- Administering and managing the hazard communications program.
- Assisting personnel in implementing the program
- Maintaining the master list of SDS's
- Training all personnel on the hazardous communication policy
- Ensuring compliance with rules and regulations.

CHEMICAL INVENTORY
The Program Administrator will maintain a list of the hazardous chemicals known to be present within the station. All personnel are responsible for reporting any new hazardous materials that are accompanied by a Safety Data Sheet (SDS) to the Program Administrator. A chemical inventory log will be kept and will include the locations of all chemicals. The chemical inventory log and each SDS will be kept in the SDS binder located .
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LABELS
Hazardous chemical containers in the station will be labeled, tagged, or marked with the identity of the hazardous chemical and the appropriate hazard warning. Primary chemical container **labels will not be defaced or removed**. Any label that becomes illegible shall be replaced with the information listed above. Primary containers must include the manufacturer name.

SAFETY DATA SHEETS
Fire Department will rely on the manufacturer evaluation of their chemical products. Safety Data Sheets will be maintained and available for any staff member to review.

STAFF MEMBER TRAINING:
Personnel will be provided with information and training on hazardous chemicals located in the fire station at the time of their initial assignment and whenever a new hazard is introduced. That information and training will include areas and operations where hazardous chemicals may be present and the location and availability of the SDS binder. Additional areas of training will include the following:

A. Methods and observations that may be used to detect the presence or release of a hazardous chemical.

B. Physical and health hazards of the chemicals on site or used at the station

C. Measures personnel can take to protect themselves from these hazards, including specific procedures that have been implemented to protect staff members from exposure, including work practices, emergency procedures, and personal protective equipment

D. The details of the hazard communication policy, including an explanation of the labeling system, the SDS's, and how to obtain and use appropriate hazard information.

SAMPLE

Structure Fires

Arrival On Scene

A. The Officer will provide a scene size-up, assume command, and develop a fire suppression plan
B. The Officer will complete a 360 degree viewing of the structure to determine number of stories, type of structure, what is showing, location of problem, exposures, what is burning, where it is going, and the need for additional resources
C. The Officer will ensure that a proper communication system has been coordinated for fireground activities

Scene Safety

A. There shall be at least 2 personnel on any interior attack hose-line.
B. There shall be at least 2 personnel on any interior search and rescue.
C. There should be a "R.I.T." in place on any interior operation or any situation where personnel are exposed or could be exposed to any IDLH situation.
D. Personnel must be authorized and properly trained before participating in any interior structural fire attack or search and rescue operations.

Incident Actions

Rescue

A. Human life is the most important consideration at a fire or other emergency.
B. Rescue of humans override all other strategic considerations at a fire.
C. The primary functions of an adequately staffed truck (if available) shall be rescue.
D. A primary and secondary search shall be conducted at all structure fires. During search all rooms should be marked by some means to indicate that the particular room has been searched.

Exposure Protection

A. Exposure protection is the strategy of preventing a fire from spreading to the uninvolved building(s) or in involved parts of the fire building.
B. The Incident Commander shall be responsible for ensuring the initial protection of exposures and assigning teams appropriately.

Confinement

A. The strategy of confinement means preventing the fire from extending to uninvolved sections of the building.
B. Whenever possible, the most effective method of confining fire spread is a direct attack on the fire.
C. The Incident Commander shall decide whether to make an offensive approach, aggressive interior attack, or a defensive approach, attacking the fire from the outside. There maybe situations when both approaches could be used, but a defensive attack should not be used when crews are operating on the interior.
D. All avenues of fire spread must be considered examples: shafts, openings, utility raceways, ducts etc.
E. Where fires involve concealed spaces (attic, ceilings, construction voids, etc.) it becomes very important that the vent crews open up and fire attacks operate fire streams into such areas.

Extinguishment

A. In most fire situations a quick and aggressive attack on the seat of the fire will take care of rescue, exposures, and confinement at the same time.
B. The size-up will provide information as to techniques, equipment and manpower needs to overcome the fire.

SAMPLE

Overhaul

A. The purpose of overhaul is to make sure the fire is completely out.
B. Overhaul operations must be properly coordinated with fire investigation efforts.
C. Unsafe conditions should be identified early in the overhaul process and definite efforts made to avoid the possible problems associated with the same.
D. During overhaul most fire fighters are more relaxed, tired, perhaps less alert and thus more apt to get injured.
E. Personnel should not remove their breathing apparatus until the area is completely cleared of toxic gases.
F. When available, a fresh crew should perform overhaul.
G. Particular attention should be given to hidden areas during overhaul.
H. During overhaul care should be given to protect personnel from exposure to carbon monoxide and other by products of combustion.

Ventilation

A. Based upon the situation, ventilation may need to occur anytime during the operation.
B. Ventilation shall be employed to:
    1. Channel heat, smoke and flames from potential victims.
    2. To prevent backdraft and flashover.
    3. To remove heat and smoke from the building so to reduce property damage.
    4. To allow the interior of the structure to be more tenable and safer for fire fighting operations.

Salvage

A. Salvage may need to begin at various points during a fire operation.
B. Salvage is those operations required to safe guard personal property, furnishings, and the unaffected portions of a structure from the effects of heat, smoke, fire and the weather.
C. Salvage should include:
    1. The use of salvage covers.
    2. Removing water from the structure.
    3. Removing furniture and personal belongings to a safe location.
    4. Debris removal.
    5. Removal of valuables from debris.
    6. Covering openings to keep weather out and to secure the building.
D. All members are expected to perform in a manner that continually reduces loss during fire operations.

Utility Control

A. Utilities should be shut down and brought under control to ensure that they will not contribute to the fires spread, overall damage or create any type of safety hazard.
B. At structure fires where electrical involvement or damage has occurred, request via radio the response of the proper electric company.
C. If the electric company is not available in time, fire personnel may shutdown the power via circuit breakers.
D. If necessary, shut down gas lines at the meter and have the Gas Department notified. Meters that have been shut off by fire department personnel should be properly locked.
E. If necessary, shut down water supplies to the structure at the valve closest to the point of usage.

SAMPLE

Vehicle Fires

Arrival on Scene

A. The Driver Operator will position the apparatus in a way that will provide the best protection for the crew during fire suppression activities
B. The driver operator will engage the pump and stand by the pump panel for further instructions
C. The Officer will provide a scene size-up, assume command, and develop a fire suppression plan

Scene Safety

A. Ensure that unauthorized/untrained personnel do not enter the hazardous area
B. See HAZMAT procedures for vehicle fires involving Hazardous Materials
C. Traffic Hazards

Incident Actions

A. The attack team will pull the hose line instructed by the Officer
B. Additional firefighters will do as instructed by the officer
C. The driver/operator will charge the hose line when directed and continue to monitor the pump operations
D. The attack team will approach the vehicle slowly from the side extinguishing the fire as they approach. Caution should be taken as the team approached for exploding bumpers, fuel tanks, tires, etc.
E. When the fire is under control the engine compartment and trunk of the vehicle on fire will be opened and cooled. The vehicles battery cables should be disconnected or cut when possible.

Vehicle Accidents

Arrival on Scene

A. The Driver Operator will position the apparatus in a way that will provide the best protection for the crew during rescue and operation activities
B. The Officer will provide a scene size-up, assume command, determine type of incident, number of vehicles involved, extent of damage to vehicles involved, extent of injuries, and if extrication is needed
C. The Officer will request additional resources as needed (EMS, MedFlight)

Scene Safety

A. Ensure that unauthorized/untrained personnel do not enter the hazardous area
B. Provide High Visibility PPE and other safety measures for Traffic Hazards

Incident Actions

Command will assign teams as needed for:

- Fire and Hazard Control
- Extrication
- Patient Care
- Landing Zone
- Traffic Control

SAMPLE

Wildland Fires

Arrival on Scene

A. The Officer will provide a scene size-up, assume command, and develop a fire suppression plan
B. The Officer will determine the location and size of the fire, direction and characteristics of fire travel, the fuel burning, and exposures
C. The Officer will request additional resources as needed
D. The Driver/Operator will park the apparatus in a safe, accessible location pointing away from the fire with the windows closed and the keys in the ignition
E. Consider evacuations of citizens

Scene Safety

A. All personnel should know the location and direction of the fire travel
B. Escape Plans shall be known to hall fire personnel
C. Be cautious for Spot fires
D. Be cautious for Flare-ups
E. Be aware of wind direction and velocity
F. Be aware of topography
G. Monitor crews for exhaustion
H. Be aware of down wires, electric fences, etc.
I. Be aware of equipment and personnel working above or around teams

Incident Actions

A. Base all actions and strategy on current and expected fire behavior
B. Establish staging area for additional arriving apparatus and personnel
C. Life safety and structural protection take priority over extinguishment of forest, brush, or ground cover
D. If offensive attack is indicated, the head of the fire is to be attacked first. If that is not possible, the flanks should be attacked while working toward the head of the fire.
E. If the fire is large and fast moving, then a direct attack may not be possible. In such cases, an indirect and/or parallel attack may be utilized by creating a fire line a distance ahead of the fire to halt the progress of the fire.
F. Different methods of attack may be used simultaneously according to the situation
G. Teams assigned to structural protection must keep hose lines flexible enough to be able to quickly break away in the even of being over run
H. Collaborate with the DNR, County Officials, and specialists/technicians as needed
I. Communications and accountability of all incident personnel shall be maintained at all times.

SAMPLE

Hazardous Materials

The Fire Department functions at the AWARENESS level. At the operations level, we possess the basic knowledge necessary to protect the public from harm due to the exposure of hazardous materials. Prior to responding to a known or suspected hazardous materials incident, all personnel shall have Hazardous Materials training at the awareness level.

An incident involving hazardous materials can pose significant risk to the public and responding personnel. While all effort shall be made to protect the public, responders must NOT rush into the incident. Many HAZMAT incidents require the assistance, involvement, and response of other agencies; as such, mitigating the incident can take an extended period of time. All actions shall be based on informed decisions from qualified individuals.

Examples of activities and functions appropriate at the **AWARENESS** level include:

- Recognition of a Hazmat incident
- Recognition of hazards
- Identifying resource needs
- Initiating response of operations and/or technician level personnel
- Establishing scene control and management

Arrival on Scene

A. The Emergency Response Guidebook (ERG) shall be used to identify containers, chemicals involved, staging, and isolation zones.
B. All units shall stage a safe distance away from the incident in accordance to ERG recommendations and current conditions. When selecting a staging area take into consideration the following: Wind direction, topography, accessibility, proximity to the incident, overhead obstacles, and potential for fire.
C. The first arriving officer should establish command and complete an initial size-up
D. Isolate the incident from all directions and evacuate as needed. Refuse admittance to the area. Note: In some situations, sheltering-in-place may be the most viable option.
E. All persons who have been exposed to the material(s) shall be moved to a location where they are isolated from others and the incident so that they may be monitored and decontaminated if necessary.
F. Obtain Safety Data Sheets and any chemical information available. This may include a, waybill, manifest, or other form of shipping papers if the incident involves the transportation of hazardous materials.
G. Make contact with any company representatives and notify the appropriate agencies including a Wisconsin Level I HAZMAT Technician team if necessary.
H. Assign an incident safety officer immediately. It is also suggested that the incident commander assign an assistant or scribe to begin documentation of all incident plans and operations.

Scene Safety

A. Establish hot, warm, and cold zones (utilize barrier tape and natural boundaries)
B. Ensure that unauthorized/untrained personnel do not enter the hazardous area

Incident Actions

A. All incident actions shall not exceed the scope of the hazardous materials operations level which is limited to establishing command, identifying the materials involved, isolating the incident, and securing the scene. Other actions may occur only if the personnel have the appropriate level of PPE and training to SAFELY carry out the tasks associated with his/her assignments.
B. An Incident Action Plan shall be created that identifies exposures, hazards, and incident objectives.

SAMPLE

C. Dike and/or dam areas to contain run-off and prevent further contamination of other areas and water sources.
D. Remove all ignition sources if materials are combustible or flammable in nature.
E. Collaborate with the DNR, EPA, County Officials, company representatives, specialists/technicians, and the HAZMAT team as needed.
F. Communications and accountability of all incident personnel shall be maintained at all times.

Reports and Documentation

A. The release of information regarding the incident shall be controlled by the OIC and the designated Public Information Officer. Only the OIC, County Emergency Management, or other designated Public Information Officer shall have the authority to provide public information.
B. The Incident Action Plan and all operations performed on the incident shall be documented. A written report shall be completed by the OIC and filed with all other documents created.
C. A log of all department personnel who were exposed or potentially exposed shall be maintained during the incident and filed along with other incident reports.
D. A record of all other agencies and their corresponding personnel who responded shall also be kept.
E. A record of all items used that will need to be replaced and any other expenses shall be kept during the incident and filed with the other incident reports.

Clean-Up

Clean up of materials is the sole responsibility of the person or company responsible for the hazardous material(s) incident. All of the personnel and equipment in contact with the hazardous material(s) shall be decontaminated prior to returning to service.

SAMPLE

Natural Gas Incidents

Natural gas (Methane) is extremely flammable, colorless, odorless, and lighter than air. Mercaptan, with an odor of rotten eggs, is added to natural gas to help indicate its presence. The flammable range of natural gas is 4% Lower Explosive Limit (LEL) to 15% Upper Explosive Limit (UEL) by volume. Natural gas can displace oxygen and cause asphyxiation in certain settings, particularly confined spaces. The presence of natural gas in its flammable range should be evaluated with the use of a Combustible Gas Indicator (CGI) (on the Engine, Utility Company, or HAZMAT response unit.)

Fires involving natural gas should be controlled by stopping the flow of gas. In most cases, burning natural gas should not be extinguished as this would change the situation from a visible to an invisible hazard with an explosive potential. Natural gas is much lighter than air and will usually dissipate rapidly in the outside environment. Inside buildings, however, it tends to pocket, particularly in attics and dead space. Because natural gas is lighter than air, if confined it has the potential for a catastrophic explosion. Natural gas leaks above ground are much easier to manage than below ground leaks.

Arrival on Scene

A. Perform a scene size up and establish Command.
B. The Emergency Response Guidebook shall be used to identify staging and isolation zones.
C. Consciously avoid committing apparatus or personnel to a dangerous situation or a situation that could become dangerous due to gas migration.
D. Attempt to locate the homeowner or responsible party and begin to gather information as to the hazard, potential victims, etc.
E. Notify appropriate Utility/Gas Company and HAZMAT(if needed) for assistance and response
F. Evacuate the area, working towards an "All Clear" of the immediate area and surrounding structures if necessary.
G. Isolate the area/scene – Establishment of a "Hot Zone" is critical.
H. Deny entry.
I. If incident is determined to be a natural gas leak, ensure that personnel safety practices are in place when working in the Hot Zone including the wearing of the appropriate PPE with SCBA, face piece donned and breathing air. Establish a water supply and ensure that a charged hose line is in place. This line must be attended when Utilty/Gas Company or HAZMAT personnel are securing the leak.
J. Approach to the incident should be from upwind. Use wind speed/direction from dispatch and observe any on-scene indicators (trees, flags and any other items that may show direction).

Scene Safety

A. Establish hot, warm, and cold zones (utilize barrier tape and natural boundaries)
B. Ensure that unauthorized/untrained personnel do not enter the hazardous area

Incidents with an Explosion- Incident Actions

Units arriving on scene of an explosion must consider natural gas as a possible cause. Underground leaks may allow gas to travel considerable distances before entering a structure through the foundation, around pipes or through void spaces. Until it can be determined that the area is safe from danger of further explosions:

A. Evacuate all civilians
B. Keep the number personnel in the area to the minimum number necessary to stabilize the situation
C. Don't rely on gas odor- Use a CGI to check all suspected areas

SAMPLE

D. Check areas systematically using a CGI- Start outside of the area of the explosion and move into the area until readings indicate a detectable concentration.
E. Map the readings for the affected area and relay it to Command
F. If the gas concentration is encountered inside, adjacent to, or underneath any building, secure all possible sources of ignition in the affected area.
G. Cut electricity from outside the affected area to avoid arcing.
H. Ventilate buildings where gas is found with explosion-proof blowers only.
I. Never enter inside when CGI is alarming for LEL.
J. Ventilate first and wait for Utility/Gas Company or HAZMAT.
K. Command shall provide for effective interaction between gas company personnel and the fire department.
L. Command must ensure the safety and stability of the structure.

Incidents with No Explosion- Incident Actions
Calls for "gas leak", gas odor", "broken gas line" and similar situations may range from minor to a potentially major incident. All these should be approached as potentially dangerous situations. The following actions must occur:

A. The first arriving unit with a CGI shall obtain a sufficient number of gas concentration readings for Command to evaluate the hazard and take appropriate action. (With these readings, a proper isolation perimeter can be established.)
B. In all cases, personnel shall take whatever actions are necessary to provide for life safety and property conservation.
C. Provide standby protection with a charged 1-3/4 inch hand line (fog nozzle) and a dry chemical extinguisher.
D. Crews shall be in full protective equipment and SCBA.
E. Crews should position themselves upwind.
F. Evacuate any civilians in the area of escaping gas.
G. Attempt to locate the source of the gas and any shutoff devices available to isolate and control the leak, i.e. water heater, stove, dryer, etc.

SAMPLE

Carbon Monoxide Incidents

Carbon monoxide (CO) is an odorless, tasteless, colorless gas that is deadly. It is a by-product of a fuel burning process. Many appliances such as furnaces, kitchen stoves, hot water heaters, automobiles, and etc. can produce carbon monoxide. When a faulty or unusual condition exists, carbon monoxide may be vented into areas where people are present. Carbon monoxide poisoning may be difficult to diagnose, its symptoms are similar to the flu, which may include headache, nausea, fatigue and dizzy spells.

Arrival on Scene

A. Perform a scene size up and establish Command.
B. Attempt to locate the homeowner or responsible party and begin to gather information as to the hazard, potential victims, etc.
C. Evacuation and treatment of occupants are the first priority.

Scene Safety

A. Establish hot, warm, and cold zones (utilize barrier tape and natural boundaries if necessary)
B. Ensure that unauthorized/untrained personnel do not enter the hazardous area

Incident Actions

A. The CO meter should be activated outside of the structure to allow for fresh air calibration.
B. Personnel shall use the CO meter and perform an initial CO level survey. The meter shall be used to survey the premises and verify the presence of carbon monoxide.
C. Personnel shall enter with protective clothing and self-contained breathing apparatus (SCBA)
D. If, at any time during the survey phase, the meters indicate a concentration of CO in excess of 20 ppm, or Oxygen by volume of less than 19.5%, then the survey team shall actively go on air
E. Personnel shall initiate a primary search or verify that all occupants are outside of the structure.
F. If occupants are showing signs of CO exposure, have EMS personnel treat them per their protocols and transport.
G. Personnel should determine if the residential CO detector is in the low battery mode or alarm mode.
    1. A reading of 9 PPM or less does not require the evacuation of the premises:
        a. Recommend the occupant, check their CO detector per manufacturer recommendations.
        b. Attempt to reset the detector.
        c. Inform occupants that if detector activates again, call 911.
    2. Any reading above 9 PPM but less than 100 PPM shall be considered above normal, and potentially dangerous to the occupants:
        a. Recommend that all occupants leave the premises and begin ventilation.
        b. Determine the source of the CO and shut down the appliance.
        c. Once the premises have been reduced to a safe level of CO, the premises may be occupied at the discretion of the occupant.
        d. Attempt to reset the detector
        e. Inform occupants that if the detector activates again, call 911.
        f. Inform the occupants of the actions that have taken place and that they should notify the appropriate resources for assistance
    3. Emergency Operations Reading of 100 PPM or greater:
        a. Order the occupants to leave the premises immediately.
        b. Determine the source of the carbon monoxide and shut down the appliance.
        c. Call for the Utility/Gas Company to respond to the scene if necessary
        d. Ventilate the structure and reduce CO to a safe level.
        e. Once the carbon monoxide level is safe the structure may be occupied at the discretion of the occupant.
        f. Inform the occupants of the actions that have taken place and they should notify the appropriate resources for assistance

SAMPLE

Confined Space Rescue

Definitions
Confined space: A confined space is any area or vessel, which meets all 3 of the following:

1. Is large enough and so configured that an employee can enter and perform work
2. Has limited means of entry or exit
3. Is not designed for continuous occupancy

Permit required confined space: A permit required confined space is defined as a confined space which has one or more of the following:

1. Contains or has a potential to contain a hazardous atmosphere
2. Contains a material with potential for engulfment
3. Is so structured that an entrant could become trapped or asphyxiated
4. Contains any other recognized serious safety or health hazard – i.e. moving parts, noise

Recovery mode: Recovery mode is defined as situations where the victim is obviously expired or after a period of time during the rescue operation where time, conditions, or other factors have reduced the chance for the victim's survival to minimal.

Rescue mode: Rescue mode is defined as situations where the victim is believed or known to be alive. If this is unknown, personnel should operate in the rescue mode until time, conditions, or other elements make the chance for survival minimal.

Confined space rescue operations present a significant danger to fire department personnel. The safe and effective management of these operations requires special considerations and resources. Examples of possible confined spaces includes tunnels, sewers, tanks, process vessels, manholes, storm drains, furnaces, silos, and industrial spaces.

The Fire Department functions at the AWARENESS level. Therefore it is the policy of the Fire Department that personnel SHALL NOT enter into a confined space. Entry is considered to have occurred as soon as any part of an entrant's body breaks the plane of an opening into the space.

Examples of activities and functions appropriate at the **AWARENESS** level include:

- Recognition of a confined space incident
- Recognition of confined space hazards
- Performing a **non-entry** retrieval
- Identifying resource needs
- Initiating response of operations and/or technician level personnel
- Establishing scene control and management

Arrival On Scene

A. A. The first-in unit should position the apparatus appropriately
B. The first arriving officer should establish command and complete an initial size-up including:
    1. Secure any witnesses
    2. Obtain the confined space entry permit and any other available information
    3. Location, number, condition of victims, and length of time in confined space
    4. Utility and other scene hazards – i.e. hazardous materials, low oxygen levels
    5. Type of work being performed in the confined space
    6. Type of PPE being used by victim(s)
    7. Determination of rescue or recovery mode
    8. Determination of additional resources needed

SAMPLE

Scene Safety

A. Establish hot, warm, and cold zones (utilize barrier tape and natural boundaries)
B. Ensure that unauthorized/untrained personnel do not enter the confined space
C. Confirm or implement lock out/tag out

Incident Actions

A. If victim is attached to a body harness and retrieval line, the rescuers may lift the victim from the confined space area
B. Attempt to establish contact with victim(s)
C. Establish atmospheric monitoring
D. Establish ventilation of confined space after atmospheric monitoring
E. If safe to do so and if it can be accomplished from outside the confined space, shutdown non-essential equipment that is located within the confined space
F. Establish staging area for additional arriving apparatus and personnel

SAMPLE

Trench Rescue

Definitions
Recovery mode: Recovery mode is defined as situations where the victim is obviously expired or after a period of time during the rescue operation where time, conditions, or other factors have reduced the chance for the victim's survival to minimal.

Rescue mode: Rescue mode is defined as situations where the victim is believed or known to be alive. If this is unknown, personnel should operate in the rescue mode until time, conditions, or other elements make the chance for survival minimal.

Trench: An excavation in which the depth is greater than the width and is less than 15 feet wide.

Trench rescue operations present a significant danger to fire department personnel. The safe and effective management of these operations requires special considerations and resources.

The Fire Department functions at the AWARENESS level. Therefore it is the policy of the Fire Department that personnel SHALL NOT enter into an unsafe trench or excavation.

Examples of activities and functions appropriate at this level include:

- Recognition of a trench collapse incident
- Identifying resource needs
- Initiating response of operations and/or technician level personnel
- Establishing scene control

Arrival on Scene

A. The first-in unit should position the apparatus a minimum of 50' from the location of the trench collapse. Additional arriving units should initially stage a minimum of 150' from the location.
B. The first arriving officer should establish command and complete an initial size-up including:
    1. Secure any witnesses
    2. Location, number, condition of victims and how long buried
    3. Depth of trench
    4. Utility and other scene hazards
    5. Determination of rescue or recovery mode
    6. Determination of additional resources needed

Scene safety

A. Establish hot, warm, and cold zones (utilize barrier tape and natural boundaries)
    Hot – 0-100' from trench Warm – 100-500' from trench Cold – 500' and further from trench
B. Secure and/or shut down machinery and traffic within 300' of trench
C. Implement lock out/tag out
D. Place ground pads within 4 feet of trench

Incident Actions

A. If victim is partially buried, lower lifeline and instruct victim to tie around themselves
B. If indicated, lower ladder into trench - for victim self-rescue only
C. If victim is buried, mark last known location using dry chemical extinguisher
D. Establish atmospheric monitoring
E. Establish ventilation of trench (if necessary)
F. Relocate any soil piles to be a minimum of 2 feet from trench
G. Establish staging area for additional arriving apparatus and personnel

SAMPLE

Water Rescue

Arrival on Scene

A. The Officer will provide a scene size-up, assume command, develop a plan, and call for additional technical rescue mutual aid units as needed.
B. The Officer will secure a responsible party or witness.
C. The Officer will determine if the operation will be a "Rescue" or "Recovery."
D. The Officer will ensure that a communication system has been coordinated for all activities.
E. The Rescue Team (Consisting of members trained in water rescue operations) will:
   a. Assume rescue/recovery operations control.
   b. Identify hazards and critical factors.
   c. Develop a plan and back-up plan.
   d. Communicate with resources.
   e. Inform command of conditions, actions and needs during all phases of the operation.

Scene Safety

A. Make the General Area Safe.
   a. Establish a Hazard Zone Perimeter.
   b. Keep all non-essential personnel out of the hazard zone.
   c. Remove all non-essential civilians from the hazard zone.
B. A Designated Safety Officer must be assigned for the scene.
   a. Identify hazards present and if possible, have them secured.
   b. Notify personnel of hazards (volume, velocity, water temperature, floating debris, unusual
   drop offs, hydraulic effects, depth of water, inclement weather, etc.)
C. Assign Personnel Up Stream that can notify Command and the Rescue team of any upstream hazards that may affect the operation.
D. Assign Personnel Down Stream that can throw ropes or watch for rescue personnel or victims that maybe washed downstream. *Personnel working near the water's edge must wear appropriate PPE/PFD
E. Assemble all necessary personnel, equipment, and patient packaging equipment that will be required for the rescue operation according to the action plan.

Incident Actions

A. The Rescue Plan. Rescue plans should be conducted from low risk to high risk order.
   a. **TALK-** If the water is calm or slow moving, try to talk the victim into self-rescue if possible
   b. **REACH-** Extend an arm, pike pole, rescue hook, or any other such object to reach the victim and pull them from the water.
   c. **THROW-** Attempt to throw the victim a throw-bag rescue line or some other type of approved safety flotation device and "pendulum-belay" or "haul" the victim to the bank.
   d. **ROW-** If it is determined that a boat-based operation shall be utilized, Mutual Aid must be called. Command and the Mutual Aid responding Technical Rescue Team will establish an action plan involving the use of boat-based operations, anchors, and rope systems.
   e. **GO-** If it is not possible to ROW to the victim, although very high risk, putting a rescuer(s) in the water can be considered. **Only rescuers with proper water rescue training, PPE/PFD, and equipment may enter the water.** Prior to entering the water, the rescuer(s) must discuss the action plan, including specific tasks and objectives, hazards, emergency procedures, and alternate plans. The rescuer(s) shall never be attached to a life line without the benefit of a quick release mechanism. The rescuer(s) should take at the least a PFD to the victim.

SAMPLE

The rescuer(s) shall not do a breath-hold surface dive in an attempt to locate a victim beneath the surface of the water.

f. **HELO-** Helicopter operations are considered high-risk and shall be decided upon proper consultation with local law enforcement, dispatch, and appropriate authorities. Command must also determine that a rescue-qualified pilot is available for the rescue operation. If so, the Pilot will have the final say on, if and how, the helicopter will be used in the rescue operation.

B. Assess the Victim

a. When the rescuer(s) reach the victim, a primary survey shall be completed. Assess Airway, Breathing, Circulation, and exact method of entrapment.

b. If the victim is conscious, rescuer(s) should determine if the victim can assist in the rescue.

c. If the victim is unconscious, the rescue must be completed as quickly as possible.

d. If it has been determined that the operation has become an underwater "recovery," the operation shall proceed as a dive operation. A Mutual Aid Technical Rescue Dive Team shall be called to perform the dive operation.

C. Treatment

a. Assist the victim to safety on shore and turn over to EMS/ALS for immediate assessment.

b. Assist with initiating C-Spine precautions as soon as possible.

c. Assist with treating any life threating conditions.

Termination

A. Ensure personnel accountability.
B. Consider decontamination of victim(s) and rescuer(s.)
C. Recover all tools and equipment used in the rescue/recovery. In the cases of a fatality, consider leaving everything in place until the investigative process has concluded.

SAMPLE

MAYDAY

The nature of fire fighting places the firefighter at risk for becoming lost, trapped or imperiled with equipment malfunctions. The toxic environment where work is performed provides only a narrow window of survivability. Survival depends on a mix of predictable self-survival actions by the affected firefighter(s), the Incident Commander and the Rapid Intervention Team. The purpose of this procedure is to provide action steps to be taken by the trapped/lost firefighter(s) and the Incident Commander. Specific procedures provided in this document include how to activate the Rapid Intervention Team (RIT) and remove those in danger to a safe location in a quick and efficient manner.

Definition:
The term Mayday will be designated solely for when a firefighter is in immediate distress. Specific examples include when a firefighter or firefighters become trapped, lost, disoriented or experience equipment malfunctions.

Procedures:
The number one basic self survival responsibility is to avoid getting into situations where a firefighter or fire company gets trapped, lost or low/out of air.

The rescue of trapped or lost firefighters within a burning building is extremely time sensitive due to our SCBAs providing a limited supply of air.

A. All companies entering the hazard zone shall have at least one portable radio and rescue tools. If it is possible, all members on the team should have individual portable radios.
B. Minimum entry crew size is two members. These members must remain intact and together.
C. Crews must also be working on a specific assignment and be working under the direct supervision of a Division Officer or Command.
D. Crews will follow all SCBA guidelines, including, but not limited to PASS device usage.

Emergency Procedures:
When a firefighter(s) become lost, trapped or experiences an equipment malfunction, the following procedures must be followed.

A. Call For Help Immediately – Report on a portable radio "Mayday – Mayday – Mayday". Announce your situation while continuing to find your way out. Firefighters should not delay notification of distress. The Mayday announcement should occur as soon as the firefighter thinks that he/she may be in trouble. The longer the delay of notification, the smaller the window of survivability will become.

B. Lost/trapped firefighter(s) should give Command information: LUNAR
   L = Location (as accurately as possible)
   U = Unit ID i.e. Eng. 3930)
   N = Name (names of lost or trapped crew members)
   A = Assignment (assignment crew was working on or assigned to prior to trouble)
   R = Resources you need (any special needs or information that may assist the RIT in locating and removing affected crew(s).

C. THE TERM "MAYDAY" WILL BE RESERVED ONLY TO REPORT LOST OR TRAPPED FIREFIGHTERS. THE TERM "EMERGENCY TRAFFIC" WILL BE USED TO REPORT ALL OTHER FIRE GROUND EMERGENCIES.

SAMPLE

D. If a Mayday is heard, all other radio traffic on that channel will cease, until the Mayday operation is complete. The Incident Commander will then designate a new radio frequency for all unaffected fire ground units to switch to. The IC will also notify dispatch of the change in fire ground channels, and have dispatch announce this change.

E. Radio Channels –
   1. Crews or personnel declaring a Mayday should remain on the assigned operations channel. Once contact is made with the IC, affected crew shall remain on that channel.
   2. After a Mayday is broadcast, the stricken firefighter(s), the Rapid Intervention Team, and the Safety Officer will stay on the designated channel, until resolution of the incident is achieved.
   3. All communications will be directed to the RIT officer. All non-affected companies shall switch to another channel as assigned by the IC and the communications center.
   4. All companies shall continue to operate in their originally assigned Division/Group.

F. Activate PASS Device – As soon as a firefighter recognizes he/she is lost or trapped, the PASS device must be manually activated to sound the audible tone. If the device interferes with radio communications it may be turned off temporarily. Once messages are completed, the device must again be manually activated.

G. Crews Stay Together – Members that separate from each other make it more difficult for rescuers to locate all members of the crew. Crew members who stay together enhance their chances for all to be rescued and allows for easier, more efficient extraction

H. Follow Hose or Lifeline Out - Crew members should stay with the hose line and follow it out whenever possible. The hose line should always be treated as the safety line to the outside. The RIT team may follow the hose line into the structure to locate distressed firefighters. Where life line ropes are in use, follow the life line to the outside.

I. Searching For an Exit – A lost firefighter should always attempt to exit out of the building by whatever means possible. Where doors, windows, or other means of egress are not available, firefighters should next attempt to reach an exterior wall. Once at an exterior wall the firefighter can try to locate windows, doors, or hallways that generally lead to the outside. Rescuers will first search hallways, around windows and doors before sweeping large areas if victim location is unknown. Getting to hallways, doors, or windows will greatly increase the chances of being rescued early. Breeching walls for escape or fresh air can aid survivability. These actions will also provide predictable activities that will aid rescuers.

J. Retreat to a Safe Refuge – Where firefighter cannot find a way out, but there is a safe refuge (protected room or floor) away from the fire that the firefighter can retreat to, he/she should take advantage of this location. Command and the RIT team must then be notified of this location as soon as possible.

K. Stay Calm and Conserve Air – A conscious effort must be made by the firefighter(s) to control breathing. Unnecessary talking or physical activity must cease, unless absolutely necessary. Firefighters must control and pace their activities and breathing to extend their SCBA supply.

SAMPLE

L. Horizontal Position – If a firefighter cannot get out, he/she should assume a horizontal position on the floor that maximizes the audible effects of the PASS device. The firefighter should attempt to take this position at an exterior wall, doorway, or hallway that maximizes quick discovery by rescue crews.

M. Flashlight / Tapping Noise – In assuming a position to await rescuers, the firefighter(s) should attempt to position their flashlight towards the ceiling. This will enhance the rescuers ability to see the light and locate the downed firefighter. If able the firefighter should attempt tapping noises to assist in location by rescuers, (hitting a tool on a metal door, tapping on the floor).

N. Company or Division / Group Officers – Company officers who are unable to locate a crew or firefighters assigned to them, must immediately notify command and use Mayday to notify all personnel operating on the scene. When possible the officer's report should include who is missing, their last known location, and the actions being taken. Fire fighting positions must not be abandoned during the rescue effort, the officers must control free-lancing. Command will initiate a rescue effort. On-going fire suppression and ventilation must continue to afford the victims increased opportunity for survival.

O. Personal Accountability Report – Immediately following declaration of a Mayday, a PAR shall be taken. This is important to confirm if additional personnel are safe and accounted for. With the exception of the RIT and Safety Officer, the PAR shall be conducted on the alternate radio channel assigned by the IC and communication's center, as to not interfere with direct communication between RIT and effected crew(s).

SAMPLE

Rehab

The Incident Commander (IC) at an emergency incident or training activity shall be responsible to consider the circumstances of each event and make adequate and early provisions to provide for the rest and rehabilitation of personnel.

Division Officers shall maintain an awareness of personnel operating within their span of control and ensure adequate steps are taken to provide for each person's health and safety. This includes ensuring that appropriate re-hydration and rest for their personnel is accomplished.

Each individual is additionally responsible for his/her preparedness prior to an incident, including sufficient rest prior to reporting for duty, re-hydration during warm weather, proper nutrition, proper dress and ensuring their PPE is in good working order.

During any emergency incident or training activity, all personnel are to advise their supervisor when they believe their level of fatigue or exposure to heat/cold is approaching a level that could affect themselves, their company, or the operation they are involved in. Officers shall assess their crew at least every 45 minutes. All individuals shall remain aware of the health and safety of others within their company.

Establishment of Rehab
The IC shall establish rehab when conditions indicate that rest and rehabilitation is needed for personnel working at an incident or training activity. Climactic or environmental conditions that indicate the need to establish rehab are a heat stress index above 90 degrees Fahrenheit or wind-chill index below 10 degrees Fahrenheit. Additional factors that should be considered in the need to establish rehab include:

- Time – including extended use of PPE and exposure to weather conditions
- Complexity – including crime scenes, specials teams incidents
- Intensity – mental and/or physical stress at incidents such as major extrications, interior search and rescue, etc.

The Rehab Manager shall function within the incident command system and report to the Incident Commander (IC) or the Incident Safety Officer (if established).

Staffing of Rehab
Rehab shall be staffed by a minimum of one (1) BLS ambulance and crew. The minimum level of available care shall be BLS and the IC shall designate an EMT or Paramedic as Rehab Manager.

For incidents that escalate to a higher alarm, an Officer should be assigned to the Rehab Group if possible.

A. Rehab shall be staffed with one (1) EMT or Paramedic for every 10 persons who are being concurrently rehabbed
B. Rehab shall maintain one (1) BLS or ALS ambulance for every 15 persons who are being concurrently rehabbed

When a formal rehab group is being established, the use of designated rehab teams and resources should be notified as early as possible to allow for travel and setup time.

Site location and characteristics
The IC will normally designate the location for rehab. If a specific location has not been designated, the Rehab Manager shall select an appropriate location. Multiple rehab locations may be necessary if the incident is large or divided. In the event there is more than one location, it shall be given a geographic designation consistent with the location at the incident.

SAMPLE

Rehab should be in a location that will provide physical rest by allowing personnel to recuperate from the demands and hazards of the emergency incident or training activity. Specific criteria for selecting a rehab location include:

- Be far enough away from the scene that personnel may safely remove PPE and have their vital signs checked while receiving fluids and rest
- Provide suitable protection from the prevailing weather conditions. During hot weather it should be in a cool, shaded area. During cold weather, it should be in a warm, dry area.
- Large enough to handle the needs of the incident
- Easily accessible by ambulance
- Enable personnel to be free from exhaust of apparatus, vehicles or equipment
- Allow for prompt re-assignment by the Rehab Manager as determined by the IC.
- Should be marked using scene tape and signs and provide a single entry/exit point.

Rehab efforts should include the following:

- Relief from weather conditions
- Rest and recovery
- Active and/or passive cooling or warming as needed
- Rehydration
- Calorie and electrolyte replacement for longer duration incidents
- Medical monitoring
- Accountability

Rehab period

A. All personnel involved in emergency operations should be routinely evaluated in rehab. The following criteria should be used as a general guideline:

   1. After the use of two 30 minute SCBA cylinders
   2. After use of a single 45 or 60 minute SCBA cylinder
   3. After 40 minutes of intense work without SCBA

   *However, extreme weather or strenuous working conditions may decrease the intervals.

B. Members entering rehab shall rest for a minimum of 10 minutes. Members shall rest for a minimum of 20 minutes if meeting the above listed criteria. Personnel requiring rest periods of greater than 30 minutes should be closely monitored for medical conditions. Those who exhibit problems with the baseline medical assessment after 30 minutes should be treated following EMS protocols and may require transport to the hospital.

C. Personnel requiring more than one hour of rest shall be released from duty and transported to the hospital

Hydration

A. Personnel should rehydrate with at least 16 ounces of water during each SCBA cylinder change

B. For scheduled events, personnel should pre-hydrate with at least 16 ounces of water within two hours of the event

C. During heat stress, personnel should attempt to replace at least one (1) quart of water per hour. Plain water or commercially prepared beverages which replenish electrolytes are the preferred beverages for rehydration during rehab. Caffeinated beverages such as coffee or tea to aid warming during cold weather may be consumed, but these should be used sparingly and are not to be considered as rehydration.

SAMPLE

Medical evaluation

A. EMS personnel assigned to rehab shall have the authority to use their professional judgment to keep members in rehab or to transport them for further medical evaluation or treatment. EMS personnel shall be alert for the following:
    1. Complaints of chest pain, dizziness, shortness of breath, weakness, nausea, or headache
    2. General complaints such as cramps, aches, and pains
    3. Symptoms of heat or cold related stress
    4. Changes in gait, speech, or behavior
    5. Changes in alertness and orientation to person, place, time
    6. Vital signs considered abnormal based on local EMS protocols

B. Personnel who are symptomatic or with abnormal findings shall receive additional monitoring during rehabilitation

Accountability

A. Teams shall report to rehab using the department's accountability system. Assignment to rehab is to be considered an order similar to any other incident scene assignment.

B. Personnel assigned to rehab shall enter and exit the rehab area as a company. The team designation, number of personnel, and the times of entry/exit shall be documented by the Rehab Manager.

C. Teams shall not leave the rehab area unless released by the Rehab Officer and shall then report to staging, Operations, or the IC

Serious injuries

If one or more of team members suffer a serious or fatal injury during an incident, all members of the team shall be removed from service as soon as possible. Critical Incident Stress Debriefing or other mental health services shall be made available.

Documentation

A. Any non-emergent injuries (sprain, strain, laceration etc.) treated in rehab other than fluids, food, and/or rest shall be documented on an appropriate rehab form. The employee will fill out a fire department injury report upon returning to quarters.

B. All rehab evaluations shall be documented on an appropriate rehab form

C. Any/all rehab reports involving mutual aid or automatic aid personnel shall be made available to their respective departments

SAMPLE

Rapid Intervention Team

Definitions
Rapid Intervention Team (RIT): A specifically designated team assigned to provide personnel for the rescue of members operating at emergency incidents if the need arises.

Qualified Firefighter : Any individual possessing a minimum of a Wisconsin State Firefighter One Certification or equivalent and has completed the training requirements as established by the Department.

Establishing RIT

A. A Rapid Intervention Team (a minimum of 2 qualified firefighters) will be established when operations are being performed in an IDLH atmosphere as soon as is practicable.

B. The establishment of a RIT is the responsibility if the Incident Commander and preferably will consist of more than the minimum of two members. The decision will be based on the following:
   1. Incident type.
   2. Building construction.
   3. Size of building.
   4. Number of personnel operating within the IDLH atmosphere.

   *Note: These are not meant to be limiting factors when establishing the RIT.

C. If the incident is in a high or mid-rise structure, large area facility, or other areas with multiple IDLH atmospheres, the incident commander shall establish the necessary number of Rapid Intervention Teams so that the rescue can be accomplished without a deployment delay. A team should be considered for each remote access point on any large facility. The incident commander will be responsible for determining the number of teams needed based on the specifics of the incident.

D. Due to the highly stressful and sometimes technical nature of incidents involving the rescue of emergency personnel, it is preferable that the RIT members be some of the more experienced and highly trained members.

E. The incident commander will appoint a team leader after establishing the RIT. The Rapid InterventionTeam leader reports directly to the Incident Commander throughout the incident, until deployed.

RIT Responsibilities

A. Immediately after being established the RIT leader will perform their incident evaluation/size-up. The purpose of this is to assess the following:
   1. Construction type of the building.
   2. Building size (large structures may require more than one RIT).
   3. Structural integrity.
   4. Access/egress points.

   Upon completion of their evaluation, the RIT leader may make recommendations to the incident commander concerning deployment of the RIT (i.e. laddering the building, the need of more than one team, etc.)

B. Organize/procure the appropriate equipment necessary to affect a rescue of a lost, trapped, or disoriented member. The equipment chosen shall be influenced by the type of building construction, but a minimum should consist of the following:
   1. A complete SCBA (regulator, face piece, air cylinder and frame).
   2. Lifeline

SAMPLE

3. Forcible entry, cutting and breaking tools.
4. Appropriate lighting.
5. Portable radio.
6. Small hand tools (pliers, wire cutters…)

*Note: these are only suggestions for the minimum equipment that will be needed and should not be a limiting factor in selecting the equipment for use.

C. When deployed, the members of the RIT are to operate as a unit and report directly to the team leader. The assignment of the RIT is to locate, rescue and remove lost, trapped, or disoriented firefighters, using any means necessary.

D. At no time during the incident should members of the RIT be assigned other fire ground tasks, unless the members can either be replaced or the alternate task does not interfere with deployment of the team. This is particularly important, as the task of the RIT is critical.

E. Throughout the rescue effort the RIT will provide updates to the Incident Commander.

F. As appropriate, the Incident Commander shall assign personnel to assist the RIT with the rescue effort. The Incident Commander shall also provide personnel to establish a second RIT when the original RIT has been deployed as, unfortunately, these members may also find themselves in need of being rescued.

SAMPLE

Health and Safety

It is the policy of the Fire Department to provide the highest level of safety and health for all members. The Department shall make every reasonable effort to provide a safe and healthy work environment, with the goal of the prevention and reduction of accidents, injuries and occupational illnesses. Appropriate training, supervision, procedures, program support and review shall be provided to achieve specific safety and health objectives in all functions and activities.

Health and Safety Officer

A. A Health and Safety Officer shall be appointed, and will be responsible for managing the Departments safety program and shall report to the Fire Chief or his designee.

B. The Health and Safety Officer duties shall include, but not be limited to:
   1. Chair the Safety Committee by preparing meeting agendas and notices;
   2. Act as the Incident Safety Officer at incidents, if needed;
   3. Provide input on equipment and protective clothing safety;
   4. Manage the safety inspection program;
   5. Assist with the investigation of all accidents, injuries and exposures;
   6. Maintain accident, injury and exposure statistics;
   7. Make recommendations to reduce or eliminate accidents, injuries or exposures;
   8. Provide for safety education to all Department members.

C. The Health and Safety Officer qualifications;
   1. The Health and Safety Officer will have and maintain knowledge of current applicable laws, codes and standards regulating occupational safety and health to the fire service;
   2. The Health and Safety Officer will have and maintain knowledge of occupational safety and health hazards involved in emergency operations;
   3. The Health and Safety Officer will have and maintain knowledge of current principles and techniques of safety management;
   4. The Health and Safety Officer will have and maintain knowledge of current health maintenance and physical fitness issues that affect the fire service members;

D. The Health and Safety Officer will have the responsibility to identify and cause correction of safety and health hazards.

E. The Health and Safety Officer will have the authority to cause immediate correction of situations that create an imminent hazard to members.

F. Where no imminent hazards are identified, the Health and Safety Officer shall develop actions to correct the situation within the administrative process of the Department. The Health and Safety Officer shall have the authority to bring notice of such hazards to whom ever has the ability to cause correction.

G. Functions of the Health and Safety Office will include, but not be limited to:
   1. Development, implementation, and management of a written risk management plan;
   2. Development, review and revision of rules, regulations and standard operating procedures pertaining to the Department occupational safety and health program and that ensure compliance to acceptable standards;
   3. Ensure training in safety procedures relating to all Department operations and functions is provided to all members;
   4. Manage an accident prevention program;
   5. Review specifications for new apparatus, equipment, protective clothing and protective equipment for compliance with applicable safety standards;

SAMPLE

6. Submit recommendations on occupational safety and health to the Fire Chief or his designee;
7. Ensure that the Departments infection control program meets or exceeds the requirements of 29 CFR 1910.1030, Occupational Exposure to Bloodborne Pathogens
8. Establish a critical incident stress management program.

Incident Safety Officer

A. An Incident Safety Officer should meet the following requirements:
   1. Will have the knowledge, skill and ability to manage incident scene safety;
   2. Will have and maintain a knowledge of safety and health hazards involved in emergency operations;
   3. Will have and maintain a knowledge of building construction;
   4. Will have and maintain a knowledge of the Departments Personnel Accountability System;
   5. Will have and maintain knowledge of incident scene rehabilitation.

B. The Incident Safety Officer will have the authority at an emergency incident where activities are judged by the Officer to be unsafe or to involve an imminent hazard, have the authority to alter, suspend, or terminate those activities. The Incident Safety Officer will immediately inform the Incident Commander of any actions taken to correct imminent hazards at the emergency scene.

C. At an emergency incident where an Incident Safety Officer identifies unsafe conditions, operations, or hazards that do not present an imminent danger, the Incident Safety Officer shall take appropriate action through the Incident Commander to mitigate or eliminate the unsafe condition, operation, or hazard at the incident scene.

D. Functions of the Incident Safety Officer will include, but not be limited to:
   1. Be integrated with the incident management system as a command staff member
   2. Shall monitor conditions, activities and operations to determine whether they fall within the criteria as defined in the Departments risk management plan
   3. Will ensure that the Incident Commander establishes an incident scene rehabilitation tactical level management unit during emergency operations
   4. Will monitor the scene and report the status of conditions, hazards and risks to the Incident Commander
   5. Will ensure that the Departments Personnel Accountability System is being utilized
   6. Will obtain the incident action plan from the Incident Commander and will provide the Incident Commander with a risk assessment of incident scene operations
   7. Ensure that established safety zones, collapse zones hot zone and other designated hazard areas are communicated to all members present on scene
   8. Will evaluate motor vehicle scene traffic hazards and apparatus placement and take appropriate actions to mitigate hazards
   9. Monitor radio transmissions and stay alert to transmission barriers that could result in missed, unclear or incomplete communication
   10. Survey and evaluate the hazards associated with the designation of a landing zone and interface with helicopters
   11. Shall ensure that a Rapid Intervention Team is available and ready for deployment
   12. Where a fire has involved a building or buildings, shall advise the Incident Commander of hazards, potential collapse and any fire extension in such building(s)

SAMPLE

13. Will evaluate visible smoke and fire conditions and advise the Incident Commander, tactical level management unit officers and company officers on the potential for flashover, backdraft, blow-up or other fire event that could pose a threat to operating teams
14. Monitor accessibility of entry and egress of structures and the effect it has on the safety of members conducting interior operations
15. Assist with safety management of Hazardous Materials events

Health and Safety Committee

A. The Health and Safety Committee will provide policy guidance pertaining to health and safety issues.

B. The Health and Safety Officer shall report bi-annually to the Health and Safety Committee on the impact and implementation of the Safety Program and on the effectiveness of any specific program actions.

C. The Health and Safety Committee will also act as a fact-finding and review entity with the authority to cause immediate corrective action when any hazardous condition or practice is detected or reported.

D. The Health and Safety Committee will:
   1. Meet at least bi-annually to review safety issues and concerns;
   2. Review effectiveness of safety activities;
   3. Develop and implement safety procedures;
   4. Make a written record of its meetings available to all fire fighters in the fire department.

E. The Health and Safety Committee may include:
   1. Fire Chief
   2. Assistant Fire Chief
   3. Department Training Officer
   4. Health and Safety Officer
   5. Incident Safety Officers
   6. Firefighters

SAMPLE

Injury and Illness Reporting

If any member suffers an injury or illness, as a result of his or her duties while serving as a member of the Fire Department, his/her medical expenses may be covered by the provisions of the Worker's Compensation Act. An injured or ill member must immediately notify his/her Commanding officer or Fire Chief of the injury/illness and incident and complete appropriate paperwork.

Physical and Mental Capabilities

Any fire fighter with heart disease, epilepsy, or emphysema, etc. shall make this information known to the Chief and will not be expected to perform tasks that may potentially harm them.

Any fire fighter that is claustrophobic, has a fear of heights or small spaces, etc. shall make this information known to the Chief and will not be expected to perform tasks that they do not feel safe doing.

Member Assistance Referral Program

The Fire Department has a fire fighter referral program set up with . Staff may contact them at to assist any with alcohol or substance abuse, stress, and personal problems

SAMPLE

Alcohol and Controlled Substance Misuse

The Fire Department believes that a healthy, competent workforce, working under conditions free from the effects of drug and alcohol is essential to the safe and effective provision of emergency services in our community, and to the safety of the individual members of the Fire Department.

The Fire Department maintains a zero tolerance policy regarding the use of alcohol and/or drugs. It is the policy of the department that no member shall respond to or sign-in for incident responses or perform any functions for the Fire department when the member uses or is under the influence of any controlled substance or alcohol.

Definition of Fire Department Functions
For the purposes of this policy, the definition of fire department functions includes all fireground operations and training. These functions include, but are not limited to:

- driving and/or operating Department apparatus, vehicles, or equipment
- responding to or performing fireground, training, or roof operations
- traffic control operations
- incident command or fireground sector command
- mandatory/non-mandatory drills and testing
- participation in fire department training activities
- participation in any other activity where the member is serving as a representative of the department, either officially or unofficially

Prohibited Conduct
No member shall participate in or perform any functions for or on behalf of the Fire Department after having consumed any alcoholic beverage within the previous eight hour period or while under the influence of alcohol.

No member shall participate in or perform any functions for or on behalf of the Fire Department when that firefighter uses any controlled substance or prescription medication, except when such use is pursuant to the instructions of a physician, and the department has been provided with written assurance by the physician that such use will not adversely affect the ability to perform safety-sensitive functions.

Members shall report any use of prescribed medication that could adversely affect the ability to perform fire department functions to a Chief Officer or other officer of the fire department.

Testing Requirements: In order to ensure the safe and effective provision of emergency services in our community, and the safety of individual members of the Fire Department, the Fire Department intends to test firefighters for the presence of alcohol and/or controlled substances, as a condition of membership as a firefighter in the Department.

The Fire Department may require the collection and testing of samples for the following purposes:

- Investigation of a vehicular accident involving department's apparatus or vehicles or personal vehicle while traveling to or from a call
- Investigation of a fireground or training accident
- When there is a reasonable suspicion of alcohol and/or controlled substance use

SAMPLE

Social Media

Recent current events have shown the ease at which sensitive or private information may be spread worldwide via electronic means and the internet in general. Something that may seem rather routine to us as the fire service may bring tremendous personal pain, anguish, and disgust to those not closely involved with our profession. In order to avoid serious damage to our reputations and to protect the privacy of those we serve:

- Personnel shall not use any personally owned devices to photograph, document, or record any emergency scene/incident while on-duty and in attendance as members of the Fire Department at those scenes. For the purposes of this policy, personally owned devices include but are not limited to: film cameras; digital cameras; video recording cameras and devices, cell phones and cell phone cameras.

- Personnel may photograph, document, or record emergency scenes utilizing department owned devices with proper authorization from the Fire Chief or Incident Commander of the scene. Any electronic media documenting the incident such as digital pictures, video or other records of the incident that are collected by any member of the department in this manner are and shall remain property of the department.

- Such electronic media and/or other documentation shall be for internal, investigative or training uses and shall not be transmitted by any means outside the department unless expressly authorized by the Fire Chief or their designee. The Fire Investigator is authorized to transmit this type of information outside the department in association with an ongoing fire investigations as may be necessary as part of the fire investigation process.

- Fire department operations allow us access to situations, investigations and crime scenes from which the media and press may be excluded due to operational, safety, or investigative reasons. As such, electronic media, information, and pictures gathered at emergency/incident scenes must be strictly controlled to be in accordance with HIPPA and other regulations so as not to jeopardize patient confidentiality; fire, accident or crime scene investigations; or shine an unprofessional light on the department.

Members who violate this policy will be subject to disciplinary action, up to and including suspension from the department.

SAMPLE

Weapons Policy

In order to protect Fire Department members from workplace violence, this policy is designed to implement and administer reasonable measures to ensure that the fire station remains a weapon-free workplace. The purpose of this policy is to assure member safety and the public's safety in the Fire Station and on the scene of all Department incidents or events.

Prohibited weapons include any form of weapon or explosive restricted under local, state or federal regulation including all firearms, illegal knives or other weapons covered by the law. Weapons include, but are not limited to, visible and concealed weapons, including those for which the owner holds the necessary permits. Weapons can include firearms/guns, knives or swords with a blade longer than four inches, explosive or chemical materials, or any other objects that could be used to harass, intimidate, or injure another member.

The Fire Department prohibits and will not tolerate any weapons in the Fire Station, apparatus, drill sites, or on the property of any department sponsored or sanctioned events. This policy applies to all members, family members, and visitors, as well as all clients and contractors, whether or not they are licensed to carry a concealed handgun. The only exceptions to this policy are law enforcement officers which functioning in this capacity. Members are also prohibited from carrying a weapon while in the course and scope of representing the Department regardless of whether he/she is licensed to carry a handgun. This policy also prohibits weapons at any Department sponsored functions including, but not limited to, inspections, community activities, banquets and picnics.

When a member is in possession of a valid carry permit and has a weapon on their person, that weapon shall be removed from the person and secured in his/her vehicle prior to entering the Fire Station, or the fire incident or event, whether owned, leased or controlled for any reason. The Department has no responsibility to provide a means of storage of any weapon.

A member who is uncertain whether an instrument or device is prohibited under this policy is obligated to request clarification to ensure that he/she is not in violation of this policy. Members will be held responsible for making sure that any potentially covered item you possess is not prohibited by this policy. Members who violate this policy will be subject to disciplinary action, up to and including suspension from the department. This policy shall not be construed to create any duty of obligation on the part of the Department to take any actions beyond those required of an employer by existing law

SAMPLE

Equal Opportunity, Discrimination, and Harassment

The Fire Department will maintain a policy of non-discrimination with regard to all personnel and applicants for employment and membership. Fire Department prohibits, forbids, and does not tolerate discrimination against anyone on the basis of race, color, religion, sex, sexual orientation, age, national origin, veteran status, disability or any other basis prohibited by applicable federal, state or local laws. All aspects of employment and membership within the Fire Department will be governed on the basis of merit, competence, and qualifications. All members and applicants are guaranteed equal opportunities.

The most productive and satisfying work environment is one in which work is accomplished in a spirit of mutual trust and respect. Harassment is a form of discrimination that is offensive, impairs morale, undermines the integrity of employment relationships and causes serious harm to the productivity, efficiency and stability of our organization. The Fire Department does not now, nor will ever endorse or condone any form of discrimination or harassment by any members.

All employees have a right to work in an environment free from discrimination and harassing conduct, including sexual harassment. Harassment on the basis of an employee's **race, color, creed, ancestry, national origin, age, disability, sex, arrest or conviction record, marital status, sexual orientation, membership in the military reserve or use or nonuse of lawful products away from work is expressly prohibited under this policy**. Harassment on any of these bases is also illegal under Section 111.31-111.39, Wisconsin Statutes.

DEFINITION: In general, harassment means persistent and unwelcome conduct or actions on any of the bases underlined above. Sexual harassment is one type of harassment and includes unwelcome sexual advances, unwelcome physical contact of a sexual nature or unwelcome verbal or physical conduct of a sexual nature.

Unwelcome verbal or physical conduct of a sexual nature includes, but is not limited to

- The repeated making of unsolicited, inappropriate gestures or comments;
- The display of offensive sexually graphic materials not necessary for our work;

Harassment on any basis (race, sex, age, disability, etc.) exists whenever

- Submission to harassing conduct is made, either explicitly or implicitly, a term or condition of an individual's employment.
- Submission to or rejection of such conduct is used as the basis for an employment decision affecting an individual.
- The conduct interferes with an employee's work or creates an intimidating, hostile or offensive work environment.

RECOGNIZING HARASSMENT

Discrimination or harassment may be subtle, manipulative and is not always evident. It does not refer to occasional compliments of a socially acceptable nature. It refers to behavior that is not welcome and is personally offensive. All forms of gender harassment are covered. Men can be sexually harassed; men can harass men; Women can harass other women. Offenders can be fellow co-workers, Officers, Chiefs, and others.

Some examples:

Verbal:

Jokes, insults and innuendoes (based on race, sex, age, disability, etc.), degrading sexual remarks, referring to someone as a stud, hunk or babe; whistling; cat calls; comments on a person's body or sex life, or pressures for sexual favors.

SAMPLE

Non-Verbal:
Gestures, staring, touching, hugging, patting, blocking a person's movement, standing too close, brushing against a person's body, or display of sexually suggestive or degrading pictures, racist or other derogatory cartoons or drawings..

COMPLAINT PROCEDURES
Any member or employee who believes he or she is being discriminated against or harassed, or any member or employee, who becomes aware of discrimination or harassment, should promptly notify his or her Officer or the Fire Chief. If the individual believes that the Officer is the harasser, another Officer or the Fire Chief should be notified. If the individual is uncomfortable discussing discrimination or harassment with his or her Officer or the Fire Chief, the individual should contact .

Information on your right to file a state or federal harassment complaint is also available from:

State of Wisconsin Equal Rights Agency
201 East Washington Avenue
Madison, WI 53703
Phone: (608) 266-6860
https://dwd.wisconsin.gov/er/

US Equal Employment Opportunity Commission
Reuss Federal Plaza
310 West Wisconsin Avenue, Suite 500
Milwaukee, WI 53203-2292
1-800-669-4000
http://www.eeoc.gov

Upon notification of a discrimination or harassment complaint, a confidential and impartial investigation will be promptly commenced and will include direct interviews with involved parties and where necessary with members or employees who may be witnesses or have knowledge of matters relating to the complaint. The parties of the complaint will be notified of the findings and their options.

RETALIATION
Retaliation of any kind against any member or employee bringing a complaint or assisting in the investigation of a complaint is prohibited. Such member or employee may not be adversely affected in any manner related to their employment. Such retaliation is also illegal under Section111.322 (2m), Wisconsin Statutes.

DISCIPLINARY ACTION
The Fire Department views discrimination, harassment, and retaliation to be among the most serious breaches of work place behavior. Consequently, appropriate disciplinary or corrective action, ranging from a warning to termination, can be expected.

FALSE COMPLAINTS
Any complaint made by a member or employee of the Fire Department regarding discrimination or harassment in the workplace which is conclusively proved to be false, shall result in discipline. This discipline may include dismissal from employment. This section is not intended to discourage members or employees from making complaints regarding discrimination or harassment. However, false complaints adversely impact the workplace of the accused, even when disproved, and will not be tolerated.

SAMPLE

Disciplinary Process

Disciplinary action is taken to promote the efficiency of department operations. In exercising discipline, the department will give due regard to each member's legal rights and will ensure that disciplinary actions are based on objective considerations without regard to age, color, disability, national origin, political affiliation, race, religion, gender, sexual orientation, or other non-merit factors.

Where violations are reoccurring, the standard steps shall be followed. In cases requiring severe measures, one or more steps may be omitted:

- Warning Notice (verbal)
- Written Warning
- Suspense and Final Notice
- Removal from the department.

There will be three (3) classes of discipline. They are as follows:

- Class I: Immediate discharge.
- Class II: Written warning, suspension, termination
- Class III: Oral warning, written warning, suspension, termination

Examples of Class I causes:

- Use or under the influence of drugs or alcohol while on duty.
- Theft of department property or another employee's property.
- Intentional destruction of department property.
- Falsifying reports.
- Gross insubordination such as refusal to work, threatening, abusing or striking a superior.
- Striking or assaulting a fire fighter or bystander
- Lying or willfully omitting critical information on an application.

Examples of Class II causes:

- Reckless driving of department vehicles.
- Disobeying traffic laws when responding to the hall.
- Negligent or careless use of department equipment.
- Failure to comply with published departmental or municipal rules or regulations.
- Fighting.

Examples of Class III causes:

- Foul and/or abusive language
- Inefficient, incompetent or negligent performance of work.
- Failure to follow sign out procedures.
- Inability or failure to maintain satisfactory working relations with co-workers and/or citizens.

All warnings, oral and written, shall be documented. Copies of these warnings shall be given to the fire fighter, with a copy being kept in there personnel file.

SAMPLE

Firefighter Code of Ethics

I understand that I have the responsibility to conduct myself in a manner that reflects proper ethical behavior and integrity. In so doing, I will help foster a continuing positive public perception of the fire service. Therefore, I pledge the following…

- Always conduct myself, on and off duty, in a manner that reflects positively on myself, my department and the fire service in general.
- Accept responsibility for my actions and for the consequences of my actions.
- Support the concept of fairness and the value of diverse thoughts and opinions.
- Avoid situations that would adversely affect the credibility or public perception of the fire service profession.
- Be truthful and honest at all times and report instances of cheating or other dishonest acts that compromise the integrity of the fire service.
- Conduct my personal affairs in a manner that does not improperly influence the performance of my duties, or bring discredit to my organization.
- Be respectful and conscious of each member's safety and welfare.
- Recognize that I serve in a position of public trust that requires stewardship in the honest and efficient use of publicly owned resources, including uniforms, facilities, vehicles and equipment and that these are protected from misuse and theft.
- Exercise professionalism, competence, respect and loyalty in the performance of my duties and use information, confidential or otherwise, gained by virtue of my position, only to benefit those I am entrusted to serve.
- Avoid financial investments, outside employment, outside business interests or activities that conflict with or are enhanced by my official position or have the potential to create the perception of impropriety.
- Never propose or accept personal rewards, special privileges, benefits, advancement, honors or gifts that may create a conflict of interest, or the appearance thereof.
- Never engage in activities involving alcohol or other substance use or abuse that can impair my mental state or the performance of my duties and compromise safety.
- Never discriminate on the basis of race, religion, color, creed, age, marital status, national origin, ancestry, gender, sexual preference, medical condition or handicap.
- Never harass, intimidate or threaten fellow members of the service or the public and stop or report the actions of other firefighters who engage in such behaviors.
- Responsibly use social networking, electronic communications, or other media technology opportunities in a manner that does not discredit, dishonor or embarrass my organization, the fire service and the public. I also understand that failure to resolve or report inappropriate use of this media equates to condoning this behavior.

Developed by the National Society of Executive Fire Officers

SAMPLE

Acknowledgement

By signing this form, I acknowledge that I have received and reviewed the Fire Department Standard Operating Guidelines (SOGs.)

I understand that I am responsible for reading these documents and familiarizing myself with their contents. I also understand that the policies contained in these documents apply to me and that it is my responsibility to comply with the policies and any revisions made to them.

I understand that the Fire Department SOG's adopted supersedes all prior handbooks or personnel policies on the subjects contained in it and that the has the right to change, modify, add to, substitute or eliminate, and to interpret and apply, the policies and rules described therein.

Print Name_____
Sign Name_____
Date_____

SAMPLE

APPENDICES

SAMPLE

Appendix A

PERSONAL PROTECTIVE EQUIPMENT
EMPLOYEE TRAINING CERTIFICATION

Person performing training session: _____

Date of Training: _____

Full name and signature of each firefighter trained (or attach a list)

Printed	Signature
Printed	Signature
Printed	Signature
Printed	Signature
Printed	Signature
Printed	Signature

Subjects of training (example: extrication, fire attack, etc.):

_____

_____

Items covered during training:
___ When PPE is necessary
___ What PPE is necessary
___ How to properly put on, take off, adjust, and wear PPE
___ Limitations and useful life of PPE
___ Proper care, maintenance, replacement, and disposal of PPE
___ Other _____

Method of Training: _____

Employee understanding of the training was demonstrated by:

_____

_____

SAMPLE

Appendix B

SECTION 29 CFR 1910.1030
HEPATITIS B VACCINE DECLINATION

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring Hepatitis B Virus (HBV) infection. I have been given the opportunity to be vaccinated with Hepatitis B vaccine at no charge to myself. However, I decline Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no charge to me.

EMPLOYEE
SIGNATURE_____DATE_____

EMPLOYEE'S PRINTED NAME _____

WITNESS
SIGNATURE_____DATE_____

Appendix C

Respiratory Protection
Medical Evaluation Questionnaire
(OSHA Respirator Medical Evaluation Questionnaire)

To the employer:
Answers to questions in Section 1, and to question 9 in Section 2 of Part A, do not require a medical examination.

To the employee:
Your employer must allow you to answer this questionnaire during normal working hours, or at a time and place that is convenient to you. To maintain your confidentiality, your employer or supervisor must not look at or review your answers, and your employer must tell you how to deliver or send this questionnaire to the health care professional who will review it.

Are you able to read and understand the questions contained in this evaluation? ☐ Yes ☐ No

The following information must be provided by every employee who has been selected to use any type of respirator (please print).

Name: _____Today's Date: _____ /_____ /_____

Date of Birth: ___/____/____ Height: _____ ft. _____ in. Weight: _____ lbs. Sex: ☐Male ☐Female

Phone: (_____) _____ -_____ The best time to reach you at this number:_____

Job title: _____

Has your employer told you how to contact the health care professional who will review this questionnaire? ☐Yes ☐No

Check the type of respirator you will use (you may check more than one):

☐Filtering Facepiece (N95, e.g., for hospitals/clinics)
☐Half face air purifying respirator (APR)
☐Full face APR
☐Powered air purifying respirator (PAPR)
☐Self contained breathing apparatus (SCBA)
☐Air line

Have you ever worn a respirator? ☐Yes ☐No If "yes," what type(s)?_____

Part A.
Questions 1 through 9 must be answered by every employee who has been selected to use any type of respirator.

	Yes	No
1. Do you *currently* smoke tobacco, or have you smoked tobacco in the last month?	☐	☐
2. Have you *ever had* any of the following conditions?		
a. Seizures	☐	☐
b. Diabetes (sugar disease)	☐	☐
c. Allergic reactions that interfere with your breathing	☐	☐
d. Claustrophobia (fear of closed in places)	☐	☐
e. Trouble smelling odors	☐	☐
3. Have you *ever had* any of the following pulmonary or lung problems?		
a. Asbestosis	☐	☐
b. Asthma	☐	☐
c. Chronic bronchitis	☐	☐
d. Emphysema	☐	☐
e. Pneumonia	☐	☐
f. Tuberculosis	☐	☐
g. Silicosis	☐	☐
h. Pneumothorax (collapsed lung)	☐	☐
i. Lung cancer	☐	☐
j. Broken ribs	☐	☐
k. Any chest injuries or surgeries	☐	☐
l. Any other lung problem that you have been told about	☐	☐

SAMPLE

	Yes	No
4. Do you *currently* have any of the following symptoms of pulmonary or lung illness?		
a. Shortness of breath	☐	☐
b. Shortness of breath when walking fast on level ground or walking up a slight hill or incline	☐	☐
c. Shortness of breath when walking with other people at an ordinary pace on level ground	☐	☐
d. Have to stop for breath when walking at your own pace on level ground	☐	☐
e. Shortness of breath when washing or dressing yourself	☐	☐
f. Shortness of breath that interferes with your job	☐	☐
g. Coughing that produces phlegm (thick sputum)	☐	☐
h. Coughing that wakes you early in the morning	☐	☐
i. Coughing that occurs mostly when you are lying down	☐	☐
j. Coughing up blood in the last month	☐	☐
k. Wheezing	☐	☐
l. Wheezing that interferes with your job	☐	☐
m. Chest pain when you breathe deeply	☐	☐
n. Any other symptoms that you think may be related to lung problems	☐	☐
5. Have you *ever had* any of the following cardiovascular or heart problems?		
a. Heart attack	☐	☐
b. Stroke	☐	☐
c. Angina	☐	☐
d. Heart failure	☐	☐
e. Swelling in your legs or feet (not caused by walking)	☐	☐
f. Heart arrhythmia (heart beating irregularly)	☐	☐
g. High blood pressure	☐	☐
h. Any other heart problem that you have been told about	☐	☐
6. Have you *ever had* any of the following cardiovascular or heart symptoms?		
a. Frequent pain or tightness in your chest	☐	☐
b. Pain or tightness in your chest during physical activity	☐	☐
c. Pain or tightness in your chest that interferes with your job	☐	☐
d. In the past two years, have you noticed your heart skipping or missing a beat	☐	☐
e. Heartburn or indigestion that is not related to eating	☐	☐
f. Any other symptoms that you think may be related to heart or circulation problems	☐	☐
7. Do you *currently* take medication for any of the following problems?		
a. Breathing or lung problems	☐	☐
b. Heart trouble	☐	☐
c. Blood pressure	☐	☐
d. Seizures	☐	☐
8. If you have used a respirator, have you *ever had* any of the following problems?		
☐Check here if you've never used a respirator and move on to question 9.		
a. Eye irritation	☐	☐
b. Skin allergies or rashes	☐	☐
c. Anxiety	☐	☐
d. General weakness or fatigue	☐	☐
e. Any other problem that interferes with your use of a respirator	☐	☐
9. Would you like to talk to the health care professional who will review this questionnaire about your answers to this questionnaire?	☐	☐

Questions 10 through 15 below must be answered by every employee who has been selected to use either a full-facepiece respirator or a self-contained breathing apparatus (SCBA). For employees who have been selected to use other types of respirators, answering these questions is voluntary.

	Yes	No
10. Have you *ever lost* vision in either eye (temporarily or permanently)	☐	☐
11. Do you *currently* have any of the following vision problems?		
a. Wear contact lenses	☐	☐
b. Wear glasses	☐	☐
c. Color blind	☐	☐
d. Any other eye or vision problem	☐	☐

SAMPLE

	Yes	No
12. Have you *ever had* an injury to your ears, including a broken ear drum?	☐	☐
13. Do you *currently* have any of the following hearing problems?		
a. Difficulty hearing	☐	☐
b. Wear a hearing aid	☐	☐
c. Any other hearing or ear problem	☐	☐
14. Have you *ever had* a back injury?	☐	☐
15. Do you *currently* have any of the following musculoskeletal problems?		
a. Weakness in any of your arms, hands, legs, or feet	☐	☐
b. Back pain	☐	☐
c. Difficulty fully moving your arms and legs	☐	☐
d. Pain or stiffness when you lean forward or backward at the waist	☐	☐
e. Difficulty fully moving your head up or down	☐	☐
f. Difficulty fully moving your head side to side	☐	☐
g. Difficulty bending at your knees	☐	☐
h. Difficulty squatting to the ground	☐	☐
i. Climbing a flight of stairs or a ladder carrying more than 25 lbs	☐	☐
j. Any other muscle or skeletal problem that interferes with using a respirator	☐	☐

Part B. Any of the following questions, and other questions not listed, may be added to the questionnaire at the discretion of the health care professional who will review the questionnaire.

	Yes	No
1. In your present job, are you working at high altitudes (over 5,000 feet) or in a place that has lower than normal amounts of oxygen?	☐	☐
If "yes," do you have feelings of dizziness, shortness of breath, pounding in your chest, or other symptoms when you are working under these conditions?	☐	☐
2. At work or at home, have you ever been exposed to or come into skin contact with hazardous solvents, hazardous airborne chemicals (e.g., gases, fumes, or dust)?	☐	☐
If "yes," name the chemicals if you know them: _____		
3. Have you ever worked with any of the materials or under any of the conditions listed below:		
a. Asbestos	☐	☐
b. Silica (e.g., in sandblasting)	☐	☐
c. Tungsten/cobalt (e.g., grinding or welding this material)	☐	☐
d. Beryllium	☐	☐
e. Aluminum	☐	☐
f. Coal (e.g., mining)	☐	☐
g. Iron	☐	☐
h. Tin	☐	☐
i. Dusty environments	☐	☐
j. Any other hazardous exposures	☐	☐
If "yes," describe these exposures: _____		
4. List any second jobs or side businesses you have: _____		
5. List your previous occupations:_____		
6. List your current and previous hobbies:_____		
7. Have you been in the military services?	☐	☐
If "yes," were you exposed to biological or chemical agents (either in training or combat)	☐	☐
8. Have you ever worked on a HAZMAT team?	☐	☐

SAMPLE

Yes No

9. Other than medications for breathing and lung problems, heart trouble, blood pressure, and seizures mentioned earlier in this questionnaire, are you taking any other medications for any reason (including over the counter medications) ☐ ☐

If "yes," name the medications if you know them:_____

10. Will you be using any of the following items with your respirator(s)?
   a. HEPA Filters ☐ ☐
   b. Canisters (for example, gas masks) ☐ ☐
   c. Cartridges ☐ ☐

11. How often are you expected to use the respirator(s) (check all that apply)?:
☐ a. Escape only (no rescue) ☐ c. Less than 5 hours *per week* ☐ e. 2 to 4 hours per day
☐ b. Emergency rescue only ☐ d. Less than 2 hours *per day* ☐ f. Over 4 hours per day

12. During the period you are using the respirator(s), is your work effort:
a. *Light* (less than 200 kcal per hour) ☐ ☐
Examples of a light work effort are *sitting* while writing, typing, drafting, or performing light assembly work; or *standing* while operating a drill press (1-3 lbs.) or controlling machines.
If "yes," how long does this period last during the average shift: _____ hrs. _____ min.
b. *Moderate* (200 to 350 kcal per hour) ☐ ☐
Examples of moderate work effort are *sitting* while nailing or filing; *driving* a truck or bus in urban traffic; *standing* while drilling, nailing, performing assembly work, or transferring a moderate load (about 35 lbs.) at trunk level; *walking* on a level surface about 2 mph or down a 5-degree grade about 3 mph; or *pushing* a wheelbarrow with a heavy load (about 100 lbs.) on a level surface.
If "yes," how long does this period last during the average shift: _____ hrs. ___ min.
c. *Heavy* (above 350 kcal per hour) ☐ ☐
Examples of heavy work are *lifting* a heavy load (about 50 lbs.) from the floor to your waist or shoulder; working on a loading dock; *shoveling; standing* while bricklaying or chipping castings; *walking* up an 8-degree grade about 2 mph; climbing stairs with a heavy load (about 50 lbs.).
If "yes," how long does this period last during the average shift: _____ hrs. _____ min.

13. Will you be wearing protective clothing and/or equipment (other than the respirator) when you are using your respirator? ☐ ☐

If "yes," describe this protective clothing and/or equipment: _____
_____

14. Will you be working under hot conditions (temperature exceeding 77°F) ☐ ☐

15. Will you be working under humid conditions? ☐ ☐

16. Describe the work you will be doing while you are using your respirator(s): _____
_____

17. Describe any special or hazardous conditions you might encounter when you are using your respirator(s) (for example, confined spaces, life threatening gases):_____

18. Provide the following information, if you know it, for each toxic substance that you will be exposed to when you are using your respirator(s):

Name of toxic substance:_____
Estimated maximum exposure level per shift:_____
Duration of exposure per shift:_____

Name of toxic substance:_____
Estimated maximum exposure level per shift:_____
Duration of exposure per shift:_____

Name of toxic substance:_____
Estimated maximum exposure level per shift:_____
Duration of exposure per shift:_____

Name(s) of any other toxic substance(s) you will be exposed to while using your respirator(s): _____
_____

19. Describe any special responsibilities you will have while using your respirator(s) that may affect the safety and well being of others (for example, rescue, security):_____
_____

SAMPLE

Appendix D

EMPLOYEE RESPIRATOR FIT TEST RECORD

COMPLETE FOR EACH INDIVIDUAL WHO IS FITTED FOR A NEGATIVE OR POSITIVE-PRESSURE TIGHT-FITTING RESPIRATOR.
Medical clearance examinations are required prior to fit testing.

Instructor Name: _____ Signature: _____
Employee Name: _____ Employee ID Number: _____
Employee Signature: _____ Fit Test Conducted By: _____
Date: _____
Employee Medically Qualified? ☐ Yes ☐ No ☐ Pending Date of Medical Evaluation: _____
Medical Approval Attached? ☐ Yes ☐ No
Respirators Fitted: (Define type, size, manufacturer, and model number): _____
_____
_____
_____
Limitations Noted:
☐ Beard ☐ Dentures ☐ Glasses ☐ Contact Lenses ☐ Facial Surgery ☐ Dental Work ☐ No Limitations
Explain (or indicate other limitations not included above): _____
_____
_____

FIT TESTING
☐ Satisfactory Positive Pressure Fit Check
☐ Satisfactory Negative Pressure Fit Check
Quantitative Fit Test: ☐ Pass ☐ Fail
Equipment Used: _____
_____
Copy of results attached: ☐

Qualitative Fit Test: ☐ Pass ☐ Fail
☐ Satisfactory Saccharin Mist Test
☐ Satisfactory Bitrex Solution Aerosol
☐ Satisfactory Banana Oil (Isoamyl Acetate)
☐ Satisfactory Irritant Smoke

APPENDIX E

Injury/Incident Reporting Form

Use this form to report any injury, illness, or incident that occurred while performing Fire Department related duties. Return the completed form to an Officer or the Fire Chief.

This is documenting an:

☐ Injury/Illness ☐ Incident ☐ Observation

Details of person injured or involved (to be filled in by person injured / involved if possible)

Person Completing Report:_____ Date:_____

Person(s) Involved:_____

Equipment or Truck ID:_____

Event Details

Date of Event:_____ Location of Event:_____

Time of Event:_____ Witnesses:_____

Description of Events (Describe tasks being performed and sequence of events):

_____

_____

_____

_____

_____

*If more space is required please use the back of this sheet

Was injury/incident caused by an unsafe act or an unsafe condition? Please explain:

_____

_____

TO BE COMPLETED ONLY IF INJURY	
Type of injury sustained:	
Cause of injury:	
Was medical treatment or first aid necessary?	Yes_____ No_____ If yes, name of hospital or physician: If First Aid, type of aid received:

Signature of Member/ Employee: _____ Date:_____

Signature of Officer/Fire Chief: _____ Date:_____

APPENDIX F

NEEDLE STICK/SHARPS INJURY LOG

Instructions:

1. **Complete a log for each exposure incident involving a sharp**
2. **Ensure that the form is received by your department's Worker's Compensation Department.**

Employee exposed:	**Employee Number:**	**Phone number/ E-mail:**
Department:	**Supervisor:**	**Phone number/ E-mail:**

Date and Time of Stick or contact with Sharp:	**Location of Incident:**	**Job classification of employee:**
Nature of exposure:	**Body part stuck:**	**Procedure being performed at time of exposure:**
Describe how the incident occurred: ○ **Patient agitated/ hostile** ○ **Emptying on handling sharps container** ○ **During disposal** ○ **Re-sheathing** ○ **Other** _____		

Sharps information if known (Type, Brand, Model) e.g. 18g needle/ABC Medical/ "no stick" syringe:
Was the sharp/ needle contaminated? _____ **If yes, what was the contaminant?** _____ **Did the device used have a retractable or self-sheathing needle?** _____ **If yes, was training provided on its proper use?** _____
For the employee: What do you think could have been done to prevent this injury?
For the employer: What do you think could have been done to prevent this injury?

Employee's Signature:	**Date:**