Category 11: Health and Safety

Keeping employees/members healthy and safe is a major priority for any organization. Having adequate programs and processes in place will help meet the goals of eliminating employee injuries and deaths, reducing liability to the organization and ultimately making the organization more effective and efficient.
Criterion 11A: Occupational Health, Safety and Risk Management

The agency’s occupational health, safety and risk management programs protect the organization and personnel from unnecessary injuries, loss, and liability.

Summary:

The department has a health and safety program that is managed by the health and safety team. The team is led by the division chief of EMS, who is the program manager. The program team focuses on initiatives to create a safer work environment through recommendations on policy guidance pertaining to health, wellness, and safety issues. The team reviews the effectiveness of health, wellness, and safety activities happening in the department.

Every effort is made to promptly address unsafe work environments as well as to stand up quality policy changes to enhance the safety and health initiatives for department members. Physical and mental well-being is of utmost importance to all department members, and it shows in the programs and processes that follow.
Performance Indicators:

11A.1 A specific person or persons are assigned responsibility for implementing the occupational health, safety and risk management programs.

Description

The department has a health and safety program that is managed by the health and safety team. The team is led by the division chief of EMS, who is the program manager. The Health and Safety Program Team includes the division chief of EMS (1), division or battalion chief of operations (1), division chief of training (1), training officers (2), division chief of administration (1), two firefighters representing the Local 1596 from each shift (6), and one captain per shift (3). The health and safety team meets routinely, the fourth Wednesday of every other month, starting in January (odd months).

The program team focuses on initiatives to create a safer work environment through recommendations on policy guidance pertaining to health, wellness, and safety issues. The team reviews the effectiveness of health, wellness, and safety activities happening in the department. Department injuries and exposure claims are reviewed and categorized by body part, nature, and cause. Mental health is also a priority for the team. In effort to address the importance of mental health and available resources, the team is working to make access to peer support resources easier. Informational resource posters have been placed in every department building.

The department's division chief of administration serves as the department’s risk management officer and serves as the liaison to the City of Lawrence’s risk manager. The city’s risk manager is responsible for city-wide risk management and personnel risk reduction efforts.

Appraisal

The risk manager’s access to resources related to health, wellness, and safety could help provide initiatives to enhance member wellbeing. The department’s current partnership with the city’s risk manager has not been utilized to its potential. For example, if the risk manager was present at numerous meetings throughout the year, they could introduce programs that would increase injury prevention.
Plan
The potential to streamline the injury record keeping with redacted Patient Health Information (PHI) in efforts to create a spreadsheet of on-duty injuries will be pursued in Fall of 2022. At the end of each quarter, the city’s risk manager will provide an injury report tracking time off per employee.

Through the 2021 program appraisal, the team will be focusing on the identified recommendations for enhancing the program’s effectiveness.

In early 2023, the health and safety program team will make recommendations to update SOP 500.01 Health and Safety Management Program to reflect current department goals, activities, and process workflow to document information for review.

References
SOP 500.01 Health and Safety Management Program
Minutes from a Health and Safety Meeting
2021 Health and Safety Program Appraisal
11A.2 The agency has policies and procedures for reporting, evaluating, addressing and communicating workplace hazards as well as unsafe/unhealthy conditions and work practices.

**Description**

The department has numerous ways of communicating unsafe work environments, practices or jeopardizing instances that take place. These reporting mechanisms can be found on the department’s intranet, Near Miss Reporting, Facilities Maintenance Problems, and Injury and Exposure Reporting.

**Appraisal**

The near miss reporting system is reviewed by the Training Division and should also be directed to the health and safety committee for additional review and input of safer practices and implementation. Having three SOPs that encompass procedures for near miss reporting, unsafe work environments, and injury/exposure reporting has not been efficient.

**Plan**

The Training Division will review SOP’s related to reporting and update as necessary. The Training Division will also draft an SOP that encompasses near miss reporting, unsafe work environments, and injury/exposure reporting. Collaboration with the health and safety committee will be facilitated for SOP updates.

**References**

SOP 108.70 Near Miss Reporting
SOP 403.21 Facilities Maintenance Problems
SOP 500.01 Health and Safety Management Program
SOP 501.10 Injury and Exposure Reporting
The agency documents steps taken to implement **risk reduction and address identified workplace hazards**.

**Description**

Unsafe workplace discussions take place during department health and safety meetings. These are often brought forward by committee members or referred to the committee by command staff, however, can be sent for review by any department employee. Recommendations are made for corrective action, in an effort to ensure the issue is addressed. Currently, there is no formal way of submitting a concern via online or paper form.

**Appraisal**

The review of injury/exposure reports in the committee meetings has been productive. Accident/injury reports are assigned to department officers for investigation and relevant findings are distributed among committee members to review.

**Plan**

By Spring of 2023, the health and safety committee will implement a department-wide program that will allow employees to report unsafe work conditions, procedures, and practices through a streamlined process. This process will expedite concerns directly to the command staff and the health and safety committee. Employees will have a voice concerning practices as well as an opportunity to bring new methods and ideas to the committee.

**References**

Health and Safety Meeting Minutes
SOP 500.01 Health and Safety Management Program
MOU IAFF Local 1596 – section 10.1 (page 38)
11A.4 The agency has established and communicated procedures and guidelines for preventing the transmission of blood-borne pathogens and other infectious diseases and reducing exposure to harmful chemicals. Guidelines should include an improvement of practices process.

**Description**

The department’s SOP 504.10 Infection Control is in place to comply with OSHA and NFPA 1500 guidelines regarding air-borne and blood-borne pathogens standards. Copies of this plan are available on the intranet and in the office of the division chief of EMS. The division chief of EMS serves as the department infection control officer and designated agent.

**Appraisal**

SOP 504.10 Infection Control has been successful in outlining policies and procedures that are in place to keep employees safe. The compliance with OSHA and NFPA has been maintained. The SOP’s length (15 pages) provides a comprehensive overview; however, it makes the SOP hard to navigate.

In 2021, the department developed an Infection Control training, delivered via Zoom to employees. A recording was posted to Vector Solutions for employees that were not able to watch live.

**Plan**

All new employees will receive initial training related to infection control during their initial recruit academy training prior to field assignment for EMS response. All infection control training will be in compliance with OSHA Regulation 29 CFR, Part 1910.1030. All department employees will continue to receive annual refresher training, via Vector Solutions, on infectious disease exposure control.

The department will continue to develop and present Infection Control training to employees of the department, annually.
References

SOP 504.10 Infection Control

Infection Control Training Video – Vector Solutions (available on-site)
The agency's **occupational health and safety training program** instruct the workforce in general safe work practices, from point of initial employment through each job assignment and/or whenever new substances, processes, procedures or equipment are introduced. It provides instructions on operations and hazards specific to the agency.

**Description**

The department conducts training and information sharing when new devices, substances, processes, procedures, or equipment is purchased or implemented into operations. This is relevant to EMS, fire suppression, technical rescue, and hazardous material responses.

The department schedules training, assigns, reviews or send electronic messages when new devices, substances, processes, procedures or equipment is implemented. New or revised SOPS’s follow an algorithm so that all members have an opportunity to comment on the procedure. Every step of the process is tracked and recorded. When new equipment is implemented, the training division or employees deemed subject matter experts provide department wide training. The Training or EMS Divisions are typically the providers of product, procedure and supply implementation or changes.

**Appraisal**

The department’s focus on creating a safe work environment and workforce has been prioritized and incorporated into daily practices. The deployment model of the health and safety program has been sufficient in providing training to the vast majority of employees. However, the department recognizes there is a portion of employees that miss training for various reasons. The training that the program provides is on-duty and has been interrupted by the demand on emergency services. Due to various types of leave, some employees may miss training. Make-up training dates for employees who were absent has not always been prioritized, leaving a void for those employees regarding new products, supplies, or safety practices.

**Plan**

The department will continue to prioritize health and safety training throughout daily operations and designated training activities. To be responsive to the necessity of timeliness,
the department will continue to be agile when scheduling introductory training on new equipment or supplies. Training is typically scheduled on concurrent days so that products, equipment, and supplies can be placed in service as soon as possible after training is complete.

References

Infection Control Training Completion List – Vector Solutions

SOP 500.01 Health and Safety Management Program

Administrative Division SOP Dashboard (Screenshot)
11A.6 The agency uses near miss-reporting to elevate the level of situational awareness in an effort to teach and share lessons learned from events that, could have resulted in a fatality, injury, or property damage.

Description

The department’s SOP 108.70 Near Miss Reporting gives employees a way to report near-miss incidents that is voluntary, confidential, non-punitive and secure. The near-miss program is to help prevent injuries and save the lives of other firefighters by collecting, sharing, and analyzing near-miss experiences.

Appraisal

This reporting mechanism has typically been underutilized by department employees. When reports are made through the near miss reporting system, the report or findings are not elevated to members of the command staff or the health and safety committee.

Plan

The health and safety committee will work to increase use and education on the reporting mechanisms. The committee will work with the Training Division to develop the training on safety-related reporting mechanisms.

References

SOP 108.70 Near Miss Reporting
11A.7 The agency has a process in place to investigate and document accidents, injuries, legal actions, etc., to determine root cause. The agency’s information management system supports this process.

Description

The investigation of accidents occurs on an as-needed basis, depending on several factors, including the severity of damage and circumstances surrounding the accident.

Currently, there is not a formal department SOP that identifies an outline of what prompts further investigation by the health and safety committee.

Department officers are assigned to investigate accidents including on-duty injuries. In the event that there is a motor vehicle accident or property damage occurs involving a City of Lawrence vehicle, regardless of the severity or location, the employee’s department and the Office of Risk Management must be contacted and allowed to respond to the accident scene for investigation. All traffic violations and/or citations are the personal responsibility of the employee operator.

Appraisal

The lack of established parameters for the investigation into accidents and injuries has resulted in inconsistent and ineffective reporting/review. The department’s lack of procedure has impacted the standardization of the reporting and investigation process.

Plan

By Fall of 2023, the health and safety committee will create a template to perform investigations in a more formal manner than what is currently in place. Creation of an SOP will be considered and evaluated in conjunction with the investigation template.

References

SOP 501.10 Injury and Exposure Reporting
SOP 108.70 Near Miss Reporting
11A.8 The agency incorporates risk management practices to increase the level of decision making and the ability to identify unsafe conditions and practices during emergency operations.

**Description**

The department does not currently incorporate effective risk management practice review into daily operations to impact decision making. Decision making in the work environment and during operations is supported through the department’s policies and procedures. Formal training on general risk management practices and routine follow-up does not occur. Currently, the health and safety committee reviews department employee injuries in efforts to correct actions or mitigate repetitive injuries if occurring often.

**Appraisal**

The incorporation of risk management practice and review has not been successful. Connectivity between the health and safety committee and department initiatives has been lacking. Lack of general risk management practices and routine follow-up has led to routine injuries and accidents. The department has done a poor job communicating trends in unsafe practices to employees.

**Plan**

The department’s health and safety committee and command staff will create an enhanced communication process to create visibility and greater awareness of department risks, trends, and safety recommendations. The health and safety committee will increase communication to the department on unsafe practice trends that have led to accidents and injuries.

By Spring of 2023, the Near Miss Reporting System will become a part of the health and safety committee’s recommendations to the Training Division for added training on the program.

**References**
SOP 501.10 Injury and Exposure Reporting
SOP 108.70 Near Miss Reporting
11A.9 The agency has adopted a comprehensive program to address direct- and cross-contamination of clothing, personal protective equipment, other equipment, apparatus and fixed facilities.

**Description**

The department’s intention is to protect the health and wellness of its’ employees. A major component to this initiative is to create a clean work environment as well as provide sufficient PPE and clothing for each employee. Efforts and procedures to prevent cancer are found in SOP 206.40 Cancer Reduction Program. The SOP outlines enhanced on-scene decontamination procedures prior to leaving emergency scenes, as well as operational hygiene preventing contaminated clothing, PPE and equipment to enter the cab of apparatus, as well as the interior rooms of fire stations. After each exposure, all employees are to decontaminate appropriately per SOP 206.40 Cancer Reduction Program and NFPA guidelines, launder clothing, change into clean apparel and clean and decontaminate gear and equipment.

**Appraisal**

The department has used the ESO Fire Incident module to track exposures and contaminations, as well as decontamination procedures for each responder. The department has not utilized or reviewed the collected data due to the limited time of available employees in the Administrative and EMS Divisions.

In July 2022, SOP 206.40 Cancer Reduction Program was implemented to minimize department employee's exposure to contaminants.

**Plan**

With the recent mid-year implementation of SOP 206.40 Cancer Reduction Program, the hope is to reduce exposure to such contaminants.

Through the budget request process, the department will continue to communicate the need for more resources within the Administrative and EMS Divisions.
References
SOP 206.40 Cancer Reduction Program
SOP 402.40 Structural PPE Cleaning
11A.10 The agency collects and maintains exposure records in accordance with local laws, regulations and/or current research.

**Description**

The department maintains records of all accidents, occupational injuries, deaths, illnesses, and exposures in accordance with the facility safety section of NFPA 1500, Standard on Fire Department Occupational Safety and Health Program. Records are kept electronically in a safe and secure manner with simple retrieval methods if records are needed.

All injuries on duty are covered by workers' compensation and provisions outlined in SOP 501.13 Workers Compensation. When an exposure occurs, the Employee Infectious Disease Exposure Report or the Employee Chemical Exposure Report are completed and submitted through the chain-of-command.

**Appraisal**

When an exposure has occurred, the appropriate documentation has been completed within 24 hours. The current process has been sufficient for standardized record keeping.

**Plan**

The department will continue with its’ current practice as there does not seem to be any deficits in the timeliness of record submission.

**References**

SOP 501.10 Injury and Exposure Reporting

SOP 501.13 Workers Compensation
The agency has established procedures to ensure effective and qualified deployment of an Incident Safety Officer to all risk events.

**Description**

The department uses SOP 502.11 Incident Safety Officer to provide guidelines for establishing an incident safety officer and defining the scope of operation of the safety officer. The role of an incident safety officer is to assist the incident commander (IC) in maintaining and ensuring the safe operations at incidents and training exercises.

The IC is the incident safety officer until assigned to another employee on scene. The safety officer is typically the second operations chief officer that arrives on scene once command has been established.

**Appraisal**

The department identified a deficiency in fulfilling the incident safety officer position with one operation chief officers. In 2020, the department was approved to increase the on-duty operations chief officer count to two. This created depth in the daily staffing to support command and incident safety officer functions. The department has had success in this expansion and implementation in operations.

**Plan**

The department will continue to follow SOP 502.11 Incident Safety Officer.

**References**

- SOP 502.11 Incident Safety Officer
- 2018 Operations Chief Officer Reliability
- 2020 Fire Medical Budget Transmittal Memo (page 3)
The agency establishes and consistently follows procedures for maintaining accountability of all personnel operating at all risk events.

**Description**

The department uses SOP 206.20 Accountability to provide a system to account for all companies/firefighters at an incident, to enhance safety, and to provide the IC or Incident Management Team (IMT) a means to track and account for all members working in the hazard zone.

Accountability is tracked using several methods by the department. As an employee adds him/herself to units they are assigned to, they will change their helmet shield identifier and add their name tag to the apparatus passport system. While operating at incidents it’s the responsibility of the company officer to keep accountability of their crew. The department also utilizes the SCOTT Connect Monitor which gives the incident commander the ability to monitor breathing air levels and PASS devices.

**Appraisal**

The use of SOP 206.20 Accountability has been implemented but is not completely followed by department officers. Company passports are updated at the beginning of each shift; however, they are not regularly utilized during emergency scene operations. The department has utilized the status boards and collection of company passports during large-scale events. When the passports have been utilized on large scale events, they have proven to be an effective resource for personnel management and accountability.

The department's use of the SCOTT Connect Monitor and PASS devices has been an effective component of personnel accountability.

**Plan**

The department will continue to follow SOP 206.20 Accountability and review/implement changes as necessary.
References

SOP 206.20 Accountability

SOP 500.01 Health and Safety Management Program
Criterion 11B: Wellness/Fitness Programs

The agency has a wellness/fitness program for personnel. The agency specifies and communicates the provisions if employees/members do not comply with the wellness/fitness program.

Summary:
The City of Lawrence and the department prioritize employee wellness and fitness. The city’s wellness program is named BeHealthy and is conducted through Lawrence Memorial Health Hospital. The department’s health and safety committee and peer support team support and leads internal initiatives related to wellness.

Each fire medical station has designated physical fitness facilities and a complement of various equipment.

The City of Lawrence has an employee assistance program (EAP) that is funded and managed by the city. In addition to the EAP, the department also supports a peer support program/committee that is led and managed by department employees.
Performance Indicators:

CC 11B.1 The agency provides for initial, regular, and rehabilitative medical, and fitness evaluations.

Description
The department utilizes Lawrence Memorial Health Business Health for medical and fitness evaluations. The department’s Administrative Division assists in facilitating scheduling and payments for the evaluations.

The department requires each new employee to obtain a ‘Fit for Duty’ pre-employment physical prior to being offered a full-time position. In addition, current employees have an annual physical with lab work. Employees who are injured while on duty will receive workers’ compensation benefits including physical therapy, if deemed appropriate by a physician.

The department abides by Section 10.5 Physical Evaluation in the IAFF Local 1596 MOU.

Appraisal
The department’s annual physical evaluation program has worked well. The department’s use of medical and physical evaluations has been beneficial in maintaining and supporting member health. However, the department has experienced a lack of accountability in the completion of the mandatory annual physicals.

Scheduling is cumbersome and inefficient. Working with department employees and Lawrence Memorial Health Business Health to schedule medical and physical evaluations can be difficult given the limited availability of available evaluation time slots. Lawrence Memorial Health Business Health has been the provider of evaluations, as directed by city risk management.

Plan
Continued discussions within the health and safety committee and command staff meeting will be had in efforts to solidify a plan moving forward to enhance the screenings, testing and participation requirements.

**References**

NFPA 1582: Standard on Comprehensive Occupational Medical Program for Fire Departments (available on-site)

IAFF Local 1596 MOU – Section 10.5 (page 40)
11B.2 The agency provides personnel with access to fitness facilities and equipment.

Description
Each fire medical station has designated physical fitness facilities and a complement of various equipment. This equipment includes cardiovascular equipment (treadmills, ellipticals, stationary bikes), free weights, weight machines, and stretching equipment.

Employees have access to department physical fitness facilities regardless of on-duty status.

Appraisal
The physical fitness facilities have been sufficient for employees to participate in physical training (P.T.) while on duty or off.

Plan
The department will continue to support the physical fitness program and provide adequate space for employees to conduct P.T. during operational shifts.

References
SOP 503.10 Physical Fitness Program (PFP)
Station Tour (available on-site)
11B.3 The agency makes available wellness/fitness training to all employees/members.

**Description**

The department uses SOP 503.10 Physical Fitness Program (PFP) to guide employees in maintaining an acceptable level of physical fitness. The department recognizes that the state of being physically fit is more important than the precise program followed to attain fitness. Therefore, the department mandates that employees perform 60 minutes of physical exercise each day, however, it is up to individual employees to determine the activities they participate in.

The city provides employees access to Lawrence Memorial Health WellCare services. These services include an online portal to track healthy activity and provide wellness training on a variety of topics. This is free to use and strongly encouraged by the city. Active participation in the Wellness Program is incentivized through an additional Health Reimbursement Arrangement contribution from the city.

**Appraisal**

The station's physical training (P.T.) areas have been equipped with modern fitness equipment and provide ample space to accommodate various P.T. activities.

**Plan**

The department will continue to require a minimum of 60 minutes of P.T. during each shift. The department will continue to support employee participation in the city’s Wellness Program.

**References**

SOP 503.10 Physical Fitness Program (PFP)

2022 Fitness Club Form

BeHealthy City of Lawrence Incentive Program Guide
11B.4 The agency provides an employee/member assistance program with timely access to critical incident stress debriefing, peer support and counseling, and other behavioral health resources.

Description

The City of Lawrence has an employee assistance program (EAP) that is funded and managed by the city. In addition to the EAP, the department also supports a peer support program/committee that is led and managed by department employees. The city’s BeHealthy initiative through the Wellness Program is available for all city employees.

Appraisal

The city’s EAP in addition to the department’s peer support team’s work has sufficiently addressed department needs related to critical incident stress debriefing, peer support and counseling, and other behavioral health requirements.

Since the inception of the department’s peer support team, employees have received frequent critical incident stress debriefings at the company level following psychologically traumatic incidents. Although participation is voluntary, employee participation has been high. The peer support team has been activated at the request of chief officers, company officers, or individual employees.

The GuardiaNet mobile application, powered by Lexipol, is an application that gives 24/7/365 access to mental wellness providers, on demand access to firefighter wellness tools, and a "help" button for employees in immediate crisis. The application was brought forward by the Douglas County Chaplain approximately 4 years ago. The chaplain left the Sheriff’s Office and the mobile application is no longer maintained, nor available to first responders. In the recent past, the division chief of EMS was able to discover more information about what it would take to get access to the application again. Access was restored to the employees in early 2022. In mid 2022, there was an announcement that the GuardiaNet application would no longer be supported/paid for by the Douglas County Sheriff’s Office. Another mental wellness application is being evaluated in November of 2022.
Plan
The Douglas County Sheriff has recently decided to cancel the GuardianNet Mobile App which leaves the department with questions as to how the department’s peer support will be supported with resources. In the meantime, a new mobile app is being discussed with a different vendor at a no-cost to very low-cost price point. Further discussions will be had in the Fall of 2022 with the department’s peer support committee, County Chaplain group and other first responder entities to be able to continue this very valuable resource.

The department will continue to support the peer support team’s efforts in addressing employee health and wellness needs.

References
BeHealthy City of Lawrence Incentive Program Guide
BeHealthy City of Lawrence Presentation
11B.5 The agency provides for cancer and behavioral health screenings and a cardiac assessment.

Description
The department offers annual medical physicals, including lab work in accordance with NFPA 1582. During the contingent job offer phase of initial employment, the department requires each potential employee to be evaluated psychologically by an outside vendor.

Appraisal
The department has identified its current cancer and behavioral health screenings and cardiac assessments as adequate. However, the opportunity to enhance the screenings and assessments has the potential to positively impact health and safety initiatives within the department.

Plan
The department’s command staff will continue discussions with the health and safety committee to establish a plan moving forward that addresses additional cancer and behavioral health screenings, testing, and participation requirements.

Regarding further screenings, such as cancer-related scans or assessments, the department has recently been investigating enhanced methods and vendors to increase services for the greater good of the department members. Continued research and vendor demonstrations are ongoing. Monetary value is placed on each scan, assessment, lab, and procedure and will need to be considered when planning for budgeting these assessments.

References
NFPA 1582: Standard on Comprehensive Occupational Medical Program for Fire Departments (available on-site)
CC 11B.6 A formal and documented appraisal is conducted, at least annually, to determine the effectiveness of the wellness/fitness programs and its impact on meeting the agency's goals and objectives.

Description
The department conducts a formal and documented program appraisal annually that summarizes the program’s impacts, outcomes, and effectiveness in the prior year. New goals are outlined in the upcoming year within this document.

Appraisal
The department’s assigned program manager and supportive staff have been able to complete an annual program appraisal. These appraisals are provided to the AHJ for review, as well as posted on the department’s external/internal website for employee review as part of the Annual Compliance Report.

Plan
The department will continue to utilize these appraisals to improve performance within the program as well as develop more efficient operational procedures based on the prior year’s performance.

References
2021 Health and Safety Program Appraisal