



HEMPFIELD FIRE DEPARTMENT – OPERATIONS

300.1 – FIREFIGHTER REHABILITATION

ISSUED:

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REVISED:

PURPOSE:

The purpose of this procedure is to provide a framework for the establishment and operation of a Rehab Group to support the physiological needs of firefighters and other responders engaged in emergency operations, extended duration incidents, and training exercises.

The primary purpose of rehabilitation is to restore or bring to a condition of health or useful and constructive activity. According to FEMA, “Any activity / incident that is large in size, long in duration, and /or labor intensive will rapidly deplete the energy and strength of personnel and therefore merits consideration for a Rehabilitation Division (REHAB) as part of ICS”

SCOPE:

This standard operating policy shall apply to all Hempfield Fire Department officers and firefighters. This procedure identifies situations where the establishment of a Rehab Group is appropriate. The Rehab Group provides firefighters and other emergency responders with fluids and food, shelter from the elements, and a medical evaluation to assure that the responder is ready to return to work in a safe and managed manner.

ENFORCEMENT:

The Fire Chief and all Hempfield Fire Department Officers are ultimately responsible for ensuring the safety of firefighters in Hempfield Township. In order to ensure the safety of all parties PPE must be used any time firefighting, rescue or hazardous materials response is warranted with the only exceptions being incidents involving a water rescue or brush fire.

GENERAL:

Firefighting and tasks associated with firefighting are among the most physiologically taxing activities that can be performed by humans. During the course of their work, firefighters are exposed to physiological stresses in the form of strenuous physical work. This work is most often performed within the confines of heavy structural firefighting personal protective clothing which further stresses the firefighter. The work is time-sensitive and often is performed under the psychological stressors of danger to the firefighter and others, the desire to do a good job, and the desire on the part of the firefighter to make an individual contribution to the work effort.

Proper implementation of this policy will ensure that members who may be suffering the effects of metabolic heat buildup, dehydration, physical exertion, and/or extreme weather (hot or cold) receive evaluation and rehabilitation during emergency and nonemergency operations.

Most heat and cold emergencies and injuries have potential to be preventable. Rehab assists the Incident Commander (IC) with monitoring the health of firefighters and controlling the work/rest cycle to prevent environmental injuries.

The Rehab Group may be staffed by fire company personnel, emergency management services (EMS) responders, or responders specifically tasked with this function.

This procedure shall be implemented at all working fires, greater alarm emergencies or during extended operations. The Rehab Group is usually implemented during hot or cold environmental temperature extremes but may be used at any time at the direction of the IC. The situations that generally produce the need for the Rehab Group include, but are not limited to,

- greater alarm structural fire operations;
- wildland operations;
- hazardous materials incidents;
- trench rescue;
- confined space rescue;
- training exercises or special events; and
- any other situation deemed necessary by the IC.

The responsibility for the establishment of a Rehab Group rests with the Incident Commander. Other Command system positions, such as the Safety Officer, may assist the Incident Commander with recognition of the need for Rehab.

It is the policy of the Hempfield Fire Department that no member will be permitted to continue emergency operations beyond safe levels of physiological, medical, or mental endurance. The intent of the Rehab Group is to lessen the risk of injury that may result from extended field operations under adverse conditions.

PROCEDURE:

1. ESTABLISHING THE REHAB DIVISION

A designated Rehab Area, remote from the fire or emergency incident, will be established at the discretion of the Incident Command with consult from the EMS commander. If the Incident Commander determines that Rehab is necessary, a commander will be assigned to manage the Rehab Division under the Incident Commander. REHAB shall report directly to the Incident Commander unless otherwise directed. Designated support staff shall be responsible for staffing the REHAB Division until released by Incident Commander.

The Incident Commander should take in account the weather, availability natural shelter, complexity of tasks being performed, and increased physical and mental stress when determining whether to initiate Rehab. Appendix A provides guidance for Rehab during heat incidents and training. Appendix B provides guidance for cold weather considerations.

2. LOCATING THE REHAB DIVISION:

It is crucial for an Incident Commander to establish the REHAB Division away from any environmental hazards, or by-products of the fire, such as smoke, gases or fumes. The area should be readily accessible to EMS personnel and their equipment, in the event that emergency transport is required. Misting/cooling systems, SCBA refilling, and canteen service should be stationed in or around this area as well. During large-scale incidents, like multi-alarm fires, Incident Commander should consider establishing multiple Rehab Groups as required.

During incidents requiring the establishment of a REHAB Division, consideration should be given to the location of the REHAB area. When possible, the REHAB area should be located within reasonable walking distance to the incident, but out of the way of any harmful byproducts of the incident. Consideration should also be given to locating additional services needed at large incidents within the same area as long as there is free unimpeded access to the rehabilitation area.

3. CRITERIA FOR REPORTING TO REHAB

Personnel should perform self-rehab procedures as follows:

- following the use of one SCBA cylinder;
- after 20 minutes of intense physical labor; and
- other times as necessary.

Personnel must report to the Rehab Group as follows:

- following the use of two 30-minute SCBA cylinders or one 45- or 60-minute cylinder
- after 40 minutes of intense physical labor
- after performing duties in hazardous materials encapsulating suits;
- when directed by an officer to do so; and
- when feeling the need to do so.

4. REHABILITATION PROCEDURES

Firefighters entering Rehab for the first time should rest for a minimum of 20 minutes and drink at least 16 ounces of water or oral electrolyte solution.

Rehab efforts should include the following:

- Relief from Climatic Conditions
- Rest and Recovery
- Active and/or Passive cooling or warming as necessitated by climatic conditions
- Rehydration (fluid replacement)
- Medical monitoring
- Firefighter Accountability
- Release

Emergency Medical Services (EMS) shall be available as part of the Rehab Group to medically monitor and provide treatment to firefighters. Basic Life Support (BLS) shall be the minimum level of care provided. EMS personnel shall evaluate firefighters as they arrive at rehab for signs/symptoms suggestive of health concerns. Symptomatic firefighters, or those with abnormal findings, shall receive continued medical monitoring and be held in the Rehab Area until released by EMS personnel.

Any firefighter treated for heat related illness should be removed from active duty at that incident. EMS personnel should assess each firefighter prior to being released from the Rehab area. EMS shall make the decision on whether a firefighter needs transported for further medical evaluation at an Emergency Department. If deemed necessary that firefighter will be transported to an appropriate facility as per State Protocol. EMS has final determination of the disposition of all personnel going through the rehab process.

Any firefighter who refuses transportation to the Emergency Department as per the recommendation of EMS and has been removed from active operations will be required to receive clearance to return to duty from a medical physician, at their own expense. The clearance to return to duty must state that the physician understands the hazards and physical stressors of firefighting and that the physician releases the firefighter to return to this duty of work.

5. DOCUMENTATION

All firefighters entering the Rehab will be logged on the Emergency Incident Rehab Accountability Form. The Form will note the time the responder entered rehab, vitals of the firefighter, and whether the firefighter was released from Rehab, or transported to local ED for further evaluation.

The EMS commander will notify the Incident Commander if any firefighter is transported to an Emergency Department for further evaluation or treatment.

All Rehabilitation Logs will be turned over to the Incident Commander at the end of the incident or when the Rehab Area is released.