

The Playbook

*A guide to establish a wellness & fitness program
for your Fire Department*



Purpose of this Document

To provide fire administrations and labor leaders with best practices to maintain and improve the wellness and fitness of their personnel.

Contributors:



Table of Contents

A Statement from the Indiana Fire Chiefs Association	4
A Statement from the Professional Firefighters Union of Indiana	5
Establishing a Project Team	6
Cost-Benefit of a Wellness Program.....	7
A Review of Existing Medical Standards for Fire Departments	12
OSHA Respirator Clearance & Fit Testing	12
National Fire Protection Association (NFPA)	13
Wellness-Fitness Initiative (WFI).....	15
Department of Transportation (DOT) / Commercial Driver's License (CDL).....	16
Gaining Buy-In for the Program	17
Recommended Implementation Path	18
OSHA Respirator Clearance.....	19
Starter Medical Clearance Program	20
A Comprehensive Wellness Program	21
The IAFF/IAFC Wellness-Fitness Initiative (WFI)	21
Work Performance Evaluations	22
Establishing a Budget and Developing an RFP	23
Determining the Services to Offer.....	23
Developing an RFP	23
Identifying Potential Vendors	23
Sample Request for Proposal	24
Selecting a Provider.....	28
Alternative Funding for Your Program	30
Grants	30
Fundraising.....	31
Collaborating with Other Fire Departments	31
Not-For-Profit Resources	31
Introducing the Program to your Personnel.....	32
Utilizing Peer Fitness Trainers.....	33
Resources.....	35

A Statement from the Indiana Fire Chiefs Association



INDIANA FIRE CHIEFS ASSOCIATION

Dale Henson, Executive Director

P.O. Box 305

Camby, IN 46113-0305

Office: 317.856.1850

Toll Free: 877.733.1850

Cell: 317.339.2473

Fax: 317.856.5949

dhenson@indfirechiefs.org

October 14, 2016

The Indiana Fire Chief's Association is proud to partner with the Professional Firefighter's Union of Indiana and Public Safety Medical in encouraging our membership to make our personnel's wellness and fitness a high priority.

We realize we could fill our stations with "state of the art" apparatus, and the best equipment on the market, but our personnel is our greatest asset. Many of us are responders, as well as administrators; therefore we see daily the importance of being not only physically fit, but also medically and mentally fit to respond to any type of incident at a moment's notice.

We understand that we are asking our personnel to perform at a high level, in one of the most dangerous professions. It is our goal to have them return from a call and return home after a shift, without injury and in the same or better condition than when they became emergency responders. There is nothing more rewarding than seeing our personnel leave after a successful career and enjoy a long, healthy, fulfilling retirement.

We strongly urge our membership and all fire departments to consider this document when establishing their wellness-fitness programs at their respective fire departments.

Respectfully
Chief Brad Lucas
Indiana Fire Chiefs Association

A Statement from the Professional Firefighters Union of Indiana



Professional Fire Fighters Union of Indiana Incorporated

Affiliated with International Association of Fire Fighters
Affiliated with Indiana State AFL-CIO



October 14, 2016

Brothers and Sisters,

When I became a member of the Indianapolis Fire Department 37 years ago, the culture was very different: Biscuits and gravy for breakfast, meat and potatoes for dinner. Working out was treated with bewilderment. Wearing SCBA was for wimps. Toughness was judged by how much smoke you could eat and how dirty your gear got.

I am grateful to have seen that culture shift dramatically since I began my career. The good old days were not good when it came to the long terms health of firefighters. I am proud to say that Indianapolis was on the cutting edge of this change. Indianapolis Local 416 started negotiating for wellness physicals in the 1980s and eventually we achieved a full wellness program. In the mid-1990s Indianapolis was invited to participate in the IAFF/IAFC Wellness Fitness Initiative. After two years of work and with the input of Dr. Steven Moffat and psychologist Dr. Jeff Savitsky, the 10 City Initiative was launched. When it was all said and done, Indianapolis was already doing 95% of the program already in place. I am very proud of that fact. And I am grateful because this program has saved the lives of some of my friends.

I want all firefighters to have the same benefits of Local 416, which means they have access to proper annual screenings for the diseases that are prevalent in the fire service because of the exposures we face. In addition, due to the severity of the situations we are placed in, and the human tragedy we experience daily, mental health screening and assistance is essential to keep our members well, our families intact and our communities safe. I consider a complete wellness program for public safety to be a good investment for any community in the long and short terms.

I encourage you and your department to be proactive and take steps to promote the physical and mental wellbeing of yourself and our Brothers and Sisters. Please take the information you learn from this document to your city management, to your departments, and to your Brothers and Sisters in the firehouse. Together we can ensure that everyone goes home not only safe from the immediate dangers of the fireground, but also the long term dangers.

Fraternally,

Tom Hanify
President, Professional Firefighters Union of Indiana

Establishing a Project Team

(adapted from the WFI, 3rd edition, 2008)

For the best success in developing and introducing a wellness-fitness program into your department, a project team should be established.

All members of the organization should feel that they have the opportunity to participate in the implementation process. Therefore, one of the primary responsibilities of the team members will be to communicate with personnel throughout the organization that a wellness-fitness program is being explored.

Good written and verbal communications skills will be an extremely important aspect of the process. The team should include representation from all areas and ranks within the organization. This should include but not be limited to:

- the fire department physician or an appropriate health care professional;
- the department's Wellness Coordinator;
- Peer Fitness Trainers, and
- equal representation from both labor and management

This will help foster a non-punitive, cooperative environment and equality among department personnel.

The following pages in this manual provide justification for such a program and a variety of resources to help ensure a successful implementation.



Cost-Benefit of a Wellness Program

(Adapted from The Fire Service Joint Labor Management Wellness-Fitness Initiative, 3rd Edition)

Uniformed personnel are at an increased risk for musculoskeletal injuries and cardiorespiratory illness compared to other occupations.

Occupational injuries are the leading cause of disability and/or early retirement for uniformed personnel, and cardiovascular disease is the most common cause of work related death. Fire fighters must perform physically intense work in extraordinary environments including high heat, low oxygen, high carbon monoxide and other combustible products. In addition to these job-related hazards, cardiac risk factors are higher among fire fighters than other comparable worker groups. As uniformed personnel age, there can be an increase in the prevalence of inactivity, hypertension, lower fitness level, and obesity. Although the work-related death rate is lower than several occupations, fire fighters' rate of injury is markedly higher than other comparable jobs, with the annual injury rate 8.6 times that in mining.



Tens of thousands of fire fighters are injured each year while fighting fires, rescuing people, responding to hazardous materials incidents and training for their job. While the majority of these injuries are minor, a substantial number are debilitating and career ending. These injuries contribute to a significant human and financial toll to personnel and the jurisdictions where they work, through lost work hours, higher insurance premiums, overtime, disability and early retirement payments. In recent years' health care costs have risen dramatically. Administrators are calling for more rigorous use of economic evaluations to guide resource allocation and spending. This is especially true in city and county governments with regard to the rising costs of fire and police agencies.

One strategy used to control the rising health care costs is to implement worksite health promotion. The rationale for worksite health promotion has been well documented from research outside of the fire service. A number of studies have addressed the question and have shown a favorable Return on Investment (ROI), for comprehensive health promotion programs. In fact, over 143 studies demonstrate positive ROI associated with worksite health promotion. Examination of the peer-reviewed literature concludes that the financial benefits of well-designed, well-implemented health promotion programs substantially exceed their costs and have a positive ROI and benefit/cost ratio.

In 1996, the IAFF and IAFC, in conjunction with 10 fire departments in North America, created and adopted the Fire Service Joint Labor Management Wellness-Fitness Initiative (WFI). Components of the WFI include a medical evaluation, fitness assessment, injury prevention and rehabilitation, behavioral health, and data collection (department injury and associated cost). The WFI is designed to improve the quality of life for all fire fighters while simultaneously seeking to prove the value of investing wellness resources over time.

Cost-Benefit of a Wellness Program (cont.)

The 10 Fire Departments of the WFI Task Force

(as of the last edition of the WFI in 2008)

Austin, Texas Fire Department

J.J. Adame, Fire Chief

Stephen Truesdell, President, IAFF Local 975

Calgary, Alberta Fire Department

Bruce Burrell, Fire Chief

Mark Faires, President, IAFF Local 255

Charlotte, North Carolina Fire Department

Jon Hannan, Fire Chief

John David Foster, President, IAFF Local 660

Fairfax County, Virginia Fire and Rescue Department

Ronald L. Mastin, Fire Chief

John Niemiec, President, IAFF Local 2068

Indianapolis, Indiana Fire Department

Brian Sanford, Fire Chief

Mike Reeves, President, IAFF Local 416

Los Angeles County, California Fire Department

P. Michael Freeman, Fire Chief

David Gillotte, President, IAFF Local 1014

Miami Dade, Florida Fire Rescue Department

Herminio Lorenzo, Fire Chief

Stan Hills, President, IAFF Local 1403

City of New York, New York Fire Department

Sal Cassano, Fire Chief

Stephen Cassidy, President, IAFF Local 94

John J. McDonnell, President, IAFF Local 854

Phoenix, Arizona Fire Department

Bob Kahn, Fire Chief

Peter Gorraiz, President, IAFF Local 493

Seattle, Washington Fire Department

Gregory M. Dean, Fire Chief

Kenneth Stuart, President, IAFF Local 27

A Comprehensive Study of the Cost-Benefit of the WFI

**Contacted the 10 Original WFI
Fire Departments**
N=10

Site visits
With department HR and Risk Mgt to review data availability and complexity

8 Departments
Had long term data with
recently upgraded and accessible
computer data base
N=8

Control
4 Dept Limited WFI Implementation
Austin, TX; Calgary, ALB;
Miami-Dade County, FL; Seattle, WA
N=4

Intervention
4 Dept Full WFI Implementation
Fairfax County, VA; Indianapolis, IN;
LA County, CA; Phoenix, AZ
N=4

Data Collection and Assessment
Injury/illness claims and costs paid per fiscal year assessed retrospectively
from 1991 – 2004 (7 years pre and 7 years post WFI)

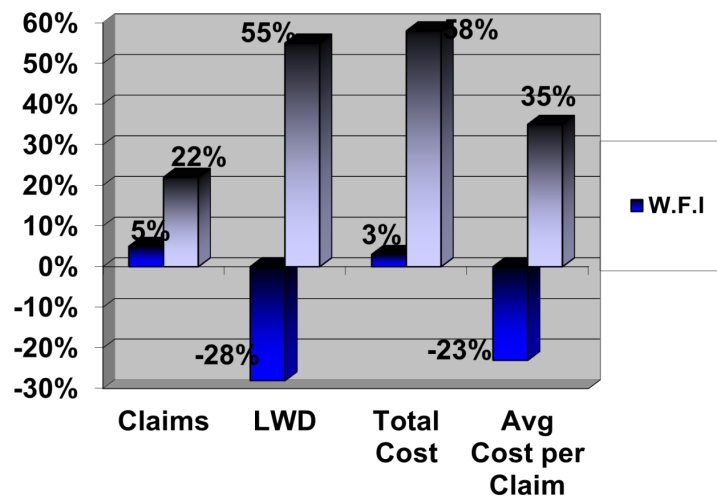
Data did not include any non-occupational claims/costs due to
difficulty with tracking this information through private insurance
and individual medical providers

Cost Analysis
Mean occupational claims, lost work days, total incurred costs, and
average cost per claim for WFI departments were compared to the
control departments by t-tests and analysis of variance

All costs were adjusted to 2006 values using the Medical Care
Consumer Price Index

Cost-Benefit of a Wellness Program (cont.)

The table below shows a graphical representation of the percentage change in claims, lost workdays, total costs, and average cost per claim for a WFI department versus a non-WFI department. **The 14-year study collected information for 7 years prior to implementing a WFI program, and then again for 7 years after the WFI program was implemented.** Statistically, there was a significant difference ($p < .026$) for occupational claims and costs between the fire departments that implemented the WFI and those sites not implementing the WFI.



Regarding occupational CLAIMS:

There was a 5 percent increase over the 7 years for a WFI department versus a 22 percent increase for a non-WFI department. For a non-WFI fire department, this represented an increase of 81 claims per year when compared to 25 claims per year for a WFI fire department.

Regarding lost hours or lost work days (LWD):

There is a 28 percent reduction in lost hours for the WFI departments compared to a 55 percent increase in lost hours for non-WFI departments.

Regarding TOTAL COST:

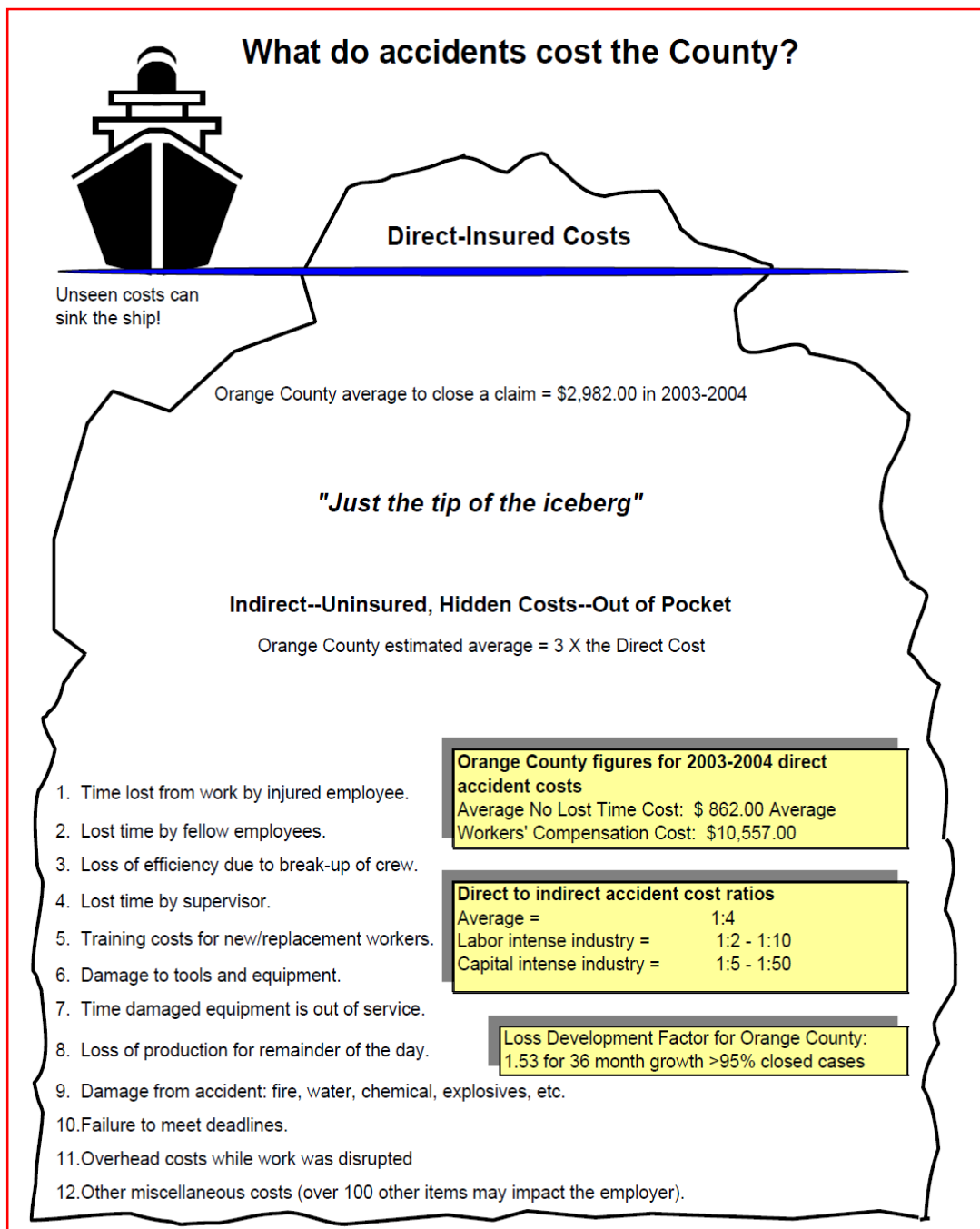
There was a 3 percent increase in costs over the 7 years for the pre- and post-implementation WFI departments and a 58 percent increase in total costs for the non-WFI fire departments for both pre- and post-implementation. In actual dollar amounts (adjusted to 2001 U.S. dollars), this equates to a total incurred cost increase of \$82,900 per year, per WFI department and a total incurred cost increase of \$1,419,435 per non-WFI fire department, per year. This represents a difference of \$1,336,535, which indicates that non-WFI departments spent over \$1.33 million dollars more per year, per department when compared to WFI departments.

Regarding AVERAGE COST PER CLAIM:

The average cost per claim was reduced by 23 percent (-\$1,518 per claim) over the seven-year period for WFI sites as compared to an increase of 35 percent (+\$2,386 per claim) for non-WFI departments. When these two figures are combined, there was a savings of \$3,904 per annual occupational claim per WFI fire department as compared to the non-WFI sites. In other words, a fire department with 500 occupational claims could save \$1,952,000 per year.

Cost-Benefit of a Wellness Program (cont.)

The graphic below depicts that direct costs are just the “tip of the iceberg” as indirect costs, such as insurance, time lost, replacement cost, presenteeism cost, can significantly to the expenses.



A Review of Existing Medical Standards for Fire Departments

There are four primary organizations that have medical standards for fire departments. They are:

1. Occupational Safety and Health Administration (OSHA)
2. National Fire Protection Association (NFPA)
3. The IAFF Wellness-Fitness Initiative (WFI)
4. United States Federal Motor Carrier Safety Administration (FMCSA)

OSHA Respirator Clearance & Fit Testing



According to the **Occupational Safety and Health Administration (OSHA)** standard **1910.134**, if a respirator is necessary for job performance, then departments are required to have a respiratory protection program in place.

RESPIRATOR CLEARANCE (OSHA 1910.134)

From a medical standpoint, all respirator-wearing personnel shall have a medical evaluation, provided by the department, to determine the employee's ability to use a respirator. This medical evaluation should occur **prior to** the employee being allowed to wear a respirator. ***A respirator clearance only clears the employee to wear a respirator and the general type of respirator they can use. It does not medically-clear a firefighter for duty.***

RESPIRATOR FIT TEST (OSHA 1910.134(F) AND 1910.134(F)(2))

Once cleared for respirator use, the employee is required to have a respirator fit test. This fit test is **required annually** or whenever there is a change in the facepiece or there is any visual observation of changes in the employee's physical condition that could affect respirator fit. According to OSHA, a quantitative mask fit test is required. A Portacount machine is the preferred method of testing. Some occupational health clinics will have Portacount machines for testing. Often, fire departments have their own machines and can offer testing to a neighboring department who may not have their own.

To learn more, visit the OSHA Web site at OSHA.gov.

National Fire Protection Association (NFPA)



NFPA Standard 1582

Firefighting is a challenging profession. Make sure your team is up to the task and keep them safe on the job with *NFPA 1582*.

To help fire departments ensure that personnel are medically capable of performing their required duties, the 2013 *NFPA 1582* incorporates current research and knowledge to present the latest provisions for a comprehensive occupational medical program. The *Standard* provides separate chapters for the medical evaluation of candidates/prospective employees and for the occupational medical and fitness evaluations for fire department members. Requirements are equated against the essential job tasks based on several NFPA® Professional Qualification Standards and apply to career, volunteer, private, industrial, governmental, and military fire departments.

Increase job performance and reduce occupational injuries and illnesses.

NFPA 1582 is an essential working tool for fire departments and fire department physicians, or those medical professionals that are providing physicals to fire department candidates and members.

What is NFPA 1582?

This Standard outlines an occupational medical program that will reduce risks and provide for the health, safety, and effectiveness of fire fighters operating to protect civilian life and property.

What does NFPA 1582 address?

NFPA 1582 presents descriptive requirements for a comprehensive occupational medical program for public, governmental, military, private, and industrial fire departments. Provisions are applicable to fire department candidates and members whose job descriptions are outlined in NFPA 1001, NFPA 1002, NFPA 1003, NFPA 1006, NFPA 1021, and NFPA 1051.

To purchase a copy of NFPA 1582, visit the NFPA Web site at NFPA.org.



NFPA Standard 1583

Keep fire fighters fit with *NFPA 1583: Standard on Health-Related Fitness Programs for Fire Department Members.*

Fire fighter fitness affects every aspect of the job, from effectiveness in the field to long-term stress and injury resilience. That's why a fitness program -- with properly trained peer fitness trainers and health and fitness coordinators -- is a key component of any department's occupational safety and health program.

NFPA 1583 outlines a complete health-related fitness program designed for fire departments that is consistent with today's best practices.

What is NFPA 1583?

This standard outlines a complete health-related fitness program for members of fire departments involved in emergency operations to enhance their ability to perform occupational activities and reduce the risk of injury, disease, and premature death.

What does NFPA 1583 address?

Requirements apply to all aspects of the development, implementation, and management of a health-related fitness program, including roles and responsibilities, health and fitness coordinator, peer fitness trainers, fitness assessment, exercise and fitness training program, health promotion education, and data collection. Annexes include a sample fitness plan and self-assessment tool.

To purchase a copy of NFPA 1583, visit the NFPA Web site at NFPA.org.

Wellness-Fitness Initiative (WFI)



The IAFF/IAFC Wellness-Fitness Initiative

The International Association of Fire Fighters and the International Association of Fire Chiefs have continued to work together in an unprecedented endeavor. They have gathered and maintained for over 20 years some of North America's finest fire departments to build a stronger fire service by strengthening their foundation—the fire fighter and EMS responder. Meeting the challenges of tomorrow's fire service requires that we keep our uniformed personnel fit and healthy today.

The *Fire Service Joint Labor Management Wellness-Fitness Initiative (WFI)* has been an exciting challenge for everyone involved in this very positive endeavor. In this document and throughout the process of its development, enhancement and revision, they have addressed the needs of the total individual in a program designed to build and maintain fit and healthy uniformed personnel. Fitness — physical, mental, and emotional — requires an effective wellness program that is made available to recruits, incumbents, and retirees. Components of the Wellness-Fitness Initiative include medical evaluation, fitness, rehabilitation and injury prevention, behavioral health, and data collection.

The WFI is now a complete medical, physical fitness and wellness program package. Since the initial distribution of this manual, the IAFF, the IAFC, the Task Force, and technical committee members have continued to address each of the Initiative's components.

Numerous task force meetings and technical committee meetings were held as part of this Initiative. The task force, consisting of the IAFF, the IAFC and the fire department chiefs and IAFF local union presidents, directed the content of the document. Each department was represented on the technical committee by exercise physiologists, fitness coordinators, department physicians, behavioral health professionals, and information management personnel. Expert advisors were utilized throughout the process to assist with meeting proceedings. Facilitating and coordinating the work of the task force and technical committees was completed by the IAFF Division of Health, Safety and Medicine.

To obtain a copy of WFI, visit the IAFF Web site at IAFF.org.

Department of Transportation (DOT) / Commercial Driver's License (CDL)



DEPARTMENT OF TRANSPORTATION (DOT) EVALUATIONS

The Department of Transportation has six entities which are required to have alcohol and drug testing programs. These entities are 1) The Federal Motor Carrier Safety Administration (FMCSA); 2) The Federal Aviation Administration (FAA); 3) The Federal Railroad Administration (FRA); 4) The Federal Transit Administration (FTA); 5) The United States Coast Guard (USCG); and 6) The Pipeline and Hazardous Materials Safety Administration (PHMSA).

The purpose of these programs is the protection of public safety. The Federal Regulations may vary among these six entities. Employees whose jobs are regulated by the DOT are required to submit to various types of alcohol or drug tests: random, post-accident, pre-employment, reasonable suspicion, return-to-duty.

United States Federal Motor Carrier Safety Administration (FMCSA)



Is your CDL Examiner Registered?

FEDERAL COMMERCIAL DRIVERS LICENSE (CDL) EXAM

In April of 2012, the United States Federal Motor Carrier Safety Administration (FMCSA) established a new rule in the National Registry, that all medical examiners who conduct physical examinations for commercial motor vehicle drivers must meet the following standards:

- Maintain a valid state license to conduct medical examinations
- Complete the required training on FMCSA's physical qualifications
- Pass the federal FMCSA Medical Examiner Certification Test to demonstrate knowledge of FMCSA's physical qualification standards
- Complete refresher training every 5 years and recertification every 10 years

For more info, visit the Federal Motor Carrier Safety Administration at fmcsa.dot.gov.

Gaining Buy-In for the Program

It is very important, prior to implementing a wellness-fitness program, that the right people are engaged to explain the need for such a program and to get their buy-in. The following 4 individuals and/or departments in your city or town are a good start to ensure you receive the support you need to make your program a long-term success.

1. **Controller** – This individual is going to be most interested in the program's impact on lost time, injury costs, and health insurance costs (claims or risk class).

Some sample questions to consider asking your controller:

1. As you look at your injury claims, are you paying for a lot of back, shoulder, and knee injuries?
2. Are you paying high medical costs for heart disease and cancer in your fire department?
3. Is chronic disease in your fire department driving your healthcare costs up or increasing your risk class (depending on whether they are self-insured or fully-insured)

2. **Human Resources** – Similarly to the controller, this department is going to be interested in injury claims and health insurance claims (cost drivers of risk class or claims).

Some sample questions to consider asking HR:

1. As you look at your desk, are your injury claims piling up?
2. Are your cases of heart disease and cancer, commonly found in the fire service, more than all the rest of your city/town departments combined?
3. Is your fire department dealing with any chronic disease?
4. Is your fire department increasing your risk class? (your FD should be the cheapest to insure)

3. **Chief of Operations** – This individual is going to be very interested in managing lost time/overtime.

Some sample questions to consider asking the Chief of Operations:

1. Is city hall asking about your overtime costs?
2. Are sprains and strains (knee, back, shoulder) making it difficult to meet minimum staffing?

4. **Fire Union** – The union is going to be interested in the levels of acute disease, disability, and chronic disease.

Some sample questions to consider asking the Union:

1. How many cases of heart disease and cancer are your firefighters experiencing?
2. How many of your firefighters are forced to retire because of duty-related injuries?
3. Do you have more than a handful of firefighters suffering with chronic disease?

Recommended Implementation Path

For departments who want to start or enhance their wellness-fitness program, here are our recommendations on a pathway to take. This pathway allows you to ease your personnel into a more comprehensive program over time and takes into consideration any budget constraints you might have.

These programs are described in more detail on the following pages.



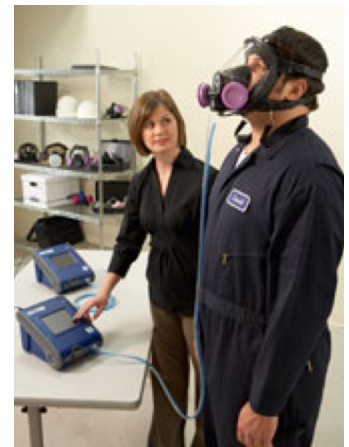
OSHA Respirator Clearance

First responders are required to wear a respirator under certain conditions. As a result, OSHA requires annual respirator clearances in accordance with OSHA 1910.134. At the minimum, your personnel need to complete the OSHA questionnaire annually. Depending upon their answers on the questionnaire, many of them will be cleared without having to go through a physical exam. However, some may be bumped into needing a physical exam to ensure that they are medically able to wear a respirator. This is up to the medical judgment of the physician performing the evaluations, as well as criteria outlined by OSHA.

This medical evaluation should occur **prior to** the employee being allowed to wear a respirator. Keep in mind that a ***respirator clearance only clears the employee to wear a respirator and the general type of respirator they can use. It does not medically-clear a firefighter for duty.***

Respirator Mask Fitting

Once cleared for respirator use, the employee is required to have a respirator fit test. This is in accordance with OSHA 1910.134(F) and (F)(2). This fit test is **required annually** or whenever there is a change in the facepiece or there is any visual observation of changes in the employee's physical condition that could affect respirator fit. A Portacount is commonly used to perform the required quantitative mask fit.



Starter Medical Clearance Program

A medical clearance evaluation is designed to specify whether or not the employee is **medically fit to perform the essential job functions** of their position. The medical clearance evaluation should **include** the OSHA respirator questionnaire as well.

It is recommended that a medical clearance evaluation include the following testing at a minimum:

- complete head-to-toe physical examination
- complete blood panel
- health history questionnaire
- EKG
- vision test
- pulmonary function test
- hearing test
- stress test for those over the age of 40 or at the discretion of the provider.



A Comprehensive Wellness Program

The IAFF/IAFC Wellness-Fitness Initiative (WFI)

The Problem

Due to the alarming rate of duty-related deaths and premature retirements due to injury and disease, the IAFF (International Association of Fire Fighters) and the IAFC (international Association of Fire Chiefs) decided this issue was too big to not address. In 1996, they along with ten pairs of local unions and their departments, as well as select experienced physician groups (including Public Safety Medical) joined together to form the Fire Service Joint Labor Management Wellness-Fitness Task Force. Their goal was to design a mandatory, non-punitive, and positive program that would help keep firefighters fit and healthy throughout their fire service career.

The Solution



Out of this collaboration came the WFI (Wellness-Fitness Initiative) in 1997. Designed to be comprehensive yet cost effective, it realized great success in accomplishing its goals. This initiative has since been adopted by National Fire Protection Association (NFPA) and recommended by the National Fallen Firefighters Foundation (NFFF) as the gold standard for reducing disease and injury. The WFI not only addresses physical exam recommendations, but also Injury and Medical Rehabilitation, Behavioral Health, Cost Justification and Data Collection.

The following components are included in the WFI evaluation for all personnel. It provides a medical and respirator clearance:

- | | |
|--|---|
| <ul style="list-style-type: none">• Physical Examination• Body Composition• Muscular strength and endurance testing• Annual Laboratory Analyses• Vision Evaluation• Hearing Evaluation• Pulmonary Evaluation | <ul style="list-style-type: none">• Aerobic/Cardiovascular Evaluation• Cancer Screening• Immunizations• Infectious Disease Screening• Referrals to Health Care Practitioners• Written Feedback• Data Collection and Reporting |
|--|---|

Getting Started

Identify a medical provider that is familiar with the WFI. Provide an orientation to your personnel on the importance of the WFI and its specific application to their jobs. Ensure they understand it is non-punitive.

For more information, contact the International Association of Fire Fighters (IAFF) at IAFF.org.

Work Performance Evaluations

Once you've performed your departmental medical evaluations to ensure your personnel are medically and respirator cleared for duty, it is recommended that you ensure your personnel are fit to perform the essential duties of their job. Consider a Work Performance Evaluation (WPE).

Defined

A WPE is a series of job-specific activities that represent the critical essential functions that your incumbent firefighters are expected to perform on the fireground.

Purpose

A work performance evaluation can help identify individuals with a fitness capacity that is too low to perform their job. By instituting a work performance evaluation, these individuals can be flagged for case management and fitness rehabilitation. Without a work performance evaluation, a firefighter with subpar fitness levels can be a liability to themselves, to other firefighters, and to the general public when on the fireground.



Process

The Department establishes its own minimum performance standards that protect the safety of the firefighter and provide the appropriate delivery of fire suppression and rescue services to the community.

Most departments have their personnel perform a WPE annually to ensure they are meeting the standard. WPE's are also used to evaluate a firefighter who is returning to duty after an extended illness or injury.

The WPE consists of a sequence of events that requires the incumbent firefighter to progress along a pre-determined path from event to event in a continuous manner. The events are placed in a sequence that best simulates the activities at a fire scene.

Recommendations on Implementing a WPE:

1. Identify a provider with experience in implementing WPE's. If you are going to utilize a work performance evaluation for the purposes of fit-for-duty, you will need to ensure that the work performance evaluation is court-defensible.
2. Include your local union leadership and your peer fitness trainers on the steering committee.
3. Provide your firefighters with an opportunity to practice the work performance evaluation prior to the actual test.
4. If some are unable to complete the work performance evaluation within the set criteria, establish a protocol to help them improve their fitness capacity, so that they can pass the evaluation.

Establishing a Budget and Developing an RFP

Determining the Services to Offer

Once you've decided to initiate a program, you will need to determine the services you wish to implement for your personnel. The medical standards described on the previous pages are a good place to start.

Make sure that you speak to the key stakeholders in your city or town to gain buy-in. Review the "Gaining Buy-In" section of this manual for recommendations on the personnel you should involve to have much better success at getting the budget approved.

Developing an RFP

One of the best ways to obtain competitive quotes is to develop a Request for Proposal (RFP).

An RFP is a tool that can help ensure your department procures the most competitively priced goods and services you need to implement your program. The RFP process can be as simple or as complex as necessary to ensure potential vendors understand exactly what you are in the market for.



Vendors that respond to RFPs understand they are competing with numerous other parties to win your business. As such, they are likely to be very specific in their responses, giving you their best estimates and describing the ways in which they can outshine the competition. The way a company responds to your RFP gives you an idea of their responsiveness and attention to detail and allows you to evaluate how well they would do providing requested products and services. See a sample RFP on the following pages.

Identifying Potential Vendors

Ideally, you should identify a vendor that has experience serving fire departments and firefighters. We recommend you reach out to other fire departments with similar programs in place to find out who they are using and if they are happy with the service. You can reach out to hospitals and medical practices in your community as well. The physician must have a thorough understanding of the positions in the fire department, including: essential job tasks; physical demands; psychosocial stressors; chemical, biological, and physical exposures; and the effects of medical conditions on essential job tasks.

As you know, shift schedules, emergency runs, training and other requirements of the department can make scheduling a challenge. Having an understanding of the world of firefighting is very valuable. See the "Selecting a Provider" section on page 29 of this manual for other considerations.

Sample Request for Proposal

SAMPLE INTRODUCTORY PAGE

City of _____
Request for Proposal

IAFF/IAFC Wellness-Fitness Initiative

Overview

The _____ **Fire Department** is requesting proposals for annual medical and fitness evaluations. The program should include all of the following comprehensive services: Medical evaluations based off of the IAFF/IAFC Wellness Fitness Initiative, Court-Defensible Case Management, Court-Defensible Work Performance Evaluation, 77 Fund Applicant Testing, HIPAA Compliant transfer of Medical Records, and also Policy Development assistance for the services listed above. This Request for Proposal (RFP) DOES NOT ask for or include injury care. This will be a competitive negotiation process. The Fire Department reserves the right to reject all bids and issue another RFP. This RFP does not commit the City to reimburse vendors for proposal submission costs. Price is an important consideration in the process, but not the only consideration. Other factors include: track record of successes at other municipalities, identification and understanding of the department's requirements, experience and qualifications of key personnel, quality of services delivered, record in providing quality support, experience with Public Safety depositions, experience with the 77 Fund, and experience with working collaboratively with Fire Department unions.

Requests and Specifications

Proposal Instructions: Please answer the stated questions listed below. If additional pages are necessary, please feel free to attach them to your proposal. Feel free to include pre-printed product literature regarding your services. Indicate the length of time over which your price quote applies. If enhancements are required to accommodate a specific task identified below, please identify the cost of such enhancement.

Sample Request for Proposal (cont.)

In this section, you will want to determine the experience that the vendor's have with serving fire departments.

SAMPLE CONTENT

The following categories have been identified by the _____ Fire Department for inclusion in the desired services. Please provide a brief response to each of the questions on a separate document.

Applicant/Post-Offer Firefighter Evaluation Experience:

In this section, you can ask questions about:

- the vendor's experience with the performance of applicant testing,
- the qualifications of their staff performing the applicant physicals, and
- the type of equipment they use.

Annual Firefighter Medical Evaluation Experience:

In this section, you can ask questions that determine the experience of the vendor in working with fire department personnel. Sections can include;

- the vendor's experience with assisting with Department policy creation
- the vendor's experience with providing evaluations to fire departments
- the qualifications of their staff performing the annual physicals
- the type of equipment they will use
- the type of reports they will provide to the department and/or to the firefighters
- the type of risk reduction programs they may have.
- the experience they have with peer fitness trainers
- their ability to provide 24/7 access to medical records

Return-to-Work Experience:

In this section, you can ask questions that address the vendor's experience with return-to-work processes. Sections can include;

- the vendor's experience with light duty policies
- the vendor's experience with return-to-work policies
- the vendor's experience with case management
- the vendor's experience with work performance evaluations

Sample Request for Proposal (cont.)

In this section, you will want the vendor to provide a “per person” quote for each category of services you are requesting.

SAMPLE INTRODUCTORY TEXT

Quote for Services Requested

The following services have been identified by the _____ Fire Department for inclusion in their program. The response should be in the following format:

Enter the appropriate cost for each test or service provided for one person. At the end of each section, provide a total per person quote.

Quote for Applicant/Post-Offer Evaluation

In this section, have the vendor break out the itemized costs for all testing they would perform for an applicant/post-offer evaluation.

<u>Name of test</u>	<u>Cost per person</u>
Test 1	\$_____
Test 2	\$_____
Test 3	\$_____
Total Cost for Applicant Testing per person:	
	\$_____

Quote for Annual Medical Evaluations

In this section, have the vendor break out the itemized costs for all testing they would perform for annual medical evaluations.

<u>Name of test</u>	<u>Cost per person</u>
Test 1	\$ _____
Test 2	\$ _____
Test 3	\$ _____
Total Cost for Annual Medical Evaluations per person:	
	\$ _____

Sample Request for Proposal (cont.)

Quote for Return-to-Work Evaluations

In this section, have the vendor break out the itemized costs for all testing they would perform for a return-to-work medical evaluation.

<u>Name of test</u>	<u>Cost per person</u>
Test 1	\$ _____
Test 2	\$ _____
Test 3	\$ _____
Total Cost for Return-to-Work Evaluations per person: \$ _____	

Assistance with Policy Development

In this section, have the vendor break out the itemized costs for any policy development they would assist you with.

<u>Name of policy</u>	<u>Cost per policy</u>
Policy 1	\$ _____
Policy 2	\$ _____
Policy 3	\$ _____

For more specific examples of RFP's for wellness-fitness initiative programs, please contact the IAFF at IAFF.org or Public Safety Medical at PublicSafetyMed.com

Selecting a Provider

You have many choices when it comes to your medical provider. Your personnel are your most precious resource and the hands in which you entrust their health and well-being should be a top priority. Selecting the wrong provider can be extremely detrimental to the success of your program. **Here is a list of 12 questions to consider when making that decision.**

1. What size of provider do you require? Local, national, large regional?

Small providers might not have all of the resources you need; while large providers can be too impersonal.

2. What is the provider's experience with serving your type of personnel?

You shouldn't have to "teach" the provider what you need. Ask questions to determine if the provider understands your industry. Do they have proven outcomes that demonstrate improved health in the departments they serve and a return-on-investment?



3. Are you receiving true medical liability coverage?

Your administration is responsible for the performance of its personnel, however it can't make determinations on whether medical, fitness, or mental health affects duty status. That decision must be made by the doctor. Does your provider take this burden off of you in a court-defensible manner?

4. Is the provider involved with your industry?

Having a history of participating in local, state, and national associations related to your industry can provide confidence that this provider is staying on the "cutting edge".

5. Is the provider also serving as your medical director?

Using your medical director as your physical exam provider can be viewed as a conflict of interest as they are often considered a part of your administration. It is important that your personnel are able to trust the physician in charge of clearing them for duty.

6. Do they provide a primary contact person?

Having a consistent contact that is readily available, dependable, professional and responsive is highly important. Ask to meet this person prior to awarding the contract.

7. How will the provider deliver your services?

Consider where you want the services delivered, how quickly it will be completed, and how much time the provider will spend with each employee. Look for flexibility.

Selecting a Provider (cont.)

8. What are the credentials of those delivering the services?

Verify the credentials of the personnel providing services and whether or not they are contractors, part-timers, or full-time employees of the provider. Ask about the number and type of employees the provider has dedicated to serving your needs.

9. How is the provider's pricing determined? What are the payment options?

Fees can vary dramatically between providers. However, the most cost effective provider may not be the best for your needs. Ask what the payment options are. Ask if they take insurance. Ask to see a sample invoice.

10. Does the provider support other needs of your organization?

Consider your need for year-round services such as pre-employment, fit-for-duty/return-to-work, fitness testing and training, psychological services, health education, among other areas, when evaluating your provider options.

11. What type of reports or documentation do you and your personnel receive after the evaluations?

Are you notified of high-risk personnel? Do you receive medical clearance reports? How? When? Are customer satisfaction questionnaires distributed? Do you receive the findings?

12. How does the provider make up missed appointments for personnel who were sick or not available?

Having a convenient and cost-effective means to make up missed appointments is very important.

In Summary:

- 1) Identify your requirements.
- 2) Identify a list of providers.
- 3) Solicit proposals.
- 4) Narrow your list to the top 2 or 3.
- 5) Meet with each provider at least once.
- 6) Ask for at least 3 references from customers of the provider.

Alternative Funding for Your Program

Grants



FEMA Grants

The Federal Emergency Management Agency (FEMA) offers an Assistance to Firefighters Grant (AFG). The main goal is to help “meet the firefighting and emergency response needs of fire departments and nonaffiliated emergency medical service organizations.”

Recommendations to Improve Your Chances of Obtaining a FEMA Grant:

Even though there is no way to guarantee success, there are a few things that will help a department’s success for landing a grant from FEMA. They include the following:

1. Ensure that the program you are recommending is based off of the IAFF/IAFC Wellness-Fitness Initiative.
2. Develop a clear “problem” of why your city/region needs a wellness and fitness program.
3. Clarify that this program has mandatory participation.
4. Communicate how you will sustain your wellness-fitness program after the grant funding runs out.
5. Express the desire to have IAFF Peer Fitness Trainers, as well as their role on educating and training personnel as a support to your program.
6. Clearly list out each component of your program as well as a justification for funding that component.
7. Look at the grant narratives of neighboring departments that have successfully been awarded a grant for their wellness-fitness program as a guide when writing your grant.

For more information, visit FEMA at [FEMA.gov/Firegrants](https://www.fema.gov/firegrants).

Fundraising

For **volunteer and combined fire departments**, there are a variety of creative ways to raise money for your medical evaluation program.

1. Create a monthly newsletter that is sent to your community with updates, fire prevention tips, department highlights, rescues, etc. This will keep your community informed year-round as to how you're protecting their community. Most importantly, do not alienate your community through harsh ordinances. Be respectful.
2. Host special events such as chili cook-offs, pancake breakfasts, and other related events that would require a small donation to attend.
3. Host an open meeting once a month to maintain good two-way communication with your community.
4. Establish partnerships with some not-for-profits that benefit the community. One department was able to partner with their local Red Cross to install smoke detectors in a number of homes in their community.
5. All of the above is done to support an annual ask. Send out a newsletter with the department's goals for the following year and include a request for voluntary contributions with a return envelope.

To learn more about how one department has been successful with this approach, contact the Dick Johnson Township Volunteer Fire Department. Chief Kevin Orme, (317)753-1189, or e-mail at korme@doc.in.gov.

Collaborating with Other Fire Departments

Talk to your neighboring fire departments to see if you might be able to form a consortium. By grouping 2 or 3 departments together, you might be able to negotiate a reduced rate for the medical evaluation services, as well as potentially find other cost-savings measures that benefit all.

Not-For-Profit Resources

There are numerous free resources that not-for-profits make available to their communities. If you have no budget, you can leverage these not-for-profits to give health education talks, health screenings and more. An excellent free resource, known as the National Health Observances, is available through the federal government at healthfinder.gov/nho. This resource provides all of the monthly health observances and Web and phone contacts to learn about how they might be able to assist the health promotion efforts of your fire department.

Introducing the Program to your Personnel

This is one of the most important steps when instituting a medical evaluation program in your department.

Oftentimes, firefighters are fearful that the program has ulterior motives of finding ways to take them off duty and other misguided perceptions. To help alleviate these fears and give them a comprehensive understanding of the purpose and nature of the program, it is recommended that you host an orientation with your medical provider for each shift of firefighters.



Here is what should be covered in the orientation at a minimum:

- An overview of the medical provider, their personnel and experience with providing these services
- An overview of the testing that will be performed and why
- An overview of how the testing will be scheduled
- An overview of who receives the test results and how any abnormal testing will be handled

This information will go a long way in building trust in your department and gaining the necessary buy-in to ensure the program is successful.

Utilizing Peer Fitness Trainers

Peer Fitness Trainers (PFT) are designated personnel in the fire department who:

- are certified to design and implement fitness programs,
- improve the wellness and fitness of the uniformed members in their departments,
- assist in the physical training of recruits, and
- assist the broader community in achieving wellness and fitness.

A certification program was developed by the International Association of Fire Fighters (IAFF), the International Association of Fire Chiefs (IAFC), in partnership with the American Council on Exercise (ACE). The purpose of the certification program is to provide a fitness trainer standard consistent with the health and fitness needs of the Fire Service throughout the United States and Canada. Those successfully passing the certification examination will have demonstrated they possess the knowledge and skills required to serve the health and wellness needs of their department.

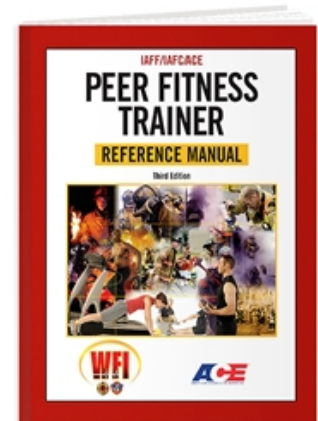
Implementing PFT's into your department will provide a cost effective way to incorporate year-round interventions in the department. They can help improve the wellness and fitness of firefighters, ultimately leading to decreased health insurance and worker's compensation expenses. Also, PFT's can help create a positive culture for health improvement. It is recommended that you have at least one PFT per shift to ensure they are readily available to serve all of your personnel.

Current Process of Becoming Certified:

- Must take and pass the ACE-approved 115-question certification exam
- Can do a home study or attend a 5-day PFT Workshop led by a certified PFT "train the trainer" instructor to prepare for exam

Hosting a PFT Certification Course:

- At least 3 months prior to the course, the Union President should contact the IAFF to express interest in hosting a course (or to find a course)
- To host, there is a \$20,000 minimum, payable to the IAFF
- If the funds are not paid to the IAFF up front, they do not post it on their Web site
- A host site can do their own advertising for the course and collect monies from each attendee.
- The cost per person is \$800, therefore you will need at least 25 enrollees to break even. They allow up to 32 people in a course.
- These fees cover books and materials for each person, a five-day classroom course, payment for two instructors, and the certification.
- They recommend that enrollees get their materials at least 3 months ahead of time to study and prepare for the exam.
- There are limitations to what the IAFF allows for course dates. The Union President of the host department will need to talk with the IAFF if any special requests are necessary.
- If at least 25 people do not enroll, the host will have to pay the difference to the IAFF or cancel the course.



Utilizing Peer Fitness Trainers (cont.)

Maintaining the PFT Certification:

Certified Peer Fitness Trainers are required to complete at least 12 hours of continuing education over a two-year period. There are continuing education courses offered online through ACE and Public Safety Medical offers classes a couple of times a year. A fire department should budget \$150-\$250 per year for each of their trainers to maintain the appropriate levels of continuing education.

For more information, contact the International Association of Fire Fighters at IAFF.org or Public Safety Medical at PublicSafetyMed.com.



Resources

Cancer

Firefighter Cancer Support Network

- <http://firefightercancersupport.org>

Heart Disease

The NVFC Heart-Healthy Firefighter Program

- <http://healthy-firefighter.org/>

Medical Evaluation Standards

Respirator Clearance

- <http://osha.gov>

NFPA 1581-Immunizations

- <http://nfpa.org/codes-and-standards>

NFPA 1582-Medical Evaluations

- <http://nfpa.org/codes-and-standards>

NFPA 1583-Fitness Evaluations

- <http://nfpa.org/codes-and-standards>

IAFF/IAFC Wellness-Fitness Initiative

- <http://iaff.org>

Public Safety Medical

- <http://PublicSafetyMed.com>

National Health Observances

- <http://healthfinder.gov>

PFT Certification

- http://acefitness.org/getcertified/certification_iaff.aspx
- <http://iaff.org>

Contributors:

Indiana Fire Chiefs Association: <http://indfirechiefs.org>

Professional Firefighters Union of Indiana: <http://pffui.com>

Public Safety Medical: <http://PublicSafetyMed.com>