

The background of the cover is a photograph of a large, multi-story building with a light-colored facade, partially obscured by lush green trees. The scene is brightly lit, suggesting a sunny day. The overall composition is clean and professional, with the text overlaid on the image.

Fire Engineering

DECEMBER 2017

TRAINING THE FIRE SERVICE FOR 140 YEARS

PeriniVCH

Physical and Wellness Program

FOR THE PAST FIVE YEARS, THE Abington Township (PA) Fire Department (ATFD) has provided physicals to its members that have become as essential as training and turnout gear in preventing injuries. These annual exams, provided at no cost to volunteers, are not the typical physicals members may get at their doctors' offices. Designed in accordance with National Fire Protection Association (NFPA) 1582, *Standard on Comprehensive Occupational Medical Program for Fire Departments*, the exams gauge the health of the heart, lungs, eyes, ears, and other physical systems that, if compromised, would present a potential danger to a volunteer on scene. Components include an electrocardiograph (EKG); a lung function test; vision and hearing assessments; cholesterol and glucose readings; a blood pressure check; and, for male firefighters, prostate-specific antigen tests.

Seeking Support/Funding

We sought and received support for the ATFD Firefighter Physicals and Wellness Program from our township elected officials well before the first exam. Five years ago, ATFD presented Abington Township commissioners with a 10-goal strategic plan. One of those goals called for a firefighter physical and wellness program. We consider monitoring and encouraging firefighter health vital to our mission, so we made the development of an NFPA 1582-compliant physical program a goal. This program was also to be a performance indicator required for department accreditation from the Commission on Fire Accreditation International, another goal we are proud to have achieved.

Township commissioners approved our strategic plan. When we later presented our detailed plans for the program, it showed that it would fulfill the goals the township had agreed that we should set. When we asked our municipality to help pay for the program, it more easily agreed to do so because it had already indicated such a program was important to the township.

It's worthwhile to remind elected officials that having a 100-percent volunteer fire department with a stable membership is

a tremendous community asset that saves taxpayers millions of dollars each year, and their continued support makes as much sense for budgetary reasons as it does for civic pride. Our commissioners agreed with the ATFD that the township's share of the cost was an investment that would help protect our volunteers, encourage them to stay, and attract more residents to join our fire companies. The years since have confirmed this, and the township continues to pay half the cost annually.

Testimonials

"What's nice about it is, in the event you do have a physical condition and you don't know about it, the physical detects it before you have an emergency," explained Brian Conway, a 24-year fire service veteran and a member of Weldon (PA) Fire Company (WFC). Pennsylvania's WFC, Abington (AFC), McKinley (MFC), Edge Hill (EHFC), and Roslyn (RFC) fire companies comprise the all-volunteer ATFD.

"It's not just one's own health that's important to a firefighter," says WFC Firefighter Bob North. "A medical condition that could be a danger to me if I'm working a fire is also a danger to other firefighters who are depending on me."

"It gives me peace of mind that the members are safe healthwise to go into a fire," said MFC Chief Shawn Philipson. "It's one less thing I have to worry about when I'm putting them into a dangerous environment to perform their jobs."

Every year, before the physicals take place, ATFD holds a meeting to provide an overview of the program and to answer questions. Physicals are scheduled over several days at our training facility. A national mobile health testing company brings a doctor, a team of technicians, and a trailer with private exam rooms.

The results of the physicals, protected by the Health Insurance Portability and Accountability Act of 1996 law, are confidential and delivered—sealed—to each firefighter. The firefighter's company chief and I (the ATFD fire administrator) receive a statement that indicates whether each firefighter is fit for duty; no further details

are shared. In cases where a concern is flagged, the firefighter is placed on restricted duty until the problem has been addressed, as indicated by a clearance from his personal physician.

AFC Firefighter Joe Raymond appreciates the confidentiality, but he noted that some members who have the same issues, such as being overweight, choose to share results with each other. "We are sharing so that we can work together and help and encourage each other," Raymond said. "It's the best part about the brotherhood and sisterhood of firefighting. Nobody is here to judge; we're like one big family support group."

In addition to the physical results, firefighters receive a personalized wellness report based on an analysis of their test results and information they provide in a prephysical questionnaire, which is also confidential. The report provides guidance on how members can improve their results, such as "Your blood sugar is a little high. Eat less sugar and more fruits and vegetables every day," or "If you stopped smoking today, you would add eight years to your life."

In the five years since the ATFD has offered its program, exams have uncovered issues ranging from vision problems, which are easily addressed with a new prescription, to a reduction in lung capacity that would make the use of self-contained breathing apparatus (SCBA) potentially unsafe. Those few members who have lung capacity issues now fight fires from outside the burning building, but no other permanent changes in duties have resulted.

Following are some important results from the ATFD program:

- Firefighters now have annual contact with health professionals and can use the cumulative records they receive each year as a touchstone for important discussions with their personal doctors.
- Volunteers have increased confidence in their own health and physical abilities and those of fellow members.
- Volunteers' families are now reassured that their loved ones are physically ready for firefighting duty, and ATFD's chiefs, who are responsible for the

well-being of their members, now feel more confident in their teams.

- Elected officials, who cover half of the program's \$50,000 annual cost, also feel more confident in their budgets.
- Current and prospective firefighters view the program as both a personal benefit and proof that they are valued by the community. The physicals have become an important component of our recruitment and retention efforts.

The Volunteer Perspective

Participation is open to all 230 ATFD volunteers and is strongly encouraged for the 175 who perform active firefighting and rescue operations.

RFC Firefighter Rick Nedzwecky is one of the few ATFD firefighters who has been temporarily assigned restricted duty as a result of his physical. "A couple of years ago, I had a reading on the EKG that was a 'red flag,'" he said. Nedzwecky is a retired federal worker who now drives a school bus. He has a standard physical each year with his personal physician, but it does not include an EKG.

Based on the ATFD physical results, Nedzwecky saw a cardiologist, and the news was good. "The cardiologist and my doctor were able to assess that it was not a problem with my heart but that the reading was related to blood pressure. We were able to address it and fix the problem." Until his blood pressure situation was addressed to his doctor's satisfaction, he was assigned to restricted duty. That short pause in his 40 years of fighting fires was well worth it to know he was safe, Nedzwecky added.

Although the vision and hearing problems ATFD physicals have unearthed were easily remedied, they could have created big problems on the fireground if left untreated. "You need good vision to see where smoke is coming from and to see what color that smoke is so you can identify the kind of fire you're dealing with," explained Mackenzie Greiner, who has volunteered with the EHFC for more than a year. He added, "You need to be able to hear someone calling for help, whether the floor you're walking on is cracking, for alarms that tell you another firefighter has been stationary for too long and might need help, or that your SCBA is running low and you need to get out."

The program has been a huge help in WFC Firefighter Frank McCann's efforts to stay healthy. The 20-year WFC veteran appreciates that the data are compiled annually so he can see the changes over time. "As I get older, I try to eat healthier and make an effort to exercise, which isn't always easy to fit in," McCann admits. "Seeing good results validates my efforts." He schedules a physical with his own doctor after his ATFD physical results come in so that they can discuss them together.

Conway also discusses the physical results with his personal physician as a way to proactively care for his health. "If there's something that looks a little high, for example, I address that with her," he says.

Abington Township Commissioner Lori A. Schreiber, director of the Public Safety Committee, calls the township's \$25,000 annual investment in firefighter physicals a bargain. She views it as a proactive way for the township to protect firefighters, their families, and township residents.

"If we can identify somebody who, for example, had high blood pressure or diabetes that they didn't know about at this relatively low cost, it's going to help save lives," she said. "All of the commissioners care about our community volunteers who work so hard to keep us safe; we want to make sure they are maintaining good health."

Why the Program Works

The ATFD made several earlier attempts at implementing a physical and wellness program before finding the right way to make it happen. Following is what worked:

Our active-duty firefighters have had physicals each of the five years the program has been in existence. We attribute this participation rate to the groundwork laid before the first physical was given.

To begin discussions, we called an information session. Representatives from the mobile health screening company that provides testing attended. ATFD leadership and the representatives from Professional Health Services provided detailed information about how the program would work.

Our volunteers' concerns were addressed. The two most common concerns boiled down to the fear that the physicals would uncover a problem that would prevent a volunteer from fighting fires and that

the results would be shared, particularly with an employer. We then held a frank discussion about what would happen if any volunteers were not found fit for duty, and we concluded the following:

- Our goal was to protect members' health so they could continue the important volunteer work they do.
- In most cases, members would return to full duty once the issue was resolved. Or, they would still fight fires and respond to emergencies with some duty restrictions, if they could do so safely.
- There are other roles for members at their firehouse even if their health does not allow them to respond to emergencies.
- Members were asked to think about the risk to themselves, their families, and their fire company if they avoided discovering a condition that meant responding to an emergency that could harm them.

Volunteers were ensured that only they and—if they choose—their personal doctors would see detailed results of the health screenings and questionnaires. Security protocols were reviewed in great detail, and we concluded the following:

- The results would be delivered to the ATFD in five sealed boxes, one for each fire company, and would never be left unsecured.
- Individual results would be placed inside the boxes in sealed envelopes.
- Each company's chief would receive the appropriate box and distribute the sealed envelopes to the volunteers.
- The volunteer is encouraged to share those results with his own physician.

We reached a consensus to proceed at this meeting. After the first year of the program, these concerns are not an issue. We continue to have annual question-and-answer sessions prior to each year's physicals, something that is especially important to that year's new volunteers.

It cannot be stressed enough: We must take seriously the confidentiality of the results and the integrity of the process designed to keep members safe. We know a breach could kill our program. ■

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