

MEMPHIS FIRE DEPARTMENT

STANDARD OPERATING GUIDELINES (SOG)

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REVISION HISTORY

Version Control			
Version	Date	Reason for Change	Author
1.0	05/08/2008	Conversion from SOP to SOG with complete review	Doug Pratt, Tim Franz
2.0	11/19/2009	Added SOG's for Attendance, Discipline and Job Classification Qualifications	Doug Pratt, Tim Franz
3.0	12/4/2009	Revisions based on December business meeting	Doug Pratt
4.0	2/18/2010	Implemented proposed changes in Version 3	Doug Pratt
5.0	5/12/2011	Added Funeral SOG. Revised Employee Attendance SOG	Doug Pratt
6.0	10/14/11	Revised Incident Response SOG to change E2 to W1. Revised Emergency Vehicle Response SOG to change vehicle response guidelines. Revised Hazardous Weather Vehicle Deployment SOG to change E2 to W1. Revised Mutual Aid Received From Other Departments SOG to add MABAS system. Revised Tornado Siren Activation SOG to add Riley Twp. siren and new activation procedure.	Doug Pratt
7.0	12/3/14	Added SOG for daytime mutual aid with Emmett FD	Doug Pratt
8.0	4/8/15	Revised Tornado Siren Activation, Tornado Alerts and Hazardous Weather Vehicle Deployment SOG's to reflect current policies, vehicles and vehicle deployment locations.	Doug Pratt
9.0	6/3/15	Updated Base Radio Operation SOG	Doug Pratt
10.0	8/10/15	Added SOG for Polaris Ranger operation	Doug Pratt
11.0	12/14/15	Added SOG's Rescue 2 Take Home and NARCAN	Doug Pratt
12.0	1/27/16	Updated Operation of Polaris Ranger Grass Unit SOG to include use of trailer	Doug Pratt
13.0	3/2/16	Updated Emergency Vehicle Response SOG	Doug Pratt
14.0	5/4/16	Updated Personal Vehicle Operations and Job Classification Qualifications SOG's	Doug Pratt

15.0	6/1/16	Updated Alcohol and Substance Abuse SOG	Doug Pratt
16.0	9/7/16	Added new SOG's for Privacy of Patient Information and Structure Fires	Doug Pratt
17.0	2/1/17	Added new SOG's for General Information, Department Membership, Job Classifications and Qualifications, Department Officers and Grievance Procedure. These SOG's are intended to replace information that was previously in the Employee Handbook. The Employee Handbook is now discontinued.	Doug Pratt
18.0	12/7/17	Revised Department Officers SOG to reflect new dates for appointments. Added SOG for Blood Glucose Testing. Changes approved at 12/6/17 department meeting.	Doug Pratt
19.0	4/18/19	Added SOG for LUCAS Device	Doug Pratt
20.0	8/7/19	Added SOG for On-Call policy	Doug Pratt
21.0	11/7/19	Revised Incident Response SOG to change responder numbers. Revised Emergency Scene Evacuation SOG to change EMERGENCY to MAYDAY. Revised Hazardous Weather Vehicle Deployment SOG to remove specific vehicle deployment locations. Added Medical Control Authority Protocols SOG. Added On The Job Injury Procedures SOG.	Doug Pratt
22.0	9/3/20	Added SOG for Part Time Shift Work	Doug Pratt
23.0	11/4/20	Added SOG's for Respiratory Protection Program, Disinfection and Decontamination and COVID 19 Exposure Procedure	Doug Pratt
24.0	1/6/21	Added SOG's for COVID Response Plan and Exposure Control Plan	Doug Pratt
25.0	2/5/2021	Added SOG for Hazard Communication Program	Doug Pratt

SOG TABLE OF CONTENTS

Revision History	2
SOG Table of Contents	4
General Information	6
Department Membership	7
Job Classifications and Qualifications	11
Department Officers	13
Grievance Procedure.....	14
Right To Know.....	15
Sexual Harassment	16
Alcohol And Substance Abuse.....	18
Borrowing Department Equipment	19
Media Information Release	20
Incident Response.....	21
Base Radio Operation	22
Priority Communications	23
Emergency Scene Evacuations	24
Incident Command System.....	25
Emergency Vehicle Response	26
Emergency Vehicle Safety.....	27
Personal Vehicle Operations.....	31
Hazardous Weather Vehicle Deployment.....	32
General Safety Precautions	33
Electrical Equipment Safety	34
Natural Gas and Propane Equipment Safety.....	35
Safety Belt Usage.....	36
Turnout Gear.....	37
Personal Protective Equipment.....	38
Self Contained Breathing Apparatus (SCBA)	39
Medical Protective Gear	40
Infectious Disease Exposure.....	41
Infectious Disease Decontamination	42
Hazardous Material Incidents.....	43
Medical Standbys	44
Mutual Aid Given To Other Departments.....	45

Mutual Aid Received From Other Departments	46
Thunderstorm Alerts	47
Tornado Alerts.....	48
Tornado Siren Activation.....	49
Fire Ground Rehabilitation	50
Employee Attendance.....	54
Discipline and Enforcement	55
Funeral Guidelines	57
Daytime Mutual Aid With Emmett FD	58
Operation of Polaris Ranger Grass Unit	59
Rescue 2 Take Home Guidelines.....	61
NARCAN Guidelines.....	62
Privacy Of Patient Information	63
Structure Fires.....	64
Blood Glucose Testing.....	66
lucas device	68
On-Call Policy.....	69
Medical Control Authority Protocols:	70
On The Job Injury Procedure:	71
Part Time Shift Work:.....	72
Respiratory Protection Program:	73
Disinfection and Decontamination:	85
COVID 19 Exposure Procedure:	88
COVID 19 Response Plan	89
Exposure Control Plan.....	90
Hazard Communication Program	94

GENERAL INFORMATION

ORGANIZATION NAME

The name of the organization covered by these SOG's is "The Memphis Fire Department".

MISSION STATEMENT

The mission of the organization shall be; The Memphis Fire Department is committed to the preservation and protection of life, property and environment from the adverse effects of fire, medical and hazardous conditions through training, progressive education and diligence to provide the highest level of service and cooperation to our community, the joy of companionship, the discipline of service and at all times have the community and this organization at heart.

GENDER STATEMENT

These SOG's are not gender specific. Where a gender term is used, the opposite term can be substituted as appropriate.

DOCUMENT REVISIONS

Any revisions to these SOG's may be approved after two (2) readings of the proposed revision at two (2) separate regular or special meetings of the organization. After the second reading, the revision may be amended by a two-thirds vote of the membership present at any regular meeting or special meeting convened after all members have been provided advance notification.

BUSINESS MEETINGS

The meetings of the organization shall be held once a month on dates determined in advance by the organization. Special meetings may be convened after notification is sent to all members of the organization. It shall be the duty of the officers of the organization to preside at all meetings of this department. Meeting minutes shall be recorded by one of the officers or other designated member.

DEPARTMENT MEMBERSHIP

BASE QUALIFICATIONS

The base qualifications for membership in The Memphis Fire Department shall be:

- At least 18 years of age
- Mentally and physically able to perform the duties of the department
- Be in agreement with the mission of the department.
- Exhibit a willingness to work toward the accomplishment of these qualifications.

APPLICATION FOR MEMBERSHIP

Application for membership to The Memphis Fire Department shall be made upon an application form furnished by the department. Upon application, the prospective member will be interviewed by members of the officer board. If the applicant is chosen for membership, he/she will be requested to fill out required employment paperwork for the City of Memphis and complete a physical from a source determined by the department. This physical will be paid for by The Memphis Fire Department. A background check of the applicant will also be performed by the department. Once the required paperwork, physical and background check are completed, the applicant will be presented as a new member to the department at the next regularly scheduled business meeting. The new member will be placed into the apprentice classification of membership.

RESIGNATION FROM MEMBERSHIP

Any member wishing to resign from membership from The Memphis Fire Department shall do so in writing to the Fire Chief.

RETURNING TO MEMBERSHIP

Any member, who has lost their membership or has previously resigned from the department and desires to return to the department may reapply for membership in accordance with the section "APPLICATION FOR MEMBERSHIP".

MEMBERSHIP VACANCIES

When vacancies in the membership of The Memphis Fire Department occur, the officers of the department shall determine how many of the vacancies shall be filled.

RESIDENCY REQUIREMENTS

If any active member should move outside the service area of the department and wish to remain an active member of the department they must notify the Fire Chief in writing no more than 30 days from vacancy of the service area stating their change of residency and future intent. Each case shall be reviewed by the officer staff and a department membership classification recommendation presented to the Fire Chief. It shall be the duty of the Fire Chief to notify the member in writing of their classification or change in membership status.

MEMBER PARTICIPATION

Active members and Apprentice members are expected to participate in all department meetings, trainings, special events and emergency incidents. Minimum participation levels are defined in the Employee Attendance SOG.

MEMBERSHIP CLASSIFICATIONS

Membership in The Memphis Fire Department shall be of the following classes:

- Active Regular and Apprentice
- Associate-Medical
- Associate-Reserve
- Reserve
- Honorary Life
- Fire Marshal

CLASS 1 – ACTIVE REGULAR AND APPRENTICE

The Active Regular and Apprentice positions shall be for members of this fire department that are able to meet the requirements of this document as well as department Standard Operating Guidelines. (SOG) Members of this classification shall be reviewed on a regular basis by the Fire Officer staff for satisfactory performance and eligibility on a regular basis.

Regular

Active members shall have all the rights and privileges of membership. All active members are eligible for all department compensation and shall be required to pay dues, which shall be established by the organization.

Apprentice

An apprentice shall be a person who has applied for Active membership within the Memphis Fire Department, upon interview and recommendation of the Fire Officers, said person may be hired by the Fire Chief. The applicant(s) shall be installed as an apprentice after meeting the Apprentice qualifications, and placed on a probationary period for up to two years. During this period an apprentice shall have no voting privileges in fire department functions. Upon expiration of the probationary period, the apprentice shall become an active member at the next regularly scheduled business meeting and upon successfully completing the training requirements for Level I Firefighter and has received a favorable final review from the officer board. All apprentices will be required to pay dues.

CLASS 2 – ASSOCIATE-RESERVE

This classification is meant to retain members that are not able to meet active membership requirements for a period of time. This classification of membership shall be monitored and reviewed by the Fire Officer staff for satisfactory performance and eligibility on a regular basis. This classification of membership shall not retain active membership positions above those members or prospective members able to meet active membership qualifications.

Associate Reserve members shall have all rights, privileges, and requirements, of Active members except to command scenes, receive department funded external training, or hold office. Associate reserve members are eligible for all department compensation and shall be required to pay dues, which shall be established by the department. Associate reserve members shall have completed the apprentice membership with this department prior to application. Acceptance of the application will be as that of an Active member.

CLASS 3 – ASSOCIATE MEDICAL

The Associate Medical position shall be for members of this fire department that wish to respond to medical emergencies or medical responder functions of an incident such as but not limited to the following: Medical Emergencies, Motor Vehicle Accidents, Structure Fires, Public Assist.

Associate – Medical members shall have all rights, privileges, and requirements, of Active members except to command scenes, or hold office. Associate - Medical members are eligible for all department compensation and shall be required to pay dues, which shall be established by the department. Associate - Medical members shall have completed the apprentice membership with this department. Acceptance of the application will be as that of an Active member.

CLASS 4 – HONORARY LIFE

The Honorary Life position shall be for members of this fire department that have reached requirements for retirement from this fire department and wish to remain involved with the membership and the workings of this fire department.

Honorary Life members shall consist of person or persons retired from active membership of this fire department and said members shall be automatically placed as Honorary Life members upon retiring, as outlined in this document. Honorary Life members shall have all rights and privileges of Active members except to command scenes, vote, hold office, or drive department vehicles in emergency response, or respond emergency status, unless requested by the officer in charge. Appropriate experience or training is required. This position does not receive any departmental compensation.

CLASS 5 – RESERVE

Reserve members shall consist of person or persons wishing to participate in fire department functions. Reserve members may participate in select department training events with prior officer approval. This Reserve class is for social participation only. Reserve members shall not respond to emergency incidents.

This position does not receive any department compensation.

CLASS 6 – FIRE MARSHAL

The position of Fire Marshal shall be an administrative position. The holder(s) of this position shall have the option of applying to the department to also hold a position of a different class (Class 1 – 5). This position will be compensated per the fee schedule adopted by the City of Memphis. Continuing Education credits required to maintain this position will be paid for by the Memphis Fire Department. A person holding this position shall have successfully passed a minimum of Fire Inspector 1 and Plans and Review classes. A person holding this position shall also be familiar with the International Fire Code or any other code adopted by the municipalities served by the Memphis Fire Department.

DEPARTMENT POSITIONS

The following department positions shall have associated minimum qualifications which are referenced under the department SOG “Job Classification Qualifications”. The positions are:

- Apprentice
- Level I Firefighter
- Level II Firefighter
- Level III Firefighter
- Senior Firefighter
- Medical Responder Level I
- Medical Responder Level II
- Lieutenant (I / II)
- Captain
- Assistant Chief (I / II)
- Fire Chief
- Retired

JOB CLASSIFICATIONS AND QUALIFICATIONS

The following department positions shall have associated minimum qualifications as referenced below. These qualifications shall be considered for members wishing to apply for fire officer candidacy.

Apprentice

- Valid State of Michigan Drivers License without restrictions or limitations
- Acceptable State of Michigan LEIN background check.
- Passing Medical Physical Examination by Approved City of Memphis Physician.

Level I Firefighter (Apprentice to Level I Firefighter)

- State of Michigan FF Training Council Firefighter I certification
- State of Michigan FF Training Council Haz-Mat Awareness certification
- State of Michigan Medical First Responder License
- State of Michigan Firefighters Drivers Training certification
- Completion of Memphis Fire Department Mentor/Training Program
- National Incident Management System 100/200 Level certification

Level II Firefighter (Level I Firefighter to Level II Firefighter)

- State of Michigan FF Training Council Firefighter II certification
- State of Michigan FF Training Council Haz-Mat Operations certification
- National Incident Management System 700/800 Level certification

Level III Firefighter (Level II Firefighter to Level III Firefighter)

- State of Michigan Advanced Vehicle Extrication certification
- Firefighter Survival and RIT Technician certification
- Water and Ice Rescue Technician certification
- Farm/Agricultural Rescue certification
- State of Michigan Emergency Medical Technician or Higher License
- State of Michigan Fire Officer Level I
- National Incident Management System 300/400 Level certification

Senior Firefighter (Level I Firefighter to Senior Firefighter)

- 20 years Active Service with Memphis Fire Department
- Served as a Mentor for an Apprentice to Level I Firefighter

Medical Responder Level I

- State of Michigan Medical First Responder License
- Certified Emergency Vehicle Operators certification
- Completion of Memphis Fire Department Mentor/Training Program
- National Incident Management System 100/200 Level certification

Medical Responder Level II

24 Months active membership with Memphis Fire Department.
State of Michigan Emergency Medical Technician or Higher License
State of Michigan Firefighters Drivers Training certification
State of Michigan Vehicle Extrication certification
National Incident Management System 700/800 Level certification

Lieutenant II

Level I Firefighter

24 Months active membership with Memphis Fire Department.
Working knowledge of PC Applications including Microsoft Office (Word, Excel, Powerpoint)
Ability to manage Department Correspondence, Checking Fund Account, Audit Reviews.

Lieutenant I

Level I Firefighter

24 Months active membership with Memphis Fire Department.

Captain

Level II Firefighter

24 Months active membership with Memphis Fire Department.
12 Months active officer position in Lieutenant I/II role.

Assistant Fire Chief (I/II)

Level II Firefighter

60 Months active membership with Memphis Fire Department.
24 Months active officer position in Captain role.
State Certified Fire Officer I/II desirable.

Fire Chief

Level II Firefighter (Level III Firefighter desirable)

60 Months active membership with Memphis Fire Department (MFD).
24 Months active Assistant Fire Chief I or II role with Memphis Fire Department
State Certified Fire Officer I (Fire Officer II/III desirable)

Retired

Voluntary retirement after 20 years of service

Voluntary retirement at the age of 55 years

Mandatory retirement at the age of 70 years

NOTE: Equivalent training and experience may be considered in lieu of the requirements.

DEPARTMENT OFFICERS

OFFICER POSITIONS

The officers of The Memphis Fire Department shall be:

- Chief
- First Assistant Chief
- Second Assistant Chief
- Captain
- Lieutenant I
- Lieutenant II

OFFICER APPOINTMENTS

All officers of The Memphis Fire Department shall be selected from the membership of The Memphis Fire Department and shall be appointed to their position by the following process

Memphis Fire Administrative Board Appointment

The Fire Administrative Board shall consist of one Memphis City Council member and two retired Memphis Fire Department chiefs or retired fire department members. The Fire Administrative Board shall be appointed by the Memphis City Council bi-annually. The Fire Administrative Board shall preside over select officer appointments and fire department matters that may require city council representation.

The Fire Administrative Board shall preside over the fire officer application and interview period as well as the appointment of the Fire Chief and his 1st and 2nd Assistant Chiefs. Upon appointment of the Fire Chief, the newly appointed Fire Chief shall join the Fire Administrative Board for the interview and selection of the 1st and 2nd Assistant Chief positions. The Fire Chief and Assistant Chiefs shall interview and appoint the remaining officers.

Memphis Fire Officer Board Appointment

Personnel interested in applying for a fire officer position shall submit a letter of interest in regard to the position(s) they are interested in to the Fire Administrative Board prior to November 15th of odd numbered years.

The Memphis Fire Department officers shall be appointed to their position beginning on January 1st and ending on December 31st. The following timeline shall be utilized: The Fire Administrative Board shall recommend a candidate for Fire Chief prior to December 1st. The Assistant Fire Chiefs shall be selected prior to the end of the 2nd week of December. The Fire Chiefs and Assistants shall appoint the remaining officers prior to the end of December. All officer positions shall be presented for final review to the Memphis City Council at their first business meeting of January.

OFFICER VACANCIES

It shall be the duty of the Assistant Chiefs, in their order, to perform the duties of the Chief in his absence or inability to serve.

In the event an officer cannot complete a term of appointment, the vacancy shall be filled by appointment for the remainder of the current unexpired term within 30 days of vacancy. Appointments for such vacancies shall be filled using the procedure as outlined above.

GRIEVANCE PROCEDURE

Progressive Steps:

Members shall utilize this SOG to address departmental issues and concerns. These issues may involve other members, including officers, violations of rules, regulations, department policy, standard operating guidelines, or others that the member shall encounter. The grievance procedure shall be a progressive system and follow the successive steps up to the final resolution.

The progressive steps of the procedure are as follows:

1. Present the issue verbally to the Chief for resolution. If the Chief is involved in the complaint, direct the issue to one of the assistant chiefs.
2. Present the issue in writing to the Chief for resolution. If the Chief is involved in the complaint, direct the issue to one of the assistant chiefs.
3. Present the issue in writing to any Officer for resolution at the next regular officer's meeting.
4. Present the issue in writing to the City Council Fire Committee.

Serious In Nature Offense:

The Fire Chief shall immediately notify the Assistant Chiefs, Mayor, and/or City Council's Fire Committee of any offense deemed serious in nature or which may have civil or legal implications.

RIGHT TO KNOW

The Memphis Fire Department maintains information on the hazardous materials within its jurisdiction to the best of its ability. This information is available to all members in the office of the Department.

Additional information that is required should be brought to the attention of the Chief or any other officer for immediate inclusion to the Right-To-Know materials.

SEXUAL HARASSMENT

PURPOSE

The purpose of this guideline is to prevent sexual harassment and other unwanted conduct in the working environment.

APPLICATION

This guideline is intended for Memphis Fire Department use only and is not intended to enlarge the members' civil rights in any way. The guideline shall not be construed as the creation of a higher legal standard of safety or care in the evidentiary sense with respect to third party claims insofar as the members legal duties as imposed by law. Non-compliance with this guideline constitutes a violation of the employment duty only, except in which cases of non-compliance is also a violation of laws of the State of Michigan. Therefore, violation of this guideline shall form the basis of the employer's disciplinary action with the Department. In the event of a violation of duties imposed by law, nothing herein shall be construed to relieve one from legal duty or from any action resulting from breach of the legal duty.

GENERAL GUIDELINE

It shall be the intent of the Memphis Volunteer Fire Department that as members you have the right to expect a working environment that is free of unwelcome sexual advances, requests for sexual favors, communication of a sexual nature, and other unwanted verbal or physical contact. The Memphis Volunteer Fire Department has adopted a Sexual Harassment and Unwanted Conduct Guideline.

This guideline shall be followed at all times. Specific activities which may constitute sexual harassment or unwanted conduct include, but are not limited to:

When such conduct or communication is made that expresses or implies conditions of obtaining employment.

When submission to or rejection of such conduct is used as a basis of or factor in decisions affecting the employment of any personnel.

When such conduct or communication has the purpose or effect of interfering with a members duty assignment or work performance or creating an intimidating, hostile or offensive environment.

PROCEDURE

An employee who believes he/she has been subjected to sexual harassment or unwanted conduct shall report the incident in writing, within ten (10) days after the alleged occurrence, to any officer of the Department, or member of the Memphis City Council.

A written complaint of sexual harassment or unwanted conduct shall be promptly investigated by the Officers of the Department, or by a designate of the complainant, provided, however, the designated investigator shall not be subject of or included within the immediate sexual harassment or unwanted conduct complaint. Every effort shall be made to handle all matters, with concern for the principles of due process and fairness. In order to protect both the person making the complaint and person(s) against whom the complaint is made, every reasonable effort will be made to handle all complaints in a confidential and discreet manner.

A meeting shall be held between the person(s) making the complaint and the Fire Chief, or highest ranking officer, as soon as possible, but no later than ten (10) days following the report of the alleged occurrence(s). Following this meeting, the member(s) against whom the complaint had been made shall be given full opportunity to respond to the allegations. The investigation conducted shall also include interviews, where appropriate, with other witnesses to the alleged occurrence(s). Following completion of the investigation, if it is determined that Sexual Harassment or Unwanted Conduct did, in fact, take place, immediate action, up to and including discharge, will be taken to remedy the situation and prevent any reoccurrence.

All members are expected to report any occurrence immediately to a command officer or senior member when witnessed in any area of the department.

Retaliatory action or conduct of any kind taken by any member of the department against a member as the result of that member having sought redress under this guideline and procedures is strictly prohibited and shall be regarded as a separate and distinct violation of the department guidelines and procedures.

Any questions, concerns, or other inquiries regarding the conduct that is prohibited by this guideline or the procedures contained herein shall be directed immediately to the Chief or available officer for disposition.

NON-COMPLIANCE

Failure to comply with any of the provisions of this guideline shall result in disciplinary action. Any member who has an alleged misconduct complaint and violates the procedure outlined above during or after the investigation may be subject to disciplinary action up to and including discharge.

ALCOHOL AND SUBSTANCE ABUSE

It shall be the duty of all members to identify suspected alcohol and substance abuse by any member while performing any departmental duty or function or while on the premises of the department so that appropriate managerial action may be taken.

The department may respond to instances of suspected substance abuse by requiring that the member who is exhibiting behavior suggestive of intoxication and/or substance abuse submit to a drug or alcohol test. As a general rule, two members should confirm the observation, whenever possible.

Actions which may give reasonable suspicion that a member is intoxicated or under the influence of drugs may include, but are not limited to, the following:

Accident or work related injury suggestive of alcohol and/or substance abuse.

Physical or outward appearance of alcohol and/or drug use.

The observation of actual use or possession of alcohol and/or drugs.

No member of this department shall respond to any department meeting, training session or incident while under the influence of alcohol or other substance which may alter the thought processes in any way.

If there is reasonable suspicion of a member being intoxicated or under the influence of drugs while at a department meeting, training session or incident, then the member shall be immediately suspended from all department activities for a period not to exceed 5 days in order that an investigation may be done by the officer staff. If the member is found to have been intoxicated or under the influence of drugs then that member could be subject to disciplinary action up to and including discharge from the department. If the member is found not to have been intoxicated or under the influence of drugs, then the member will be reimbursed for missed calls during the suspension period.

If the member refuses to submit to an alcohol and drug test during an investigation, that member could become subject to disciplinary action up to and including discharge.

BORROWING DEPARTMENT EQUIPMENT

The procedures for borrowing equipment are detailed below. The safety of the members and the people in the communities served by the department must be taken into account when consideration is made for borrowing equipment.

INCIDENT SPECIFIC EQUIPMENT

Any equipment that is in service for the purpose of providing fire protection, extinguishment, extrication, or rescue operations is not to be borrowed. The intent of this procedure is that any equipment that may be needed by members to provide required service on any incident not be removed from the station.

NON-EMERGENCY EQUIPMENT

Prior to borrowing any department equipment that is non-emergency in type it must be approved by the Chief or other officer of the department. No department owned equipment is to be borrowed by someone other than a member of this department.

MEMBER RESPONSIBILITY

It is the responsibility of any member borrowing equipment to return that equipment in a condition that is as good as or better than when received. The items must be returned in a timely manner. Each item must be entered on the log sheet that is posted on the department bulletin board.

MEDIA INFORMATION RELEASE

Only the Chief, or a member officially designated by the Chief, shall release any information pertaining to the department, the members of the department, or any incident responded to by the department.

Any information released shall be positive and not reflect upon the department, members of the department, or incident responses in a detrimental manner.

Any member other than those listed in the opening paragraph receiving requests for information shall refer such requests to the Chief or other designated member.

INCIDENT RESPONSE

Members shall respond to any incident, emergency or otherwise, in a safe and orderly manner. The procedure that follows shall be adhered to whenever possible.

The first person to the hall shall open the front entrance and answer the call on the radio, if the call originated from the Central Dispatch center. If the alarm originated from elsewhere, Central Dispatch shall be notified and told to dispatch the department.

The required vehicle for each incident shall be manned by members with the required training to safely operate that vehicle while responding to the incident, as well as while on the scene.

All members responding to alarms in department vehicles shall be required to wear seat and shoulder belts, provided the vehicles are so equipped

The first department vehicle arriving on the scene shall contact Central Dispatch and establish the required command location.

The driver of any pumper/tanker vehicle shall remain with that vehicle as the operator of the pump, unless relieved by the I.C. on scene.

Members responding to the station after the vehicles have left shall remain at the station until the scene has been cleared and the command terminated, unless released by the I.C.

At no time shall the procedures for manning the radio or the vehicles outlined above be interpreted in such a manner that the required vehicle, or vehicles, not respond to the scene. Every attempt should be made to have a minimum of two members respond in any vehicle.

BASE RADIO OPERATION

All of the radio traffic, transmitting or receiving, from the base radio of the Memphis Fire Department shall be conducted in a professional and courteous manner.

The base radio is to be manned by trained personnel on standby at the fire hall during a call. The person manning the radio must stay with the radio until relieved by the I.C. To answer the call, the operator will contact Central Dispatch to verify Memphis is clear on the call and request additional information if needed. After receiving any additional information, the operator will answer to Central Dispatch "Memphis will be enroute shortly".

The operator shall then monitor all radio traffic and assist the members at the incident whenever possible or required, keeping traffic from the base to a minimum. All radio traffic between the base radio, trucks and personnel is to be conducted on 74F14 unless an operations channel has been assigned.

The radio operator will also make any required telephone calls to emergency centers for Edison, Chemtrec, or Gas, as required by the I.C. at the scene. The phone numbers are located in the department phone directory in the radio room.

PRIORITY COMMUNICATIONS

When an emergency exists and the radio is required for a priority transmission, the radio operator will transmit the following message over the fire frequency:

“EMERGENCY-EMERGENCY, PRIORITY TRANSMISSION REQUESTED”

The radio should be cleared for the emergency transmission immediately. If other departments declare a radio emergency, the frequency must be left open for the traffic.

EMERGENCY SCENE EVACUATIONS

The first and most important priority of the I.C. at any incident location is the safety of the personnel responding to and the citizens currently at the scene. To accomplish this task, it may become necessary to evacuate the scene rapidly.

When the Incident Commander deems the situation is abnormally dangerous, the signal to evacuate will be given and all personnel are to evacuate the scene immediately. Citizens are to be moved to a place of safety immediately without exception.

When the Incident Commander or other officer on scene deems the situation to be abnormally dangerous and evacuation necessary, the engine on scene will be requested to do the following: **ONE (1) LONG BLAST OF THE AIR HORN TO SIGNAL AN IMMEDIATE WITHDRAWL OF ALL PERSONNEL FROM THE SCENE AND SURROUNDING AREAS.** The personnel retreating shall assemble at the pumper giving the alarm until otherwise instructed by the I.C.

When on a scene where no air horn is available, a broadcast of **“MAYDAY-MAYDAY-MAYDAY, RETREAT-RETREAT-RETREAT!!!”** over the P.A. system of the Incident Command Vehicle will be continually made until all personnel have retreated from the scene and have assembled at the I.C.V.

When on a scene where no fire service vehicle is available, a radio transmission on the county fire frequency as outlined above shall be given on a portable radio by the individual responding for all fire service units to evacuate the scene.

INCIDENT COMMAND SYSTEM

Emergency operations and other situations that pose similar hazards, including but not limited to training exercises, shall be conducted in a manner that recognizes hazards and prevents accidents and injuries.

An incident management system that meets the requirements of NFPA 1561, STANDARD ON FIRE INCIDENT MANAGEMENT SYSTEM, is established with written standard operating procedures applying to all members involved in emergency operations. All members involved in emergency operation shall be familiar with the system.

At an emergency incident, the incident commander shall be responsible for the overall safety of all of the members and all activities at the scene.

At an emergency incident, the incident commander shall establish an organization with sufficient supervisory personnel to control the position and function of all members operating at the scene and to ensure that safety requirements are satisfied.

At an emergency incident, the incident commander shall have the responsibility to:

Assume and confirm command and take an effective command position;

Perform situation evaluation that includes risk assessment;

Initiate, maintain, and control incident communications;

Develop an overall strategy and attack plan and assign units to operations;

Develop an effective incident organization by managing resources, maintaining an effective span of control, and by managing direct supervision over the entire incident by creating geographic and functional sectors;

Review, evaluate, and revise the attack plan as required;

Continue, transfer, and terminate command.

The fire department shall establish and ensure the maintenance of an incident communication system that meets the requirements of Section 3-6 of NFPA 1561, STANDARD ON FIRE DEPARTMENT INCIDENT MANAGEMENT SYSTEM.

EMERGENCY VEHICLE RESPONSE

Emergency vehicles shall respond to all incidents using this procedure.

All emergency vehicles shall respond to incidents in a manner that does not endanger the public, the occupants of the vehicle, private or public property, or the vehicle itself.

The 1st vehicle on scene will be designated as the command post unless deemed otherwise by I.C.

Personal vehicles are not to be considered emergency vehicles for the purpose of this procedure. Personal vehicles are to be operated as detailed in the Personal Vehicle Operations S.O.G.

Every attempt shall be made to respond with a minimum of two responders to every incident. Medical vehicles must have at least 1 licensed responder.

Only those members trained and proficient in operating the engines pump will drive vehicles so equipped unless deemed necessary by the I.C.

All vehicles are to deploy to locations assigned in the Hazardous Weather Vehicle Deployment S.O.G. during hazardous weather conditions when required by the I.C.

Any vehicle used for response to an incident will be refueled if below $\frac{3}{4}$ full before returning to service, unless deemed unnecessary by the I.C. Any vehicle used for response to an incident will be cleaned, as required, before being put into the buildings.

Any vehicle used for response to an incident will be restocked with any items that may have been used from the supplies on board. This is to include perishables such as bandages, oxygen, and air from SCBA's, as well as hard goods such as back boards and brooms for brush fires.

Members of the department who are Apprentices by status shall not drive a vehicle to an incident unless deemed necessary by the I.C.

EMERGENCY VEHICLE SAFETY

Introduction

Fire Officers/Firefighters, need to recognize the fact that the emergency vehicle response is the basis for the success or failure of all other emergency functions. These vehicles carry all the portable emergency equipment in addition to all of the personnel of the organization. Without the safe conveyance of these vehicles to the emergency scene, the emergency service organization cannot achieve its mission of saving lives and protecting property. Having sound emergency vehicle response guidelines in place will assist the emergency service organization in providing sound direction to its officers and drivers.

Purpose

When responding to any emergency call, a great deal of responsibility is placed on the drivers of emergency vehicles. Not only must emergency vehicle drivers provide prompt conveyance of the apparatus, equipment, and personnel to provide service to those in need, but just as importantly, must accomplish this task in the safest and most prudent manner possible. Emergency vehicle drivers have in their care, custody and control most of the major assets possessed by this organization (the vehicle, portable equipment, personnel). Emergency vehicle drivers also have a higher standard of care to provide due regard for safety of others. Drivers must constantly monitor and reduce the amount of risk and exposure to potential losses during each and every response. Safe arrival at the emergency scene shall be, and must always remain, the first priority of all emergency vehicle drivers. In order to accomplish this enormous task all Memphis Fire Department emergency vehicle drivers shall become familiar and constantly abide by the following policies and procedures.

Procedures

1. Circle of Safety

Prior to entering the cab and starting the vehicle, the emergency vehicle driver shall make a circle of safety around the vehicle to see that all equipment is secured, that all compartment doors are securely closed and any physical obstructions moved out of the way. During the circle of safety the emergency vehicle driver shall encircle the vehicle and visually inspect all 4 sides and the top of the vehicle before entering the cab. They should also verify right side and rear clearance with the person riding in the officer position. This shall be conducted prior to moving the vehicle regardless of whether or not the vehicle is about to leave on an emergency or a non-emergency.

2. Warning Devices and True Emergencies

When responding to an emergency call, all audible and visual warning devices will be operated at all times regardless of times of day and/or traffic conditions. All emergency vehicle drivers must understand that warning devices are not always effective in making other vehicle operators aware of your presence. Warning devices only request the right-of-way, they DO NOT insure the right of way. Emergency vehicle drivers shall comply with Public Act 300, Michigan Vehicle Code. Whenever a Fire Dept. vehicle is responding to an emergency, the following procedures will be in effect:

- While responding to an emergency, seat belts shall be worn. Warning lights and sirens shall be used in conjunction with each other.
- Once an emergency is declared under control, all remaining apparatus will continue normal traffic.
- Warning devices will not be used on non-emergency type runs.

a. EMERGENCY

All Rescue Calls

Structure Fires

Unknown Fires

Personal Injury Accident

CO Alarms (with symptoms present or unknown. If there are no symptoms and the occupants are out of the building then respond non-emergency.

Hazardous Material

Wires Down *(when reported to be on a building or vehicle, with any entrapment of people or if in an area of heavy pedestrian traffic)

b. NON-EMERGENCY

Illegal Burning

Medical Assist / Public Assist

Station Fill-ins

Wash Downs

Wires Down *(not meeting above listed criteria)

Note: The above listings are some examples of calls MFD may encounter. The Fire officer ultimately has the discretion to deviate from the above.

6. Non-Emergency Response

When responding to a call in a non-emergency response mode or normal flow of traffic (when not responding to a true emergency) the vehicle will be operated without any audible or visual warning devices and in compliance with all state motor vehicle laws that apply to civilian traffic. At no time should any emergency vehicle be operated during response with only visual warning devices.

7. Ordinary Travel Procedures

All drivers shall obey all traffic laws and traffic control devices when driving any fire department vehicle under ordinary travel conditions. Any driver observed breaking any traffic laws or driving any vehicle in an aggressive manner will be subject to disciplinary action up to and including but not limited to suspension of driving privileges.

8. Riding Policy

The department requires all persons riding on fire apparatus to be seated in approved riding positions and be secured to the vehicle by seat belts whenever the vehicle is in motion. The emergency vehicle driver and/or the person riding in the officer position shall verify that all personnel are properly seated and in seat belts before the vehicle is moved.

Standard communication signals should be formulated and utilized by all personnel. The emergency vehicle driver shall verify that all seat mounted air packs (SCBA) are properly secured prior to the vehicle being moved.

The department prohibits the riding on tail steps, sidesteps, running boards, or any other exposed position.

Non-department members shall not ride in department vehicles during emergency responses.

9. Backing

The department recognizes that backing emergency vehicles is made hazardous by the fact that the driver cannot see much of where they intend to go. The department recommends that whenever possible drivers should avoid backing as the safest way to back up a vehicle is not to back it up at all. When it is necessary to back up any departmental vehicle all drivers shall follow one of the two following measures listed below:

- The department's first choice of backing procedures is that before any vehicle is put into reverse and backed that a spotter be put in place near the rear of the vehicle. The spotter should be positioned so that the emergency vehicle driver can see them at all times. If at any time the emergency vehicle driver loses sight of the spotter, they shall stop immediately until the spotter is visible again.
- If conditions exist that makes use of spotters impossible, all drivers, before attempting to back up any fire department vehicle, shall/will make a circle of safety to see that, no person or persons are directly behind the vehicle or in its intended path of travel, all equipment is secured and that all compartment doors are securely closed, any physical obstructions are moved out of the way. The emergency vehicle driver should also note potential obstructions in the intended path of travel.

10. Response in Privately Owned Vehicles

When any member responds to the station or to the scene of an emergency in their private vehicle that is equipped with appropriate emergency siren/lighting equipment, the same policies/procedures as for department vehicles shall be followed. Lights and sirens on personal vehicles are only to be used within the Memphis Fire District.

When any member responds to the station or to the scene of an emergency in their private vehicle not equipped with appropriate emergency siren/lighting equipment, each member must strictly adhere to all applicable motor vehicle laws. Privately owned vehicles without proper emergency siren/lighting are not provided with the same exemptions that are provided to emergency vehicles (Public Act 300, Motor Vehicle Code).

No member of the organization will be permitted to violate any motor vehicle laws, including but not limited to:

- Speed limits
- Going through traffic control devices
- Passing in an unsafe manner

While it is recognized that timeliness in response to an emergency is important, it is imperative that all drivers understand that their private vehicles when not equipped with emergency siren/lighting are not emergency vehicles and therefore are not afforded any exemptions or special privileges under state law. Any driver observed breaking any traffic laws or operating any vehicle in an aggressive or unsafe manner will be subject to disciplinary action up to and including but not limited to, suspension/loss of driving privileges.

Members wishing to equip their personal vehicle with emergency siren/lighting equipment must first obtain authorization to do so from the current fire officer board prior to any installation or use of such devices. The requesting member shall provide the following base requirements to be considered for authorization.

Valid Michigan Driver's License, Vehicle Registration, and Proof of Insurance.

Valid / Current training certification in at least one of the following.

Michigan Medical First Responder or greater medical license

Michigan Firefighters Training Council Fire I or Fire II certification.

Membership record of minimum 6 month fire or EMS service time.

Reference: Michigan 1949 PA 300, Sec. 2

"Authorized emergency vehicle" means vehicles of the fire department, police vehicles, ambulances, privately owned motor vehicles of volunteer or licensed ambulance drivers or attendants as are authorized by the department of state police.

In setting forth privileges granted to drivers of authorized emergency vehicles, 1949 PA 300, supra, Sec. 603 states in part:

'(a) The provisions of this chapter applicable to the drivers of vehicles upon the highway shall apply to the drivers of all vehicles owned or operated by the United States, this state, or a county, city, town, district, or any other political subdivision of the state, subject to the specific exceptions as are set forth in this chapter with reference to authorized emergency vehicles.

'(b) The driver of an authorized emergency vehicle when responding to an emergency call, but not while returning from an emergency call, may exercise the privileges set forth in this section, subject to the conditions of this section.

'(c) The driver of an authorized emergency vehicle may:

'(1) Park or stand, irrespective of the provisions of this act.

'(2) Proceed past a red or stop signal or stop sign, but only after slowing down as may be necessary for safe operation.

'(3) Exceed the prima facie speed limits so long as he does not endanger life or property.

'(4) Disregard regulations governing direction of movement or turning in specified direction.

'(d) The exemptions granted in this section to an authorized emergency vehicle shall apply only when the driver of the vehicle while in motion sounds an audible signal by bell, siren, air horn, or exhaust whistle as may be reasonably necessary except as provided in subsection (e), and when the vehicle is equipped with at least 1 lighted lamp displaying a flashing, oscillating, or rotating red or blue light visible under normal atmospheric conditions from a distance of 500 feet in a 360 degree arc except where it is deemed advisable not to equip a police vehicle operating as an authorized emergency vehicle with a flashing, oscillating or rotating light which is visible in a 360 degree arc. In those cases a police vehicle shall display a flashing, oscillating, or rotating red or blue light which is visible under normal atmospheric conditions from a distance of 500 feet to the front of the vehicle. Only police vehicles which are publicly owned shall be equipped with a flashing, oscillating, or rotating blue light which when activated shall be visible under normal atmospheric conditions from a distance of 500 feet in a 360 degree arc.

'(e) A police vehicle shall retain the exemptions granted in this section to an authorized emergency vehicle without sounding an audible signal if the police vehicle is engaged in an emergency run where silence is required.

257.706. Horns and warning devices;

An authorized emergency vehicle may be equipped with a siren, whistle, air horn, or bell capable of emitting sound audible under normal conditions from a distance of not less than 500 feet, but the siren shall not be used except when the vehicle is operated in response to an emergency call or in the immediate pursuit of an actual or suspected violator of the law. In those cases the driver of the vehicle shall sound the siren when necessary to warn pedestrians and other drivers of the approach of the vehicle.

PERSONAL VEHICLE OPERATIONS

Personal vehicles without lights and siren must follow the regular rules of the road.

All personal vehicles shall respond to the station or to incidents in a manner that does not endanger the public, the occupants of the vehicle, private or public property, or the vehicle itself.

All personal vehicles shall respond directly to the station and not to the scene unless:

All appropriate trucks for the incident have already left the station.

The incident scene is located between the responder's current location and the station.

Lights and sirens on personal vehicles are only to be used within the Memphis Fire District.

Drivers of personal vehicles with lights and/or sirens shall be registered with the Department and the Michigan State Fire Marshal Division and abide by the State of Michigan Code Act 300 of 1949.

HAZARDOUS WEATHER VEHICLE DEPLOYMENT

Vehicles are to respond to locations deemed necessary by the I.C.

All emergency vehicles shall respond to incidents in a manner that does not endanger the public, the occupants of the vehicle, private or public property, or the vehicle itself.

GENERAL SAFETY PRECAUTIONS

The first and most important priority of the I.C. at any incident location is the safety of the personnel responding to and the citizens currently at the scene. General safety precautions for all aspects of the scene follow.

EMERGENCY PERSONNEL

When a life threatening hazard exists, no department or EMS personnel will be allowed to enter the hazardous scene until the hazardous situation has been sufficiently mitigated.

When a moderate hazard exists, personnel in the area are to be protected by P.P.E. per the Personal Protective Equipment, Medical Protective Gear and Self Contained Breathing Apparatus S.O.G.'s as applicable. Non-essential personnel are to be prevented access to the scene.

ALL personnel in the area of an extrication operation shall wear P.P.E. as outlined in the Personal Protective Equipment, Medical Protective Gear and Self Contained Breathing Apparatus S.O.G.'s as applicable. Eye protection is required for all personnel in the area of an extrication in addition to items outlined the noted S.O.G.'s.

PATIENT SAFETY

Patients shall be provided with the highest level of protection possible given the conditions of the scene.

EMERGENCY VEHICLES

Emergency vehicles shall be staged for assignment as determined by the Incident Commander. The staging area will be a safe distance from the scene so as not to interfere with the incident area.

Apparatus arriving at the scene shall report to the I.C. and be positioned to allow a safe working environment. Apparatus shall be placed to provide easy access to required equipment and to allow passing of other vehicles coming to or leaving the scene.

Personally owned vehicles responding to a scene shall be parked on one side of the road or in a nearby parking lot if possible. Traffic flow, driveways, and parking lots are not to be disrupted if possible.

CITIZEN SAFETY

Unnecessary personnel shall be cleared from the scene immediately. Department shall cooperate with Police agencies to control crowds when possible.

ELECTRICAL EQUIPMENT SAFETY

The Incident Commander must assess the potential for electrical hazard from overhead and/or underground sources when arriving on a scene. When an electrical hazard is present, the I.C. shall contact the dispatch to have power company personnel sent to mitigate the situation.

GUIDELINE

Following is the guideline regarding electrical supply of buildings:

It shall be the intent of the Memphis Volunteer Fire Department that “ONLY POWER COMPANY PERSONNEL SHALL REMOVE A ELECTRIC METER FROM A BUILDING. FURTHER, ONLY POWER COMPANY PERSONNEL SHALL CUT ANY ELECTRICAL WIRES OR REMOVE ANY ELECTRICAL EQUIPMENT BEYOND THE SERVICE ENTRANCE PANEL OF THE BUILDING”.

The Incident Commander may authorize a member to shut off power to a building by turning off power at a main circuit breaker or fuse panel. Care should be used even after this procedure in case there was more than one feed to the building. Do not assume that pulling a main switch or breaker will de-energize an entire building, structure, or fire area.

NATURAL GAS AND PROPANE EQUIPMENT SAFETY

The Incident Commander must assess the potential for natural gas and/or propane hazard from above or underground sources when arriving on a scene. When a hazard is present, the I.C. shall contact the dispatch to have SEMCO personnel sent to mitigate the situation.

GUIDELINE

Following is the guideline regarding natural gas and propane equipment:

It shall be the intent of the Memphis Volunteer Fire Department that no member be placed in a flammable or explosive vapor cloud for **ANY** reason. Gas or propane shall never be turned on by department personnel.

The Incident Commander may authorize a member to shut off flow to a building by turning off flow at a main. Care should be used even after this procedure in case there was more than one feed to the building.

If the gas is burning, do not extinguish the flame. Exposures can be protected by hose streams if necessary. Personnel shall wear P.P.E. per the Personal Protective Equipment and Medical Protective Gear S.O.G.'s respectively. The feed to structures should be turned off immediately in case of fire or fume build-up.

SAFETY BELT USAGE

The intent of this department is that every person riding in a department vehicle shall wear a seatbelt at all times while the vehicle is in motion.

It is the responsibility of the operator to check that all seat belts are secured before the vehicle is put into motion. If a SCBA is required on the scene, the SCBA shall be donned after arrival if it hinders use of the seat belt.

It is the responsibility of each member to report broken or damaged seat belts immediately to the I.C. or senior member and to properly maintain the seat belts in good working order and keep them accessible for proper use.

In cases where shoulder straps are not available, additional restraining devices such as grab bars, arm loops, or web straps, may be provided. These devices shall be used where supplied.

TURNOUT GEAR

The general turnout gear is issued by the Memphis Volunteer Fire Department to members for the following reasons:

- Identification to other agencies
- Personal protection and safety

The protective clothing is for use in fighting conventional fires only, to protect the body against high temperatures, steam, hot water, and hot particles. The gear is not intended as protection in hazardous material situations.

The Memphis Volunteer Fire Department shall be responsible to issue personal protective equipment to all members. The Department shall establish the equipment that is required. The following equipment is currently required:

- Bunker pants
- Bunker coat
- Bunker boots
- Turnout gloves
- Extrication gloves
- Protective hood (Nomex)
- Approved helmet with shield
- P.A.S.S. protection device (If not part of SCBA)
- Firefighter I.D. tag
- Department badge

Each member shall inspect his/her protective gear after each use for cuts, tears, burn damage, or extensive wear and report any findings to an officer.

All personal protective gear shall be maintained by the individual member. Maintenance is to include cleaning, repairing as required, and replacement if necessary.

PERSONAL PROTECTIVE EQUIPMENT

It is the intent of the Memphis Volunteer Fire Department that all members responding to any incident, other than a medical emergency, shall be properly wearing all required personal protective gear as outlined in the Turnout Gear S.O.G..

The intent of this guideline is provide each member with the highest degree of safety for every instance, including training, rescue operations as required, and fire suppression operation. The I.C. may decide what gear is required for an individual incident taking into the consideration the risk factor and environmental conditions.

Under no circumstances shall any aspect of personal safety be sacrificed in order to increase the speed of emergency operations. Full protective clothing shall be donned prior to entering the incident perimeter.

Full protective equipment shall be worn by all personal operating any power tools, hydraulic tools, or forcible entry tools. Personnel operating at the scene of an EMS or rescue incident shall wear whatever protective equipment is required to assure personal safety during the incident.

Helmets with chin strap in place shall be worn by all personnel operating at incidents where there is a possibility that tools, equipment, or debris from above may fall. This would include any time personnel are operating above or below ground such as during trench rescue or high angle rope rescue operations.

Gloves shall be worn at all time when hand tools, power tools, hose, ladders, or any other equipment is used that could cause injuries to the hands. This shall include all work details, maintenance operations, and training exercises.

The I.C. is responsible for establishing the level of personal protective equipment required for any incident that does not fall within these guidelines. In all cases it is the responsibility of the member to wear all protective clothing necessary to sufficiently protect against all foreseeable hazards.

SELF CONTAINED BREATHING APPARATUS (SCBA)

SCBA shall be provided for and shall be used by all personnel working in areas where; 1) the atmosphere is hazardous; 2) the atmosphere is suspected of being hazardous; 3) the atmosphere may become hazardous.

In addition to the above, all personnel working below ground level or inside any confined space shall be provided and shall use an SCBA unless the safety of the atmosphere can be established by testing and continuous monitoring.

Damage to the SCBA shall be reported to the I.C. immediately. The I.C. shall inspect the damage and determine if the unit is to be repaired or replaced. Full personal protective gear, as detailed in the Turnout Gear S.O.G., is to be worn together with the SCBA.

The I.C. may use his discretion to determine the need for use of SCBA where no specific guideline has been established. The SCBA is to be worn whenever there is any doubt that a hazardous condition either exists or could exist in the foreseeable future.

Each SCBA used at a scene shall be thoroughly cleaned and inspected following the guidelines established by the manufacturer. SCBA's shall be inspected at least once each month following the manufacturer's guidelines. Only those members trained to do so may repair any of the working components of the SCBA. Logs of repairs made on each unit shall be maintained and held on file for the life of the unit.

The intent of this procedure is that the SCBA shall be worn by any member who may potentially encounter hazardous atmosphere conditions during any type of incident, fire, rescue, or hazardous materials.

MEDICAL PROTECTIVE GEAR

All members responding to an incident shall wear personal protective equipment as outlined in Turnout Gear S.O.G.. In cases where full gear was not indicated, such as medical emergencies, and there is any chance of contact with any bodily fluid, members shall don medical protective gear including, but not limited to, latex gloves, gowns, and eye protection.

All medical protective gear worn at a scene is to be disposed of at the scene in the ambulance BIO-HAZARD disposal station. Should this method of disposal not be possible, the gear is to be placed into a marked BIO-HAZARD bag as soon as possible after returning to the vehicle.

Any contamination of personal protective equipment as outlined in the Turnout Gear S.O.G. shall be reported to the I.C. immediately. Decontamination procedures must be followed prior to placing the equipment back into service.

INFECTIOUS DISEASE EXPOSURE

EXPOSURE

An exposure occurs when a person's blood or any other bodily fluid transfers to another person's bloodstream. The three most possible causes for the fire service responder are the following:

Bodily fluids include, but are not limited to:

Blood	Semen	Saliva (or spit)
Urine	Tears	Feces (stool)
Vomit	Sweat	

Needle sticks (Sharps). Accidental sticks from sharp instruments while administering aide to others.

Bites from others which expose bodily fluids to the infected person.

Other cuts or open sores, abrasions, sunburns, or rashes.

REPORTING

Any member that suspects that they have been exposed to an infectious disease shall immediately do the following:

Thoroughly wash all areas suspected with a specialized soap containing an antibacterial agent with a chlorine base and hot water or with a chlorine bleach ratio of 1:10 parts water.

Gather information about the individual involved which should include; name, birthday, medical information, current whereabouts, and cause for concern of infection. THIS INFORMATION IS NOT DISCLOSURABLE under the Freedom of Information Act.

Contact the Chief or other available officer immediately.

Complete a report as soon as possible and submit it to the Chief or other officer of the Department.

INTENT

It shall be the intent of the Memphis Volunteer Fire Department to provide any protection required for it's members from exposure to infectious diseases and to meet all requirements as set forth in O.S.H.S.A. BLOOD BORNE PATHOGEN STANDARD (29 C.F.R. 1910.1030).

INFECTIOUS DISEASE DECONTAMINATION

When any member is involved in an incident where there is any possibility that contamination from blood borne pathogens has, or may have, occurred, decontamination must take place. The following procedures must be followed:

Wash all exposed skin thoroughly and immediately per the Infectious Disease Exposure S.O.G..

Any article of clothing or P.P.E. soiled with any bodily fluid must be washed with a decontaminating soap similar to that specified in the Infectious Disease Exposure S.O.G. or disposed of. Any article disposed of shall be red bagged as a possible hazardous contaminate.

Rescue equipment such as resuscitators and suction devices contaminated with bodily fluid shall be disinfected immediately upon returning to the station using appropriate safety precautions.

Vehicles contaminated by bodily fluids must be disinfected as soon as returning to the station with household bleach and hot water.

To prevent possible contamination to personnel and equipment, **ALL** medical waste generated at any scene must be disposed of immediately after use. This would include gloves, wrappers, dressings, bandages, and any other item used during an incident where bodily fluids were present. All items are to be placed in a red bio-hazard bag and given to the EMS personnel on the scene for proper disposal. When no EMS is on scene, the items are to be red bagged at the station for disposal with EMS as soon as possible.

HAZARDOUS MATERIAL INCIDENTS

Any hazardous material incident requires special attention to protect the health and safety of all of the responders to the scene. Rescue 2 will be the first unit to respond the incident. The unit must be manned by at least one member with a valid Michigan Medical First Responder license with current HazMat Operations training.

As soon as practical after leaving the station, the wind speed and wind direction must be requested from the base station operator or Central Dispatch. All vehicles responding to the HazMat scene must be staged **UP HILL, UPWIND, and UPSTREAM** from the incident.

All units responding to the scene of a HazMat incident must wear S.C.B.A. and P.P.E. per the Personal Protective Equipment and Self Contained Breathing Apparatus S.O.G.'s respectively, unless directed otherwise by the I.C. or CHEMTREC.

The first arriving unit must attempt to identify the material causing the HazMat situation as soon as possible and request assistance from CHEMTREC through the base operations. The CHEMTREC number is 800-424-9300. The CHEMTREC form, found in the Michigan D.O.T. handbook, should be consulted for the needed information that should be obtained prior to making the call. The D.O.T. guidebook should be consulted for additional assistance upon acquisition of the D.O.T. tag numbers, if available.

The Incident Command System must be initiated per the Incident Command S.O.G. prior to calling for outside assistance or mutual aid response, per the Mutual Aid Received From Other Departments S.O.G..

MEDICAL STANDBYS

Certain events may be held at which the Memphis Volunteer Fire Department will stand by in case a medical incident arises. These events may include but are not limited to school sporting events and community functions.

Memphis Rescue 1 should be the primary vehicle used for medical standby purposes. Before leaving the station, the units being utilized and location of the standby shall be noted on the information board in the radio room.

An ideal standby crew will consist of 3 department members (2 patient care and 1 command).

Medical incidents that may occur at the location of the standby will not be toned out by Central Dispatch unless it is deemed necessary by the standby crew that more personnel are required for the incident. Upon completion of the incident, the standby crew will contact Central Dispatch and obtain an incident number. An incident report will be generated by the standby crew. Only department members directly involved with the incident will be included on the report unless toned out by Central Dispatch.

Members of the standby crew shall remain with their equipment in the vicinity of the event they are attending (Example: Sidelines of a high school football game). This ensures a timely response to an incident. All possible distractions should be avoided.

It is the responsibility of the standby crew to ensure that they have portable radio equipment with them at all times in order to stay in communication with Central Dispatch.

Unless previous arrangements have been made, the standby crew will respond to any incident that MFD may be dispatched to during the time of the standby. It will be the responsibility of the group/organization in charge of the standby event whether that event shall continue or not if the standby crew leaves.

MUTUAL AID GIVEN TO OTHER DEPARTMENTS

When a surrounding fire department requests the assistance of the Memphis Fire Department, Central Dispatch will activate the siren and monitors. All available members will report to the Memphis fire station and respond to the scene with the appropriate equipment and personnel as has been requested.

Units responding from the Memphis Fire Department will contact the Incident Commander of the scene while in route for exact instructions and orders regarding placement of vehicles and responsibility of personnel.

Upon arrival on scene, the members will report to the Incident Commander for assignment as required. Reporting to the Incident Commander is mandatory and essential for maintaining an accurate accounting of the number of personnel on the scene.

MUTUAL AID RECEIVED FROM OTHER DEPARTMENTS

Mutual aid is to be requested from area departments when the Incident Commander feels that additional help is needed, either manpower or equipment, to successfully remedy the emergency situation in the safest and quickest manner

The Incident Commander, upon deciding that mutual aid is required, will contact Central Dispatch and utilize the MABAS system to request mutual aid alarms.

THUNDERSTORM ALERTS

The following two types of alert may be issued.

Watch: This alert indicates that the National Weather Service has severe thunderstorms on radar in neighboring counties that may impact on the Memphis fire district.

Warning: This alert indicates that the National Weather Service has a severe thunderstorm on radar in the immediate vicinity of the Memphis fire district. The warning may or may not have been issued by Central Dispatch.

The I.C. will determine the need to activate the personnel dispatch system and call members to standby at the station and/or deploy to locations as outlined in the Hazardous Weather Vehicle Deployment S.O.G..

No radio transmissions will take place except to report extremely severe conditions such as very high winds, hail, dangerous lightning, or possible funnel clouds. The base radio will be manned at all times throughout the incident until the all clear is issued by the I.C.

TORNADO ALERTS

When weather conditions are deemed severe and the potential of a tornado exists by either the weather services, police agencies, or the Officers of the Memphis Volunteer Fire Department, a tornado alert may be issued.

The following two types of alert may be issued.

Watch: This alert indicates that the responsible agency, generally the National Weather Service, feels that the conditions are favorable for the development of a tornado.

Warning: This alert indicates that a tornado or funnel cloud has been spotted by another department or agency within the immediate vicinity of the Memphis fire district. The warning may or may not have been issued by Central Dispatch.

Upon being alerted to a tornado warning, members are to report to the fire station.

See the Tornado Siren Activation S.O.G. for the siren warning activation procedure. Vehicles will be dispatched to the proper locations as detailed in the Hazardous Weather Vehicle Deployment S.O.G..

No radio transmissions will take place except to report the existence and location of a tornado. The base radio will be manned at all times throughout the incident until the all clear is issued by the I.C.

TORNADO SIREN ACTIVATION

The severe weather sirens at the fire station and Riley Township are to be used to communicate to residents that the possibility of hazardous weather exists in the general vicinity and that shelter should be sought immediately.

The sirens will be activated by St. Clair County Central Dispatch per protocols established by St. Clair County Emergency Management. The sirens will be activated for a continuous period of three (3) minutes.

Upon activation of the severe weather sirens or at officer discretion, Memphis Fire Department personnel are to report to the station in a non-emergency manner.

FIRE GROUND REHABILITATION

The purpose of this policy is to provide the Memphis Fire Department and supporting ambulance personnel with a working knowledge of the rehabilitation division for an emergency incident or training exercise in order to:

Prevent injuries, illnesses and deaths that may result from excessive fatigue.

Establish procedures for medical evaluation and treatment, food and fluid replenishment, relief from extreme climatic conditions, during prolonged emergency operations.

Recommended Procedure:

Upon arrival on the fire ground the ambulance should be set up for maximum advantage for use as an emergency care station and secondly as a rehabilitation unit. The first priority on any emergency scene is patient care. The first arriving ambulance Crew Chief or highest ranking Ambulance officer must evaluate this situation prior to any efforts to set up rehab.

The unit most likely responsible for establishing a rehab division will be the ambulance responding from outside the fire response area. For example, the ambulance responding as backup or dispatched as "Fire Standby" will most likely be responsible for establishing the rehab division at the incident scene.

Before arriving at the incident, the ambulance responsible for rehab will gather cold and/or hot drinks from the Memphis Fire station.

Determine the weather conditions that the crews will be operating in.

Base rehabilitation needs analysis on:

Weather, Temperature, Humidity, Wind, and Severity of Incident

Once it is determined that a rehabilitation division should be established the Crew Chief will consult with the IC to determine the following:

Appropriateness of establishing the Rehab Division.

Appropriate location for the Rehab Division. Don't forget shelter if it's cold or windy. Shade in the summer.

Establish guidelines for whom and how often personnel will visit rehab.

Once the rehab division has been established and "open for business", ask the IC to inform the officer staff and announce its location to all personnel operating in the incident.

As a reminder, operations can be far reaching; remote tanker fill sites, traffic control, etc. Take into account ALL personnel and plan accordingly for everybody's well being.

Ultimately, every person on the fire ground must be put through rehabilitation during a prolonged emergency response. Documentation should be kept of all personnel who travel through rehab using the attached log sheets.

Incident officers will issue re-habilitation cards to crews needing to report to the rehab division and announce the number of crew members that should be expected. Upon arrival the crew member is to check-in and begin rehab procedures. When complete and determined that the crew member can return to active duty the rehab card shall be "Checked" by the attending medic so that the crew member can return it to the issuing officer and start further assignments.

During rehab, conditions permitting, all outer gear will be removed. Personnel will sit down. Vital signs will be taken. Water will be given to all personnel. While in rehabilitation the patient's physical and mental condition will be evaluated prior to release from the rehabilitation division. The name of any personnel whom the rehab crew chief feels is unable to return to duty will be reported to the Chief or line officer of that member's respective department.

All personnel will have a 2 air bottle maximum and will be subjected to at least one half hour rehabilitation prior to involvement with any more fire ground duties upon reaching the two bottle maximum. When personnel are changing air bottles approximately 2 cups of water should be consumed prior to re-entry into the fire building.

All forms filled out during the course of rehab will be turned into the IC at the conclusion of the incident to become part of the permanent record of the call.

<p>MEMPHIS FIRE DEPT.</p> <p>REHABILITATION ORDERS</p> <div data-bbox="263 533 480 680" style="border: 1px solid black; width: 134px; height: 70px; margin: 20px auto;"></div> <p>Upon Receipt of this card report immediately to rehab division leader.</p>	<p>MEMPHIS FIRE DEPT.</p> <p>REHABILITATION ORDERS</p> <div data-bbox="656 533 873 680" style="border: 1px solid black; width: 134px; height: 70px; margin: 20px auto;"></div> <p>Upon Receipt of this card report immediately to rehab division leader</p>	<p>MEMPHIS FIRE DEPT.</p> <p>REHABILITATION ORDERS</p> <div data-bbox="1049 533 1266 680" style="border: 1px solid black; width: 134px; height: 70px; margin: 20px auto;"></div> <p>Upon Receipt of this card report immediately to rehab division leader</p>
<p>MEMPHIS FIRE DEPT.</p> <p>REHABILITATION ORDERS</p> <div data-bbox="263 1276 480 1423" style="border: 1px solid black; width: 134px; height: 70px; margin: 20px auto;"></div> <p>Upon Receipt of this card report immediately to rehab division leader</p>	<p>MEMPHIS FIRE DEPT.</p> <p>REHABILITATION ORDERS</p> <div data-bbox="656 1276 873 1423" style="border: 1px solid black; width: 134px; height: 70px; margin: 20px auto;"></div> <p>Upon Receipt of this card report immediately to rehab division leader</p>	<p>MEMPHIS FIRE DEPT.</p> <p>REHABILITATION ORDERS</p> <div data-bbox="1049 1276 1266 1423" style="border: 1px solid black; width: 134px; height: 70px; margin: 20px auto;"></div> <p>Upon Receipt of this card report immediately to rehab division leader</p>

MEMPHIS FIRE EMERGENCY INCIDENT REHABILITATION REPORT										INCIDENT:			AGENCY AMBULANCE #:							
THIS DOCUMENT TO BE RETURNED TO MEMPHIS FD UPON TERMINATION OF THE INCIDENT										DATE:			MEDIC:			EMT:				
DEPT / FF#	TIME (S) IN / OUT	FG Task Performed	BP	PULSE	RESP	TEMP	SKIN	TAKEN BY	COMPLAINTS / CONDITION	Status										
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EMPLOYEE ATTENDANCE

Purpose:

All personnel shall understand the appropriate response and attendance expectations set forth in this policy to ensure all department members are within the guidelines of this document.

Employee Attendance Guidelines

All department members of the membership classifications Active (Regular and Apprentice), Associate-Medical, and Associate-Reserve are expected to meet the following minimum guidelines:

- 30% of the total alarms
- 45% Department Fire Training exercises
- 45% Department Medical Training exercises
- 65% Department Vehicle Inspection duties
- 25% Department Hosted Public Functions

The guidelines above will be evaluated on a quarterly basis. For determining percentages, the most recent 3 month period will be used for calculating the total alarms percentage. All other percentages will be based on the most recent 12 month period.

If a member anticipates that the above guidelines cannot be met for a period of time it will be their responsibility to notify the Fire Officer Board prior to that time and request exemption from the guidelines. Examples of reasons to request exemption include family matters, work requirements and medical issues.

If a member fails to meet these expectations they may be requested to meet with the Fire Officer Board to undergo a verbal review and start a corrective action plan as outlined below.

Verbal review with Fire Officer Board to counsel employee and review membership classification options. Employee attendance will be monitored for the next 3 months.

If attendance does not improve during the 3 month monitoring period the employee's membership status will be downgraded to Associate Reserve Membership with an additional 3 month probation period to be reviewed again by the Fire Officer board.

If the employee attendance does not improve or begin to meet the expected minimum guidelines the employees membership status shall again be downgraded into the Reserve membership classification.

Returning to Active Membership

A member may return to active status as follows:

Reserve status to Associate Reserve

Meet the expected attendance requirement percentages as stated above with the exception of total alarms. The attendance percentages will be based on a period of the last 3 months.

Complete the equipment training guides and tests as provided by the Officer Board.

Associate Reserve to Active

Meet all of the expected attendance requirement percentages as stated above. The attendance percentages will be based on a period of the last 3 months.

It will be the responsibility of the member to request a review of his/her percentages in order to change a status.

DISCIPLINE AND ENFORCEMENT

Purpose:

All personnel shall understand the discipline and enforcement guidelines set forth in this policy to ensure all department members are within the guidelines of this document.

Employee Discipline and Enforcement Guidelines

The Fire Chief and Department Fire Officers shall have full responsibility and authority to enforce these rules and regulations.

Any charge against an employee shall be investigated and a conclusion of fact reached which will be as follows.

Proper Conduct

Improper Conduct

Policy and/or procedure failure

Insufficient evidence

Unfounded Complaint

If discipline is required, every effort will be made to respond to the deficiency with training or counseling.

Violations of any of the provisions of the rules and regulations, directives, procedures, and special orders, or the neglect or evasion of the duties and responsibilities contained herein shall be the subject of disciplinary action up to and including discharge.

Any member violating these rules and regulations may be subject to any of the following disciplinary action with due regard for the nature of the offense and the member's previous record of conduct.

- Reprimand: Oral or Written
- Restriction of activities or privileges
- Requirement of restitution
- Demotion
- Suspension
- Probation
- Discharge

Any member of the fire department may be suspended or dismissed for cause for any of the following list of offenses which is not to be considered as all inclusive.

- Use of intoxicants or Illegal drugs while on duty
- Operation of department equipment while intoxicated or influence of drugs
- Thievery
- Immoral or indecent conduct that would be offensive to the average citizen
- Insubordination
- Refusing an order from an officer
- Leaving an alarm incident early without notification to officer in charge.
- Giving Fire/Medical information to unauthorized persons.
- Loss of valid Michigan Motor Vehicle Operators License.
- Misuse of fire department equipment
- Failure to use proper chain of command, involving matters or procedures.
- Loaning of fire department identification or equipment to unauthorized persons.
- Responding to an incident in a careless / reckless manner.
- Failure to complete required training / emergency response guidelines.
- Any conduct which brings discredit to the fire department.
- Abuse of leave time or absence without leave.
- Unsatisfactory work performance.
- Failure to follow Department Standard Operating Guidelines.

Any member of the fire department can be suspended by an officer, at any time, and charges must be preferred by the officer in writing, and referred to the Fire Chief within twenty-four (24) hours, or the charges are automatically dropped. All charges must be acted upon by the Chief within five (5) working days.

The Fire Chief may dismiss or suspend any member for cause, after apprising the member of the action to be taken and reasons therefore. Upon dismissal or suspension, a member shall have the right to appeal said action as outlined in the employee handbook within twenty-four (24) hours.

FUNERAL GUIDELINES

Purpose:

This SOG establishes guidelines for the participation of the Memphis Fire Department in funerals of members and their families.

Active Member Line of Duty Death:

The Chief organizes an informational meeting with the other officers.

The MFFSA LOD Team is contacted for assistance.

The Chief is the primary contact for the family.

A critical stress debrief team is called in and a meeting is held for all members.

Class A uniforms are worn with mourning bands during all visitation hours.

Two MFD members will be on guard during all visitation hours.

A fire department walk through with the Fireman's Prayer recited will be conducted. A county all-call will be made to invite other departments to the walk through.

Flowers will be sent by the department.

Active Member Death – Non Line of Duty

Same as above with the exception of contacting the MFFSA LOD Team.

Retiree Death

Same as Active Member Death – Non Line of Duty with the following exceptions:

The critical stress debrief team and meeting will be at the discretion of the officer board.

No members on guard during visitation.

Spouse or Child of an Active Member or Living Retiree

The Chief is the primary family contact.

Notification of the death will be made to all members.

A fire department walk through will be held. The Fireman's Prayer will not be recited.

Class A uniforms without mourning bands are to be worn.

Flowers will be sent by the department.

Immediate Family Death of an Active Member (Mother, Father, Sister or Brother)

Same as Spouse or Child of an Active Member or Living Retiree above.

DAYTIME MUTUAL AID WITH EMMETT FD

Purpose:

This SOG is written to define appropriate responses to weekday daytime calls for Memphis and Emmett Fire Departments.

Employee Response Guidelines:

Memphis Fire Department and Emmett Fire Department currently have an automatic mutual aid agreement for calls occurring between the hours of 6:00 AM and 6:00 PM on weekdays. The following guidelines are to be used for response to these calls:

- 1) During the hours of 6:00 AM to 6:00 PM on weekdays, members are to keep their pagers on setting C. This will alert the member to any type of call for both departments.
- 2) When either department is dispatched during the above hours, both departments are to respond to the call until told otherwise.

In the event a call is received for Memphis during the above hours, responders are asked to respond to the call as they would following normal procedures. If responders feel they have adequate manpower and equipment, they are asked to announce over the radio on 74F911 that Emmett units can stand down or clear. If responders feel that they will need either manpower, equipment or both, they are to broadcast over 74F911 that they request Emmett to continue with whatever resources are needed

OPERATION OF POLARIS RANGER GRASS UNIT

SOG: Operation of Polaris Ranger Grass Unit and Trailer

Purpose:

This SOG is written to define appropriate operation of the Polaris Ranger grass unit.

Response Guidelines:

- 1) The designation of this unit shall be Grass 1 (G1).
- 2) Equipment to be included on this unit will include: Drafting hose, 4 brooms, TNT tool and land anchor. A bag will be provided for the equipment to be placed into.
- 3) The headlights will be used at all times.
- 4) When using the unit on paved roads the drive selector switch it to be kept in the 1 wheel drive position. Other positions can be used in cases where wheel slippage may occur.
- 5) Seat belts are to be worn at all times.
- 6) Non-paved roads are to be utilized for responses whenever possible.
- 7) A prep radio needs to be taken in the unit when it is used. No mobile radio is mounted in the unit.
- 8) When operated on roadways, the doors and windshield must be in place on the unit.
- 9) The driver of the unit is responsible for refilling the unit with water and gasoline after usage.
- 10) Before driving the unit in emergency situations the driver must complete 2 hours of training time and be signed off by the Chief.
- 11) Responses within the MFD service area:
 - a. The unit will be driven to calls using emergency status. Use all guidelines above while responding. A trailer may be utilized but in that case the response will be non-emergency status.
- 12) Mutual Aid Responses To Other Departments:
 - a. If the call is located in the area bounded by Miller Rd. to the west, I-69 to the north, Mayer Rd. to the east and School Section / Meskill Roads to the south then the unit is to respond as if in the MFD service area. For mutual aid calls in any other area the trailer is to be utilized in a non-emergency manner.

13) Trailer Usage:

- a. The trailer is to be utilized in a non-emergency manner.
- b. U1 is to be utilized for pulling the trailer unless additional personnel are required. In that case, R2 may be utilized to pull the trailer.
- c. Whenever possible, at least 2 people will respond when utilizing the trailer.
- d. The driver is responsible for ensuring G1 is secured to the trailer using the proper tie-down equipment. In addition, all equipment on G1 is to be properly secured.
- e. The trailer will be checked as part of the truck check of U1.
- f. Before using the trailer in a run situation, the operator will be required to complete 1 hour of training time. Yearly requalification will also be required. Requalification will be done at the same time as other Memphis Fire Department vehicles.

RESCUE 2 TAKE HOME GUIDELINES

These guidelines outline the responsibilities and requirements for taking R2 home to respond to calls directly from a member's residence. The guidelines are intended to create better response time within Memphis Fire Department coverage area as well as guaranteeing someone will answer a call.

Members are able to take R2 home to respond to calls as long as all the requirements of this SOG are met.

The member must have at least Firefighter 1&2 and a Medical license. They also must be an **ACTIVE** member of the department for at least one year.

Members requesting to take home R2 must have permission from the officer staff prior to taking the vehicle home.

Members that take R2 home to respond to calls **MUST** respond to **ALL** dispatched calls, emergency or non-emergency. Once they are no longer able to respond to calls, R2 must be returned to the station immediately (family emergencies, called into work, etc). Members must stay within the Memphis Fire district unless on department business or responding to a mutual aid call

Members taking R2 home must wear a Memphis Fire Department shirt when responding to calls. They must take their turnout gear with them when taking R2 home.

When responding with R2, the member should acknowledge with dispatch that they are clear on the call and then next notify the rest of the dept. on channel 74F14 that the member is responding and what, if any, further assistance is needed.

If a member takes R2 home to respond to calls and does not respond to a call that is dispatched, then that member will be suspended for thirty days from the dept. It will be up to the officer staff as to if that member will be allowed to utilize this procedure in the future.

When taking R2 home, the member shall notify the entire membership via email that they have taken the unit. They shall also notify the entire membership when the unit is returned to the station.

NARCAN GUIDELINES

These guidelines identify the operations of administering and the restocking of NARCAN.

Administering

Per state and local protocol, MFR agencies are required to carry NARCAN on each MFR licensed vehicle. MFR's are capable of administering NARCAN in the field via Naloxone (nasal mist syringe). Steps for administering are as follows:

1. Two rescuers must be present at the time of administration.
2. Airway is first and most important. Ventilation must be provided to the patient.
3. Contact the ALS unit responding to confirm their ETA. If the ETA is greater than 5 minutes then you may administer NARCAN. If the ETA is less than 5 minutes then continue to assist with breathing and patient care until the ALS unit arrives.
4. Attach the atomizing device to the prefilled NARCAN syringe.
5. Use one hand to support the back of the patient's head if possible.
6. Place the tip of the atomizing device snugly against one nostril and administer one half of the medication. Repeat this process with the remaining medication into the other nostril.
7. Document the time the medication was administered.

Restocking

Once the medication has been administered to a patient, the MFR provider or another MFR that was on the alarm **MUST** go to the hospital with the patient via the ALS unit that transports the patient or a fire department vehicle. This must be done at the same time the patient is transported to the hospital so a new medication dosage can be put back in service as soon as possible. The MFR that responds to the hospital must take with them the used medication and the form that is enclosed within the medication envelope. The medication transfer form must be completed prior to being able to exchange for new medication. The fire department copy must go with the MFR for his/her record. The patient care report must be turned into the Chief within 2 days of care being provided. At that point, the Chief will turn it into the local Medical Control.

PRIVACY OF PATIENT INFORMATION

Patient information received by the Memphis Fire Department is maintained in the strictest confidence.

I understand that my release of patient information to anyone outside the organization is prohibited, unless required for purposes of treatment, payment or health care operations. I understand that my involvement in any discussions regarding patients must be limited to that necessary to carry out my job responsibilities.

I understand that acceptable use of patient information within the organization includes, but is not limited to, exchange of patient information needed for the treatment of the patient, billing and other essential health care operations such as peer review, internal audits and quality assurance activities.

I understand that the Memphis Fire Department provides services to patients that are private and confidential and that I am responsible for respecting and protecting the privacy rights of patients. I understand that patients provide personal information in a variety of forms such electronic, oral, written, etc., and that all information is strictly confidential and protected by federal and state laws without regard to the form of the information.

I agree to comply with all confidentiality policies and procedures set in place by the Memphis Fire Department during my entire employment or association with the Memphis Fire Department. If I, at any time, knowingly or inadvertently breach the patient confidentiality policies and procedures, I agree to notify a member of the officer staff immediately. In addition, I understand that a breach of patient confidentiality may result in suspension or termination of my employment or association for any reason, or at any time upon request, I agree to return any and all patient information in my possession.

I understand that a breach of patient confidentiality during or following my employment or association with the Memphis Fire Department may subject me to personal liability.

I understand that a copy of the Code of Federal Regulations, with supplemental materials from the Federal Register, specific to regulations regarding Privacy of Individually Identifiable Health Information promulgated under part C of title XI of the Social Security Act and section 264 of Public Law 104-191 (the "Health Insurance Portability and Accountability Act") are maintained in the business office. I have been afforded the opportunity to review those materials.

I received and have read and understand all privacy policies and procedures provided to me by the Memphis Fire Department. I agree to abide by all policies and acknowledge that my failure to do so may subject me to disciplinary action, which may include verbal or written warning, suspension or termination of employment or of any membership or association with the Memphis Fire Department.

Signature: _____ Date: _____

Printed Name: _____

STRUCTURE FIRES

The following are guidelines to be used when the Memphis Fire Department is dispatched for a structure fire.

Arrival On Scene

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

Scene Safety

1. There shall be at least 2 personnel on any interior attack hose-line.
2. There shall be at least 2 personnel on any interior search and rescue.
3. There should be a R.I.T. in place on any interior operation or any situation where personnel are exposed or could be exposed to any immediately dangerous to health or life (IDHL) situation.
4. Personnel must be authorized and properly trained before participating in any interior structural fire attack or search and rescue operations.

Incident Actions

Rescue

1. Human life is the most important consideration at a fire or other emergency.
2. Rescue of humans overrides all other strategic considerations at a fire.
3. The primary functions of any adequately staffed truck (if available) shall be rescue.
4. A primary and secondary search shall be conducted at all structure fires if there is any question that human life may be in danger. During search, all rooms should be marked by some means to indicate that the particular room has been searched.

Exposure Protection

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

Confinement

1. The strategy of confinement involves preventing the fire from extending to uninvolved sections of the building on fire.
2. Whenever possible, the most effective method of confining fire spread is a direct attack on the fire.
3. The Incident Commander shall decide whether to make an offensive approach, aggressive interior attack or a defensive approach, attacking the fire from the outside.
4. All avenues of fire spread must be considered with examples including: shafts, openings, utility raceways, ducts, etc.
5. Where fires involve concealed spaces (attic, ceilings, construction voids, etc.) it becomes very important that the vent crews open up and fire attacks operate fire streams into such areas.

Extinguishment

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

Overhaul

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

Ventilation

- 1) Based upon the situation, ventilation may need to occur anytime during the operation.
- 2) Ventilation shall be employed to:
 - a) Channel heat, smoke and flames from potential victims
 - b) To prevent backdraft and flashover
 - c) To remove heat and smoke from the building in order to reduce property damage.
 - d) To allow the interior of the structure to be more tenable and safer for firefighting operations.

Salvage

- 1) Salvage may need to begin at various points during a fire operation.
- 2) Salvage involves operations required to safeguard personal property, furnishings and the unaffected portions of a structure from the effects of heat, smoke, fire, water and the weather.
- 3) Salvage should include:
 - a) The use of salvage covers.
 - b) Removing water from the structure.
 - c) Removing furniture and personal belongings to a safe location.
 - d) Debris removal
 - e) Removal of valuables from debris
 - f) Covering openings to keep weather out and to secure the building.
- 4) All members are expected to perform in a manner that continually reduces loss during fire operations.
- 5) Salvage may be performed by both the fire department and commercial salvage companies hired by the structure owner or insurance company.

Utility Control

- 1) Utilities should be shut down and brought under control to insure that they will not contribute to the fire's spread, overall damage or create any type of safety hazard.
- 2) At structure fires where electrical involvement or damage has occurred, request via radio or telephone the response of the proper electric company.
- 3) If the electric company is not available in time, fire personnel may shut down the power via removal of the electric meter of the structure.
- 4) If necessary, shut down gas lines at the meter or tank and have the gas company notified. Meters that have been shut off by fire department personnel should be properly locked.
- 5) If necessary, shut down water supplies to the structure at the valve closest to the point of usage.

BLOOD GLUCOSE TESTING

Purpose:

This SOG describes the use of a blood glucometer for the purpose of measuring blood glucose level.

The Memphis Fire Department will follow the appropriate Medical Control Authority's protocol for blood glucose testing depending on what county the test is being done in.

Listed below are the glucometer manufacturer's recommended procedures for performing a blood glucose test, performing a control solution test and cleaning and disinfecting procedures.

Performing a Blood Glucose Test:

- 1) Wear appropriate protective gear such as disposable gloves.
- 2) Insert a test strip with the contact bars facing up into the meter's test strip port. Push the strip gently into the strip port until the meter automatically turns on and the prism symbol appears.
- 3) Disinfect the area to be lanced on the patient's finger using an alcohol wipe.
- 4) Obtain a blood sample using a lancing device. Place the lancing device against the sampling site in the direction of the arrow. The best puncture sites are areas on the middle or ring fingers. Remove the device from the finger. Wait a few seconds for a blood drop to form. A minimum volume of 0.5 microliter is needed to fill the confirmation window.
- 5) After the prism symbol appears on the glucometer screen, apply the blood sample to the narrow end of the test strip until the meter beeps. It is recommended that the application of the blood sample to the test strip be performed virtually vertical to the sample site.
- 6) The test result will appear after the meter counts down from 5 to 1.
- 7) Slide the ejector button on the right side of the meter to discard used test strips safely in a disposable container.

Performing a Control Solution Test:

- 1) A control solution test should be done for the following reasons:
 - When it is desired to practice the testing procedure using the control solution instead of blood.
 - When using the meter for the first time.
 - Whenever a new vial of test strips is opened.
 - If the meter or test strips do not function properly.
 - If symptoms are inconsistent with the blood glucose test results and it is felt that the meter or test strips are not working properly.
 - If the meter is dropped or damaged.

- 2) Insert a test strip into the meter's test strip port with the contact bars facing upwards. Gently push the test strip into the test strip port until the meter beeps.
- 3) Shake the control solution bottle well before each test.
- 4) Discard one or two drops of control solution. Apply one drop of control solution to the top of the control solution cap. Touch the narrow edge of the test strip to the control solution until the meter beeps.
- 5) Test results appear after the meter counts down from 5 to 1. Compare the control result with the appropriate control solution range printed on the test strip vial. If the result falls within the specified range, the meter is ready to use.
- 6) Remove the test strip from the meter.
- 7) Control solution must be a room temperature 68 F – 77 F before use.
- 8) Control solution should be capped tightly and stored at 46 F – 86 F.

Cleaning and Disinfecting Procedures:

- 1) The meter should be cleaned and disinfected after use on each patient.
- 2) Use Professional Disposables International, Inc (PDI) Super Sani-Cloth Germicidal Disposable Wipes or equivalent for cleaning and disinfecting the meter.
- 3) To clean the meter wear appropriate protective gear such as disposable gloves. Using a clean wipe, wipe the entire surface of the meter 3 times horizontally and 3 times vertically to clean blood and other body fluids. Dispose the used cleaning wipe. Proceed to disinfect the meter.
- 4) To disinfect the meter use a new wipe and wipe the entire surface of the meter 3 times horizontally and 3 time vertically to remove blood-borne pathogens. Dispose the used disinfecting wipe. Allow the exterior surface of the meter to remain wet for 1 minute the wipe using a dry cloth
- 5) After disinfection, the user's gloves should be removed and thrown away. Wash hands before proceeding to the next patient.

LUCAS DEVICE

Purpose:

This SOG describes the use and care of the LUCAS device.

Indications for use of the LUCAS device - The LUCAS device may be used in adult patients who have suffered cardiac arrest, where manual CPR would otherwise be used. The LUCAS device should be used in accordance with device specific instructions.

Contraindications for use of the LUCAS device:

- If it is not possible to position the LUCAS device safely or correctly on the patient's chest
- Too small patient: If the LUCAS device alerts with 3 fast signals when lowering the Suction Cup and you cannot enter the PAUSE mode or ACTIVE mode
- Too large patient: If you cannot lock the Upper Part of the LUCAS device to the Back Plate without compressing the patient's chest.

Arrival at the Patient

1. Manual chest compressions and AHA CPR should be initiated immediately while the LUCAS device is being prepared to be placed on the patient.
2. Minimize interruptions of manual chest compressions during the preparation and application of the LUCAS device
3. The LUCAS device should be applied to the patient by personal who have been trained and authorized to use the LUCAS device by the Memphis Fire Department.

Care for LUCAS device

1. If the Memphis Fire Department LUCAS device is transported with the patient to a hospital, then MFD personnel will obtain a LUCAS device from the responding RLEMS unit. This will keep a LUCAS device in the MFD responding area. The MFD and RLEMS LUCAS devices should be swapped back to their correct units as soon as practical.
2. Remove the suction cup and the stabilization strap (if used, remove the patient straps).
3. Clean all surfaces and straps with a soft cloth and warm water with a mild cleaning agent or disinfectant agent
4. Allow the device to dry before you pack it into the Carrying Case.
5. Preparations for next use are to replace battery, mount new suction cup, reattach all straps, and pack the LUCAS device in the carrying case.
6. The LUCAS device in the carrying case should be charging and secured while stored in a vehicle.
7. Routine checks of the LUCAS device should be done weekly, and after each use of the LUCAS device in accordance with instruction manual Appendix B.
8. The battery in the LUCAS device should be swapped with the spare battery at each truck check. The battery removed from the LUCAS device should be placed in the charger.

ON-CALL POLICY

Purpose:

The Memphis Fire Department utilizes an “on call” system to ensure coverage of calls.

Guidelines:

Each Firefighter will be required to choose specific days per month that they will be required to be “on call” to respond to an incident. The number of days per month required to be “on call” will be equal for all firefighters and will be determined by the officer staff depending on the number of members currently on the department. A calendar will be established that is accessible by members to view who is “on call” during any particular day.

Attendance during a member’s assigned “on call” time is mandatory. Attendance is strongly encouraged at all times whether the member is “on call” or not.

If a conflict exists and the member is not able to be “on call” for all or part of their assigned day, it will be the responsibility of that member to attempt to find another member to cover the time. The department group text will be used for this purpose.

Trading time with another member is allowed once the calendar is established. It is up to the members who traded to keep track of all traded time.

If a member fails to respond to a call or responds in a time frame greater than 5 minutes after the call is dispatched during their designated “on call” period, the following disciplinary action will be taken:

- 1st Occurrence – A written warning will be placed in the member’s personnel file. The written warning will be removed from the file after 1 year.
- 2nd Occurrence – A disciplinary hearing will be held with the Chief, the Assistant Chief and the member. A possible 5 day suspension may result. If the suspension occurs during their “on call” shift day then it will be the responsibility of that individual to fill the vacancy.
- 3rd Occurrence – A disciplinary hearing will be held with the Chief, the Assistant Chief and the member. A possible 15 day suspension may result. If the suspension occurs during their “on call” shift day then it will be the responsibility of that individual to fill the vacancy.
- 4th Occurrence – The member will be immediately suspended until a formal disciplinary hearing with the Command Staff is held. Possible dismissal from the department may result from the hearing.

MEDICAL CONTROL AUTHORITY PROTOCOLS:

Purpose:

This SOG describes the use of Medical Control Authority protocols.

Medical Control Authority Protocol Usage:

The Memphis Fire Department will utilize appropriate protocols published by the Medical Control Authority for all medical calls.

The appropriate Medical Control Authority protocols used will be determined by the county in which the medical call occurs.

ON THE JOB INJURY PROCEDURE:

Purpose:

This SOG outlines the procedure to follow in case of an on the job injury.

Procedure:

Seek appropriate level of medical care for the injury involved.

Any injuries incurred while on the job require a report detailing when and how the injury occurred. The report shall be completed at the employee's earliest opportunity and a copy attached to the appropriate City of Memphis paperwork.

Minor Injuries Not Requiring Treatment At An Urgent Care Clinic Or Hospital:

- 1) Complete the Employer's Report of Injury form as soon as possible after the injury and forward to an officer who shall forward a copy to City Hall.
- 2) Complete the Employer's Basic Report of Injury form (OCR 100) as soon as possible and forward to an officer.
- 3) Complete a report or memo detailing the injury as soon as possible and forward to an officer.
- 4) Report the injury to an officer as soon as possible.

Injuries Requiring Care At An Urgent Care Facility Or A Hospital:

- 1) If possible, complete the Occupational Health Partners Employers Authorization form and take it with you to the health care provider and present it to the health care provider. Ask for a copy to include in your paperwork.
- 2) Complete the Employer's Report of Injury form as soon as possible after the injury and forward to an officer who shall forward a copy to City Hall.
- 3) Complete the Employer's Basic Report of Injury form (OCR 100) as soon as possible and forward to an officer.
- 4) Complete a report or memo detailing the injury as soon as possible and forward to an officer.
- 5) Report the injury to an officer as soon as possible.
- 6) If your injury requires continued care, follow ups, rehabilitation, etc., maintain a Medical Treatment Mileage Log which can be turned in to Worker's Compensation for reimbursement.

If you are injured during business hours and require non-emergency care, you may be treated at Henry Ford Walk In Clinic located at 7267 Main St., Richmond, MI, 48062. The phone number is (586) 649-9078. The employee may choose a different facility, however, the employee may have to pay out of pocket and seek reimbursement from the city.

If you are injured after hours and require non-emergency care, you may be treated at Village Health Urgent and Family Care located at 12150 30 Mile Road, Washington, MI., 48095. The phone number is (586)752-7256). This is a 24 hour clinic.

If you are injured an emergency care is needed and the employee transports themselves go to Henry Ford Macomb Hospital located at 15855 19 Mile Rd., Clinton Township, MI, 48038 or McClaren Port Huron Hospital, 1221 Pine Grove, Pt. Huron, MI, 48060.

If you are injured and require ambulance transport then EMS shall decide what hospital is appropriate.

All injuries regardless of seriousness shall be reported within 24 hours to protect the rights of employee and employer under Workmen's Compensation laws.

PART TIME SHIFT WORK:

Purpose:

This SOG explains the expectations of a Memphis Firefighter working a paid part time shift.

Procedure:

- The firefighter will be expected to be on time and work the entire shift he or she has signed up for with the fire chief's or designated officer's approval.
- The firefighter will be required to fill out their timesheet (located on the radio room computer) and turn it into the chief after every shift.
- The firefighter working shift work is required to acknowledge Central Dispatch on all incidents that are dispatched within 30 seconds of receiving the alert.
- The firefighter working part time shift work shall also respond to all incidents within one minute of receiving the alert from Dispatch, with the proper equipment to handle the incident dispatched.
- If the firefighter is working an 8-hour shift, they are allowed a half hour paid lunch. During their lunch break they are to not leave the service area unless approved by one of the officer staff.
- The firefighter working shift work will be given tasks to be completed each day unless call volume doesn't allow enough time to complete the tasks.
- A firefighter may not exceed 28 hours in a pay period. A pay period is considered the city's pay period which is Sunday to Saturday for a total of 7 days.
- A firefighter working a paid shift will be counted for the incidents they attended but will not be paid their run pay while collecting a part-time wage.
- The firefighter working on shift will not be allowed to conduct personal business during their shift unless approved by an officer.

RESPIRATORY PROTECTION PROGRAM:

PURPOSE:

General Industry Standard 1910.134 of the Michigan Occupational Health Standards requires that a Respiratory Protection Program shall be established whenever respirators are required to be used in an occupational setting. This program is a guideline to prevent employee overexposure to atmospheric contaminants and oxygen deficient atmospheres which are potentially harmful to health.

SCOPE AND APPLICATION:

This written respirator program has been prepared for the Memphis Fire Department. It applies to all employees assigned to wear respirators.

RESPONSIBILITIES:

Employer:

- Determine the need for respiratory protection.
- Establish and maintain a Respiratory Protection Program in compliance with all requirements of the 1910.134 of the Michigan Occupational Health Standards.
- Provide all employees in the program with respirators appropriate to the purpose intended.

Employees:

- Wear assigned respirator when and where required and in the manner in which they were trained.
- Care for and maintain their respirators as instructed, and store them in a clean and sanitary location.
- Inform supervisor if the respirator no longer fits well, and request a new one that fits properly.
- Inform supervisor or the Program Administrator of any respiratory hazards that are not adequately addressed in the workplace and of any other concerns regarding the program.

Program Administrator:

The Memphis Fire Department has designated the Fire Chief as the Program Administrator. This person administers or oversees the respiratory program including evaluating its effectiveness.

SELECTION OF RESPIRATORS IN THE WORKPLACE AND PROCEDURES FOR USE IN FIRE FIGHTING:

It is the policy of the Memphis Fire Department that all personnel expected to respond and function in toxic atmospheres shall be equipped with SCBA and trained in its proper use and care. These respirators shall be used in accordance with the manufacturer's recommendations and the Michigan Firefighter Training Council performance testing guidelines.

Respirators for IDLH (Immediately Dangerous to Life and Health) Atmospheres:

Atmosphere supplying respirators operated in a positive pressure mode shall be used by all personnel working in areas where:

- The atmosphere is immediately dangerous to life and health (IDLH);

- The atmosphere is suspected of being IDLH;
- The atmosphere may rapidly become IDLH.

All interior structural fires, hazmat response hot zones and confined space entries shall be considered to be IDLH, unless air monitoring proves otherwise.

The fire department shall provide the following respirators for fire department use in IDLH atmospheres:

A full facepiece, positive pressure, SCBA certified by NIOSH for a minimum service life of thirty (30) minutes.

Note: Because the federal register 29 CFR part 1910.139 will regulate respiratory protection and exposure to M. Tuberculosis, the Memphis Fire Department will use SCBA's or N-95 particulate masks in all cases for respiratory protection.

MEDICAL EVALUATIONS OF EMPLOYEES REQUIRED TO USE RESPIRATORS

Using a respirator may place physiological burdens on fire fighters that vary with the type of work in which the respirator is used and the medical status of the employee. Accordingly, each employee must undergo a medical evaluation to determine the employee's ability to use the respirator. All new employees must undergo a medical evaluation prior to being fit tested or required to use the respirator. Medical evaluations shall be administered to all uniformed employees of the fire department according to the following schedule:

All new employees will receive a medical evaluation during their entry physical. All current fire fighters will receive a medical evaluation with physical or complete and send an evaluation to the fire department doctor for review.

The department shall identify a Physician or other Licensed Health Care Professional (PLHCP) to administer a medical questionnaire to each fire fighter. The questionnaire shall be administered confidentially during a time agreed upon by the employer and employee. The questionnaire will determine the need for a follow-up examination.

The department shall use Concentra Urgent Care, Chesterfield, MI, 48047, or a qualified alternative, to administer the questionnaire and for any needed follow-up examination.

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

Note: The following appendices are provided for use in administering the program:

- Appendix I Medical Questionnaire
- Appendix II Information to be supplied to the PLHCP by the Fire Department
- Appendix III Information supplied by the PLHCP to the Fire Department
- Appendix IV Fit Test Record

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

- Employee reports signs and/or symptoms related to his/her ability to use a respirator, such as shortness of breath, dizziness, chest pains or wheezing;
- The physician or supervisor informs the Program Administrator that the employee needs to be reevaluated;

- Information from this program, including observations made during fit testing and program evaluation, indicates a need for reevaluation;
- A change occurs in workplace conditions that may result in an increased physiological burden on the employee.

The Program Administrator, employee and physician would arrange an appropriate time for the exam. All above exams are paid for by the employer.

FIT TESTING PROCEDURES

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

Fit tests will be conducted on all employees who use respirators following the initial medical evaluation, at least annually thereafter, or whenever the employer observes or receives a report of changes in the employee's physical condition that could affect respirator fit, or the employee states the fit of the respirator is unacceptable.

Factors that may affect respirator fit are:

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

Fit tests will be administered using an OSHA accepted qualitative or quantitative test in the negative pressure mode. The protocol used will be stated on the fit test record for each employee. See Appendix IV.

PROCEDURES FOR PROPER RESPIRATOR USE

General Use Procedures:

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

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

Employees are not permitted to wear tight-fitting respirators if they have any conditions such as facial scars, beards or other facial hair, or missing dentures that prevents them from achieving a good seal. Employees are not permitted to wear headphones, jewelry, glasses or other articles that may interfere with the face piece to face seal.

PROCEDURES OF IDLH (Immediately Dangerous to Life and Health) ATMOSPHERES (2 In / 2 Out)

The following are not meant to preclude an Incident Commander from starting suppression (not entering) or rescue operations (entering) in a structural incident. The requirement intends that the Rapid Intervention Team (RIT) be established as soon as practical to ensure safety of fire fighters, yet not detract from the responsibility to provide rescue and suppression to citizens.

Rapid Intervention Team as described in NFPA 1500 6-5:

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

The composition and structure of rapid intervention crews shall be permitted to be flexible based on the type of incident and the size and complexity of operations. The incident commander shall evaluate the situation and the risks to operating teams and shall provide one or more rapid intervention crews commensurate with the needs of the situation.

In the early stages of an incident, which includes the deployment of a fire department's initial attack assignment, the rapid intervention crew(s) shall be in compliance with NFPA 1500 6-4.4 and 6-4.4.2 and either one of the following:

- (a) On-scene members designated and dedicated as rapid intervention crew(s)
- (b) On-scene members performing other functions but ready to redeploy to perform rapid intervention crew functions. The assignment of any personnel shall not be permitted as members of the rapid intervention crew if abandoning their critical task(s) to perform rescue clearly jeopardizes the safety and health of any member operating at the incident.

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

Two firefighters shall be located outside the IDLH atmosphere; visual, voice, signal line, or hose line is maintained between the firefighters in the IDLH atmosphere and the firefighters located outside the IDLH atmosphere.

The firefighters located outside the IDLH atmosphere shall be trained and equipped to provide an effective emergency rescue.

The Incident Commander is notified before the RIT located outside the IDLH atmosphere enter the IDLH atmosphere to provide an emergency rescue. When the "two out" enter to perform rescue, they must first notify the IC. The IC must immediately provide additional assistance.

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

Firefighters located outside the IDLH atmospheres are equipped with:

Positive pressure SCBA;

Rescuers shall have appropriate retrieval equipment for removing the employee(s) who enter these hazardous atmospheres where retrieval equipment would contribute to the rescue of the employee(s) and would not increase the overall risk resulting from entry. This could include a charged 1-1/2" or larger hose line.

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

First on scene personnel to a structure fire beyond the capabilities of extinguishment by a fire extinguisher, will secure the scene, lay hose lines, fight fire from outside, and prepare to enter building. Once a minimum of two two-person crews are available, two firefighters will enter to extinguish fire and the other two firefighters must be outside the IDLH atmosphere and monitor and be ready for rescue of first two firefighters.

If a rescue of first two fire fighters is necessary, the rescue team will notify the IC who will form another rescue team any way possible including calling for mutual aid.

Nothing in this rule is meant to preclude firefighters from performing emergency rescue activities before an entire team has assembled, however, such action is not to be considered a standard of operation. Whenever the Two In, Two Out rule is not followed, a written report must be submitted to the Chief, by the individual(s) who were involved in the incident explaining the necessity of doing so.

PROCEDURES FOR SUSPECTED HARMFUL AIRBORNE AGENT

Whenever a suspected airborne illness or other communicable disease is suspected to be airborne, or exposure to airborne droplets of bodily fluid is reasonable, all Healthcare providers shall don the N95 particulate mask prior to providing patient care. In the event the healthcare provider is provided with information that the patient has been diagnosed or is suspected to be diagnosed with Tuberculosis, Influenza or other contagious airborne illness, the healthcare provider WILL don PPE in the form of respiratory, eye, and hand protection prior to patient contact.

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

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

Respirators issued for the exclusive use of a firefighter shall be cleaned and disinfected as often as necessary to be maintained in a sanitary condition.

Respirators issued to more than one firefighter shall be cleaned and disinfected before being worn by different individuals.

Respirators used in fit testing and training shall be cleaned and disinfected after each use.

Respirator face pieces assigned to personnel (personal face pieces) shall be cleaned and disinfected as required by the user of the face piece.

The face piece shall be placed in a clean, dry container and stored in a manner which prevents deformation of the face seal, other damage or contamination.

Respirator face pieces are stored in the following location(s) and manner:

Each face piece will be in a velvet bag for the face piece. These bags will be stored on vehicles with each SCBA. Personal face pieces will also be in velvet bag and kept with your fire department turn-out gear.

The cleaning and disinfecting procedure supplied by the manufacturer/seller of the respirator shall be used by the department:

In station, the air mask will be cleaned by using SCOTT multi-wash Mini or equivalent. It cleans and sanitizes in one operation. Spray wash as directed by instructions located near cleaning area. It will not deteriorate rubber, plastic, glass or metal parts.

In field, the mask will be cleaned before other person's use with the safety equipment wipes that hygienically clean the mask. These are located in Engines and Rescues.

The Program Administrator or designee will ensure an adequate supply of appropriate cleaning and disinfection material at the cleaning station. If supplies are low, employees should contact a fire department officer who will replenish supplies.

MAINTENANCE

Respirators are to be properly maintained at all times in order to ensure that they function properly and adequately protect the employee. Maintenance involves a thorough visual inspection for cleanliness and defects. Worn or deteriorated parts will be replaced prior to use. No components will be replaced or repairs made beyond those recommended by the manufacturer. Repairs to regulators or alarms of atmosphere-supplying respirators will be performed by the manufacturer or a person certified by the manufacturer.

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

For fire department respirators, fire department personnel shall:

Certify the respirator by documenting the date the inspection was performed (at weekly truck training) the name (or a signature) of the person who made the inspection, the findings, required remedial action, and a serial number or any other means of identifying the inspected respirator. This will be done on the weekly truck training sheets.

The fire department shall ensure that respirators that fail an inspection or are otherwise found to be defective are tagged with problem, removed from service, replaced with spare, and are discarded or repaired or adjusted in accordance with the following procedures:

Repairs or adjustments to respirators are to be made only by persons appropriately trained to perform such operations and shall use only the respirator manufacturer's NIOSH-approved parts designed for the respirator.

Repairs shall be made according to the manufacturer's recommendations and specifications for the type and extent of repairs to be performed; and SCBA repairs including but not limited to reducing and admission valves, regulators, and alarms shall be adjusted or repaired only by the manufacturer or a technician trained by the manufacturer or vendor supplying the equipment to the fire department.

QUALITY AND QUANTITY OF BREATHING AIR

Breathing air in the SCBA cylinder shall meet the requirements of the Compressed Gas Association G-7.1-1989, COMMODITY SPECIFICATION FOR AIR, with a minimum air quality of Grade D.

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

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

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

Standards for breathing air and hazards associated include:

Oxygen content (v/v) of 19.5-23.5%

Hydrocarbons (condensed) content of 5 milligrams per cubic meter of air or less;

Carbon monoxide (CO) content of 10 ppm or less;

Carbon dioxide content of 1,000 ppm or less;

Lack of a noticeable odor.

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

Cylinders are tested and maintained as prescribed in the Shipping Container Specification Regulations of the Department of Transportation (49 CFR part 173 and part 178) test requirements of three years for composite fiberglass cylinders and five years for Carbon fiber, steel or aluminum cylinders.

Note: Composite cylinders have a maximum use life of 15 years.

The moisture content in the cylinder does not exceed a dew point of -50 degrees F. (-45.6 degrees C.) at 1 atmosphere pressure.

RESPIRATORY HAZARDS AND TRAINING ON RESPIRATOR USE

The fire department is required to provide training to those who use respirators. The training must be comprehensive, understandable, and occur annually, and more often if necessary. Documentation of this training shall occur.

The fire department shall ensure that each firefighter can demonstrate knowledge of at least the following:

Why the respirator is necessary and how improper fit, usage, or maintenance can compromise the protective effect of the respirator;

What the limitations and capabilities of the respirator are;

How to use the respirator effectively in emergency situations, including situations in which the respirator malfunctions;

How to inspect, put on and remove, use, and check the seals of the respirator;

What the procedures are for maintenance and storage of the respirator;

How to recognize medical signs and symptoms that may limit or prevent the effective use of respirators;

The general requirements of this program.

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

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

Changes in the workplace or the type of respirator render previous training obsolete;

Inadequacies in the firefighters' knowledge or uses of the respirator indicate that the firefighter has not retained the requisite understanding or skill;

Any other situations arise in which retraining appears necessary to ensure safe respirator use.

PROCEDURES FOR EVALUATING THE RESPIRATOR PROGRAM:

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

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

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

RECORD KEEPING:

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

- Medical evaluation records (Appendix II and III)
- Fit testing records (Appendix IV)

In addition, the department will maintain records of employees' training (e.g. dates, attendees, trainer(s), subject matter)

APPENDIX I

See document from Concentra Occupational Health Program.

APPENDIX II

Information to be Supplied to the Physician or licensed Healthcare Professional (PLHCP) by the Employer for Use in the Evaluation/Examination.*

The employee of Memphis Fire Department will be wearing an SCBA of the following type and weight:

SCOTT air pack ; Weight is 25 lbs. to 37 lbs. depending on bottle type.

Duration and frequency of SCBA use: No set frequency

When used, would be 30 minutes to 1 hour duration.

Expected physical work effort: Light to Heavy

Additional protective clothing and equipment: Full Turn-Out Gear

Temperature and humidity extremes: Freezing to High Heat

Additional information: As a Memphis Fire Fighter, might not wear SCBA for months, but could also use multiple times in one day.

*Employee has provided their assessment of these issues in the medical questionnaire.

Note: This is the information required by 1910.134(e) (5) (I) and (ii).

In accordance with 1910.134(e)(5)(iii), the employer is required to provide the PLHCP with a copy of the Respiratory Protection Standard (1910.134) and a copy of their written respiratory protection program.

APPENDIX III

See documentation from Concentra Occupational Health.

APPENDIX IV

Fit Testing Record

Employee Fit Tested: _____ Date of Test: _____

Make: **3M** STYLE: **Health Care**

Model: N 95 Particulate Respirator and Surgical Mask Size: _____

Type of Fit Test Performed in accordance with protocols listed in 1910.134 Appendix A-OSHA Accepted Fit Test Protocols:

QUALITATIVE (QLFT)

Substance used: _____

	Pass	Fail
Types of exercise performed during fit test:		
1. Normal breathing	_____	_____
2. Deep breathing	_____	_____
3. Moving head up and down	_____	_____
4. Turning head side to side	_____	_____
5. Talking (rainbow passage)	_____	_____
6. Bending over or jogging in place	_____	_____
7. Normal breathing	_____	_____
Overall results	_____	_____

Comments: _____

Person administering the test: _____

Employed by Memphis Fire Department

Employee acknowledgment of test results:

Employee Signature: _____

DISINFECTION AND DECONTAMINATION:

Purpose:

This policy describes the decontamination procedures of equipment and clothing. This procedure outlines cleaning and disinfecting procedures for emergency medical equipment that may be contaminated with potentially infectious agents.

Procedure:

It is imperative that all members properly clean and disinfect reusable equipment to minimize the possibility of infection during emergency treatment. Cleaning and disinfecting decreases the likelihood of infections by reducing the amount of disease causing organisms on equipment. Cleaning is defined as the removal of all foreign materials from objects. Equipment for invasive procedures that require sterilization will not be used by the department but will provide comparable equipment that is single use only. These items will be disposed of after each use as if they were contaminated waste. All fire stations shall have a designated decontamination area. This area will be used only for disinfecting contaminated equipment. Cleaning infected equipment in this area will assure isolation of potential infectious agents. Stations will be provided cleaning solutions and necessary cleaning tools.

Contaminated Equipment Transport

Before transporting contaminated equipment from a scene or hospital to a designated cleaning area, these items shall be placed in a red biohazard bag. If the item is too large for the bag, care should be taken to make certain the item does not cause secondary contamination of equipment or supplies.

Equipment Disinfecting

Equipment that has been contaminated by blood or Other Potentially Infectious Materials (OPIM) shall be decontaminated through cleaning and disinfecting, or disposed of as contaminated waste. Members decontaminating and disinfecting equipment shall wear appropriate PPE and use disposable paper towels to remove gross contaminants. Anything used to clean blood or OPIM shall be disposed of as if it were contaminated waste. If using DisCide® wipes, follow the manufacturer directions on the container for disinfection / decontamination procedures. If any medical equipment is contaminated with a patient's blood or OPIM, it must be decontaminated after use. Gross Decontamination shall be accomplished by utilizing supplied DisCide® wipes. The equipment will then be disinfected using the E-Mist disinfection machine, with an approved water based disinfection solution, and allowed to dry for a minimum of 5 minutes. This process will inactivate microorganisms such as HIV, HBV, Tuberculosis, and MRSA. All EMS equipment shall be checked daily for cleanliness and operational readiness. Items that come into contact with patients will be given special attention in order to have them as clean as possible prior to use. The following areas shall be checked on a daily basis:

- Oxygen and EMS Bags
- Spine Boards and KED Boards
- Suction Unit
- Cardiac Monitor
- Intubation Kits

If cleaning is necessary, follow the recommendations below:

Oxygen/EMS Bags - Bags shall have all surfaces cleaned with soap and water. Dirt and debris will be removed and contents will be orderly and not overstocked.

Spine Boards/KED Boards - Clean with soap and water. Follow disinfecting directions listed above.

Suction Unit - Clean with soap and water to remove blood, food, or other particles. Follow disinfecting directions listed above.

Monitor - Contaminated cables should be cleaned after each use. Monitor exterior should be cleaned and free from contaminants, dirt, and debris using the disinfecting directions above. Carrying case should be cleaned with soap and water.

Intubation Kits - Cleaning of these items will follow directions listed in this section. Particular attention should be given to laryngoscope blades. Handles may be cleaned with using the disinfecting directions above.

Disposable Equipment

The medical equipment identified below that requires sterilization and will be disposed of as contaminated waste. The following list includes some of the equipment available that are disposable due to the difficulty of decontamination required:

Suction canisters/catheters/tubing.

Head immobilizer/C-collars.

Oxygen masks, cannulas, nebulizers, BVM's.

OB kits

Gloves, masks, sleeves.

Intubation tubes, OPA's, NPA's.

Bandaging materials, burn sheets.

Uniform Disinfection

Clothing that has been contaminated with blood or OPIM needs to be cleaned as follows:

Contaminated clothing, including turnouts, will be changed as soon as possible and washed in detergent and warm water as recommended by the manufacturer.

Contaminated uniform clothing will be washed at the fire station. Contaminated uniforms will be placed in a plastic bag to prevent any cross contamination of other uniforms, washed separately, and the washing machine should be rinsed with a cup of bleach after clothing is removed from machine. The department does not recommend the laundering of contaminated clothing at home.

Uniform Boots or shoes should be scrubbed with soap and hot water to remove contaminants. Wash the soles of footwear after the medical incident or as soon as possible, if contaminated with blood or OPIM.

Hand Washing

The Center for Disease Control (CDC) states that "hand washing before and after contact with patients is the single most important means of preventing the spread of infection." Washing your hands after encountering each patient is a must. Use soap and water, or approved waterless hand sanitizer available on all apparatus and vehicles when other wash facilities are not available. The CDC recommends that hand washing take a minimum of 30 seconds to properly rid the hands of protein matter, blood, secretions, and other contaminants picked up while handling patients. Vigorous scrubbing is essential. The following is the suggested method for hand washing:

Wet hands up to 2-3" above wrists.

Apply hand-cleaning agent. Various agents and soaps are furnished for station use.

Rub hands vigorously to work up lather.

Using rotating motion, apply friction to all surfaces of hands and wrists, including backs of hands, between fingers, and around and under nails. Interlace fingers and rub up and down; continue for 15 seconds.

Holding hands downward, rinse thoroughly, allowing the water to drop off fingertips.

Repeat procedure, dry hands thoroughly with a paper towel.

Turn off faucet using a clean paper towel so as not to re-contaminate your hands on the dirty faucet handle.

Hand Sanitizers

The CDC recommends the use of an alcohol based hand rub for decontaminating hands when soap and water hand washing is not available. It is recommended that personnel utilize the approved hand sanitizer and skin protectant, to kill germs on their skin and to provide additional protection against disease causing germs.

Medical Waste

Medical waste is any waste generated at an emergency scene. Proper disposal depends on whether such waste is contaminated, liquid, solid, or sharp. The purpose of this section is to ensure all department personnel can identify hazardous medical waste and deal with it in a safe manner. Medical waste contaminated, or suspected of contamination, with blood or OPIM shall be treated as infectious waste. Solid contaminated waste shall be placed in a red, biohazard-labeled plastic bag and disposed of into infectious waste containers located in the transporting ambulance or at the receiving hospital. Disposable equipment shall be disposed of as contaminated waste after patient use. Non contaminated waste such as packaging for such supplies as IVs, 4x4s, and tubing should be disposed of in any available garbage container. When sharps containers become full, they shall have the lid properly secured and disposed of at the receiving emergency department. Sharps containers are not to be left in the medical supplies rooms.

Apparatus

An apparatus that has been contaminated by blood or OPIM shall be decontaminated through cleaning and disinfecting. Environmental surfaces that have become soiled with blood or OPIM must be cleaned and disinfected using DisCide® wipes and/ or the use of the E- Mist disinfection machine. Gloves shall be worn when decontaminating ambulances. As part of the daily apparatus check-out, all interior surfaces of the apparatus should be inspected for signs of contamination. Any surface that shows signs of contamination should be immediately disinfected and decontaminated. If a mop is used in the process, the mop head should be disposed of or soaked in a solution of bleach and water, 1:9, for at least an hour. In addition to the decontamination of apparatus "as needed", all ambulances will be thoroughly disinfected and decontaminated each Sunday as part of regular apparatus weekly inspection.

COVID 19 EXPOSURE PROCEDURE:

Purpose:

The purpose of this SOG is to explain the process to be followed in the case of a potential exposure to COVID 19 by a firefighter of the Memphis Fire Department and the steps to be taken to prevent the exposure of co-workers.

Procedure:

If a firefighter feels they have possibly been exposed to COVID 19 whether it was on a fire department related incident or through other means, that firefighter is to contact the Fire Chief within 24 hours and explain their situation. CDC guidelines should be used to determine if an exposure has occurred. If an exposure has occurred, the fire department will coordinate with the firefighter to determine proper testing for COVID 19. The firefighter will be isolated from the fire station and any other fire department activity until written test results from two separate COVID 19 tests come back as negative. Once two test results have come back as negative the firefighter may return back to work. If a test comes back as positive the firefighter must isolate themselves from the fire station or any other fire department activity for a minimum of ten days. At this time, the other members of the fire department will be notified that a firefighter has tested positive for COVID 19. After ten days of isolation, the firefighter must provide proof of two separate negative COVID 19 tests. Once the firefighter provides the two negative test results the fire department officer staff will discuss with the firefighter the next steps to return to active firefighter status and duties.

COVID 19 RESPONSE PLAN

It is the intention of the Memphis Fire Department to follow all regulations and guidelines as set forth by the Michigan Department of Health and Human Services, the Macomb County Medical Control Board and the St. Clair County Medical Control Board in regard to COVID-19. The following are specific guidelines put in place by the Memphis Fire Department.

Attendance at the Memphis Fire Department fire department building will be divided into non-emergency and emergency visits for the purpose of this SOG.

Non-Emergency Visits

Members and visitors will enter the building through the door marked Main Entrance. Before entry of the building, the member/visitor will don a mask covering the mouth and nose. The member/visitor will then stop at the screening table and sign in. The member/visitor will take their forehead temperature using the provided thermometer and record that temperature on the sign-in sheet. The member/visitor will also answer the question on the sign-in sheet regarding COVID-19 symptoms. If the member/visitor exhibits a temperature or has any of the COVID-19 symptoms noted on the sign-in sheet then the member/visitor will immediately exit the building. Members/visitors are also encouraged to wash their hands using the bathroom sinks or provided hand sanitizer.

Masks covering the mouth and nose will be worn in the building anytime more than 1 person is present. If more than 1 person is present, the members/visitors will make every attempt to practice social distancing of at least six (6) feet from each other.

Emergency Visits

The guidelines for Non-Emergency visits above will be temporarily suspended in the case of an emergency call being answered by the Memphis Fire Department. Fire department members responding to an emergency will use the emergency entry door to prevent contact with any non-emergency visitors. While on an emergency call, members will utilize the protocols issued by the Macomb County and St. Clair County Medical Control boards in regard to COVID-19 precautions.

Upon return to the station from an emergency call, any member entering the station will utilize the COVID-19 precautions as written above for a non-emergency visit.

Fire Hall Sanitation

After the use of counter tops, table tops and chairs, the used surfaces will be disinfected using appropriate cleaning products. Disinfection of bathrooms will be done on a regular basis depending on usage. Emergency equipment will be disinfected or disposed of based on protocols supplied by the appropriate county medical control board.

EXPOSURE CONTROL PLAN

The Memphis Fire Department is committed to providing a safe and healthful work environment for its entire staff. In pursuit of this endeavor, the following exposure control plan (ECP) is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens"

The ECP is a key document to assist the Memphis Fire Department in implementing and ensuring compliance with the standard, thereby protecting our employees. This ECP includes:

- Determination of employee exposure
- Implementation of various methods of exposure control, including
 - Universal precautions
 - Engineering and work practice controls
 - Personal protective equipment
 - Housekeeping
- Hepatitis B vaccination
- Post-exposure evaluation and follow-up
- Communication of hazards to employees and training
- Record keeping
- Procedures for evaluating circumstances surrounding an exposure incident

The methods of implementation of these elements of the standard are discussed in the subsequent pages of this ECP.

Program Administration

The officers of the Memphis Fire Department are responsible for the implementation of the ECP. The officers will maintain, review and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures.

Those employees who are determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this ECP.

The Memphis Fire Department will maintain and provide all necessary personal protective equipment (PPE), engineering controls (e.g., sharps containers), labels, and red bags as required by the standard. The Memphis Fire Department will ensure that adequate supplies of the aforementioned equipment are available in appropriate sizes.

The Fire Chief will be responsible for ensuring that all medical actions required are performed and that appropriate employee health and OSHA records are maintained.

The Fire Chief will be responsible for training, documentation of training, and making the written ECP available to employees, OSHA and NIOSH representatives.

Exposure Determination

The following employee job classifications at the Memphis Fire Department are Category A due to anticipated occupational exposure to blood or other OPIM, regardless of frequency. The exposure determination is made without regard to the use of personal protective equipment.

<u>Category "A" Job Classification</u>	<u>Task</u>
Firefighter	Response to emergency medical incidents

Methods of Implementation and Control

Standard Precautions:

All employees will utilize universal precautions in the provision of medical care, the removal of sharps and waste from medical care scenes and the housekeeping of any medical care area in order to prevent contact with blood or OPIM. All blood and OPIM will be considered infectious regardless of the perceived status of the source individual.

Engineering and Work Practice Controls:

Employees will wear appropriate personal protective equipment (PPE) for all medical care incidents.

Employees will utilize available handwashing stations or hand sanitizer after removal of PPE.

Sharps containers will be utilized for disposal of sharps (e.g. Blood glucose testing). Where scissors are used in a medical procedure and become contaminated, they are classified as a contaminated sharp and discarded in an approved sharps container or decontaminated. Needles are not to be recapped, must not be bent or broken and must be disposed of in a labeled, closeable, leakproof, puncture resistant container.

In areas where there is a reasonable likelihood of exposure to blood or OPIM, employees are not to eat, drink, apply cosmetics or lip balm, smoke or handle contact lenses.

Personal Protective Equipment

All personal protective equipment (PPE) used by employees will be provided by the Memphis Fire Department at no cost. PPE will be chosen based on the anticipated exposure to blood or other OPIM. The PPE will be considered appropriate only if it does not permit blood or OPIM to pass through or reach the employee's clothing, skin, eyes, mouth or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.

PPE is located on each emergency response vehicle.

All employees using PPE must observe the following precautions:

- Wash hands immediately or as soon as feasible after removal of gloves or other PPE.
- Remove PPE after it becomes contaminated and before leaving the scene.
- Used PPE may be disposed of in medical waste bags. These bags are located in the ambulances or Memphis Fire Department vehicles.
- Wear appropriate gloves when it can be reasonably anticipated that there may be hand contact with blood or OPIM, and when handling or touching contaminated items or surfaces. Replace gloves if torn, punctured, contaminated or if their ability to function as a barrier is compromised. Never wash or decontaminated disposable gloves.
- Wear appropriate face and eye protection when splashes, sprays, spatters or droplets or blood or OPIM pose a hazard to the eye, nose or mouth.
- If an employee were to have another person's blood or OPIM splash or soak their clothing, they would make arrangements to remove the contaminated clothing as soon as possible. This clothing would be placed in a protective bag and laundered at the department's expense. The clothing would be identified as contaminated and any employee, of any employer, exposed to it would be notified and protected from exposure.

Housekeeping

Regulated waste is to be disposed of in appropriately marked red bio-hazard bags.

Sharps are to be discarded immediately in containers that are closable, puncture resistant, leakproof on sides and bottoms and labeled or color-coded appropriately. Sharps disposal containers are located on each emergency vehicle.

Medical equipment used on scene will be decontaminated using disinfectant wipes available on each emergency vehicle or at the station.

Hepatitis B Vaccination

The Memphis Fire Department will provide training to employees on hepatitis B vaccinations, addressing the safety, benefits, efficacy, methods of administration and availability. The hepatitis B vaccination series is available at no cost after training and within 10 days of initial assignment to all employees. Vaccination is encouraged unless: 1) documentation exists that the employee has previously received the series, 2) antibody testing reveals that the employee is immune, or 3) medical evaluation shows the vaccination is contraindicated.

If an employee chooses to decline vaccination, the employee must sign a declination form. Employees who decline may request and obtain the vaccination at a later date at no cost. Documentation of refusal will be kept on file.

Vaccinations will be given by an agency chosen by the Memphis Fire Department.

Post-Exposure Evaluation and Follow-Up

When an employee experiences an exposure incident, it must be reported to the Fire Chief or other available department officer.

All employees who experience an exposure incident will be offered post-exposure evaluation and follow-up by a licensed physician in accordance with Centers for Disease Control and Prevention guidelines as specified in MIOSHA standard.

The follow-up will include the following:

- Documentation of the route of exposure and the circumstances related to the incident.
- If possible, the identification of the source individual and, if possible, the status of the source individual. The blood of the source individual will be tested (after consent is obtained) for HIV/HBV infectivity.
- Results of testing of the source individual will be made available to the exposed employee with the exposed employee informed about the applicable laws and regulations concerning disclosure of the identity and infectivity of the source individual.
- The employee will be offered the option of having their own blood collected for testing of their HIV serological status. The blood sample will be preserved for at least 90 days to allow the employee to decide if the blood should be tested for HIV/HBV serological status.
- The employee will be offered post exposure prophylaxis in accordance with the current recommendations of the U.S. Public Health Service in consultation with a licensed healthcare professional.
- The employee will be given appropriate, confidential counseling concerning precautions to take during the period after the exposure incident. Counseling on risk reduction and the risks and benefits of HIV testing. The employee will also be given information on what potential illnesses to be alert for and to report any related experiences to appropriate personnel.
- The Fire Chief has been designated to assure that the policy outlined here if effectively carried out as well as to maintain records related to this policy.

Interaction with Health Care Professionals

The Memphis Fire Department will ensure that the health care professional who is responsible for the hepatitis B vaccination is provided a copy of these rules. A written opinion shall be obtained from the health care professional who evaluates employees of this facility. Written opinions will be obtained in the following instances:

- When an employee is sent to obtain the hepatitis B vaccine.
- Whenever the employee is sent to a health care professional following an exposure incident.

Health care professionals shall be instructed to limit their written opinions to:

- Whether the hepatitis B vaccine is indicated and if the employee has received the vaccine, or for evaluation following an incident;
- A statement that the employee has been informed of the results of the evaluation, and;
- A statement that the employee has been told about any medical conditions resulting from exposure to blood or OPIM. (Note: The written opinion to the employer is not to reference any personal medical information.)

Training

Training for all Category A employees will be conducted prior to initial assignment to tasks where occupational exposure may occur. Training will be conducted in the following manner:

Training for employees will include and explanation of the following:

- The MIOSHA standard for Bloodborne Infectious Diseases
- Epidemiology and symptomatology of bloodborne diseases
- Modes of transmission of bloodborne pathogens
- This Exposure Control Plan
- Procedures which might cause exposure to blood or OPIM at this department
- Control methods which will be used at the department to control exposure to blood or OPIM
- PPE available at this department and who should be contacted concerning its use
- Post exposure evaluation and follow-up
- Signs and labels used at the department
- Hepatitis B vaccine program at the department

Training sessions shall afford employees ample opportunity for discussion and the answering of questions by a knowledgeable trainer.

All Category A employees will receive annual refresher training.

Recordkeeping

The Memphis Fire Department shall establish and maintain a record for each employee with occupational exposure to include:

- Name
- Social Security Number
- Hepatitis B vaccine status
- A copy of all results of examinations, medical testing and follow-up procedures required as part of vaccinations and post-exposure follow-up. These records shall be confidential.
- The records are to be kept for duration of employment plus 30 years

Training records shall include the following:

- Date(s)
- Summary of Contents
- Names and qualifications of trainers
- Names of all trainees
- These records shall be kept for 3 years

HAZARD COMMUNICATION PROGRAM

Introduction

The Memphis Fire Department is committed to preventing accidents and ensuring the safety and health of its employees. It will comply with all applicable federal and state health and safety rules. Under this program, employees are informed of the contents of the OSHA Hazard Communications Standard, the hazardous properties of chemicals with which they work, safe handling procedures and measures to take to protect themselves from these chemicals. These chemicals may be physical or health related. This written hazard communication plan is available at the following location for review by all employees: The SOG book in the Chief's office and online at www.memphisfd.com.

Identifying Hazardous Chemicals

Detailed information about the physical, health, and other hazards of each chemical found at the Memphis Fire Department is included in a Safety Data Sheet (SDS); the product identifier for each chemical matches and can be easily cross-referenced with the product identifier on its label and on its Safety Data Sheet.

Identifying Containers of Hazardous Chemicals

The labeling system to be used by the Memphis Fire Department will follow the requirements in the 2012 revision of the OSHA Hazard Communication Standard to be consistent with the United Nations Globally Harmonized System. (GHS) of Classification of Labeling of Chemicals. The label on the chemical is intended to convey information about the hazards posed by the chemical through standardized label elements, including symbols, signal words and hazard statements.

All hazardous chemical containers used at this workplace will have:

1. The original manufacturer's label that includes a product identifier, an appropriate signal word, hazard statement(s), pictogram(s), precautionary statement(s) and the name, address, and telephone number of the chemical manufacturer, importer, or other responsible party.
2. A label with the appropriate label elements just described.
3. Workplace labeling that includes the product identifier and words, pictures, symbols, or combination that provides at least general information regarding the hazards of the chemicals.

The officer staff will ensure that all containers are appropriately labeled. No container will be released for use until this information is verified. Workplace labels must be legible and in English.

Small quantities intended for immediate use may be placed in a container without a label, provided that the individual keeps it in their possession at all times and the product is used up during the work shift or properly disposed of at the end of the work day. However, the container should be marked with its contents.

Keeping Safety Data Sheets

The manufacturer of importer of a chemical is required by OSHA to develop a Safety Data Sheet (SDS) that contains specific, detailed information about the chemical's hazard using a specified format. The distributor or supplier of the chemical is required to provide this SDS to the purchaser.

SDS's are readily available to all employees during their work shifts. Employees can review SDS's for all hazardous chemicals used at this workplace. SDS's for the Memphis Fire Department can be found in a binder in the front engine bay on the north wall. The SDS's are updated and managed by the officer staff. If a SDS is not immediately available for a hazardous chemical, employees can obtain the required information by calling a member of the officer staff.

Training Employees about Chemical Hazards

Before they start their jobs or are exposed to new hazardous chemicals, employees must attend a hazard communications training that covers the following topics:

- An overview of the requirements in OSHA's Hazard Communications Standard.
- Hazardous chemicals present in their workplace.
- Any operation in their work area where hazardous chemicals are used.
- The location of the written hazard communication plan and where it may be reviewed.
- How to understand and use the information on labels and in Safety Data Sheets.
- Physical and health hazards of the chemicals in their work areas
- Methods used to detect the presence or release of hazardous chemicals in the work area.
- Steps taken to prevent or reduce exposure to these chemicals
- How employees can protect themselves from exposure to these hazardous chemicals through the use of engineering controls / work practices and personal protective equipment.
- An explanation of any special labeling present in the workplace. These may include pictograms, signal words, hazard statements and precautionary statements.
- Emergency procedures to follow if an employee is exposed to these chemicals.

The Fire Chief is responsible to ensure that employees receive this training. After attending the training, employees will sign a form verifying that they understand the above topics and how the topics are related to the hazard communication plan.

Prior to introducing a new chemical hazard in the workplace, each employee will be given information and training as outlined above for the new chemical hazard.

Informing Employees Who Do Special Tasks

Before employees perform special (non-routine) tasks that may expose them to hazardous chemicals, the officer staff will inform them about the chemical's hazards. The officer staff will also inform them about how to control exposure and what to do in an emergency. The officer staff will evaluate the hazards of these tasks and provide appropriate controls including Personal Protective Equipment and additional training as required.



Informing Contractors and Other Employers About Hazardous Chemicals

If employees of other employers may be exposed to hazardous chemicals at the Memphis Fire Department (for example, employees of a construction contractor working on-site) it is the responsibility of the officer staff to provide contractors and their employees with the following information:

1. The identity of the chemicals, how to review the Safety Data Sheets and an explanation of the container labeling system.
2. Safe work practices to prevent exposure.

The officer staff will also obtain a Safety Data Sheet for any hazardous chemical a contractor brings on location.

HCS Pictograms and Hazards

 <ul style="list-style-type: none"> ▪ Carcinogen ▪ Mutagenicity ▪ Reproductive Toxicity ▪ Respiratory Sensitizer ▪ Target Organ Toxicity ▪ Aspiration Toxicity 	 <ul style="list-style-type: none"> ▪ Flammables ▪ Pyrophorics ▪ Self-Heating ▪ Emits Flammable Gas ▪ Self-Reactives ▪ Organic Peroxides 	 <ul style="list-style-type: none"> ▪ Irritant (skin and eye) ▪ Skin Sensitizer ▪ Acute Toxicity ▪ Narcotic Effects ▪ Respiratory Tract Irritant ▪ Hazardous to Ozone Layer (Non-Mandatory)
<p style="text-align: center;">Gas Cylinder</p>  <ul style="list-style-type: none"> ▪ Gases Under Pressure 	<p style="text-align: center;">Corrosion</p>  <ul style="list-style-type: none"> ▪ Skin Corrosion/Burns ▪ Eye Damage ▪ Corrosive to Metals 	<p style="text-align: center;">Exploding Bomb</p>  <ul style="list-style-type: none"> ▪ Explosives ▪ Self-Reactives ▪ Organic Peroxides
<p style="text-align: center;">Flame Over Circle</p>  <ul style="list-style-type: none"> ▪ Oxidizers 	<p style="text-align: center;">Environment (Non-Mandatory)</p>  <ul style="list-style-type: none"> ▪ Aquatic Toxicity 	<p style="text-align: center;">Skull and Crossbones</p>  <ul style="list-style-type: none"> ▪ Acute Toxicity (Fatal or Toxic)