

ROGUE VALLEY FIRE CHIEFS ASSOCIATION

Document:	Rehab
Section & #:	Model Operational Guidelines #3.09
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Purpose

To provide guidance on using a rehabilitation process at the scene of emergencies or training exercises giving guidelines to personnel to assure that their mental and physical condition is safe and functional.

Scope

This guideline should be followed by all members of the Fire Department. The Incident Commander has full control of the scene and may deviate from this guideline.

Procedure

This procedure should apply to all emergency operations and training exercises where strenuous physical activity or exposure to heat or cold exists. Any activity/incident that is large in size, long in duration and/or labor intensive that will rapidly deplete the energy and strength of personnel therefore merits consideration for rehabilitation.

I. Establishment of Rehab

A. Individual responsibility

While every effort will be made to provide rehab as outlined in this guideline, it is the responsibility of the individual to be self-sufficient with food and fluids for up to 6 hours in the event that there are inadequate resources available to establish rehab.

B. Initial/Crew Rehab – Level 1

In cases where Incident Command , Safety Officer , Company Officer and/or Training Officer deem modified Rehab appropriate, the officer in charge shall be responsible to provide physical assessments, fluid and nutrition replacement, as appropriate.

C. Full/Extended Rehab – Level 2

The Rehab Group will be established when conditions indicate that rest and rehabilitation is needed for personnel operating at an emergency scene or training exercise. The following list is a guideline and provides examples of where it is a goal for Rehab to be established.

- Working fires where personnel are expected to use two or more SCBA bottles
- Extended Technical Rescue
- Haz-Mat Incident when Encapsulating Suits are worn
- Extended wildland incidents
- Any event lasting more than 1 hour with a Heat Stress Index above 90° F or Wind-chill index below 10° F
- Training burns and extended training exercises
- As requested by Incident Command and or Safety Officer

II. **Site Selection and Set Up**

The Incident Commander will normally designate the location for rehab that includes the following characteristics:

- The site should be sufficiently far away from the effects of the operation that members can safely remove their (PPE) and (SCBA) and can be afforded mental rest from the stress and pressure of the emergency operation or training evolution.
- Provide suitable protection from the prevailing environmental conditions as follows:
 1. During hot weather, it should be in a cool, shaded area.
 2. During cold weather, it should be in a warm, dry area.
- Enable personnel to be free of smoke, and exhaust fumes from apparatus, vehicles or equipment.
- Large enough to accommodate multiple crews based on the size of the incident.
 1. Easily accessible by EMS units.
 2. Allow prompt re-entry back into the emergency operation or staging area

Extended incidents, such as larger Wildland and Commercial fires, can utilize “**Divisional Rehab**” to provide basic rehab services. The Division Sup would

establish a safe rest area and rotate crews out of the work area frequently. The Division Sup should request additional crew(s) and rehab supplies for their division. This method does not replace level 2 rehab; however, it can provide an effective and efficient method of managing resources in a larger extended incident. Eventually, the crews should be sent for full rehab, including medical monitoring.

When formal rehab is not possible consider positioning supplies of fluids and/or energy bars in accessible locations around the fireground.

III. Staffing

- A. The Incident Commander shall identify a Rehab Group Supervisor
- B. Basic Life support (BLS) should be minimum level of care, however Advanced life support (ALS) personnel should be considered preferable.

IV. Assignment to Rehab

- A. Members assigned to rehabilitation should add/remove clothing to regain normal body temperature, drink Fluids (water and sport drinks), eat food, and rest.
- B. All members entering and leaving rehabilitation should be assigned by the IC and should be tracked through the personnel accountability system.

V. Medical Evaluation and Treatment

- A. Upon admittance to rehabilitation, members should be evaluated for the following: heart rate, SPO₂, COHb (if Pulse CO-Oximeter is available) and mental status. Members may be evaluated for blood pressure and core temperature as well.
- B. Medical treatment for individuals, whose vital signs and/ or symptoms indicate potential problems, will be based on current Jackson or Josephine County protocols as appropriate.
- C. In the event that an individual is transferred to the Medical Unit, and/or transported, the Incident Commander shall be notified.
- D. Members in rehab should be reevaluated after 20 minutes

- E. All medical evaluations shall be completed by the Rehab Officer or their designee and recorded on the Medical Evaluation Form for Rehabilitation.

VI. Hydration and Nourishment

- A. Hydration is a critical factor in the prevention of heat injury. Water must be replaced during exercise periods and at emergency incidents. Caffeine and carbonated beverages should be avoided.

Members should have a minimum fluid intake of 2 oz to 4 oz approximately every 20 minutes. Sports drinks are recommended during long duration events. It should be noted that rehydration requirements vary widely among individuals.

- B. Nourishment shall be provided at the scene of an extended incident.

Energy bars that contain 40/30/30 (carbohydrates, protein, and fat) should be nourishment of choice in addition to fresh fruit. Energy bars coming close to this standard include: Zone Perfect, Cliff, Balance, Powerbar, and Premier. Other energy bars may also come close to this standard and may be used.

VII. Rest and Recovery

- A. In all cases, the objective evaluation of an individual's fatigue level shall be the criteria for rehab time.
- B. Rest shall not be less than 20 minutes and/ or as determined by the Rehab Group supervisor.

VIII. Demobilization of Crews

- A. The Rehab Group Supervisor shall be responsible for evaluating personnel for physical and mental response readiness.
- B. Emergency response units shall not be put back in service until they have fully decontaminated themselves and their apparatus and equipment.
- C. The company officer for each crew shall evaluate their personnel for response readiness before clearing back into service or release without proper rest and recovery.
- D. If an individual is found to be not fit for duty or too fatigued to be safely released from duty, the direct supervisor will be notified.

Heat Index

How to read the chart: Find the temperature on the left-hand side, then move to the right until you find the column for the approximate relative humidity. That number will be the temperature that it will "feel" like. For example, a temperature of 95°F and relative humidity of 50% will "feel" like 107°. Add up to 15° if in the direct sun.

Heat Index Chart															
Temperature (°F) vs. Relative Humidity															
	10%	15%	20%	25%	30%	35%	40%	45%	50%	55%	60%	65%	70%	75%	80%
115	111	115	120	127	135	143	151								
110	105	108	112	117	123	130	137	143	151						
105	100	102	105	109	113	118	123	129	135	142	149				
100	95	97	99	101	104	107	110	115	120	126	132	136	144		
95	90	91	93	94	96	98	101	104	107	110	114	119	124	130	136
90	85	86	87	88	90	91	93	95	96	98	100	102	106	109	113
85	80	81	82	83	84	85	86	87	88	89	90	91	93	95	97
80	75	76	77	77	78	79	79	80	81	81	82	83	85	86	86
75	70	71	72	72	73	73	74	74	75	75	76	76	77	77	78
Heat Index/Heat Disorders															
Heat Index	Possible heat disorders for people in higher risk groups														
130 or higher	Heatstroke/sunstroke highly likely with continued exposure.														
105-130	Sunstroke, heat cramps or heat exhaustion likely, and heat stroke possible with prolonged exposure and/or physical activity.														
90-105	Sunstroke, heat cramps and heat exhaustion possible with prolonged exposure and/or physical activity.														
80-90	Fatigue possible with prolonged exposure and/or physical activity.														
Source: National Weather Service															

EVALUATION GUIDELINES

In order to return to staging for re-assignment these conditions must be met:

- Heart rate > 60 and < 100
- Normal mental status
- Oxygen Saturation > 95%
- COHb < 16% (if Pulse CO-Oximeter is available)
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The following may also be considered

- Systolic Blood Pressure > 100 and < 160; Diastolic Blood Pressure > 60 and < 100; Temperature < 100
- **Active cooling should be performed if body temperature is 101 or greater.**

>A medical unit shall be assigned to anyone with these findings: Chest Pain; Shortness of Breath; Altered Mental Status; Irregular Pulse; Injury