

Bear Valley - Indian Valley Fire Protection District

Policy Manual

MISSION

It shall be the mission of the Bear Valley-Indian Valley Fire Authority to serve and protect the citizens of the Town of Stonyford and the Bear Valley-Indian Valley Fire Protection District from all disasters, natural or manmade. To respond to all calls at all hours of the day and night with the highest professional level of service.

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PHILOSOPHY AND GOALS

Protection of life and property through fire prevention.

Prevent loss of life, property, and the environment from uncontrolled hazards such as panic, fire, explosions, physical entrapments, floods, dangerous chemicals, and gases.

Safeguard the general economy and welfare of the community by preventing disastrous conflagrations from destroying economically essential industries and businesses.

Provide emergency medical/rescue services as required for the preservation of life as training and skill level permit.

Provide disaster control services as assigned in the County's Emergency Operational plan for natural or (Homeland Security) war-time disasters.

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FIREFIGHTER CODE OF ETHICS

As a firefighter and member of the Bear Valley - Indian Valley Fire Protection District, my fundamental duty is to serve the community; to safeguard and preserve life and property against the elements of fire and disaster; and maintain a proficiency in the art and science of fire engineering.

I will uphold the standards of my profession, continually search for new and improved methods and share my knowledge and skills with my contemporaries and successors.

I will not allow personal feelings, nor danger to self, deter me from my responsibilities as a firefighter.

I will at all times, respect the property and rights of all men and women, the laws of my community and my country, and the chosen way of life of my fellow citizens.

I recognize the Title of Firefighter is a symbol of public faith, and I accept it as a public trust to be held so long as I am true to the ethics of the fire service. I will never use my official position to obtain advantages or favors for myself, my friends or family.

I will constantly strive to achieve the objectives and ideals, dedicating myself to my volunteer service of saving lives, fire prevention and fire suppression.

As a member of the Bear Valley - Indian Valley Fire Protection District, I accept this self-imposed and self-enforced obligation as my responsibility.

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Chapter 1 - Fire Service Role and Authority

Fire Service Authority

100.1 PURPOSE AND SCOPE

This policy describes the legal authority of the Department and the individual members. On May 15, 1942, the Colusa County Board of Supervisors called for an election to be held on June 30, 1942, for the formation of a fire protection district. On July 6, 1942, the Board of Supervisors formed the Bear Valley Indian Valley Fire Protection District under the provisions of Act 2583 Deering consolidated Supplement 1925-27. The District operated under Section 14400-145998 of the California Health and Safety Code in parts of Colusa and Glen Counties until July 18, 1966. At that time, all fire districts in Colusa County were reorganized under provisions of Part 2.7 (Commencing with paragraph 13801), Division 12, of the Health and Safety Code. The BVIVFPD was reorganized by a resolution of the Board of Supervisors (resolution No. 66-25) on July 18, 1966 to conform to the provisions of Part 2.7 (commencing with 13801), Division 12 of the Health and Safety Code. The BVIVFPD operates today under the California Fire Protection Law of 1987 to provide various fire protection and emergency services to the local community.

100.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to limit its members to only exercise the authority granted to them by law.

While the Bear Valley - Indian Valley Fire Protection District recognizes the authority of members granted to them, members are encouraged to use sound discretion in the exercise of their authority, and this department does not tolerate abuse of authority.

100.3 ORGANIZATIONAL POWERS

This department is authorized to perform the following:

- (a) Fire suppression
- (b) Emergency Medical Services (EMS)

100.4 FIREFIGHTER POWERS

Firefighters are sworn members of this department and have the following authority:

- (a) Participate in a wide range of emergency and rescue activities, including EMS, extrication and heavy rescue
- (b) Perform fire suppression duties, including the suppression of structural, aircraft, wildland and other types of fires
- (c) Investigate causes of fires
- (d) Preserve evidence when a fire is of a suspicious origin.
- (e) Provide public education and fire prevention activities and services.

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Fire Service Authority

100.5 CONSTITUTIONAL REQUIREMENTS

When exercising their authority, members shall observe and comply with every person's clearly established rights under the United States and California Constitutions.

100.6 SUPERVISORY AUTHORITY

Any Firefighter may relieve any member from duty when, in his/her judgment, an incident is sufficiently serious to warrant immediate action. A report of such action shall be made immediately through the appropriate channels to the Fire Chief or designee, followed by written documentation of the incident, in accordance with department policy or procedures. All such processes shall comply with established rules, and regulations..

Fire Chief

101.1 PURPOSE AND SCOPE

This policy identifies the education, experience or certifications desired for the Board of Directors.

101.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to have a highly qualified Fire Chief.

101.3 FIRE CHIEF

We encourage higher-level college degrees in public or business management, completion of the National Fire Academy Executive Fire Officer (EFO) and the Center for Public Safety Excellence Chief Fire Officer (CFO) programs as well as experience in chief officer positions enhance the professional credibility of candidates for the rank of Board of Directors.

101.4 CERTIFIED FIRE CHIEF

The Peer Assessment for Chief Executive (PACE IV) certification established by the OSFM is a desired qualification. Certified Fire Chief status may be achieved through the California Office of the State Fire Marshal (OSFM) by acquiring a PACE IV certification, holding a chief officer rank for a minimum of one year and completing the application process described in the training manual. The certification requirements are described in the State Fire Training Procedures Manual.

Oath of Office

102.1 PURPOSE AND SCOPE

This policy establishes the oath of office for all sworn personnel of this department.

102.2 OATH OF OFFICE

Upon employment, all sworn personnel shall be required to affirm the oath of office expressing commitment to support and defend the Constitution of the United States and the Constitution of the State of California (CA. Const. art. XX, § 3 and Government Code § 3102). The oath shall be as follows:

I, [employee name], do solemnly swear (or affirm) that I will support and defend the Constitution of the United States and the Constitution of the State of California against all enemies, foreign and domestic; that I will bear true faith and allegiance to the Constitution of the United States and the Constitution of the State of California; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties upon which I am about to enter.

Policy Manual

103.1 PURPOSE AND SCOPE

The Policy Manual of the Bear Valley - Indian Valley Fire Protection District is hereby established and shall be referred to as the "Policy Manual." The Policy Manual is a statement of the current policies, rules, and guidelines of this department. All department members are expected to conform to the provisions of this Policy Manual. All prior and existing policies, manuals, orders, and regulations that are in conflict with this Policy Manual are revoked, except to the extent that portions of the existing policies, manuals, orders, and other regulations that have not been included herein shall remain in effect where they do not conflict with the provisions of this Policy Manual.

103.2 POLICY

Except where otherwise expressly stated, the provisions of this Policy Manual shall be considered guidelines. It is recognized that fire and rescue work is not always predictable, and circumstances may arise that warrant departure from these guidelines.

It is intended that the provisions of this manual be viewed using an objective standard, taking into consideration the sound discretion entrusted to the members of this department under the circumstances reasonably available at the time of any incident.

103.2.1 DISCLAIMER

The provisions contained in the Policy Manual are not intended to create an employment contract, nor any employment rights or entitlements. The policies contained within this manual are for the internal use of the Bear Valley - Indian Valley Fire Protection District and shall not be construed to create a higher standard or duty of care for civil or criminal liability against the District, its officials, or members. Violations of any provision of any policy contained within this manual shall only form the basis for administrative action, training, or discipline. The Bear Valley - Indian Valley Fire Protection District reserves the right to revise any policy content, in whole or in part.

103.2.2 SEVERABILITY

In the event that any term or provision of this Policy Manual is declared illegal, invalid, or unenforceable by any court or any federal or state government agency, the remaining terms and provisions that are not affected shall remain in full force and effect. If any provision of the Policy Manual is found to be in conflict with a local, state, or federal law, District policy, such law, or District policy, shall take precedence over that provision of the Policy Manual.

103.3 RESPONSIBILITIES

The responsibility for the contents of this Policy Manual rests with the Board of Directors. Since it is not practical for any one person to prepare and maintain the Policy Manual, the following delegations have been made:

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103.3.1 BOARD OF DIRECTORS

The Board of Directors shall be considered the ultimate authority for the provisions of this manual and shall continue to approve and adopt directives that shall modify those provisions of the manual to which they pertain. Any directive so issued shall remain in effect until such time as they may be permanently incorporated into the manual.

103.3.2 POLICY COMMITTEE

Policy Committee shall consist of the following:

- Board of Directors
- Fire Chief or Designee

Policy Committee shall review all recommendations regarding proposed changes to the manual and make recommendations to the Board of Directors on final manual changes. The policy committee will be responsible for incorporating any changes into the policy manual after approval by the BOD's.

103.3.3 OTHER PERSONNEL

Any member suggesting revision of the contents of the Policy Manual shall forward the suggestion through the chain of command, in writing, to their Captain.

103.4 FORMATTING CONVENTIONS FOR THE POLICY MANUAL

The purpose of this section is to provide examples of abbreviations and definitions used in this manual.

103.4.1 ACCEPTABLE ABBREVIATIONS

The following abbreviations are acceptable substitutions in the manual:

- Policy Manual sections may be abbreviated as "Section 106.4" or "§ 106.4."

103.4.2 DEFINITIONS

The following words and terms shall have these assigned meanings, unless it is apparent from the content that they have a different meaning:

Adult - Any person 18 years of age or older.

District - The District of Bear Valley Indian Valley Fire Protection District.

Civilian - Members and volunteers who are not sworn employees.

Department/BVIVFPD - The Bear Valley - Indian Valley Fire Protection District.

Employee - Any person employed by the Department.

Fire Code - The 2018 edition of the International Fire Code (IFC) (2019 California Fire Code, Title 24, Part 9) as adopted by the State of California and the incorporated California amendments (Health and Safety Code § 18928).

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Firefighter/Sworn, appointed, or elected - Those members, regardless of rank, who perform fire suppression and EMS duties as part of their primary duties as sworn, appointed, or elected members of the Bear Valley - Indian Valley Fire Protection District.

Manual - The Bear Valley - Indian Valley Fire Protection District Policy Manual.

May - Indicates a permissive, discretionary, or conditional action.

Member - Any person employed or appointed by the Bear Valley - Indian Valley Fire Protection District, including:

- Sworn firefighters
- Reserve firefighters
- Volunteers

On-duty - Member status during the period when he/she is actually engaged in the performance of his/her assigned duties.

Order - A written or verbal instruction issued by a superior.

Rank - The job classification title held by a firefighter.

Shall or will - Indicates a mandatory action.

Should - Indicates a generally required or expected action, absent a rational basis for failing to conform.

Supervisor - A person in a position of authority regarding hiring, transfer, suspension, promotion, discharge, assignment, reward, or discipline of other department members, directing the work of other members, or having the authority to adjust grievances. The supervisory exercise of authority may not be merely routine or clerical in nature but requires the use of independent judgment.

The term "supervisor" may also include any person (e.g., firefighter-in-charge, lead, or senior worker) given responsibility for the direction of the work of others without regard to a formal job title, rank, or compensation.

103.5 DISTRIBUTION OF THE POLICY MANUAL

Copies of the Policy Manual shall be distributed to the following:

- Board of Directors
- Fire Chief
- Assistant Fire Chief
- Captains
- Firefighters
- Each fire station

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An electronic version of the Policy Manual will be made available on the department network for access by all employees. The electronic version will be limited to viewing and printing specific chapters or sections. No changes shall be made to the electronic version without authorization from the Board of Directors board of Directors.

103.6 POLICY MANUAL ACCEPTANCE

As a condition of employment, all members are required to read and obtain necessary clarification of this Policy Manual. All are required to sign a statement of receipt acknowledging that they have received a copy or have been provided access to the Policy Manual and understand that they are responsible to read and become familiar with its content.

103.7 REVISIONS TO POLICIES

All revisions to the Policy Manual will be provided to each member on or before the date the policy becomes effective. Each member will be required to acknowledge that they have reviewed the revisions and shall seek clarification from an appropriate supervisor as needed.

Members are responsible for keeping informed of all Policy Manual revisions.

The Fire Chief will ensure that members under their command are aware of any Policy Manual revision.

All department members suggesting revision of the contents of the Policy Manual shall forward their written suggestions to their supervisors, who will consider the recommendations and forward them to the command staff as appropriate.

Chapter 2 - Organization and Administration

Organizational Structure

200.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the organizational structure of the Bear Valley - Indian Valley Fire Protection District. This policy also provides guidance regarding the department's reporting process through the chain of command.

200.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to organize its resources in a manner that allows for effective and efficient service delivery to the public. To ensure effective organizational communication, members should generally adhere to the established chain of command unless there is a good faith and reasonable basis for utilizing an alternate channel of communication.

200.3 DIVISIONS

The Board of Directors is responsible for managing the Bear Valley - Indian Valley Fire Protection District. The following divisions make up the Bear Valley - Indian Valley Fire Protection District:

- Board of Directors Division
- Emergency Services Division

200.3.1 BOARD OF DIRECTORS DIVISION

The Board of Directors Division is an elected position by the citizens of the district and provides administrative support to the Board of Directors; prepares and coordinates the department budget; acts as liaison with the Fire Chief regarding recruitment, promotion, and performance appraisals; manages information technology systems and payroll functions; and reviews, prepares, and presents staff reports to the department, the District staff, and District officials.

It is the responsibility of the Board of Directors to prepare and maintain a current organizational chart.

200.3.2 EMERGENCY SERVICES DIVISION

The Emergency Services Division is directed by a Fire Chief or Designee. The Emergency Services Division responds to all fire, rescue, and medical aid calls for service; manages major disaster responses; and staffs engine companies and truck companies.

200.4 UNITY OF COMMAND

The principles of unity of command ensure efficient supervision and control within the Department. Generally, each member is accountable to a single supervisor at any time for a given assignment or responsibility. Any supervisor may temporarily direct the subordinate of another supervisor where specifically delegated or if an operational need exists.

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Organizational Structure

200.5 CHAIN OF COMMAND

Respect for rank is essential for administrative and operational efficiency. All members of the Bear Valley - Indian Valley Fire Protection District shall adhere to the chain of command. All members shall be thoroughly familiar with the Incident Command System (ICS) and operate within its parameters throughout the duration of all emergency incidents.

A supervising or commanding officer will be identified for each department member. This supervisor/commanding officer is the first step in the organizational chain of command, followed by the next level of commanding officer as set forth in the department's organizational structure. In the event that no supervisory officer is available, rank will be determined by seniority in rank.

Members of the Bear Valley - Indian Valley Fire Protection District shall generally conduct department business through the established chain of command. Members shall consult with and report to their commanding officer/supervisor when making recommendations for changes, alterations or improvements concerning department matters. Members shall forward all reports and recommendations through the chain of command. The submission should include written comments from the member's immediate supervisor to indicate whether the supervisor approves of the recommendation. No memo or recommendation should be stopped in the chain of command before it reaches its intended destination/officer.

Other than the exceptions set forth below, no member of the Bear Valley - Indian Valley Fire Protection District shall initiate contact with any member of the governing board or with any other local, regional, state, or federal official regarding any matter affecting the Bear Valley - Indian Valley Fire Protection District without having first informed the Board of Directors through the chain of command.

[Organizational Structure for the BVVFPD](#)

200.6 DIRECTIVES AND ORDERS

Members shall comply with lawful directives and orders from any [department_agency] supervisor or person in a position of authority, absent a reasonable and bona fide justification.

A member who believes any written or verbal order to be unlawful or in conflict with another order shall:

- (a) Immediately inform the supervisor issuing the order, and also the member's immediate supervisor or the [agencyHead], of the conflict or error of the order.
- (b) Provide details explaining the grounds for believing there is a conflict or error.
- (c) Request clarification, guidance, and direction regarding following the order.
- (d) Request the order in writing, absent exigent circumstances, should the conflict or perceived error be unresolved.
- (e) Respectfully inform the supervisor of the intention to disobey what is reasonably believed to be a conflicting or unlawful order.

A member's decision to disobey an order that is believed to be unlawful is not a bar to discipline should the order be determined as lawful.

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Organizational Structure

200.7 ALTERNATE CHANNELS OF COMMUNICATION

All members shall endeavor to keep their supervisors informed of any matters that may affect the safety, welfare, or operations of the Department.

As a general matter, any concern about a workplace situation should first be raised with the member's immediate supervisor. It is recognized, however, that there may be occasions where the use of the normal chain of command may not be appropriate. If an issue is of a personal nature, involves a sensitive matter, is of significant importance to the Department, or involves other members or supervisors, the member may consult directly with the Fire Chief, or the Assistant Fire Chief, or a representative of the Board of Directors.

All members are free to make or prepare to make, in good faith, any complaint that identifies ethical or legal violations, including fraud, waste, abuse of authority, gross mismanagement, violations of the law or practices that may pose a threat to health, safety, and security without fear of actual or threatened discrimination, retaliation, or reprisal. Such complaints may be made to any supervisor or directly to the Board of Directors. Nothing in this policy shall diminish the rights or remedies of a member pursuant to any applicable federal law, provision of the U.S. Constitution, applicable law, or ordinance.

Any form of reprisal or retaliation against any member for making or filing a complaint in good faith or for participating in the investigation of a complaint is prohibited. Any member engaging in any form or type of reprisal or retaliation is subject to discipline.

Emergency Action Plan and Fire Prevention Plan

201.1 PURPOSE AND SCOPE

The purpose of this policy is to provide for member and visitor safety in the event of an emergency at any department facility and ensure compliance with state regulations mandating all employers to develop and maintain an Emergency Action Plan (EAP) and a Fire Prevention Plan (FPP) (Labor Code § 142.3; 8 CCR 3220; 8 CCR 3221).

201.2 POLICY

The Bear Valley - Indian Valley Fire Protection District is committed to preparing for natural or human-created emergency incidents and providing for the safety of its members and visitors.

201.3 EMERGENCY ACTION PLAN AND FIRE PREVENTION PLAN

The Board of Directors and Fire Chief will develop and maintain an EAP and FPP to provide for the safety of department members and visitors in the event of an emergency. The EAP and FPP will address the specific requirements contained in 8 CCR 3220 and 8 CCR 3221, and will address all buildings, facilities and regular places of work or visitor access that are controlled by the Department. The plan also will address actions that members of the Department must take to ensure their safety and that of visitors from fire and other emergencies.

- (a) The EAP shall be in writing and its elements shall include, but are not limited to (8 CCR 3220):
 - 1. Emergency evacuation procedures, including escape procedures and emergency escape route assignments.
 - 2. Procedures to be followed by members who remain to conduct critical facility operations before they evacuate.
 - 3. Procedures to account for all members and visitors after an emergency evacuation has been completed.
 - 4. Rescue and medical duties.
 - 5. Means of reporting fires and other emergencies.
 - 6. Names and regular job titles of persons or departments that can be contacted for further information or an explanation of duties under the plan.
 - 7. The alarm system that will be used to notify members and visitors in the event of a fire or other emergency situation.
 - 8. The types of evacuations to be used in emergency circumstances.
- (b) The FPP shall be in writing and its elements shall include, but are not limited to (8 CCR 3221):
 - 1. Potential fire hazards and their proper handling and storage procedures, potential ignition sources (e.g., welding, smoking) and their control procedures, and the type of fire protection equipment or systems that can control a fire involving them.

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Emergency Action Plan and Fire Prevention Plan

2. Names and regular job titles of those responsible for maintaining the equipment and systems installed to prevent or control ignitions or fires.
 3. Names and regular job titles of those responsible for controlling the accumulation of flammable or combustible waste materials.
 4. Procedures to control the accumulation of flammable and combustible waste.
 5. Maintenance procedures for heat-producing equipment to prevent accidental ignition of combustible materials.
- (c) The written EAP and FPP shall be kept at each department workplace or facility and made available for member and visitor review.

201.4 PROCEDURE

201.4.1 EMERGENCY ACTION PLAN

The alarm system to inform visitors and members of an emergency is verbal communication on site.

Visitors and non essential members are to walk out of the station.

Meeting room to evacuate through the entrance door to the street.

Equipment bay to evacuate through the north entrance door or into the meeting room and proceed to the street.

Senior operations person is in charge, and will check restrooms, meeting room, and equipment bay to confirm evacuation.

Members that are critical or essential, are to open the equipment bay doors if safe to do so, and remove equipment to the street.

911 will be notified.

Department personnel will then conduct emergency operations.

201.4.2 FIRE PREVENTION PLAN

The fire chief is in charge of overseeing any work in the station.

If work is being done in the station that has the potential to create an ignition source, equipment is to be removed out of the station.

Fire extinguishers are to be available throughout the station.

No smoking in the station.

No flammable or combustible waste is to be stored in the station at any time.

All equipment is to be equipped with a battery disconnect to prevent any unattended electrical ignition.

The last operator of the equipment is responsible to report any malfunction of the equipment to the fire chief immediately.

201.5 TRAINING

The Department will provide state-mandated training supporting the EAP and FPP to all members and also to those persons who become members at the time they are assigned to the facility, as

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Emergency Action Plan and Fire Prevention Plan

described in the Emergency Action Plan and Fire Prevention Plan Training Policy (8 CCR 3220; 8 CCR 3221).

Department Directives

202.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process to make immediate changes to department policy. Department directives will immediately modify or change and supersede the sections of this manual to which they pertain.

202.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to make any immediate changes to policy and procedure. Generally the establishment of department directives is management's prerogative but employee participation may be sought in the development of those policies. It is the policy of the Department to comply with any meet-and-confer requirements between labor groups and authorized department representatives.

202.3 RESPONSIBILITIES

The Board of Directors shall issue all department directives.

All department officers shall be responsible for communicating department directives to all members in their command.

Department directives will be rescinded upon incorporation into the manual.

Training Policy

203.1 PURPOSE AND SCOPE

It is the policy of this department to administer a training program that will provide for the professional growth and continued development of its members. By doing so, the Department will ensure its members possess the knowledge and skills necessary to provide a professional level of service that meets the needs of the community.

203.2 POLICY

The Department seeks to provide ongoing training and encourages all members to participate in advanced training and formal education on a continual basis. Training is provided within the confines of funding, the requirements of a given assignment, staffing levels and legal mandates.

Whenever possible, the Department will use courses certified by the California Office of the State Fire Marshal (OSFM), the California Fire Service Training and Education System (CFSTES), the U.S. Department of Homeland Security or other accredited entities.

203.3 OBJECTIVES

The objectives of the training program are to:

- (a) Enhance the level of emergency services to the public.
- (b) Increase the technical expertise and overall effectiveness of department members.
- (c) Provide for continued professional development of department members.
- (d) Reduce risk and enhance safety.

203.4 TRAINING PLAN

A training plan will be developed and maintained by the Training/Safety Division. It is the responsibility of the Training/Safety Division to maintain, review and update the training plan on an annual basis, ensuring that all mandated training is achieved. All training records will be maintained in accordance with established records retention schedules.

203.5 TRAINING NEEDS ASSESSMENT

The Training/Safety Division will conduct an annual training needs assessment. The needs assessment will be reviewed by command staff. Upon approval by the Board of Directors, the needs assessment will form the basis of the training plan for the following year.

California Fair Political Practices Commission Filings

204.1 PURPOSE AND SCOPE

The purpose of this policy is to provide a uniform method for complying with the Fair Political Practices Commission (FPPC) requirements, for designated members to report all potential economic conflicts of interest to the District.

204.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to comply with state requirements, and designate certain job classifications as required to file a Statement of Economic Interests (Government Code § 87300).

204.3 PROCEDURE

The District requires certain job classifications to file a Statement of Economic Interests (Government Code § 87300). These job classifications have been identified based on the opportunity for personal gain that could result from official actions as a member of this department.

204.4 DEPARTMENT RESPONSIBILITIES

The Board of Directors shall designate a person to be the Conflict of Interest Filing Officer for the Department, who shall be responsible for administering the filings in accordance with applicable laws.

All Statement of Economic Interests filings shall be screened for compliance by the Conflict of Interest Filing Officer. Members in designated classifications are required to disclose certain economic interests, which may include investments, interests in real property, income and business interests. All information provided by members on the Statement of Economic Interests is a matter of public record.

204.4.1 FILING REQUIREMENTS

Members in designated job classifications must file the following type of statements:

- Assuming office statement within 30 days after assuming office
- Annual statement due by April 1 each year
- Leaving office statement within 30 days after leaving the position

204.4.2 FILING PROCESS

The filing process is administered by the Conflict of Interest Filing Officer and includes the following procedures:

- A Statement of Economic Interests form and filing instructions shall be distributed annually to designated department members. Additionally, forms shall be sent to designated members upon notice of appointment or termination.

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California Fair Political Practices Commission Filings

- A completed Statement of Economic Interests shall be returned to the Conflict of Interest Filing Officer by the date indicated on the instructions.
- The Conflict of Interest Filing Officer shall screen the Statement of Economic Interests for completeness, potential conflicts of interest and to ensure all designated members have filed a statement, in accordance with FPPC regulations.
- Upon completion of the screening process, the Conflict of Interest Filing Officer shall retain the original for a period of time in accordance with the FPPC and the department's established records retention schedules.
- A list of all department members with potential conflict situations will be compiled and maintained in the Board of Directors Division.
- Any change to the FPPC filing process shall be submitted to the governing body for review and approval.

204.4.3 REPORTING REQUIREMENTS

All members are required to report potential conflicts of interest even if they are not in a designated classification. All members are disqualified from participating in government decisions in which they have, or appear to have, a financial interest (Government Code § 87100). When a potential conflict of interest situation arises, it must be reported immediately through the chain of command to the member's immediate supervisor and then the Conflict of Interest Filing Officer.

204.4.4 DESIGNATED CLASSIFICATIONS

The Bear Valley - Indian Valley Fire Protection District has designated the following classifications as required to complete a Statement of Economic Interests document in accordance with FPPC regulations:

- (Designated classifications)

Liability Claims

205.1 PURPOSE AND SCOPE

This policy provides guidelines for the management of all claims, including personal injury and property loss or damage, filed against the Department.

205.2 POLICY

It is the policy of this department to evaluate and resolve claims in a timely manner, as appropriate.

205.3 RESPONSIBILITY

The Board of Directors should designate a risk manager to receive, investigate, and evaluate any claim for loss or damage received by the Department.

Any member of this department who becomes aware of any potential for a claim or lawsuit, or who receives a formal written claim against the Department, shall forward the information to the risk manager within 45 days of the incident.

205.4 RESPONSE TO CLAIMS

The risk manager will investigate all claims for money or damages received and will resolve claims as appropriate and within guidelines approved by the Board of Directors and the department's governing body.

If a claim is deficient or incomplete, the risk manager should notify the claimant within 20 days and specify the defects (Government Code § 910.8).

The risk manager should ensure the claim is accepted or rejected by the department's governing body within 45 days. Notice of acceptance or rejection should be given to the complainant in writing and in compliance with state law. If a claim is rejected because it was filed late, the notice should state that the claim was returned as untimely but that the claimant may apply promptly to the Department for a leave to file a late claim (Government Code § 912.4; Government Code § 913; Government Code § 911.3).

The risk manager should ensure an application for permission to file a late claim is acted upon by the department's governing body within 45 days (Government Code § 911.6).

Administrative Communications

206.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines, format and authority levels for the various types of administrative communication documents in existence within the Department.

206.2 POLICY

It shall be the policy of this department to control the use of the name of the Department and the use of letterhead, and to ensure that official administrative communications follow a specific format and are released only by persons with the authority to do so.

206.3 PERSONNEL ORDERS

Personnel orders may be issued periodically by the Board of Directors to announce and document promotions, transfers, hiring of new personnel, separations, personnel and group commendations, or other changes in status.

206.4 CORRESPONDENCE

In order to ensure that the letterhead and name of the Department are not misused, all external correspondence shall be on department letterhead. All department letterhead shall bear the signature element of the Board of Directors in addition to the actual signature of an authorized signer. Members of the Department may use letterhead only for official business and with approval of their supervisor.

206.5 MEMORANDUMS

Memorandums are a necessary and important component of effective operations at all levels of the Department. For the purposes of clarity and to ensure appropriate distribution of written communications, all memorandums between department members shall utilize a standardized format.

Memorandums typically are used to memorialize and/or summarize communication and facts. Memorandums can be generated by a supervisor and sent to subordinates or a group of subordinates to give direction, clarify a policy decision or request an action by another division. A memorandum also may be written by line-level members to communicate information. If the recipient is of higher rank than the member's immediate supervisor or is outside the Department, the information should be approved by the proper chain of command before being forwarded to the recipient.

Recommendations for a standardized department memorandum format: a standard heading including the name of the Department, the date of the memorandum, the intended recipient of the memorandum, the name, rank and division of the department member creating the memorandum, and a brief statement of the subject of the memorandum.

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Administrative Communications

206.6 SURVEYS

All surveys made in the name of the Department shall be authorized by the Board of Directors or the authorized designee.

Minimum Staffing Levels

207.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for minimum staffing levels on emergency vehicles and to ensure that proper supervision is available for all shifts.

207.2 POLICY

- (a) The stations are not staffed.
- (b) All members are notified via cell phones, text, pagers, or radios by dispatch.
- (c) Members respond when notified by dispatch of an incident.
- (d) Response is to a station for the proper equipment.
- (e) If no response or inadequate response, dispatch notifies a neighboring district under mutual aid.
- (f) The chiefs truck is pre positioned, along with several EMS trucks for faster response.
- (g) The first priority is to get a member on scene properly equipped to assess the emergency and give a scene size up.
- (h) The firehouse radio shall be manned at all times during an incident if personnel are available.
- (i) Personnel shall notify the IC or Duty Officer of the number of personnel on standby on Red Fire channel and ranks of staffing. (Engineer, Operator, etc.)
- (j) Personnel on standby shall be in a state of readiness to respond additional apparatus or to additional incidents.
- (k) Stand by Personnel shall remain at the station until released by IC or Duty Officer.

Post-Incident Analysis

208.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a uniform Post-Incident Analysis (PIA) to identify strengths and weaknesses within the Department. This policy describes the various types of PIA that can be used in the evaluation of department performance. A PIA may also be used to identify equipment needs, staffing deficiencies and training needs. The information collected during the PIA process also may be useful in justifying future funding requests for equipment, personnel and/or training.

208.2 POLICY

The PIA is a valuable tool to improve the overall operations of the fire service. It is the policy of this department to use the PIA as a tool for Incident Commanders (ICs), Fire Marshals, Captains, Shift Commanders and command staff to identify areas of strength and weakness within the Department on an incident-by-incident basis, for the purpose of continuous improvement.

The PIA may additionally be utilized in department-wide training to communicate continuous improvement of emergency scene operations and fireground safety.

208.2.1 RESPONSIBILITIES

The ICs, Fire Marshals, Captains, Shift Commanders and command staff have shared responsibility for the overall effectiveness of the PIA process.

The IC should informally analyze every incident to improve personnel, unit and system performance. After every major incident or special event, the IC should develop a PIA to determine strengths, weaknesses and lessons learned about the incident operation.

Anyone may request a PIA of a particular incident. Any PIA requests must be made through the chain of command.

Any significant safety issue that is identified in the PIA should be addressed immediately, if it was not already resolved prior to the PIA being completed. If appropriate, a report should be sent to the International Association of Fire Chiefs (IAFC) Near-Miss Reporting System on any significant safety issues.

208.3 POST-INCIDENT ANALYSIS

A PIA should be completed within 30 days of an incident and may result in recommendations for changes to procedures, staffing, equipment use, policy and/or training to better enable the Department to serve the community.

A PIA should include lessons learned from the observation of effective and efficient methods of mitigating a major incident. These include all strategic decisions, operational issues, built-in fire protection devices and anything else that assisted in mitigating the incident.

(a) A PIA may include:

1. Evaluation of the overall operational effectiveness.

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Post-Incident Analysis

2. Evaluation of safety procedures.
 3. Evaluation of the success or failure of tactical objectives.
 4. Evaluation of the application and effectiveness of policies and/or procedures.
 5. Specific knowledge that might be beneficial.
- (b) The information gained from a PIA should be used by company officers and staff teams to:
1. Reinforce the incident management system.
 2. Evaluate current training programs and/or identify training needs.
 3. Evaluate current policies and procedures.
 4. Identify and prioritize planning needs for the future.
 5. Identify equipment problems/concerns.
 6. Evaluate fire prevention inspection and public education effectiveness.

208.4 TYPES OF POST-INCIDENT ANALYSIS

208.4.1 HOT WASH

An incident “hot wash” should be performed at the incident scene prior to the release of equipment or personnel. A hot wash is a meeting of all involved personnel on-scene. It is an informal briefing of the incident, the actions taken and problems encountered. An IC may present an analysis with key companies or crews while they are on-scene. The advantage to this is that crews are present and all aspects of the call are still fresh. One disadvantage to a hot wash might occur at medical incidents, when some members may be caring for patients and are unable to participate.

If the analysis takes place while on-scene, it is the responsibility of the IC to:

- Meet in a safe area, even if it requires relocating to another area.
- Ensure that the meeting area is inaccessible by the public and media.
- Consider the impact of company downtime.
- Consider public perception.

208.4.2 INFORMAL PIA

An informal PIA is used following smaller multi-company incidents, such as structure fires, medical incidents or special operations incidents. The IC or a designated representative should arrange for and conduct the informal analysis.

208.4.3 COMPANY-LEVEL PIA

A company-level PIA is highly encouraged and should be a standard communication tool for all company officers. It is appropriate for significant incidents involving single companies as well as multiple-company stations where more than one company participated in the incident.

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Post-Incident Analysis

Company-level analysis promotes unity and teamwork, enhances communication, improves company performance and is a useful tool for evaluating the health and welfare of crew members following certain traumatic incidents. A company-level PIA can take place while returning from a call using the headsets, at the fire station or any location that provides privacy.

208.4.4 FORMAL PIA

- (a) A formal PIA should be conducted following all:
 - 1. Multiple-alarm structure fires.
 - 2. Multiple-alarm brush fires.
 - 3. Multiple-alarm Emergency Medical Services (EMS) incidents.
 - 4. Multiple-alarm special operations incidents.
 - 5. Major disaster drills.
 - 6. Unusual incidents identified by the IC or other staff officers.
- (b) A formal PIA should be considered for:
 - 1. A building fire in which three or more rooms are severely damaged by fire, or where unusual extinguishment problems existed.
 - 2. Any incident in which an unusual event occurs, (e.g., explosion, collapse).
 - 3. Any fire resulting in a fatality.
 - 4. Any fire resulting in injury to firefighters that is serious enough to require transport to a medical facility.
 - 5. Any "close call" incident where firefighters could have been injured.
 - 6. Any hazardous materials incident with multi-company involvement.
 - 7. Any specialty rescue operation with multi-company involvement.
 - 8. Any incident, at the IC's discretion or at the direction of a senior officer.
- (c) The Fire Chief is responsible for scheduling and facilitating the presentation of all formal PIAs. This will include:
 - 1. Setting a presentation date and location within three days (whenever possible) of the incident.
 - 2. Supervising the completion of an incident analysis packet that should include a summary of the incident, drawings and identification of any lessons learned.
 - 3. Developing a written After Action Report (AAR) summarizing the PIA and submitting it to the Board of Directors for approval and distribution.
 - 4. Notifying Shift Commanders.
 - 5. Coordinating/scheduling with other departments or outside agencies that worked the incident.
 - 6. Arranging move-up and/or cover companies from other departments.

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Post-Incident Analysis

The Shift Commander is responsible for notifications to all members of the shift who are scheduled to attend the PIA. All members should be notified within one week if a formal PIA is being arranged to allow them to prepare or gather any necessary documentation.

Copies of the formal AAR should be posted at each fire station for all personnel to review.

A copy of all PIAs and AARs shall be forwarded to the Board of Directors for approval prior to distribution, including any determinations or conclusions reached through the PIA presentations.

Annual Planning Calendar

209.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that there is a master schedule of annual activities that will assist with overall planning and coordination of department resources, training and other activities.

209.1.1 DEFINITIONS

Definitions related to this policy include:

Target hazard - A building or occupancy that is unusually dangerous in terms of life loss, or that has a high potential for property damage. A target hazard is often the subject of a target hazard assessment and training by virtue of its potential to overload equipment and personnel resources; involve atypical hazards; require special technical advice; require a multi-agency response; involve complex firefighting operations; have a significant impact on the community if the target were destroyed.

209.2 POLICY

The Bear Valley - Indian Valley Fire Protection District will comply with all mandatory training requirements and inspections.

209.3 RESPONSIBILITIES

The Training/Safety Officer is responsible to create and maintain a calendar that includes a schedule of all training required for compliance with state and federal regulations as well as required inspections. The calendar should include at a minimum:

- All necessary National Incident Management System (NIMS) and Occupational Safety and Health Administration (OSHA) training.
- All required Emergency Medical Technician (EMT) and EMT-Paramedic (EMT-P) recertification training as necessary to meet the local Emergency Medical Service (EMS) and state requirements.
- Training required for job specific duties and functions, including emergency response roles, the Incident Command System (ICS) and FIREScope training, wildland interface training and target hazard training. Training may include manipulative exercises, didactic classroom work and simulations.
- An annual vehicle inventory.
- An inspection and review of all plot plans and pre-fire attack plans.
- Protective clothing inspections.
- Hose and ladders, including aerials inspections.
- Vehicle and pump capacity inspection and testing.
- Biennial Inspection Terminal (BIT) inspections of all tractor-type vehicles, performed by the California Highway Patrol (CHP) according to the California Department of Transportation (DOT) guidelines (Vehicle Code § 34501.12).

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Annual Planning Calendar

- All other training and inspections required by any federal, state or local agency.

Physical Asset Management

210.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines for maintaining a system of inventory and accountability over the department's physical assets.

210.1.1 DEFINITIONS

Definitions related to this policy include:

Physical assets – Any tangible items of value, including but not limited to:

- Materials.
- Machinery.
- Tools and equipment.
- Apparatus, ambulances, and command and support vehicles.
- Office supplies.
- Furniture.
- Firefighting tools and appliances, including hose, power tools, and communications devices.

Physical asset management – The process of tracking and maintaining the department's physical assets.

210.2 POLICY

It is the policy of the department to accurately inventory, track, maintain, and dispose of its physical assets valued over \$1,000 owned by the Department in a manner that controls costs, avoids waste, and promotes the department's mission.

210.3 RESPONSIBILITIES

The Board of Directors or the authorized designee should be responsible for the inventory, maintenance, and disposal of department physical assets, including:

- (a) Maintaining compliance with federal, state law, and local laws regarding physical asset management, inventory control, and reporting requirements.
- (b) Maintaining compliance with any grant requirements associated with physical asset purchases.
- (c) Developing procedures for the implementation of this policy, including:
 1. Procedures for disposal of all department-owned physical assets in accordance with federal, state, and local law.
 2. Procedures for safe disposal of hazardous waste.
 3. Procedures for handling surplus and obsolete physical assets.

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Physical Asset Management

4. Procedures to inventory assets according to internal reporting deadlines (e.g., quarterly, annually).
- (d) Developing a physical asset management plan to track the department's physical assets and maintain accurate and complete records related to these assets. The plan should include:
 1. A minimum value of the physical assets that are subject to this policy, the plan, and the implementing procedures.
 2. An inventory control and recordkeeping system to account for the movement, storage, maintenance, use, loss, damage, destruction, and disposal of the department's physical assets.
 3. Routine internal and external audit practices.
 4. Procedures to access physical assets for reuse, transfer, recycling, or disposal.
- (e) Designating members as appropriate to assist with inventory under the physical asset management plan.
- (f) Annual physical asset acquisition planning.

210.4 IDENTIFICATION AND TAGGING

Physical assets should be tagged using a bar code or other system to identify and locate the items. Tags should be affixed in the same manner and location on each item, when feasible. The following information regarding the tagged item should be maintained using the inventory control system and method of recordkeeping established in the physical asset management plan:

- (a) A description of the item, including but not limited to:
 1. Make, model, and serial number
 2. Physical dimensions and weight
 3. Color, material, and other physically distinct qualities
 4. Warranty and/or recall information, if any
- (b) The specific location where the item can be found
- (c) The acquisition date of the item, as well as the amount and funding source for the acquisition
- (d) The intended and actual use of the item
- (e) The expiration of an item's lease or loan terms

210.5 SURPLUS OR OBSOLETE ASSETS

When the department no longer utilizes a physical asset, the asset should be identified as surplus or obsolete. If the physical asset retains value, the item should be stored as surplus or handled in accordance with the procedures established pursuant to this policy. If the physical asset is deemed obsolete, the item shall be disposed of in accordance with this policy.

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Physical Asset Management

210.5.1 STORAGE

When practicable, physical assets that retain value but are not being utilized should be stored in lieu of disposal. Physical assets in storage are subject to routine inventory and revaluation. If the physical asset's value is less than the cost of storage, the Department should pursue disposal of the item in accordance with this policy.

210.5.2 TRANSFERS

When a physical asset is transferred from one department to another, the value of the physical asset should transfer with the asset. Interdepartment transfers shall be documented through the inventory control and recordkeeping system implemented by the physical asset management plan.

210.6 LOSS, DAMAGE, OR DESTRUCTION

Loss, damage, or destruction of department physical assets shall be handled in accordance with the procedures established pursuant to this policy and the Use of Department-Owned and Personal Property Policy, as applicable.

210.7 USAGE MONITORING

Physical asset performance should be regularly monitored for functionality, utility, wear-and-tear, and cost-effectiveness. Usage monitoring of the department's physical assets should include the duration of use (e.g., daily use and number of hours in use), user satisfaction, costs of operating the asset, and the asset's contribution to employee performance and overall productivity.

210.8 MAINTENANCE

Routine maintenance of physical assets should be proactive to limit interruption of the department's daily operations. Employees should report any physical asset performance issues to a supervisor.

Maintenance requests and reports shall be recorded in the inventory control and recordkeeping system implemented by the physical asset management plan. The Executive Board or the authorized designee shall routinely evaluate maintenance expenditures to determine whether continued maintenance is beneficial.

210.9 DISPOSAL

Physical assets slated for disposal should be evaluated for salvage value (e.g., items containing reusable materials like aluminum or copper) or transferred or disposed of in accordance with the procedures established pursuant to this policy.

210.10 INVENTORY AND REPORTS

Routine inventory of physical assets should be conducted for purposes of loss control, revaluation, retagging, documenting asset movement and condition, disposition and acquisition planning, and obtaining adequate insurance coverage.

All internal controls and inventories related to physical asset management shall be accurately documented and subject to both internal and external audit. Inventory reports should include an explanation of any discrepancies from the previous period.

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Physical Asset Management

All inventory documentation shall be retained and stored in accordance with the records retention schedule.

210.11 TRAINING

Members and supervisors accountable for the proper care, use, transfer, maintenance, storage, loss, and disposition of all department physical assets should receive training regarding their responsibilities under the physical asset management plan.

Purchasing and Procurement

211.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines for the purchasing and procurement of goods and services.

211.2 POLICY

It is the policy of the department to conduct purchasing and procurement in an efficient and cost-effective manner consistent with federal, state, and local laws, rules, and requirements in order to protect the integrity of the department and maintain public trust.

[Purchasing-Procurement Policy](#)

211.3 PURCHASING COORDINATOR

The Board of Directors should designate a member to coordinate department purchases. The member's responsibilities should include:

- (a) Remaining familiar with and updating agency practices in accordance with applicable federal, state, and local purchasing and procurement laws, rules, and requirements.
- (b) Obtaining authorization from the Board of Directors or the authorized designee for each purchase.
- (c) Reviewing proposed purchases to determine the most appropriate method of procurement.
- (d) If the procurement method selected is one other than competitive bidding, documenting why another method was selected.
- (e) Assisting other members involved with the purchasing and procurement of goods or services in following purchasing requirements and rules applicable to the method of procurement.
- (f) Forwarding all contracts and purchase orders to the Board of Directors or the authorized designee for review, approval, and execution.

211.4 REVIEWS

The Board of Directors should ensure that a review of purchasing and procurement activities is conducted annually to determine compliance with any applicable federal, state, and local laws, rules, and requirements.

Americans with Disabilities Act (ADA) Compliance

212.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines for equal access to Bear Valley - Indian Valley Fire Protection District services, programs, and activities for persons with disabilities in accordance with Title II of the Americans with Disabilities Act (ADA).

This policy also includes guidelines to provide effective communication with persons with disabilities and to protect the rights of individuals who use service animals in accordance with the ADA.

212.1.1 DEFINITIONS

Definitions related to this policy include (28 CFR 35.104):

ADA coordinator – The member designated by the Board of Directors to coordinate the [Department_Agency]'s efforts to comply with the ADA (28 CFR 35.107).

Assistive devices, auxiliary aids, and services - Tools used to communicate with people who have a disability or impairment. They include but are not limited to the use of gestures or visual aids to supplement oral communication; a notepad and pen or pencil to exchange written notes; a computer or typewriter; an assistive listening system or device to amplify sound; a teletypewriter (TTY) or videophones (video relay service, or VRS); taped text; qualified readers; or a qualified interpreter.

Disability or impairment - A physical or mental impairment that substantially limits a major life activity, including hearing or seeing, regardless of whether the person uses assistive devices, auxiliary aids, and services. Individuals who wear ordinary eyeglasses or contact lenses are not considered to have a disability (42 USC § 12102; 28 CFR 35.108).

Facility - All aspects of buildings, structures, sites, complexes, equipment, rolling stock or other conveyances, roads, walkways, parking areas, and other real or personal property (28 CFR 35.108).

Modification - Any change, adjustment, alteration, adaptation, or accommodation that renders a [department_agency] service, program, or activity suitable for use, enjoyment, or participation by a person with a disability. This may include alteration of existing buildings and facilities.

A modification includes any change or exception to a policy, practice, or procedure that allows a person with a disability to have equal access to programs, services, and activities. It also includes the provision or use of assistive devices, auxiliary aids, and services.

Power-driven mobility device - Any mobility device powered by batteries, fuel, or other engine type used by persons with disabilities for mobility assistance, regardless of whether the device was primarily designed for that purpose (e.g., golf carts, Segway® PT, mobility scooters). For purposes of this policy, it does not include wheelchairs.

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Americans with Disabilities Act (ADA) Compliance

Qualified interpreter - A person who is able to interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. Qualified interpreters include oral interpreters, transliterators, sign language interpreters, and intermediary interpreters.

Service animal - A dog that is trained to do work or perform tasks for the benefit of a person with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability. The work or tasks performed by a service animal must be directly related to the individual's disability.

Service animal also includes a miniature horse if the horse is trained to do work or perform tasks for persons with disabilities, provided the horse is housebroken, is under the handler's control, the building or facility can accommodate the horse's type, size, and weight, and the horse's presence will not compromise legitimate safety requirements necessary for safe operation of the facility (28 CFR 35.136(i)).

212.2 POLICY

It is the policy of the Department that persons with disabilities have equal access to department services, programs, and activities.

The Department will not discriminate against or deny any individual access to services, programs, or activities based upon disabilities.

212.3 ADA COORDINATOR

The responsibilities of the ADA coordinator include but are not limited to (28 CFR 35.130):

- (a) Coordinating efforts within the Department and with the District ADA coordinator to provide equal access to services, programs, and activities including:
 - 1. Establishing procedures to provide for the performance of routine maintenance on buildings, facilities, or equipment that provide access to persons with disabilities (28 CFR 35.133).
- (b) Recommending amendments to this policy, as needed.
- (c) Coordinating a process of periodic self-evaluation. The process should include:
 - 1. Inspection of current department buildings and facilities to identify access issues.
 - 2. Review of current department services, activities, and programs for access issues.
 - 3. Assessment and update of current compliance measures.
 - 4. Identification of recurring areas of complaint for which new methods of modification should be considered.
 - 5. Review of the department's emergency programs, services, and activities as they apply to persons with disabilities.
 - 6. Recommendation of a schedule to implement needed improvements.
- (d) Acting as a liaison with local disability advocacy groups or other disability groups regarding access to department services, programs, and activities.

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Americans with Disabilities Act (ADA) Compliance

- (e) Developing procedures for the review and processing of requests for assistance or modifications that will help members provide persons with disabilities access to department services, programs, and activities, as appropriate.
- (f) Providing notice to the public regarding the rights and protections afforded by the ADA (e.g., posters, published notices, handbooks, manuals, and pamphlets describing department services, programs, and activities and the availability of assistive devices, auxiliary aids, and services, as well as modifications) (28 CFR 35.106).
- (g) Developing procedures for members to access assistive devices, auxiliary aids, and services, including qualified interpreters, and making the procedures available, as appropriate.
 - 1. A list of qualified interpreter services with contact and availability information should be maintained and easily accessible to members.
- (h) Developing, implementing, and publishing appropriate procedures to provide for the prompt and equitable resolution of complaints and inquiries regarding discrimination in access to services, programs, and activities (28 CFR 35.107). The complaint procedures should include an appeal process.
- (i) Requiring third parties providing department services, programs, or activities through contract, outsourcing, licensing, or other arrangement to establish reasonable policies and procedures to prevent discrimination against and denial of access to persons with disabilities.
- (j) Developing and implementing procedures to provide that new construction and any alteration to an existing building or facility are undertaken in compliance with the ADA (28 CFR 35.151).
- (k) Coordinating with appropriate state and local agencies to address the needs of persons with disabilities in the department's emergency disaster preparedness planning, including consideration of communication methods (e.g., warning and emergency notification systems), evacuation and transportation, shelters and care facilities, emergency medical care, and post-disaster canvassing, transportation, and remediation.)
 - 1. The ADA coordinator or the authorized designee should serve as a liaison to Department members during an emergency or disaster to provide guidance on issues involving persons with disabilities that may arise.

212.4 REQUESTS

The goal of any modification should be to allow the person to participate in the service, program, or activity in the same way as a person who does not have a disability.

Upon receiving a request for a modification, members should make reasonable efforts to accommodate the request based on the preference of the person with the disability. Members should not ask about the nature and extent of a person's disability and should limit questions to information necessary to determine the need for a modification and the type of modification that is appropriate.

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If the requested modification or an alternative modification can reasonably be made at the time of the request, the member should make the modification. A member who is unable to accommodate a request or unsure about whether a request should be accommodated should contact a supervisor.

The supervisor should review and approve the request, if practicable and appropriate. Otherwise, the supervisor should document the requesting person's contact information and the modification being requested and forward the request to the ADA coordinator for processing as soon as reasonably practicable.

212.4.1 DENIAL OF REQUEST

The following should be considered before denying a request for modification:

- (a) Requests for modifications should be approved unless complying with the request would result in (28 CFR 35.150):
 - 1. A substantial alteration of the service, program, or activity.
 - 2. An undue financial or administrative burden on the Department.
 - 3. All resources available for use in the funding and operation of the service, program, or activity at issue should be considered in this determination.
 - 4. A threat to or the destruction of the historic significance of an historic property.
 - 5. A direct threat to the health or safety of others (28 CFR 35.139).
 - 6. If any of the above circumstances are present, the ADA coordinator should work with department staff and the person requesting the modification to determine if an alternative modification is available.
- (b) Where physical modification of an existing building or facility, or new construction, would be unfeasible or unduly burdensome, the ADA coordinator should work with department staff to determine whether alternative modifications are available. Alternative methods that should be considered include (28 CFR 35.150):
 - 1. Reassigning services, programs, or activities to accessible buildings or facilities.
 - 2. Utilizing technology, equipment, rolling stock, or other conveyances.
 - 3. Delivering the services, programs, or activities directly to a person with a disability by way of home visits or meeting the person at an accessible location.
 - 4. Any other means or methods that would make services, programs, or activities readily accessible.
- (c) If no alternative modification is appropriate, the ADA coordinator shall issue a written statement explaining why a modification of the public service, program, or activity will not be made (28 CFR 35.150).

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212.4.2 PERSONAL DEVICES AND ASSISTANCE

Although members should make every effort to comply with requests, the provision of personal devices or assistance (e.g., wheelchairs, eyeglasses, hearing aids, personal assistance in eating or using the restroom) to persons with disabilities is not required (28 CFR 35.135).

212.4.3 SURCHARGES

Surcharges shall not be imposed upon persons with disabilities to cover the costs of providing modifications to public services, programs, and activities (28 CFR 35.130(f)).

212.5 MOBILITY DEVICES

Wheelchairs and manually powered mobility devices such as walkers, crutches, canes, and braces are permitted in any areas open to pedestrians.

Power-driven mobility devices other than wheelchairs may be restricted only if a legitimate safety interest is identified that warrants the restriction (28 CFR 35.130(h); 28 CFR 35.137).

A member should not ask a person using a power-driven mobility device to terminate the use of the device or leave the area unless an imminent and legitimate safety issue is present. If a member is concerned about the use of a power-driven mobility device by a person with a disability, the member should contact a supervisor.

The determination of whether a reasonable modification should be made for the use of a power-driven mobility device within a public building or facility should be based on whether the device, given its size and speed, can be safely used within the particular building or facility taking into account the layout and design of the building or facility, the amount of pedestrian traffic present in the building or facility, and whether there is any risk of damage to the building or facility or its immediate environment as set forth in 28 CFR 35.137.

212.5.1 INQUIRIES REGARDING MOBILITY DEVICES

If an individual is using a power-driven mobility device other than a wheelchair, the member may seek credible assurance from the individual that the device is needed because of a disability. Credible assurance of the device's necessity may be provided in one of the following ways (28 CFR 35.137):

- (a) Presentation of a valid, state-issued disability placard or card
- (b) Presentation of any other state-issued proof of disability
- (c) A verbal statement, not contradicted by observable fact, that use of the device is necessary for mobility purposes

212.6 COMMUNICATIONS WITH PERSONS WITH DISABILITIES

Members should remain alert to the possibility of communication problems when engaging with persons with disabilities. When a member knows or suspects an individual requires assistance to effectively communicate, the member should identify the individual's choice of assistive device, auxiliary aid, and service.

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The individual's preferred communication method should be honored unless another effective method of communication exists under the circumstances (28 CFR 35.160).

Factors to consider when determining whether an alternative method is effective include:

- (a) The methods of communication usually used by the individual.
- (b) The nature, length, and complexity of the communication involved.
- (c) The context of the communication.

In emergency situations involving an imminent threat to the safety or welfare of any person, members may use whatever assistive device, auxiliary aid, or service reasonably appears effective under the circumstances. This may include, for example, exchanging written notes or using the services of a person who knows sign language but is not a qualified interpreter, even if the person who is deaf or hard of hearing would prefer a qualified sign language interpreter or another appropriate assistive device, auxiliary aid, and service. Once the emergency has ended, the continued method of communication should be reconsidered. The member should inquire as to the individual's preference and give primary consideration to that preference.

212.6.1 TYPES OF ASSISTANCE AVAILABLE

Members shall not refuse an available type of assistive device, auxiliary aid, or service to a person with a disability who is requesting assistance. The Department will not require persons with disabilities to furnish their own assistive device, auxiliary aid, or service as a condition for receiving assistance. The Department will make every reasonable effort to provide equal access and timely assistance to persons with disabilities through a variety of assistive devices, auxiliary aids, and services.

Persons with disabilities may choose to accept District-provided assistive devices, auxiliary aids, and services, or they may choose to provide their own.

Department-provided assistive devices, auxiliary aids, and services may include but are not limited to the assistance methods described in this policy.

212.6.2 AUDIO RECORDINGS AND ENLARGED PRINT

The Department may develop audio recordings to assist people who are blind or have a visual impairment with accessing important information. If such a recording is not available, members may read aloud from the appropriate form or provide forms with enlarged print.

212.6.3 QUALIFIED INTERPRETERS

A qualified interpreter may be needed in lengthy or complex interactions (e.g., public meetings or hearings, special or emergency meetings, press conferences) for individuals who normally rely on sign language or speechreading (lip-reading) to understand what others are saying. The qualified interpreter should not be a person with an interest in the exchange. A person providing interpretation services may be required to establish the accuracy and trustworthiness of the interpretation in a local government or legal proceeding.

Qualified interpreters should be:

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- (a) Available within a reasonable amount of time.
- (b) Experienced in providing interpretation services.
- (c) Familiar with the use of VRS and/or video remote interpreting services.
- (d) Certified in either American Sign Language (ASL) or Signed English (SE).
- (e) Able to understand and adhere to the interpreter role without deviating into other roles, such as counselor or legal adviser.
- (f) Knowledgeable of the ethical issues involved when providing interpreter services.

Members should use department-approved procedures to request a qualified interpreter at the earliest reasonable opportunity or when it is reasonably apparent that an interpreter is needed. Persons with disabilities shall not be required to provide their own interpreters (28 CFR 35.160).

212.6.4 TTY AND RELAY SERVICES

The Department will accept all TTY or TDD calls placed by those who are deaf or hard of hearing and received via a telecommunications relay service.

Note that relay services translate verbatim, so the conversation must be conducted as if speaking directly to the caller.

212.6.5 COMMUNITY VOLUNTEERS

Interpreter services may be available from community volunteers who have demonstrated competence in communication services, such as ASL or SE, and have been approved by the Department to provide interpreter services.

When qualified interpreters are unavailable to assist, approved community volunteers who have demonstrated competence may be called upon when appropriate. However, Department members must carefully consider the nature of the interaction and the relationship between the person with the disability and the volunteer to be reasonably satisfied that the volunteer can provide neutral and unbiased assistance.

212.6.6 FAMILY AND FRIENDS

While family or friends may offer to assist with interpretation, members should carefully consider the circumstances before relying on such individuals. The nature of the interaction and relationship between the person with the disability and the person offering services must be carefully considered to determine whether the family member or friend can provide neutral and unbiased assistance.

Children shall not be relied upon except in emergency or critical situations when there is no qualified interpreter reasonably available.

Adults may be relied upon when (28 CFR 35.160):

- (a) There is an emergency or critical situation and there is no qualified interpreter reasonably available.

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- (b) The person with the disability requests that the adult interpret or facilitate communication and the adult agrees to provide such assistance, and reliance on that adult for such assistance is reasonable under the circumstances.

212.6.7 FIELD ENFORCEMENT CONSIDERATIONS

It is important that members are able to effectively communicate with persons with disabilities even though the location of the communication may hinder the member's ability to provide assistive devices, auxiliary aids, and other services in a prompt manner.

Members involved in interactions with persons with disabilities that occur in the field and that could result in any type of civil or criminal enforcement action (e.g., issuing code enforcement citations, shutting off a utility service, fire investigations) should assess each situation to determine if communication assistance is necessary. The length, complexity, and importance of the communication, as well as the individual's preferred method of communication, should be considered when determining what, if any, resources should be used and whether a qualified interpreter or other service is needed.

212.7 SERVICE ANIMALS

Service animals that are assisting persons with disabilities are permitted in all Department buildings and facilities and other areas where the general public is allowed. Department members are expected to treat people with service animals with the same courtesy and respect that the Department affords to all members of the public (28 CFR 35.136).

212.7.1 IDENTIFICATION AND USE OF SERVICE ANIMALS

Some service animals may be readily identifiable. However, many do not have a distinctive symbol, harness, or collar.

Service animals may be used in a number of ways to provide assistance, including:

- (a) Guiding people who are blind or have low vision.
- (b) Alerting people who are blind or have low vision.
- (c) Retrieving or picking up items, opening doors, or flipping switches for people who have limited use of their hands, arms, or legs.
- (d) Pulling wheelchairs.
- (e) Providing physical support and assisting with stability and balance.
- (f) Doing work or performing tasks for people with traumatic brain injury, intellectual disabilities, or psychiatric disabilities, such as reminding a person with depression to take medication.
- (g) Altering a person with anxiety to the onset of panic attacks, providing tactile stimulation to calm a person with post-traumatic stress disorder, assisting people with schizophrenia to distinguish between hallucinations and reality, and helping people with traumatic brain injury to locate misplaced items or follow daily routines.

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212.7.2 INQUIRIES REGARDING SERVICE ANIMALS

If it is apparent or if a member is aware that an animal is a service animal, the individual generally should not be asked any questions as to the status of the animal. If it is unclear whether an animal meets the definition of a service animal, the member should ask the individual only the following questions (28 CFR 35.136(f)):

- (a) Is the animal required because of a disability?
- (b) What task or service has the service animal been trained to perform?

If the individual explains that the animal is required because of a disability and has been trained to work or perform at least one task, the animal meets the definition of a service animal and no further questions as to the animal's status should be asked. Members should not question individuals about their disabilities, nor should members ask any individual to provide a license, certification, or identification card for a service animal.

212.7.3 CONTACT WITH SERVICE ANIMALS

Service animals are not pets. Department members should not interfere with the important work performed by a service animal by talking to, petting, or otherwise initiating contact with a service animal.

212.7.4 REMOVAL OF SERVICE ANIMALS

If a service animal is not housebroken or exhibits vicious behavior, poses a direct threat to the health of others, or unreasonably disrupts or interferes with normal business operations, a member should notify an appropriate supervisor who may direct the handler to remove the animal from the premises. Barking alone is not a threat, nor does a direct threat exist if the person takes prompt, effective action to control the service animal (28 CFR 35.136(b)).

Each incident must be considered individually, and past incidents alone are not cause for excluding a service animal. Removal of a service animal may not be used as a reason to refuse access to services, programs, or activities to a person with a disability. Members are expected to provide all services that are reasonably available to a person with a disability, with or without a service animal.

212.8 WEBSITE ACCESS

The ADA coordinator should work with appropriate Department members to develop online content that is readily accessible to persons with disabilities. Department web content should be developed in conformance with the most current guidelines issued by the U.S. Department of Justice.

Website content should also be made available to persons with disabilities in an alternative format upon request, if reasonably practicable.

212.9 DOCUMENTATION

Whenever any modification, assistive device, auxiliary aid, or service has been provided, the member involved should document:

- (a) The type of modification, aid, or service provided.

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- (b) Whether the individual elected to use an assistive device, auxiliary aid, and service provided by the Department or some other identified source, if applicable.
- (c) Whether the individual's express preference for the modification, assistive device, auxiliary aid, or service was not honored, and the reason why an alternative method was used.

The documentation and any written communications exchanged should be maintained consistent with the Records Maintenance and Release Policy.

212.10 COMPLAINTS

A member who receives a complaint or becomes aware of potential disability discrimination, an ADA violation, or a person's inability to access a [department_agency] program, service, or activity should document the complaint and refer the matter to the ADA coordinator (28 CFR 35.107).

212.11 TRAINING

Members who may have contact with persons with disabilities should receive periodic training on ADA compliance, to include:

- (a) Awareness and understanding of this policy and related procedures, related forms, and available resources.
- (b) Procedures for handling requests for modifications.
- (c) Accessing assistive devices, auxiliary aids, and services needed to communicate with persons with disabilities.
- (d) General requirements of the ADA, including modifying policies and practices, communicating with and assisting customers, accepting calls placed through alternative systems, and identifying alternate ways to provide access to programs, services, and activities as appropriate to the member's job duties.

Training records should be maintained in each member's personnel file in accordance with the established records retention schedule.

Limited English Proficiency Services

213.1 PURPOSE AND SCOPE

This policy provides guidance to members when communicating with individuals with limited English proficiency (LEP) (42 USC § 2000d).

213.1.1 DEFINITIONS

Definitions related to this policy include:

Authorized interpreter - A person who has been screened and authorized by the Department to act as an interpreter and/or translator for others.

Interpret or interpretation - The act of listening to a communication in one language (source language) and orally converting it to another language (target language), while retaining the same meaning.

Limited English proficiency (LEP) individual - Any individual whose primary language is not English and who has a limited ability to read, write, speak, or understand English. These individuals may be competent in certain types of communication (e.g., speaking, understanding) but still exhibit LEP for other purposes (e.g., reading, writing). Similarly, LEP designations are context-specific; an individual may possess sufficient English language skills to function in one setting, but these skills may be insufficient in other situations.

Qualified bilingual member - A member of the Department, designated by the Board of Directors or the authorized designee, who has the ability to communicate fluently, directly, and accurately in both English and another language. Bilingual members may be fluent enough to communicate in a non-English language but may not be sufficiently fluent to interpret or translate from one language into another.

Translate or translation - The replacement of written text from one language (source language) into an equivalent written text (target language).

213.2 POLICY

It is the policy of the Department to reasonably provide LEP individuals with meaningful access to services, programs, and activities, while not imposing undue burdens on the [Department_Agency] or its members.

The Department will not discriminate against or deny any individual access to services, rights, or programs based upon national origin or any other protected interest or right.

213.3 LEP COORDINATOR

The Board of Directors or the authorized designee should delegate certain responsibilities to an LEP coordinator.

The responsibilities of the coordinator should include but not be limited to:

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- (a) Coordinating and implementing all aspects of the department's LEP services to LEP individuals.
- (b) Developing procedures that will enable members to access LEP services, including telephonic interpreters, and ensuring the procedures are available to all members.
- (c) Maintaining and making available to members, as appropriate, a list of all qualified bilingual members and authorized interpreters. The list should include information regarding:
 - 1. Languages spoken.
 - 2. Contact information.
 - 3. Availability.
- (d) Ensuring signage stating that interpreters are available free of charge to LEP individuals is posted in appropriate areas and in the most commonly spoken languages.
- (e) Reviewing existing and newly developed documents to determine which are vital documents and should be translated, and into which languages the documents should be translated.
 - 1. Content on the department website should be included in this review and should be translated on the website, if appropriate.
- (f) Annually assessing demographic data and other resources, including contracted language services utilization data and data from government and community-based organizations, to determine if there are additional documents or languages that are appropriate for translation.
- (g) Identifying standards and assessments to be used to qualify individuals as qualified bilingual members or authorized interpreters.
- (h) Periodically reviewing efforts of the Department in providing meaningful access to LEP individuals, and, as appropriate, developing reports, developing new procedures, or recommending modifications to this policy.
- (i) Receiving and responding to complaints regarding department LEP services.
- (j) Ensuring appropriate processes are in place to provide for the prompt and equitable resolution of complaints and inquiries regarding discrimination in access to department services, programs, and activities.
- (k) Requiring third parties providing department services, rights, or programs through contract, outsourcing, licensing, or other arrangement to establish reasonable policies and procedures to prohibit discrimination or denial of access or services based upon national origin or any other protected interest or right.

213.4 FOUR-FACTOR ANALYSIS

Because there are many different languages that members could encounter, the Department will utilize the four-factor analysis outlined in the U.S. Department of Justice (DOJ) Guidance to Federal Financial Assistance Recipients, available at the DOJ website, to determine which

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measures will provide meaningful access to its services and programs. It is recognized that contacts and circumstances will vary considerably. This analysis, therefore, must remain flexible and will require an ongoing balance of the following four factors, which are:

- (a) The number or proportion of LEP individuals eligible to be served or likely to be encountered by [department_agency] members, or who may benefit from programs or services within the jurisdiction of this department.
- (b) The frequency with which LEP individuals are likely to come in contact with [department_agency] members, programs, or services.
- (c) The nature and importance of the contact, program, information, or service provided.
- (d) The cost of providing LEP assistance and the resources available.

213.5 TYPES OF LEP ASSISTANCE AVAILABLE

Members should never refuse service to an LEP individual who is requesting assistance, nor should they require an LEP individual to furnish an interpreter as a condition for receiving assistance. The Department will make every reasonable effort to provide meaningful and timely assistance to LEP individuals through a variety of services.

The Department will utilize all reasonably available tools, such as language identification cards, when attempting to determine an LEP individual's primary language.

LEP individuals may choose to accept department-provided LEP services at no cost, or they may choose to provide their own.

Department-provided LEP services may include but are not limited to the assistance methods described in this policy.

213.6 WRITTEN FORMS AND GUIDELINES

Vital documents or those that are frequently used should be translated into languages most likely to be encountered. If English versions of any vital documents are published on the department website, the translated versions of the same document must also be posted on the website. The LEP coordinator will arrange to make all translated documents available to members and other appropriate individuals, as necessary.

213.7 AUDIO RECORDINGS

The Department may develop audio recordings of important or frequently requested information in a language most likely to be understood by those LEP individuals who are representative of the community being served.

213.8 QUALIFIED BILINGUAL MEMBERS

Bilingual members may be qualified to provide LEP services when they have demonstrated through established Department procedures a sufficient level of skill and competence to fluently communicate in both English and a non-English language. Members utilized for LEP services must demonstrate knowledge of the functions of an interpreter/translator and the ethical issues involved when acting as a language conduit.

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When a qualified bilingual member from this department is not available, personnel from other District departments who have been identified by the [department_agency] as having the requisite skills and competence may be requested.

213.9 AUTHORIZED INTERPRETERS

Any person designated by the Department to act as an authorized interpreter and/or translator must have demonstrated competence in both English and the involved non-English language, must have an understanding of the functions of an interpreter that allows for correct and effective translation, and should not be a person with an interest in the transaction involving the LEP individual. A person providing interpretation or translation services may be required to establish the accuracy and trustworthiness of the interpretation or translation in a legal or other proceeding.

Authorized interpreters must pass a screening process established by the LEP coordinator that demonstrates their skills and abilities in the following areas:

- (a) The competence and ability to communicate information accurately in both English and in the target language.
- (b) Knowledge, in both languages, of any applicable specialized terms or concepts and of any particularized vocabulary or phraseology used by the LEP individual.
- (c) The ability to understand and adhere to the interpreter role without deviating into other roles, such as counselor or legal adviser.
- (d) Knowledge of the ethical issues involved when acting as a language conduit.

213.9.1 SOURCES OF AUTHORIZED INTERPRETERS

The Department may contract with authorized interpreters who are available over the telephone. Members may use these services with the approval of a supervisor and in compliance with established procedures.

Other sources may include:

- Qualified bilingual members of another department within the District.
- Individuals employed exclusively to perform interpretation services.
- Contracted in-person interpreters, such as court interpreters, among others.
- Interpreters from other agencies who have been qualified as interpreters by this department, and with whom the Department has a resource-sharing or other arrangement that they will interpret according to department guidelines.

213.9.2 COMMUNITY VOLUNTEERS AND OTHER SOURCES OF LANGUAGE ASSISTANCE

Language assistance may be available from community volunteers who have demonstrated competence in either monolingual (direct) communication and/or in interpretation or translation (as noted in above), and have been approved by the Department to communicate with LEP individuals.

Where qualified bilingual members or other authorized interpreters are unavailable to assist, approved community volunteers who have demonstrated competence may be called upon when

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appropriate. However, members must carefully consider the nature of the contact and the relationship between the LEP individual and the volunteer to ensure that the volunteer can provide neutral and unbiased assistance.

While family or friends of an LEP individual may offer to assist with communication or interpretation, members should carefully consider the circumstances before relying on such individuals. For example, children should not be relied upon except in exigent or very informal and non-confrontational situations.

213.10 CONTACT AND DOCUMENTATION

Although all public contacts, services, and individual rights are important, this [department_agency] will utilize the four-factor analysis to prioritize service to LEP individuals so that such services may be targeted where they are most needed, according to the nature and importance of the particular activity involved.

Whenever any member of this department is required to complete a report or other documentation that involves a situation in which interpretation services were provided to any involved LEP individual, such services should be noted in the related report or documentation. Members should document the type of interpretation services utilized and whether the individual elected to use services provided by the District Department or some other identified source.

213.11 RECEIVING AND RESPONDING TO REQUESTS FOR ASSISTANCE

The Department will take reasonable steps to develop in-house language capacity by hiring or appointing qualified members proficient in languages representative of the community being served.

213.11.1 EMERGENCY ASSISTANCE

Department members will make every reasonable effort to promptly accommodate LEP individuals who appear to be in need of emergency assistance. A member who determines that a person in need of emergency assistance is an LEP individual should attempt to gather sufficient information to determine what type of assistance the person needs and to initiate an appropriate response to the situation. As soon as possible, if language assistance is still needed and the language is known, the member should attempt to locate a qualified bilingual member to assist with the situation.

If a qualified bilingual member is not available or the member is unable to identify the primary language used by the LEP individual, the member should contact the contracted interpretation service for assistance.

213.12 COMMUNITY OUTREACH

Community outreach programs and other such services offered by this department are important to the ultimate success of local government and achievement of the department's mission. This department will continue to work with community groups, local businesses, and neighborhoods to provide equal access to such programs and services.

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213.13 TRAINING

To ensure that all members who may have contact with LEP individuals are properly trained, the Department will provide periodic training on this policy and related procedures, including how to access authorized telephonic and in-person interpreters and other available resources.

New members should receive LEP training. Those who may have contact with LEP individuals should receive periodic refresher training. Training records should be maintained in each member's personnel file in accordance with the established records retention schedule.

213.13.1 TRAINING FOR AUTHORIZED INTERPRETERS

All members on the authorized interpreter list must successfully complete prescribed interpreter training. To complete interpreter training successfully, an interpreter must demonstrate proficiency in and ability to communicate information accurately in both English and in the target language, demonstrate knowledge in both languages of any specialized terms or phraseology, and understand and adhere to the interpreter role without deviating into other roles, such as counselor or legal adviser.

Members on the authorized interpreter list must receive refresher training annually or they will be removed from the authorized interpreter list. This annual training should include language skills competency (including specialized terminology) and ethical considerations.

Authorized interpreters will receive annual refresher training

Incident Reports

214.1 PURPOSE AND SCOPE

Every incident that has a type of response for the BVIVFD will be documented by filling out an Incident Report. These shall include all incidents, fire prevention, inspections, and public contact for service. Volunteer functions shall not be documented on Incident Reports or Training Records.

214.2 PROCEDURE

It shall be the responsibility of all personnel to fill out the proper incident forms and gather the proper information from the incident/scene to complete report. The Duty Officer can delegate authority to collect information to other personnel for report as long as other policies are not violated.

- (a) Reports include the following:
 - 1. Incident Report
 - 2. Fire Report
 - 3. Medical Form
 - 4. Pictures
 - 5. Expanded Narrative, if needed

All personnel shall be responsible for making sure that they are documented on the incident report by either documenting their status themselves or confirming with the Command Staff.

Personnel on Standby (SB) shall document besides their name "SB" for being on standby.

- (a) Personnel on Standby shall not leave unless released by a member of the Command Staff or they will not receive credit for standby.
- (b) If you are on "SB" and respond to the incident, then personnel or the person writing the report shall be responsible for documenting the proper status and apparatus number.
- (c) At no time shall personnel on "SB" complete any other information on the report other than personnel status.

Chapter 3 - General Operations

Incident Management

300.1 PURPOSE AND SCOPE

The purpose of this policy is to establish operational guidelines for members of the Department to use in the management and mitigation of all-hazards emergency incidents.

300.1.1 DEFINITIONS

Definitions related to this policy include:

All-hazards - An incident, natural or manmade, that warrants action to protect life, property, the environment, and public health or safety, and to minimize disruptions of government, social or economic activities.

300.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to utilize the Incident Command System (ICS) or other National Incident Management System (NIMS)-compliant incident management system for managing all emergency incidents. All incident-related activities should be managed in accordance with established ICS/NIMS methods and procedures.

300.3 PROCEDURES

The Fire Chief should ensure the Department adopts written ICS/NIMS procedures that are compatible with neighboring jurisdictions. These procedures should be available to members.

Emergency incidents shall be managed utilizing trained and qualified personnel for the specific tactical, supervisory, or command level assignments.

Whenever an emergency incident occurs in the jurisdiction of the Bear Valley - Indian Valley Fire Protection District, it is the responsibility of the Incident Commander (IC) to assess the potential for the incident to involve property, structures or persons within either a State Responsibility Area (SRA) or a Federal Responsibility Area (FRA). If the incident involves or threatens to involve any SRA or FRA, the IC shall immediately notify the California Department of Forestry and Fire Protection (CAL FIRE) or the United States Forest Service (USFS) and Colusa County of the incident.

The IC shall also send notification through the chain of command to the on-duty Captain, and the Fire Chief.

The IC should assess the potential for the incident to involve or negatively impact any persons or property in neighboring jurisdictions. If the IC determines that the potential exists, he/she shall immediately direct Colusa County to notify the appropriate jurisdiction of the incident.

Emergency Response

301.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure a safe and appropriate response to emergencies while maintaining the safety of department members and the public by requiring operators of department vehicles to conform to applicable California laws and regulations during an emergency response (Vehicle Code § 21055).

301.1.1 DEFINITIONS

Definitions related to this policy include:

Emergency response - Any call for service or assistance involving fire, explosion or violent rupture; human rescue; human entrapment; illness or injury; hazardous materials release or threat of contamination; flooding; threatened or actual acts of violence; any explosive, bomb or threatened bombing; any act of terrorism; any natural disaster; any release, spill or threat of release of radioactive materials; any spill, release or threat of release of any active biological agent; or any other circumstance that presents a threat to life-safety or to property.

301.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to appropriately respond to all emergency calls.

301.3 EMERGENCY CALLS

Fire personnel dispatched to an emergency shall proceed immediately, shall continuously operate emergency lighting equipment, including at minimum a steady forward facing red light, and shall sound the siren as reasonably necessary (Vehicle Code § 21055).

Responding with emergency lights and siren does not relieve personnel of the duty to continue to drive with due regard for the safety of all persons. The use of any other warning equipment without a red light and siren does not provide any exemption from the Vehicle Code. Posted speed limits shall be adhered to at all times. Operators will exercise due caution while responding to incidents during adverse weather conditions.

Personnel should only respond with emergency lights and siren when so dispatched to an emergency or when circumstances reasonably indicate an emergency response is required.

Personnel not authorized to respond with emergency lights and siren shall observe all traffic laws and proceed without the use of emergency lights and siren.

301.4 MULTIPLE EMERGENCY VEHICLE RESPONSES

When more than one apparatus responds to an emergency, emergency vehicle operators should remain alert to the presence of other emergency vehicles and exercise due caution. Personnel must further exercise due caution in recognizing that traffic yielding to one emergency vehicle may not expect other emergency vehicles to follow.

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Emergency Response

301.5 INITIATING AN EMERGENCY RESPONSE

If a member believes an emergency response to any call is appropriate, the member shall ensure Colusa County is immediately notified.

301.6 RESPONSIBILITIES OF RESPONDING PERSONNEL

Emergency vehicle operators shall exercise sound judgment and care, with due regard for life and property while operating a vehicle en route to an emergency response.

In addition, emergency vehicle operators should reduce speed at all intersections and should come to a complete stop at all blind street intersections or intersections where there is either a red light, a flashing red light or a stop sign. Emergency vehicle operators should also come to a complete stop at intersections whenever they reasonably believe they cannot account for traffic in approaching lanes or when vehicles have not yielded the right-of-way. After coming to a complete stop, emergency vehicle operators should only proceed when it is safe to do so.

The decision to continue an emergency response is at the discretion of the emergency vehicle operator or company officer. If, in the judgment of either individual, the roadway conditions or traffic congestion does not permit such a response without unreasonable risk, the response may be continued without the use of red lights and siren at the legal speed limit. In such an event, the vehicle operator or the company officer should ensure Colusa County is promptly notified. Personnel shall also discontinue the emergency response when directed by any supervisor.

301.7 FAILURE OF EMERGENCY EQUIPMENT

If the emergency equipment on the vehicle should fail to operate, the vehicle operator must terminate the emergency response and respond accordingly. In all cases, the vehicle operator or company officer shall notify the Fire Chief of the equipment failure so that another apparatus may be assigned to the emergency response.

Fire Ground Accountability

302.1 PURPOSE AND SCOPE

The purpose of this policy is to increase firefighter safety by establishing accountability systems for keeping track of all personnel operating at the scene of an emergency incident.

302.1.1 DEFINITIONS

Definitions related to this policy include:

Personnel Accountability Report (PAR) - A roll call of all operations members assigned to an incident at specified times; a PAR is designed to account for each member's location and activity and to verify their safety.

302.2 POLICY

It is the policy of this department that supervisors periodically account for members working under their direction at emergency incidents and that all members participate in accountability systems.

302.3 RESPONSIBILITIES

A personnel accountability system should be used primarily to track personnel, not resources. However, on small incidents one individual may be responsible for tracking both personnel and resources.

A written personnel accountability system, such as the Incident Command System (ICS) Form I-201 for Incident Commanders, and a status board should be maintained. Individual crew names must be posted in a conspicuous location in the cab of department vehicles.

Supervisors are responsible for tracking all personnel on emergency incidents. Personnel should be accounted for from the time of dispatch to the time of demobilization.

Supervisors should implement sufficient tracking methods for personnel at the individual, company, division, group and unit levels to account for personnel during all phases and at all locations of an incident, including travel between locations and assignments.

The Incident Commander should designate an accountability officer to monitor who is in charge of each area; what crews are assigned to each area; where each area is located; and the area assignment.

Area supervisors should be assigned to keep track of all crews assigned to their area. Company officers should know the location and assignment of each firefighter in their crew.

All members are responsible for participating in the accountability system, including checking in at approved locations, including members who arrive on-scene individually or in privately-owned vehicles.

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Fire Ground Accountability

302.4 REPORTING

Ongoing, routine tactical accountability should be accomplished through periodic reporting or visual observation. This can be accomplished through concise reports that include conditions, actions and needs, also called a CAN report. Members should also make the following reports:

- Emergency situations
- Inability to meet objective with revised timeline and/or resource requests
- Notification of completed actions

302.4.1 PERSONNEL ACCOUNTABILITY REPORTS (PAR)

A PAR should be conducted within the first 10 minutes after arrival of an incident and every 20 minutes thereafter for personnel at the scene. In addition, PARs should be conducted after any change in conditions that may alter or affect firefighter safety, such as an increase in fire conditions or after ordering an emergency evacuation of an area.

A PAR should be conducted for each division, group and organizational element where operations personnel are working. If any person involved in the operation is unaccounted for, emergency procedures should be initiated.

The Incident Commander may discontinue regular PARs when incident stabilization is achieved and hazards are sufficiently reduced.

Rapid Intervention/Two-In Two-Out

303.1 PURPOSE AND SCOPE

The purpose of this policy is to increase firefighter safety by implementing procedures for safeguarding and rescuing firefighters while operating in environments that are immediately dangerous to life and health (IDLH).

This policy applies to all members assigned to an incident and is designed to ensure immediate assistance for members who become lost, trapped or injured by adhering to the two-in/two-out standard and designating rapid intervention groups (RIG) (29 CFR 1910.134(g)(4)).

303.1.1 DEFINITIONS

Definitions related to this policy include:

Immediately dangerous to life and health (IDLH) - An atmospheric concentration of any toxic, corrosive or asphyxiant substance that to an unprotected person poses an immediate threat to life, would cause irreversible adverse health effects or would impair an individual's ability to escape from a hazardous area. Interior atmospheric conditions at structure fires beyond the incipient stage are considered IDLH, as are a variety of rescue types.

Initial rapid intervention group (IRIG) - A group of at least two members located outside the IDLH atmosphere to initially monitor and provide emergency rescue for responders until a larger, more formalized rapid intervention group (RIG) is created. One of the two members may be assigned to an additional role, as long as the individual is able to perform assistance or rescue activities without jeopardizing the safety or health of any firefighter at the incident. An IRIG is also known as two-in/two-out.

Rapid intervention group (RIG) - A formalized designated group of individuals or companies whose sole function is to prepare, monitor and provide for effective emergency rescue of responders in IDLH atmospheres.

303.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to ensure that adequate personnel are on scene before interior operations begin in any IDLH environment. However, nothing in this policy is meant to preclude firefighters from performing emergency rescue activities before an entire team has assembled.

303.3 PRE-DEPLOYMENT

Prior to initiating any fire attack in any IDLH environment with no confirmed rescue in progress, members should ensure that there are sufficient resources on-scene to establish two-in/two-out procedures (29 CFR 1910.134(g)(4)).

- (a) Members should ensure that at least two firefighters using self-contained breathing apparatus (SCBA) enter the IDLH environment and remain in voice or visual contact with one another at all times.

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- (b) At least two additional firefighters should be located outside the IDLH environment.
 - 1. One of the two outside firefighters may be assigned to an additional role so long as the individual is able to perform assistance or rescue activities without jeopardizing the safety or health of any firefighter working at the incident.

303.4 INITIAL DEPLOYMENT

A written personnel accountability system will be maintained whenever companies are operating at IDLH incidents. Individual crew names will be posted in a conspicuous location in the cab of department vehicles.

During the initial phase of an incident, confirmed rescues should take priority. When a confirmed rescue is in progress during the initial phase of an incident, emergency rescue activities may be performed before a designated IRIG has assembled.

All members operating in IDLH environments should be tracked and accounted for at all times, except when it would preclude firefighters from performing emergency rescue activities during the initial phase of the incident.

303.5 RIG DUTIES

The RIG should be assembled from resources at the scene, whose sole function is to prepare for, monitor and provide effective emergency rescue for responders.

- (a) To the extent possible, visual, voice and signal line communication should be maintained between those working in the IDLH environment and the RIG outside the IDLH environment.
- (b) RIG members should not be involved in any other duties that divert attention or resources away from their primary mission of responder rescue.
 - 1. Acceptable duties may include identifying and preparing access and emergency rescue egress points from affected areas, the pre-positioning of exterior ladders, forcible entry and other rescue equipment as needed at strategic locations.
- (c) Additional companies may be assigned to the RIG as conditions warrant. For large incidents with multiple points of entry, multiple RIGs should be considered.

303.6 EMERGENCY DEPLOYMENT OF A RIG

When a firefighter-down or firefighter-missing broadcast is transmitted, all non-emergency radio traffic should be cleared from the radio channels that the missing or trapped firefighter is using. Non-affected personnel should switch to other tactical frequencies. At least two individuals should be dedicated solely to monitoring the tactical channel. One person should be responsible for gathering information on the identity, location and condition of trapped or missing firefighter, while the second person should communicate and offer support on the tactical channel.

For an emergency deployment of a RIG, a Rescue Branch Director position should be activated to coordinate the rescue as well as any fire activities in support of the rescue effort. Other divisions

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and groups may support the Rescue Branch Director's efforts by diverting fire spread through horizontal or vertical ventilation to draw fire away from the affected rescue areas and by placing hose streams to check fire spread and protect rescue efforts.

The RIG supervisor should notify the Rescue Branch Director before making entry for emergency rescue. The Rescue Branch Director should provide any assistance that is appropriate to the situation. Additional resources should be ordered as needed, including additional RIGs, medical treatment and transportation groups or other organizational elements.

Urban Search and Rescue (USAR)

304.1 PURPOSE AND SCOPE

The purpose of this policy is to describe the Federal Emergency Management Administration (FEMA) Urban Search and Rescue (USAR) Response System as a resource for disaster response.

304.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to utilize the FEMA USAR resources in the event of an urban disaster, as appropriate.

304.3 RESOURCES

USAR is a multi-hazard discipline and may be used for a variety of disasters, including hurricanes, earthquakes, typhoons, storms, tornadoes, floods, dam failures, technological accidents, terrorist activities and hazardous material releases.

USAR task forces have four areas of specialization: searches, to find victims who are trapped after a disaster; rescues, which include safely digging victims out of collapsed concrete or metal; technical: structural specialists who help make rescues safe for the rescuers; medical: caring for victims before and after a rescue.

If a disaster warrants national USAR support, FEMA may deploy task forces within six hours of notification and can provide additional teams as necessary to support the Bear Valley - Indian Valley Fire Protection District's efforts to locate victims and manage recovery operations.

The following resources are generally available from the FEMA USAR Response System:

- Air Search Team (fixed-wing)
- Airborne Reconnaissance (fixed-wing)
- Canine - Avalanche/Snow
- Canine - Disaster Response
- Canine - Land/Cadaver
- Canine - Water
- Canine - Wilderness
- Canine - Wilderness Tracking and Trailing
- Cave Search and Rescue Team
- Collapse Search and Rescue Team
- Mine and Tunnel Search and Rescue Team
- Mountain Search and Rescue Team

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Urban Search and Rescue (USAR)

- Radio Direction Finding Team
- Swift Water and Flood Search, and Dive Rescue Team
- USAR Incident Support Team
- USAR Task Force
- Wilderness Search and Rescue Team

More information about the specific capabilities and sustainability of USAR resources may be obtained on the FEMA website.

Tactical Withdrawal

305.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for tactical withdrawals from any scene or location when confronted by violent individuals or threatening situations, circumstances or events. The violence or threat need not be specifically directed at department members to justify the application of this policy.

305.2 POLICY

The Bear Valley - Indian Valley Fire Protection District is committed to the safety of its members. It is the policy of the Bear Valley - Indian Valley Fire Protection District to allow members to withdraw from the scene or general location of an emergency call for service when they are confronted by violent individuals, violent or potentially violent situations or any other circumstance presenting a real or perceived imminent threat to member safety.

305.3 THREAT ASSESSMENT

All members of the Department are expected to continually evaluate their surroundings while responding to incidents or participating in the mitigation of emergency or non-emergency events. The actions and conduct of persons at an event should be a primary element of the ongoing scene-safety evaluation. Certain types of events, certain actions taken by individuals involved in events and a variety of other circumstances should trigger a heightened awareness and consideration of personnel safety. Situations or circumstances that should initiate such consideration include:

- (a) Gang-related activity, particularly any event involving violent encounters, confrontations or conflicts between members of rival gangs.
- (b) Any situation involving shots fired, or on any scene where shooting occurs or is heard in the immediate vicinity.
- (c) Any time a subject challenges or threatens members of the Department with violence or harm.
- (d) Any scene where members of the Department are attacked in any way. Examples include rocks, bottles or other projectiles thrown or launched at members or department vehicles or apparatus; individuals attempting to gain access to department vehicles or apparatus; or any direct act of violence committed against members of this department.
- (e) Any event involving civil disturbance, large-scale demonstrations or protests. This includes any event involving a large gathering of people where the nature of the activity appears to include violent confrontation or the perceived threat of violent confrontation between opposing groups, or between the protesters and law enforcement personnel or other government representatives.

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Tactical Withdrawal

Any member who believes that there is a threat of violence to personnel at any incident should promptly relay that information to the appropriate supervisor as quickly as possible.

The Incident Commander (IC), scene supervisor or senior ranking member has the authority to initiate a tactical withdrawal and the responsibility for ensuring that all members on-scene or at risk due to the threat are notified of the action. Authority for the decision resides primarily with on-scene personnel and should not be delayed while seeking approval or confirmation from a higher authority, who may not be at the incident scene.

In the event that a credible threat to personnel is discovered at a level of the incident command structure above an on-scene supervisor, a tactical withdrawal may be ordered and initiated down the chain of command to the on-scene supervisor. In that event, the supervisor has the responsibility for ensuring that all members on-scene or at risk due to the threat are notified of the initiation of a tactical withdrawal.

305.4 CONDUCTING TACTICAL WITHDRAWALS

305.4.1 WITHDRAWAL OPTIONS

The following guidelines should be applied when the decision has been made to initiate a tactical withdrawal:

- (a) During the response to an incident:
 - 1. If a tactical withdrawal occurs during the response phase of an incident the department member responsible for initiating the withdrawal is responsible for notifying all responding units and Colusa County of the withdrawal action. The relay of the withdrawal decision to individual units may be conducted by the member, or he/she may choose to have Colusa County notify all responding units to cancel their response or to respond to a defined staging area.
- (b) After arrival at an incident:
 - 1. When units are on-scene at an incident and a decision is made to initiate a tactical withdrawal, the IC or ranking supervisor is responsible for notifying all involved units (including those assigned to the incident but that have not yet arrived) of the withdrawal action. The IC should also notify Colusa County of the tactical withdrawal, and if time and circumstances allow, the situation and reason for the withdrawal. Individual unit supervisors are responsible for notifying all of their assigned personnel of the withdrawal.

305.4.2 WITHDRAWAL GUIDELINES

The following guidelines should be applied when the decision has been made to initiate a tactical withdrawal:

- (a) Whenever a tactical withdrawal is initiated, a defined staging area will be established at a safe location away from the incident scene and all involved units and personnel should withdraw to that staging area. Whenever practicable, all involved units should

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withdraw from the incident scene as a single group. If that is not practicable, individual units should attempt to congregate together, forming the fewest and largest groups practicable, and withdraw in those groups.

- (b) After all units have been initially notified of a tactical withdrawal, individual unit supervisors are responsible for personnel accountability ensuring all members of their crew are accounted for and withdrawing as directed. The on-scene supervisor is responsible for accounting for all units assigned to the call and ensuring that all units are withdrawing as directed.
- (c) Whenever a tactical withdrawal is initiated, Colusa County should immediately notify and request an immediate response by the appropriate law enforcement agency to provide security for the withdrawing units.
- (d) Once the IC or scene supervisor believes that all units and personnel have withdrawn from an incident, he/she should conduct a Personnel Accountability Report (PAR) of all units assigned to the incident to confirm they have safely withdrawn. Individual unit supervisors shall confirm that all members of their crew are accounted for and safe.
- (e) Once all involved units have gathered at the staging area, the IC or scene supervisor should again conduct a PAR to confirm that all personnel are safe. If any person involved in the operation is unaccounted for, emergency procedures should be initiated.

305.5 PATIENT CARE CONSIDERATIONS

Special consideration should be taken when a tactical withdrawal is initiated after members have begun providing medical assessment or medical care at an incident scene. If a tactical withdrawal is initiated at a time that members are providing medical services to sick or injured patients, those members should, whenever practicable, attempt to maintain their care of medical patients and evacuate those patients as part of the withdrawal process.

In the event that violence or the threat of violence forces members to abandon any patient under their care, the involved member should immediately notify the appropriate law enforcement agency of the location of the patient and request immediate assistance in securing the scene to allow for safe and timely medical treatment and evacuation of the patient. The members should remain on the call and wait for law enforcement clearance or other information indicating that it is safe to enter the incident scene. Once it is safe to do so, the members should attempt to locate the patient and resume medical evaluation, treatment and transport per protocol. In the event that law enforcement personnel and department members are unable to relocate the patient, the patient may be deemed to have self-extracted and the appropriate documentation should be prepared.

305.6 NOTIFICATIONS

Whenever a tactical withdrawal is initiated, the circumstances of the incident, including the incident location, will be relayed up the chain of command to the Fire Chief or IC. The Fire Chief or IC should

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ensure that all on scene personnel are immediately notified of the location and circumstances of the incident.

The Fire Chief or IC should coordinate with Colusa County and law enforcement to ensure additional calls for service to the affected area are screened and determined safe for entry.

Response Time Standards

306.1 PURPOSE AND SCOPE

The purpose of this policy is to establish turnout, travel and response time goals and objectives for emergency incidents.

306.1.1 DEFINITIONS

Definitions related to this policy include:

Dispatch processing time - The time elapsed between receipt of the alarm or telephone call and the dispatch of emergency response units.

Response time - The time elapsed between the dispatch center receiving the first notification of the emergency and the arrival of the first emergency response unit. Response time combines dispatch, processing, turnout and travel times.

Travel time - The time elapsed between the emergency response unit beginning travel to the emergency and when the emergency response unit arrives.

Turnout time - The time elapsed between dispatch notifying firefighters of the emergency and when the emergency response unit begins travel.

306.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to document all department response times to emergency incidents and establish response time baselines and performance objectives.

306.3 PERFORMANCE OBJECTIVES

Response times should be measured at 90 percent of fractile time and reported against an established department Standards of Cover document, if available.

Performance objectives may include:

- (a) One minute or less for dispatch processing time.
- (b) Five minutes or less for turnout time for Emergency Medical Services (EMS) incidents.
- (c) Five minutes or less for turnout time for non-EMS incidents.
- (d) Fifteen minutes or less for the arrival of the first unit at a fire suppression incident.
- (e) Five minutes or less for the arrival of a unit with first responder or higher level capability at an EMS incident.
- (f) Anticipate increased response times with an increase of distance or inclement weather.

306.4 EVALUATIONS

The Department shall annually evaluate its level of service, deployment delivery and response time objectives. The evaluation shall be based on data relating to level of service, deployment

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Response Time Standards

and the achievement of each response time performance objective in the geographic area of the jurisdiction.

Aircraft Operations

307.1 PURPOSE AND SCOPE

This policy describes standards for the safe operation of firefighting and medical evacuation aircraft that may be working with ground personnel at any incident involving the tactical use of aircraft.

307.2 POLICY

The Bear Valley - Indian Valley Fire Protection District will follow Incident Command System (ICS) standards when firefighting or medical evacuation aircraft are in tactical use at any emergency incident.

307.3 ICS STANDARDS

Members should follow the department's ICS standards for managing firefighting aircraft operations, including the identification, establishment and management of aircraft landing zones any time that firefighting or medical evacuation aircraft are in tactical use at any emergency incident.

307.4 MEDICAL EVACUATION LANDING ZONE CONSIDERATIONS

The Bear Valley - Indian Valley Fire Protection District should develop guidelines for its own medical evacuation (medivac) landings or enter into local operating agreements for the use of medivac aircraft as applicable. In creating those guidelines, the Department should identify:

- Responsibility and authority for selecting and designating a landing zone and determining the size of landing zone needed.
- Responsibility for securing the area and maintaining that security once the landing zone is identified.
- Consideration of the helicopter provider's minimum standards for proximity to vertical obstructions and surface composition (e.g., dirt, gravel, pavement, concrete, grass).
- Consideration of the helicopter provider's minimum standards for horizontal clearance from structures, fences, power poles, antennas or roadways.
- Responsibility for notifying the appropriate law enforcement or transportation agencies (e.g., California Highway Patrol (CHP), California Transportation Authority (CalTrans)) if a roadway is selected as a landing site.
- Procedures for ground personnel to communicate with flight personnel during the operation.
- Procedures for determining whether an engine or other specific apparatus should be on standby at the landing zone.

Atmospheric Monitoring for Carbon Monoxide

308.1 PURPOSE AND SCOPE

This policy establishes procedures for measuring atmospheric concentrations of carbon monoxide (CO) at an incident for the safety of members working in potentially hazardous conditions.

308.1.1 DEFINITIONS

Definitions related to this policy include:

Calibration - The process of resetting the values for each sensor in the instrument.

Spanning - The process of using the calibration gasses to check the calibration of the instrument, also known as bump testing.

308.2 POLICY

Exposure to CO can be hazardous to the health of those exposed. It is the policy of the Bear Valley - Indian Valley Fire Protection District to mitigate the health risks associated with exposure to CO by its members and the public.

308.3 RESPONSIBILITIES

Training/Safety Officer or designee should ensure that atmospheric monitoring instruments are spanned or calibrated to manufacturer's specifications on a quarterly basis, if they have not been used, and prior to use.

The instruments should be stored in operating condition.

The Incident Commander or the authorized designee is responsible for measuring atmospheric concentrations of CO at any location containing or suspected of containing elevated levels of CO.

308.4 PROCEDURES

Carbon monoxide may be present as a by-product of combustion, an emission from internal combustion engines, a chemical reaction or a leak from an industrial process. Carbon monoxide has approximately the same vapor density as air. When measuring for atmospheric concentrations of CO at an incident, instruments do not have to be placed near the floor or ceiling to obtain accurate readings.

Positive pressure ventilation may be used to reduce the CO concentration, as well as the presence of other toxic gases in the atmosphere. Gasoline-powered smoke ejectors should not be used to positive-pressure ventilate.

All members shall use self-contained breathing apparatus (SCBA) in any atmosphere containing 35 parts per million or greater of CO (National Institute for Occupational Safety and Health (NIOSH)). An atmospheric concentration of CO that is below the threshold limit value (TLV) does not necessarily indicate an adequate level of oxygen or eliminate the possibility of other toxic gases or products of combustion being present.

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Atmospheric Monitoring for Carbon Monoxide

Members shall also use a SCBA in any atmospheric concentration of CO that is below the TLV where there is also the presence of visible smoke and in any atmosphere containing less than 19.5 percent oxygen (8 CCR 5144; 29 CFR 1910.134).

308.5 EMERGENCY MEDICAL TREATMENT

A person with acute CO exposure may exhibit the signs and symptoms of headache, flushing, nausea, vertigo, weakness, irritability, unconsciousness, and in persons with pre-existing heart disease and atherosclerosis, chest pain and leg pain.

An affected or incapacitated person should be removed from further exposure and have appropriate emergency medical procedures implemented, including any listed on the Safety Data Sheet (SDS) for CO.

All personnel with the potential for becoming exposed to CO or being present during an exposure should be familiar with emergency procedures, the location and proper use of emergency equipment, and the methods of protecting themselves during rescue operations.

308.6 DOCUMENTATION

Each time an atmospheric monitoring instrument is spanned or calibrated, the testing will be entered on a log. The log should be submitted to The Fire Chief once a year and retained in accordance with established records retention schedules. The log documents will serve as a history of an instrument's performance.

Staging

309.1 PURPOSE AND SCOPE

An incident scene can quickly become congested with emergency equipment if the equipment is not managed effectively. The purpose of this policy is to provide guidelines for staging at emergency incidents.

309.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to safely stage resources at emergency incidents.

309.3 RESOURCE STAGING

Staging areas are locations designated within the incident area to temporarily position resources that are available for assignment. Resource staging at emergency incidents will be conducted using the procedures, guidelines and positions identified in the department's Incident Command System (ICS).

As incident resources grow, the Incident Commander (IC) should identify a staging area manager to maintain the staging area resources so they are ready for assignment. At the conclusion of the incident, the staging area manager should demobilize units with the approval of the IC.

309.3.1 REGULAR STAGING

When establishing a staging location and conducting staging activities Bear Valley - Indian Valley Fire Protection District personnel should consider the following:

- (a) During initial attack operations or on smaller, short-term incidents, identifying and selecting a primary staging location for incoming units should be based primarily on placing incoming resources in a safe location while providing for their rapid deployment when needed. Generally, resources will stage one block from the incident until assigned by the IC.
- (b) During extended attack or multiple-alarm incidents, the IC should establish a secondary staging location early and assign a staging area manager. A radio designation of "staging" should be utilized. Additional location factors should be considered when identifying and establishing staging areas:
 1. **Private property** - Whenever practicable, staging areas should be established using public property as opposed to private property. If it is necessary to utilize private property, the incident management team should attempt to contact the property owner and obtain permission to utilize the property.
 2. **School property** - Whenever practicable, the incident management team should contact the school administration or property manager for permission to use school property prior to establishing a staging area. If school property is utilized, the staging area should be configured to create the least possible

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Staging

disruption to scheduled school activities, including traffic flow in and around the school and the orderly movement of vehicles carrying students. When school property is used for staging purposes, the local media should be notified. The notification should emphasize that the school property is being used to support an incident occurring away from the school and that the school is not involved in the emergency.

3. **Church property** - Whenever practicable, the incident management team should contact the church administration or property manager for permission to use the property prior to establishing a staging area. If church property is utilized, the staging area should be configured to create the least possible disruption to scheduled church activities, including traffic flow in and around the property.
4. **Commercial property** - Whenever practicable, the incident management team should contact the owner or property manager for permission to use the property prior to establishing a staging area. If commercial property is utilized, the staging area should be configured to create the least possible disruption to normal business, including traffic flow in and around the property.
5. **Major transportation infrastructure** - Whenever practicable, consideration should be given to avoiding disruption of major transportation infrastructure, including freeways and main traffic arteries, airports, train facilities and transit centers.
6. **Election polling facility** - In the event that an incident requiring a staging area occurs on a scheduled public election day, the staging area should not directly impact any public polling facility or inhibit the normal flow of traffic in or around a public polling facility. If a negative impact to a public polling facility is unavoidable, the appropriate election official should be immediately notified of the circumstances of the disruption.

309.4 STAGE-AWAY OPTION

The stage-away option should be used in any incident where there may be a violent encounter. A violent encounter should be anticipated in, but not limited to, the following categories of calls for service:

- Shootings or shots-fired
- Stabbings
- Civil disturbances
- Criminal gang activity
- Attempted suicides
- Domestic disputes, including family fights

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- Unknown assaults
- Bomb incidents

It is the policy of the Bear Valley - Indian Valley Fire Protection District to use a nonstandard and defensive response profile when responding to calls for service involving known or suspected violent subjects. When responding to calls involving known or suspected violent subjects, department members should take the following actions:

- (a) Whenever possible, Colusa County should determine if violent subjects are involved in any call for service and, if so, include that information in the initial dispatch. The responding units should be advised to stage away from the scene. Any time Colusa County or any of the responding crews receive additional information indicating that violent subjects are at the scene of a call, the response should be upgraded to a stage-away incident.
- (b) The officer of the first-in responding unit will normally identify a staging point for all responding units. The staging point should be located two or more blocks away from the incident scene, out of direct line of sight of the incident, and should not require that the responding units drive by the incident to reach the staging point. The company officer should also confirm with Colusa County that law enforcement is responding to the incident.
- (c) All responding units should acknowledge the call to stage-away and confirm the staging location via radio while en route to the incident. All units should avoid driving by or through the line of sight of the incident until it is determined to be safe to enter the scene.
- (d) All units should report "on-scene staging" upon arrival at the staging point.
- (e) All units should remain staged away from the incident scene until notified that law enforcement has determined that the scene is safe to enter or until reliable information is received confirming that no violent subjects remain at the scene.

In the event that the first-in unit arrives at an incident scene and encounters unanticipated violence or violent subjects, the officer or senior member of that crew should immediately notify Colusa County of the circumstances and request law enforcement support. All other responding units should be directed to stage-away unless members of the first-in unit determine it is safe for additional personnel to respond directly to the scene.

Elevator Entrapments

310.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure the safe and effective rescue of people who may become trapped in an elevator.

310.2 POLICY

People trapped in an elevator are typically not in danger unless there is a medical emergency or fire. During any rescue effort, the priorities are the safe extrication of people in the elevator and the safety of firefighters during the operation.

310.3 RESPONSIBILITIES

The Board of Directors or the authorized designee shall establish guidelines for personnel entering elevator shafts and for the use of commercial elevator technicians for emergency and non-emergency extrications.

The Board of Directors or the authorized designee shall identify department-approved rescue procedures and appropriate applications. Procedures that have the potential to cause damage to private property should be avoided if reasonably practicable.

Fire prevention personnel are responsible for tracking elevator entrapment responses, identifying problematic installations and working with building owners and vendors to resolve further responses.

310.4 PROCEDURE

On-scene personnel should consider the following:

- Is the elevator inoperative?
- If so, are people inside?
- What is the condition of the people inside?
- Has an elevator repair person been notified and what is the estimated time of arrival?
- What is the location of the inoperative elevator? Is it between floors or at a landing?
- What is the type of elevator? Is it hydraulic or cable?
- Where is the elevator equipment room? (Generally, above for a cable elevator and below for a hydraulic elevator).

Various methods may be utilized to extricate people from an inoperative elevator. Use of a specific method should be based on the unique circumstances of each incident and the expertise of the fire personnel on scene. Elevator entrapment rescue procedures typically include, but are not limited to, the following:

- Moving the elevator car

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Elevator Entrapments

- Use of an adjacent elevator car
- Forcing the elevator doors open
- Breaching the elevator shafts
- Use of roof or side emergency exits

310.5 TRAINING

The Training Safety Officer should ensure that written procedures with diagrams are available for each elevator entrapment rescue procedure, including hydraulic or cable elevators and elevators with multiple-door configurations. The Training Safety Officer is responsible for ensuring that all personnel are properly trained in department-approved elevator entrapment rescue procedures.

Elevator Restrictions During Emergencies

311.1 PURPOSE AND SCOPE

This policy provides guidelines for elevator use during emergency incidents.

311.2 POLICY

Extreme caution shall be used when determining whether to use an elevator during a response to a fire emergency. Only elevators that have been determined to be uninvolved and equipped with fire service operation controls shall be used.

311.3 USE OF STAIRWELLS

The operation of elevators under fire conditions can be erratic and dangerous. Elevators are subject to serious malfunction from the effects of heat, smoke and water on drive machinery and/or control equipment.

At every emergency incident in a high-rise building, when there is a potential for elevators and/or firefighters to be exposed to the effects of heat, smoke, flame, chemicals, explosion or water (e.g., reported fires, fire alarms, smoke investigations), stairwells will be used to gain access to above-ground locations.

The initial fire attack/investigation teams shall use stairwells to reach the reported emergency location and make a visual assessment of actual conditions that might affect elevator use.

These teams shall advise the Incident Commander which stairwell is being used and shall describe the stairwell by identification number and the geographical location in the building. Information regarding the safety of elevators and the floor conditions of the reported fire floor and all preceding floors shall be relayed immediately to the Incident Commander, who shall make the final determination of whether the elevators are safe to use.

311.4 USE OF ELEVATORS

Most high-rise building incidents will only require an investigation. Elevators may be used by the initial investigation team only when building personnel, such as engineering or security employees, are on the reported fire floors and the following conditions are met:

- They have checked the floor where the report or alarm originated, as well as the floors immediately above and below that floor.
- They are in contact with lobby personnel via radio or phone.
- They are able to provide information that conditions are safe.

Swiftwater Rescue and Flood Search and Rescue Responses

312.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidance for operating at a swiftwater or flood search and rescue incident.

312.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to utilize the Incident Command System (ICS) for managing swiftwater or flood search and rescue incidents.

312.3 PROCEDURE

Upon notification of a potential water rescue incident, department members and Colusa County personnel are authorized to order and should dispatch or request the appropriate specialized water rescue resources immediately. Ordering of resources should not be delayed pending the verification of a water rescue situation or the confirmation that a victim has been seen or located.

Rescuers conducting search and rescue operations around flood waters, and particularly around swiftly moving water, are confronted with a unique set of challenges and face risks not encountered in other types of rescue operations. Operating in a swiftwater environment requires specialized knowledge, training and equipment to ensure the safety of both rescuers and victims. Tools, equipment and procedures routinely used in other types of rescue situations may not be appropriate when confronting a swiftwater rescue and may even exacerbate the situation and increase risks to the safety of rescue personnel.

Department members should apply the following guidelines when responding to swiftwater or flood search and rescue incidents:

- (a) Members should not wear structural firefighting personal protective equipment (PPE) (e.g., turnouts, bunker gear, bunker boots) or wildland fire PPE when responding to, or participating in, a swiftwater or flood search and rescue incident.
- (b) Only properly trained members currently certified for in-water rescues should approach or enter any body of water, whether still or moving, and only when sufficient equipment and trained personnel are available to safely conduct the operation.
- (c) Non-certified, not currently certified, non-equipped or under-equipped members may utilize ropes, throw-bag ropes, rescue rings, floatation devices or other appropriate equipment to attempt water rescues, as long as the attempt does not require the member to enter the water in any way.
- (d) Department members should use extreme caution when parking or positioning fire apparatus alongside swiftly moving water and should remain vigilant for any signs of erosion or changing conditions that could threaten apparatus or personnel at the incident.

Confined Space Rescue Response

313.1 PURPOSE AND SCOPE

This policy provides guidance on various confined space entries.

313.1.1 DEFINITIONS

Definitions related to this policy include:

Confined space - An area with limited access and egress, with the possible existence of hazards such as oxygen deficient, flammable or toxic atmosphere or physical hazards (e.g., tanks, pipes, culverts, sewers, vaults, manholes, voids in a structural collapse or any area not intended for continuous human occupancy).

Confined space entry - Entry occurs when any part of an entrant's body breaks the plane of an opening to a confined space.

Confined space entry permit - An Occupational Safety and Health Administration (OSHA) required list of all hazards inherent to a confined space and the protections necessary for an entrant.

313.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to provide training and equipment to members to reasonably ensure their safety while performing confined space rescues.

313.3 PROCEDURES

Department members should be trained to identify and measure atmospheric hazards within confined spaces. Reasonably practicable attempts at self-rescue or nonentry rescue should be made prior to any entry rescue operation.

Department members should adhere to National Institute for Occupational Safety and Health (NIOSH) safety standards when performing a confined space rescue.

Any time there is questionable action or lack of movement by the worker inside the confined space, a verbal check should be made. If there is no response, department rescue personnel should conduct a survivability profile and a risk analysis, based on the information documented on the entry permit.

313.3.1 PRECAUTIONS

No ignition sources should be introduced into the confined space when atmospheric hazards are attributable to flammable or explosive substances or lighting and electrical equipment.

Members should perform continuous atmospheric monitoring during all confined space rescue operations. If atmospheric conditions change adversely, members should exit the confined space until appropriate precautions for any new hazards are developed and implemented.

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Confined Space Rescue Response

Work-time should be closely monitored because heat stress emergencies may be caused by a warm atmosphere inside a confined space.

313.4 TACTICAL GUIDELINES

313.4.1 PRIMARY ASSESSMENT

- Upon arrival, the first-in company should establish command and provide a Report of Conditions.
- Assess immediate hazards to rescuers, contact witnesses or otherwise look for clues as to the cause of the confined space emergency.
- Conduct a survivability profile of the victims, including the number, location and condition of the victims and how long they have been trapped.
- Establish communication with the victims, if possible.
- If applicable, locate any confined space permit indicating information about the space.
- Make a determination whether the operation will be a rescue or a recovery.

313.4.2 SECONDARY ASSESSMENT

- Determine the type of confined space and what type of products are used or stored in the space.
- Identify any known hazards that are present (e.g., electrical, mechanical, stored energy).
- Determine the stability of the confined space and conduct a hazardous materials size-up.

313.4.3 INCIDENT COMMANDER RESPONSIBILITIES

- Determine if adequate technician-level trained personnel are on-scene to safely complete the rescue.
- Determine if the proper equipment is at the scene to safely complete the rescue (e.g., atmospheric monitoring equipment, explosion-proof lighting and communications, self-contained breathing apparatus (SCBA), ventilation equipment and victim removal equipment).
- Establish a perimeter and ventilation, if needed, and make assignments that include a hazards officer.
- Ensure all utilities are locked-out, including electrical, gas and water.
- Evaluate the structural stability of the confined space and surrounding area.
- Remove or restrict the flow of any product in or flowing into the confined space.

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Confined Space Rescue Response

- Ensure all entry and back-up personnel are wearing the proper level of personal protective equipment (e.g., helmet, gloves, proper footwear, eye protection, appropriate skin protection, a Class III harness and safety tag line, SCBA and any additional equipment deemed necessary for the safety of personnel, given the totality of the circumstances).
- Ensure the appropriate method of extrication is determined and constructed.
- Ensure department-approved procedures are followed to perform the rescue.

313.4.4 VICTIM ASSESSMENT

- If possible, the entry team should bring a supply of breathable air for the victims.
- Rescuers shall not remove their SCBA and give it to the victims.
- If indicated and practicable, complete C-spine precautions should be taken.
- After treatment for immediate life-threatening injuries, the victims should be packaged appropriately for extrication (e.g., backboard, rescue basket).

313.4.5 VICTIM TRANSFER

Immediately after reaching the point of egress, the victims should be transferred to awaiting medical personnel.

313.5 TERMINATION OF THE RESCUE

At the conclusion of the rescue, the Incident Commander should:

- Ensure all rescue personnel are accounted for.
- Ensure all tools and equipment used for the rescue/recovery are removed (unless there has been a fatality, then consideration may be given to leaving tools and equipment in place for investigative purposes).
- Ensure proper decontamination procedures are implemented if personnel or equipment have been contaminated during the operation.
- Determine if a formal critical incident stress debriefing or a routine debriefing and critique are warranted, and if so, implement as appropriate.

Wildland Firefighting

314.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidance for wildland firefighting incidents.

314.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to utilize the Incident Command System (ICS) methods and procedures for managing wildland firefighting operations.

314.3 INCIDENTS INVOLVING STATE OR FEDERAL RESPONSIBILITY AREA

Whenever a wildland fire event occurs in the jurisdiction of the Bear Valley - Indian Valley Fire Protection District it is the responsibility of the Incident Commander to assess the potential for the fire to involve either a State Responsibility Area (SRA) or Federal Responsibility Area (FRA). If the incident either involves or threatens to involve an SRA or FRA, the Incident Commander shall immediately notify the California Department of Forestry and Fire Protection (CalFire) or the U.S. Forest Service (USFS) Colusa County of the incident. The Incident Commander shall also send notification up the chain of command to the on-duty Captain, the Emergency Services Fire Chief and the Board of Directors.

Whenever a wildland fire event occurs in the jurisdiction of the Bear Valley - Indian Valley Fire Protection District it is also the responsibility of the Incident Commander to assess the potential for the fire to involve areas in bordering jurisdictions. If the Incident Commander determines there is any potential for the incident to involve bordering jurisdictions, he/she should immediately direct Colusa County to notify the appropriate jurisdiction.

Trench Rescues

315.1 PURPOSE AND SCOPE

Trench rescue operations involve a complex system of shoring, digging and special resources, and can be a critical danger to fire personnel. The purpose of this policy is to minimize member exposure to hazardous conditions during trench rescues through the safe and efficient management of operations (29 CFR 1926 Subpart P).

315.1.1 DEFINITIONS

Definitions related to this policy include:

Excavation - Any man-made cut, cavity, trench or depression in the ground.

Trench - A narrow (in relation to length) excavation made below the surface of the ground that is generally deeper than it is wide and is not wider than 15 feet (29 CFR 1926.650(b)).

315.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to use standardized procedures and relevant training to minimize the exposure to hazardous conditions to rescue personnel during trench or excavation rescues.

315.3 PROCEDURES

Secondary collapse must always be considered as a potential hazard during trench rescues. Suffocation, extreme pressure and trauma can all occur due to the weight of a cave-in. There may be times when it is necessary to place the safety of the firefighter above the rescue of a victim, who clearly has no chance of survival.

- (a) Using the Incident Command System (ICS), the first-in company shall attempt to determine the following:
 - 1. Who is in charge at the site and what happened?
 - 2. How many victims are trapped and where are they located?
 - 3. Is a rescue possible or is this a body recovery?
 - 4. What kind of material is covering the victims (e.g., dirt, sand, rock)?
- (b) An extrication and safety officer should be assigned to:
 - 1. Determine what kind of material is covering the victims (e.g., dirt, sand, rock).
 - 2. Monitor the status of all personnel involved in the rescue.
 - 3. Monitor the site for signs of potential secondary collapse (e.g., surface cracks, shoring with signs of bending, falling debris).

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Trench Rescues

- (c) A hazard zone should be established within a 50-foot perimeter around the incident site using ICS methods. Apparatus, equipment, traffic and staging distance should be set at a distance that will minimize vibrations at the site.
- (d) Minimally, the equipment required to be available for rescue personnel to enter a trench or excavation should include (29 CFR 1926.651(g)(2)(i)) the following:
 - 1. A self-contained breathing apparatus (SCBA)
 - 2. A safety harness or line, or a basket stretcher
 - 3. A helmet
- (e) When determining whether the trench or excavation is safe for emergency responders to enter, the following will be considered:
 - 1. Adequate ventilation has been established (29 CFR 1926.651(g)(1)(iii)).
 - 2. When ventilation is in place, the air quality is being periodically tested (29 CFR 1926.651(g)(1)(iv)).
 - 3. If water accumulation is a factor, protection from water hazards is in place (29 CFR 1926.651(h)).
 - 4. Adequate protection for people working in the trench or excavation, in the form of shields, supports or sloping, and benching systems have been established (29 CFR 1926.652(a); 29 CFR 1926.652(g)).
- (f) If the rescue effort is protracted, personnel may need to be rotated and/or additional alarms requested for appropriate relief.

Carbon Monoxide Detector Activations

316.1 PURPOSE AND SCOPE

This policy establishes guidelines for the safe and efficient handling of calls associated with carbon monoxide (CO) detector activations.

316.2 POLICY

Exposure to CO can be hazardous to health. It is the policy of the Bear Valley - Indian Valley Fire Protection District to respond to all reports and alarms indicating the presence of CO and mitigate the health risks associated with exposure to CO by its members and the public.

316.3 RESPONSIBILITIES

316.3.1 COLUSA COUNTY RESPONSIBILITIES

Any dispatcher who determines that a call for service involves a CO detector activation should inform responding personnel of this information via voice over the radio and by a notation in the electronic event (if the responding apparatus are equipped with Mobile Data Computers). The dispatcher should attempt to ascertain if people at the scene are displaying symptoms of CO poisoning and consider whether a medical aid response should also be dispatched. The responding medical aid personnel should also be advised of the CO detector activation.

316.3.2 ARRIVING UNITS

Arriving units should establish National Incident Management System/Incident Command System (NIMS/ICS) practices according to the Incident Management Policy. In addition, arriving units shall:

- (a) Assess for necessary rescue and safely move potential victims from the affected location. Activate a medical response if necessary.
- (b) Evaluate the situation through interviews prior to entering the building.
- (c) Assess airflow ventilation conditions and general building conditions.
- (d) Wear structural turnouts and self-contained breathing apparatus (SCBA) to investigate the building using a CO detector, if available.
 1. Atmospheric monitoring results require the use of SCBA pursuant to the Atmospheric Monitoring for Carbon Monoxide Policy.
- (e) Have face pieces on and air flowing:
 1. Whenever information is inadequate to rule out toxic levels of CO.
 2. If anyone has displayed symptoms of CO poisoning.

316.3.3 INVESTIGATING PERSONNEL

Personnel investigating a reported CO detector activation should take the following actions:

- (a) Remove occupants and unnecessary personnel from the affected area.

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Carbon Monoxide Detector Activations

- (b) Utilize a Handling Carbon Monoxide Calls information card, if available.
- (c) Examine the activated detector to ensure that it is a CO detector and is in good condition.
- (d) Determine if the activated detector is low-oxygen or CO-detecting, if possible.
- (e) Interview the occupant and/or reporting party to obtain background information on the activation, the past history of the activated detector and activities in the building at the time of the activation.
- (f) Check the premises and adjoining areas for CO sources, such as vehicles, open flame devices or closed fireplace dampers.
- (g) Check appliances for improper use, poor maintenance or obvious faulty installation or operation.
- (h) If responding personnel carry a CO detector, it may be used to assist in determining a source of CO.
- (i) If the source of CO is identified, personnel should take the following actions:
 - 1. If the source is a vehicle, open flame device or other source not intended for interior use, remove the source from the building or shut off the device and ventilate the building thoroughly.
 - 2. If the source is an improperly operating appliance, shut off the appliance and the appliance's main line valve and ventilate the building thoroughly.
 - (a) Encourage the occupant to have the appliance serviced by a reputable service technician or a plumbing and heating contractor.
 - (b) Do not attempt to repair or alter an appliance or heating unit.
 - 3. Do not ventilate the building with gasoline-powered smoke ejectors.
 - 4. Do not shut off the building's main gas valve unless necessary to control the problem.
- (j) If the source of CO is not identified, personnel should take the following actions:
 - 1. Consider requesting a response by the gas company. If it is necessary to leave the scene prior to arrival of the gas company, the occupants should be advised to remain out of the building until a gas company representative arrives.
 - 2. Complete any required property notification and provide a copy to the property owner or tenant.

Safely Surrendered Baby Law

317.1 PURPOSE AND SCOPE

This policy establishes the guidelines to comply with the Safely Surrendered Baby (SSB) Law (Health and Safety Code § 1255.7).

This policy addresses infants who are less than 72 hours old and are surrendered under the terms of the SSB Law pursuant to Penal Code § 271.5 and Health and Safety Code § 1255.7. This policy does not address illegal desertion or abandonment of an infant as defined in Penal Code § 271. For an abandoned infant, see the Abandoned Infants Policy.

317.1.1 DEFINITIONS

Definitions related to this policy include:

Coded identification bracelets - Two small coded bracelets to be placed on the ankles of the surrendered infant and one large coded bracelet provided to the person surrendering the infant.

Medical questionnaire - The SSB Law requires that a medical questionnaire be offered to the person surrendering the infant for the purpose of collecting medical information critical to the health and survival of the infant.

Safe-surrender site - Any department facility designated by the local governing body (Health and Safety Code § 1255.7).

317.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to provide an option to protect infants by allowing parents or persons with lawful custody to safely and confidentially surrender infants at any fire station that has been designated as a safe-surrender site (Health and Safety Code § 1255.7).

317.3 PROCEDURE

The Board of Directors shall identify personnel qualified to take custody of surrendered infants and ensure that such qualified personnel are available to receive any surrendered infants (Health and Safety Code § 1255.7).

The Fire Chief shall ensure that department facilities designated as safe-surrender sites display the California state-approved Infant Safe logo.

The following procedures will be used by personnel at all department facilities that have been designated as safe-surrender sites (Health and Safety Code § 1255.7).

(a) Site preparation:

1. All department facilities designated as safe-surrender sites will display the California state-approved Infant Safe logo near the front door, adjacent to a 9-1-1 call box if possible. In addition, fire station lobbies should display public outreach brochures obtained from the state or the local child welfare agency.

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Safely Surrendered Baby Law

2. Each safe-surrender site shall have a person designated as responsible to order, maintain and inventory, on a monthly basis, Safe Surrender Kits that contain coded identification bracelets, the medical information questionnaire and a fact sheet regarding the SSB Law.
 3. Each designated safe-surrender site shall have a person responsible for maintaining any donated blankets and maintaining current contact information for the local child welfare agency.
- (b) Accepting a surrendered infant:
1. Qualified personnel shall accept a surrendered infant, even if the infant appears older than 72 hours. If the infant appears to be older than 72 hours, the receiving personnel should immediately notify law enforcement and the appropriate child welfare agency, as provided in the Abandoned Infants Policy.
 2. The receiving personnel shall notify the Colusa County of a "medical aid" at the station and request an ambulance and a paramedic unit, if one is not available in quarters. Avoid radio traffic declaring an "infant safe surrender," to maintain confidentiality.
 3. If it appears that the infant has been the victim of child abuse or neglect, law enforcement personnel should be requested.
- (c) Following acceptance of an infant:
1. Receiving personnel shall open a Safe Surrender Kit and place the small coded bracelets on the infant's ankles and make a good faith effort to give the large coded bracelet to the person surrendering the infant to facilitate reclaiming the infant.
 2. Receiving personnel shall make a good faith effort to provide the fact sheet from the kit to the surrendering person. The law requires that the medical questionnaire also be offered to the surrendering person. This is a voluntary document, however, and can be declined by the surrendering person.
 3. The surrendering person should be encouraged to accompany the infant to the hospital to give the medical history directly to the hospital staff and should be reassured that the same protection from prosecution and the ability to surrender the child is available at the hospital.
 4. If the surrendering person does not wish to accompany the infant to the hospital, the surrendering person should be encouraged to complete the medical questionnaire and should be given assistance, if needed.
 5. If the surrendering person is unwilling to complete the questionnaire and unwilling to accompany the infant to the hospital, personnel should make a good faith effort to provide the surrendering person the following items from the kit:
 - (a) The business reply envelope containing the medical questionnaire, which can be filled out later and returned by mail.
 - (b) The fact sheet

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Safely Surrendered Baby Law

- (c) The surrendering person's copy of the coded bracelet
- (d) Medical assessment and documentation:
 - 1. A qualified health care professional shall assess the infant to identify any immediate treatment needs and complete a Pre-Hospital Care Report (PCR) for the infant. The bracelet code number shall be included on the infant's PCR in the patient name field.
 - 2. If the surrendering person is the birth mother, a qualified health care professional should attempt to assess and treat her as necessary and pursuant to established Emergency Medical Services (EMS) protocols. If treated, the mother should be listed as "Jane Doe" to protect her anonymity.
 - 3. **DO NOT** use the parent's name on the PCR (Health and Safety Code § 1255.7(d)(2)).
- (e) Transportation to the hospital:
 - 1. Paramedics shall accompany the infant and surrendering person (if the person is willing to accompany the infant) to the nearest emergency room with labor and delivery capabilities.
 - 2. The receiving hospital will take custody of the infant and make immediate notification to the local child welfare agency.
 - 3. Department personnel will coordinate with the hospital to confirm that the above required notification has been made as soon as possible but in no event later than 48 hours after the Department has taken custody of the infant.
- (f) Additional notifications and media concerns:
 - 1. The receiving personnel shall notify their appropriate supervisor as soon as practicable.
 - 2. The supervisor will notify the Captain, duty officer and the department Fire Chief.
 - 3. The Fire Chief may, as circumstances dictate, provide the following limited facts to the media:
 - (a) Date, time and fire station where the infant was surrendered
 - (b) Local child welfare agency representative's name and telephone number
 - (c) Under no circumstances shall the surrendering person's name be released to the public or media (Health and Safety Code § 1255.7(k))
- (g) Individuals who return to claim an infant:
 - 1. If a parent or individual who voluntarily surrendered an infant requests return of the infant while the Department still has physical custody, the infant shall either be returned to the parent or individual or the receiving personnel should contact the local child welfare agency if any personnel at the safe-surrender site know or reasonably suspect that the child has been the victim of child abuse or neglect. The voluntary surrender of an infant is not in and of itself a sufficient basis for reporting child abuse or neglect. Possession of the ankle bracelet identification,

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Safely Surrendered Baby Law

in and of itself, does not establish a right to custody of the child and members may seek assistance from the child welfare agency.

2. If a parent or individual who voluntarily surrendered an infant requests return of the infant after the Department has given up physical custody, the person should be directed to call the child welfare agency that has custody of the infant. Department personnel should assist the person with the telephone call, as needed.
3. Notify Colusa County that the company is engaged in a "public assist" at the fire station.
4. The identity of the surrendering individual must still be kept anonymous and confidential.
5. Do not make any judgments about time frames or the individual's ability to care for the infant. The local child welfare agency will determine whether the infant is released to the individual.

(h) Community donations:

1. Community groups, volunteers, foundations and individuals may express interest in helping with this program. Some may want to donate baby supplies, such as baby food, diapers or blankets, directly to the fire station. The following guidelines are established:
 - (a) The only item a fire station may accept is a small, new baby blanket in the original wrapper. Donated blankets may be stored with the Safe Surrender Kits.
 - (b) Donors who wish to donate any other baby-related items, such as clothes, baby food or diapers, should be directed to a local social service agency and/or reputable charities.

Abandoned Infants

318.1 PURPOSE AND SCOPE

This policy provides guidance to Bear Valley - Indian Valley Fire Protection District personnel who encounter abandoned infants or children. This policy does not apply to infants who are surrendered within 72 hours of birth under the Safely Surrendered Baby Law (Health and Safety Code § 1255.7), as provided in the Safely Surrendered Baby Policy.

318.1.1 DEFINITIONS

Definitions related to this policy include:

Abandoned child - Any child, who is not in the care of a parent or guardian, an adult family member, a responsible sibling, a responsible caregiver, a law enforcement officer, a social services representative or another person who is providing a safe environment for the child, except those surrendered within the guidelines of the Safely Surrendered Baby Policy (Health and Safety Code § 1255.7).

318.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to make the safety, health and well-being of an abandoned child a primary consideration. Notification to the appropriate law enforcement agency regarding the child should be the secondary consideration.

318.3 MEDICAL PROCEDURE

Abandoned children who have apparent medical needs or are unable to provide information regarding their health history or acute medical conditions, nutrition and allergy history or other significant health information should be treated as medical patients, receive the appropriate pre-hospital medical evaluation and be delivered to an appropriate medical facility for further evaluation.

318.4 MANDATED REPORTER REQUIREMENTS

Non-volunteer firefighters, paramedics, EMT 1 and II and other department members certified under Health and Safety Code Division 2.5 § 1797 et seq. are designated as mandated reporters (Penal Code § 11165.7). Mandated reporters shall notify a police or sheriff's department or a child welfare agency as soon as practicable and shall send a written report concerning the abandoned child to that same agency within 36 hours (Penal Code § 11166(a)).

If a mandated reporter of this department relinquishes control of an abandoned child to a law enforcement officer and, by mutual agreement, the officer assumes responsibility for complying with the mandated reporter requirements, the department mandated reporter may forego submitting a written report (Penal Code § 11166(h)).

318.5 RELINQUISHING CONTROL

Department members may relinquish control of an abandoned child at any time to a law enforcement officer or to a representative of a child welfare agency having jurisdiction over

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abandoned children. Members may also relinquish control of an abandoned child to a physician, nurse or social services representative at a receiving medical facility or to a representative from a licensed children's shelter or other facility approved by the child welfare agency having jurisdiction over abandoned children.

Members should not release an abandoned child to a parent, family member, guardian or other person without first notifying a law enforcement officer and a representative of a child welfare agency having jurisdiction over abandoned, abused or neglected children.

Hazardous Materials Response

319.1 PURPOSE AND SCOPE

Hazardous materials HAZMAT may include toxic, flammable, corrosive, explosive, radioactive, or reactive materials; materials that can cause health hazards; or a combination of these materials. The purpose of this policy is to provide a general framework for handling a HAZMAT incident.

Training related to HAZMAT response is addressed in the Hazardous Materials Training Policy.

319.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to protect the safety of the public and responders to HAZMAT incidents and to comply with all applicable state and federal laws during the management and mitigation of all HAZMAT incidents (29 CFR 1910.120).

319.3 RESPONSIBILITIES

All HAZMAT responses should be managed using the National Incident Management System (NIMS) and the Incident Command System (ICS) in accordance with California regulations for emergency response and applicable federal laws.

319.3.1 INITIAL ACTIONS

If available, information should be provided by Colusa County to the units responding to a HAZMAT incident including the name and type of the material involved (e.g., hydrochloric acid and corrosive), the size and quantity of the containers involved, the nature of the problem (e.g., spill, leak) and any known dangerous properties of the materials.

The first arriving unit approaching the incident should use caution, approach from upwind and upgrade of the incident, establish Incident Command (ICS), and begin a size-up of the situation. The purpose of the size-up by the first-in company is to determine the nature and severity of the HAZMAT incident and formulate an initial Incident Action Plan (IAP). While it may be necessary to take immediate action to make a rescue or evacuate an area, any action should be taken with an awareness of the risk to department personnel and making appropriate use of available protective equipment. It is important to avoid the premature commitment of personnel to potentially hazardous locations. In some cases, isolating the incident and denying entry until more resources arrive may be the safest approach.

In assessing the incident, all available references should be used to determine the hazards that are or potentially could be present. These references may include, but are not limited to, the U.S. Department of Transportation (DOT) Emergency Response Guidebook, the National Institute for Occupational Safety and Health (NIOSH) Pocket Guide to Chemical Hazards, Safety Data Sheets (SDS), HAZMAT business plans, shipping papers, National Fire Protection Association (NFPA) placards, U.S. DOT placards, and United Nations substance identification numbers. Other sources of information may be available, such as the Chemical Transportation Emergency Center (CHEMTREC®), facility personnel, department specialists, or manufacturers of the materials involved.

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Hazardous Materials Response

The hazards presented by a HAZMAT incident may change significantly as the materials interact with other materials, the surrounding environment, and the actions taken by responders. Responders should consider site topography, surroundings, other potential hazards, and prevailing weather conditions. The initial perimeter established for the incident may need to be expanded to establish the appropriate control zones for the response (e.g., exclusion zone, contamination reduction zone, support zone).

319.4 INCIDENT ACTION PLAN

The primary goal of the IAP will be to protect the safety of the public and responders. The initial IAP should focus on identifying a safe approach for other arriving units, determining the type of hazard and the scope of the incident, isolating the area and denying entry to the public, determining incident-specific personal protective equipment (PPE), and initiating notifications. The initial IAP may be a written document or may be notes kept and controlled by the Incident Commander (IC). The initial IAP should include the following minimum information:

- (a) Incident name, agency or unified command, and command post location.
- (b) Information for responding units on the best route of travel, staging locations, and minimum isolation distances to maintain the safety of responding members.
- (c) The information available on the products involved or an indication that the products are not yet known.
- (d) The incident control objectives and goals.
- (e) An incident site safety plan and designation of an Incident Safety Officer.
- (f) A communications plan including radio frequencies and contact telephone numbers.

When a HAZMAT incident response will be prolonged and will extend beyond an initial operational period, a written IAP should be developed. The written IAP should utilize standard NIMS/ICS forms that may include but are not limited to:

- ICS-201 Incident Briefing.
- ICS-202 Incident Objectives.
- ICS-203 Organization Assignment List.
- ICS-204 Assignment List.
- ICS-205 Incident Radio Communications Plan.
- ICS-206 Medical Plan.
- ICS-207 Incident Organization Chart.
- ICS-208 Safety Message/Plan.

319.5 RESOURCE CONSIDERATIONS

Most HAZMAT incidents will require the Incident Commander IC to request additional resources in order to implement the IAP and safely mitigate the hazard.

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Hazardous Materials Response

The response to a HAZMAT incident may require numerous specialized resources to achieve incident stabilization and return to normal operations. The IC should consider involving:

- (a) Specialized HAZMAT teams at the technician and/or specialist levels for assistance with mitigating the release of material. Teams may be operated by local or regional fire agencies, military, or private industry.
- (b) Specialized operators or contractors to address post-response mitigation, removal, cleanup, and required disposal of material.
- (c) Local law enforcement for assistance with scene security and evacuation, if necessary.
- (d) Activation of local or regional California HAZMAT emergency response teams for assistance.
- (e) United States Coast Guard assistance for spills affecting waterways.
- (f) Public works and road departments for diking, diversion, or other activities.

Resources shall be coordinated using NIMS/ICS as the response is reinforced. It is important that duties assigned to personnel are suitable for their level of training under federal regulations and California law (Government Code § 8607). It is also important to consider the limitations of available (PPE) and the limitations of chemical detection or monitoring equipment on hand when preparing to commit personnel to a potentially hazardous area.

319.6 NOTIFICATIONS

Managing the response to a HAZMAT incident may involve required notifications to various local, regional, state, or federal agencies. ICs should consider notifying the following agencies when applicable or required:

- (a) The public, media, and other affected entities, such as schools and businesses
- (b) Adjoining jurisdictions that may be impacted by incident activities
- (c) Local and regional elected officials and emergency management personnel
- (d) California Governor's Office of Emergency Services
- (e) California Office of the State Fire Marshal
- (f) California State Department of Public Health
- (g) California Environmental Protection Agency
- (h) California State Department of Transportation
- (i) California Highway Patrol
- (j) United States Coast Guard National Response Center

News Media Relations

320.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines for communicating with representatives of the media and to establish procedures for interacting with media representatives at emergency scenes. Additionally, this policy establishes an operating framework for integration of the Fire Chief into the incident management system.

320.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to establish and maintain a positive working relationship with the media in order to effectively communicate timely and accurate information.

320.3 FIRE CHIEF DESIGNATION

As soon as practicable after basic fire and rescue operations are completed on the fireground or at any significant fire incident, the Incident Commander will designate a Fire Chief if the Department does not have a full time Fire Chief. The Fire Chief shall interface with and provide timely and relevant information to representatives of the media during critical command stages. A single Fire Chief will be designated for each incident, including incidents operating under Unified Command and multijurisdictional incidents.

In multiagency or multijurisdictional incidents, it may be necessary to establish a joint information center with a Fire Chief and Assistant Fire Chief. In all cases, the Fire Chief shall be responsible for coordinating the dissemination of information to the media.

Upon arrival at the scene of the incident, the designated Fire Chief will report to the Incident Commander, obtain an incident briefing, and be assigned the Fire Chief radio designator for the incident.

320.4 DISSEMINATION OF INFORMATION

The Fire Chief should gather and disseminate the following information as deemed appropriate:

- (a) Incident response information, including the number of units and personnel on scene
- (b) Appropriate human interest or safety information
- (c) Nature of the incident and expertise of the fire personnel deployed (e.g., high rise, technical rescue)
- (d) A description of any particular hazards present at the incident
- (e) Identification of life-saving or heroic acts that may have occurred including any rescue scenarios
- (f) Projected duration of the incident

If appropriate, the Fire Chief may coordinate a brief interview with the company officer or a crew member.

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320.5 RESTRICTED INFORMATION

The Fire Chief shall ensure that legally protected information is not released to the media. The Fire Chief should consult with the Board of Directors or the authorized designee about any issues or concerns regarding legally protected information.

Refer to the Line-of-Duty Death and Injury Notification and Communication Policy for additional considerations regarding communication with the media concerning a line-of-duty death.

320.6 MEDIA INQUIRIES

All media inquiries received by incident personnel shall be forwarded to the Fire Chief for response. The Fire Chief will endeavor to provide accurate information that is available at the time while clearly communicating that any such information is preliminary. The following communication strategies may be employed:

- (a) Reporters should be directed to assemble in a designated staging area to wait until additional information can be obtained.
- (b) If necessary to remain with media representatives, the Fire Chief may request assistance from the Incident Commander in gathering information. Media representatives may be allowed to take photographs and video, provided they do not interfere with incident operations or create a safety hazard.
- (c) Prior to releasing the names or identifying information of persons seriously injured or deceased, the Fire Chief shall confirm that the next of kin has been notified. Next of kin notifications are generally handled by law enforcement and/or hospital personnel. The Fire Chief should contact the Colusa County supervisor to confirm that notification has been made.
- (d) The names of deceased or seriously injured persons shall not be transmitted over the radio.

The Fire Chief or the authorized designee should not speculate as to the cause of an incident. The Fire Chief may escort media representatives on a tour of a fire-damaged area following knockdown after receiving authorization from the Incident Commander and in coordination with operations personnel. The Fire Chief will be responsible for ensuring that all media personnel wear proper protective clothing as warranted.

320.7 MEDIA ACCESS

Authorized members of the media shall be provided access to scenes of floods, storms, fires, earthquakes, explosions, and other emergency scenes. Access by the media is subject to the following conditions (Penal Code § 409.5(d)):

- (a) The media representative shall produce valid press credentials that shall be prominently displayed at all times while in areas otherwise closed to the public. Media representatives may not bring or facilitate the transport of an unauthorized person into a closed area unless it is for the safety of the person.

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- (b) Media representatives may be prevented from interfering with emergency operations and criminal investigations.
 - 1. Reasonable effort should be made to provide a safe staging area for the media that is near the incident and that will not interfere with emergency or criminal investigation operations. All information released to the media should be coordinated through the Fire Chief or other designated spokesperson.

320.7.1 TEMPORARY FLIGHT RESTRICTIONS

If the presence of media or other aircraft pose a threat to public or personnel safety or significantly hamper incident operations, the Incident Commander should consider requesting a Temporary Flight Restriction (TFR). All requests for a TFR should be routed through a Captain. The TFR request, either for a pre-planned operation or an unplanned incident, should include specific information regarding the perimeter and altitude necessary for the incident. The TFR should be requested through the appropriate control tower. If the control tower is not known, the Federal Aviation Administration should be contacted (14 CFR 91.137).

320.8 NEWS RELEASES

News releases are documents specifically prepared for release to the media. News releases should generally be authored by the Fire Chief and approved by the Board of Directors or the authorized designee, prior to release. News releases should be structured to facilitate use by the print media, typically containing no more than two pages of concise information. News releases should be formatted in accordance with the approved department standard.

320.9 NEWS CONFERENCES

A news conference is a pre-scheduled event intended to highlight a newsworthy event such as a promotion, the opening of a new fire station, or if a public appearance by a representative of the Department is desired. The Board of Directors will determine the purpose and scope of the conference. Any accompanying news release will include details, such as the date, time, and location, and may reference other officials, dignitaries, or agencies that may be in attendance.

The Fire Chief should prepare the news release and/or a prepared statement for the department spokesperson. The Fire Chief shall make arrangements for the site, obtain required equipment, arrange for availability of the news release, identify photo locations, and provide escorts, as necessary. The conference may include a moderator or the Fire Chief, who should make introductory remarks and introductions, assist with any question-and-answer period that may follow, and conclude the conference.

Specific information should not be released prior to the conference. The Fire Chief should notify appropriate department personnel of the date, time, and location of all news conferences. Department members attending should wear their dress uniform as specified in the Uniform Regulations Policy. Attendance requirements will be determined by the Board of Directors.

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320.10 THIRD-PARTY REQUEST TO INTERVIEW PERSONNEL

Upon approval from a supervisor, department employees may be authorized to participate in official interviews regarding work-related activities when conducted by law enforcement or other regulatory agencies, such as the California Division of Occupational Safety and Health (Cal/ OSHA).

Scene Preservation

321.1 PURPOSE AND SCOPE

The purpose of this policy is to provide department members with guidance on performing emergency mitigation tasks when working in and around scenes where evidence may be present. Members of the Department are often confronted with opposing priorities when performing duties at scenes containing potential evidence. They must balance the need to provide timely and effective life-saving and property-preserving services while minimizing the disturbance of any items of evidentiary value. In some instances department members must evaluate whether to enter a scene or to initiate mitigation activities.

321.1.1 DEFINITIONS

Definitions related to this policy include:

Evidence - Any item or arrangement of items that may provide relevant information to an investigation.

Scene - Any location where items of evidentiary value may be found. A scene need not be the location where a criminal act occurred, it need only be a location where items of evidentiary value are available for collection or documentation.

321.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to minimize the disturbance of conditions and evidentiary items when providing emergency mitigation services in and around scenes.

321.3 SCENE IDENTIFICATION

Department members must be mindful of encountering potential evidence at a scene whenever they respond to calls for service. The potential for evidence at a scene may be identified in a number of ways, including but not limited to:

- (a) The location of any incident that involves a physical assault or results from an act of violence. Such a location should be assumed to be a crime scene. Examples include shooting incidents, stabbing incidents, any incident involving a medical patient injured by the act of another person, suicides, bomb incidents or any act of terrorism.
- (b) Any incident that law enforcement personnel have identified as a crime scene and have notified department members of that determination.
- (c) Any unattended death scene.
- (d) All fire incidents.
- (e) Any incident where department members believe or have a reasonable suspicion that a crime has taken place. The type of suspected criminal activity may be severe, as in the case of a robbery or burglary, or less severe, as in the case of vandalism.

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- (f) Transportation incidents, including traffic collisions and rail, aircraft, shipping and boating incidents.
- (g) Industrial accidents.

321.4 ENTERING SCENES

When department members determine that a scene containing potential evidence is involved, they should promptly evaluate the need to enter the scene prior to approval of investigators. For the purposes of department members, scenes may be categorized into two distinct types: stable or unstable.

321.4.1 STABLE SCENE

A stable scene exists when there is no apparent immediate or ongoing threat to the safety, health or well-being of department members, the public or property. Examples of stable scenes include incidents where the victim or victims are obviously deceased, incidents involving obviously failed incendiary devices and fire incidents where the fire is clearly extinguished prior to the arrival of department members.

When department members encounter a stable scene and it is apparent that no threat to safety or property exists, they should remain outside the scene until cleared to enter by the appropriate investigator or law enforcement personnel. If there is a confirmed or suspected threat to life or public safety, department members should take whatever actions reasonably appear necessary to stabilize the scene and then withdraw pending approval from investigators or law enforcement personnel to re-enter.

321.4.2 UNSTABLE SCENE

An unstable scene exists whenever there appears to be an ongoing or imminent threat to the health, safety or well-being of department members, the public or property that necessitates immediate mitigation. Examples of unstable scenes include incidents involving injured or entrapped persons, active fire or threat of imminent fire, imminent structural collapse endangering lives, the release or imminent threat of the release of hazardous materials or any incident where immediate mitigation is required to preserve life.

When department members encounter an unstable scene they are authorized to take appropriate corrective action to mitigate the threat.

321.5 PRESERVATION OF EVIDENCE AT CRIME SCENES

Whenever practicable, department members should avoid touching, moving, manipulating or otherwise altering anything located at a scene where the potential for evidence exists. In some circumstances, the need to move items may be unavoidable. In those instances, department members should note what items were moved, who moved them and the location from which they were moved. Members should not attempt to move displaced items back to their original location; rather the items should be left in the place to which they were moved. The appropriate investigator or law enforcement personnel should be informed of any items that were moved and the location where the items originally were found.

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In instances where an obvious item of evidence must be moved, an investigator or law enforcement representative should be consulted prior to moving the item, if practicable. For example, if a weapon is located beside or underneath a victim and an investigator is available, the investigator should be called to relocate the weapon. Life-preserving care should not be unreasonably delayed awaiting the arrival of an investigator or law enforcement personnel to move items of evidence.

321.6 MEDICAL SUPPLIES AND DEBRIS

When department members provide medical care in or around a scene where evidence may be located, any discarded medical material, wrapping material, used bandaging, containers or other debris should be left at the scene when the crews depart. Reusable tools, medical equipment and other durable supplies may be collected but care should be taken by department members to minimize any disturbance to other items or material at the scene. Hazardous items and other material, such as medical sharps, controlled substances or surplus medications, should be collected and handled appropriately. If investigators or law enforcement personnel direct that any hazardous materials be left in place, department members should clearly identify all such materials to the controlling authority at the scene.

Child Abuse Reporting

322.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines for the mandatory reporting of suspected child abuse or neglect (Penal Code § 11165.7).

322.1.1 DEFINITIONS

Definitions related to this policy include:

Child - Any person under the age of 18 years (Penal Code § 11165).

Child abuse or neglect - Includes the following:

- Physical injury or death inflicted by other than accidental means upon a child (Penal Code § 11165.6)
- Sexual abuse as defined in Penal Code § 11165.1
- Neglect as defined in Penal Code § 11165.2
- The willful harming or injuring of a child or endangering a child or the health of a child, as defined in Penal Code § 11165.3
- Unlawful corporal punishment or injury as defined in Penal Code § 11165.4

Child abuse or neglect does not include an altercation between minors (Penal Code § 11165.6).

322.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to report suspected child abuse to local law enforcement.

322.3 MANDATED REPORTER REQUIREMENTS

All members of this department are responsible for the timely and proper reporting of suspected child abuse or neglect. Non-volunteer firefighters, paramedics, EMT I and II and other department members certified under Health and Safety Code Division 2.5 § 1797 et seq. are designated as mandated reporters (Penal Code § 11165.7).

A mandated reporter of this department who, in his/her professional capacity or scope of employment, has knowledge of or observes a child known or reasonably suspected to have been the victim of child abuse or neglect, shall notify law enforcement personnel by telephone as soon as practicable. The member shall then send or transmit a written follow-up report on the form provided by the law enforcement agency (Penal Code § 11168) within 36 hours of receiving the information concerning the incident (Penal Code § 11166(a)). A record of the written follow-up report should be retained.

Reports of suspected child abuse or neglect shall include the following information if known (Penal Code § 11167(a)):

- The name, business address and telephone number of the mandated reporter

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- The capacity that makes the person a mandated reporter
- The information that gave rise to the reasonable suspicion of child abuse or neglect and the source of that information
- The names, addresses and telephone numbers of the child's parents or guardians
- The name, address, telephone number and other relevant personal information about the persons who might have abused or neglected the child

Department members with knowledge of, or who reasonably suspect that, a child is suffering serious emotional damage or is at a substantial risk of suffering serious emotional damage may make a report through a mandated reporter (Penal Code § 11166.05).

Failure to report an incident of known or reasonably suspected child abuse or neglect by a mandated reporter is a misdemeanor and may also result in discipline (Penal Code § 11166(c)).

322.4 MANDATED REPORTER STATEMENT

Each mandated reporter of this department shall be provided with a copy of Penal Code § 11165.7, Penal Code § 11166 and Penal Code § 11167, and shall sign a statement acknowledging that he/she received the copies, is a mandated reporter and will comply with the mandatory reporting provisions (Penal Code § 11166.5). The Department will retain the original signed statement consistent with the department's established records retention schedules.

322.5 CONFIDENTIALITY

Reports of child abuse or neglect are to be confidential and may be disclosed only as provided in Penal Code § 11167.5.

Disposition of Valuables

323.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process by which all valuables found at emergency incidents are inventoried and held securely by the Department until the items can be returned to the owner or otherwise legally released for disposition.

323.2 POLICY

The Bear Valley - Indian Valley Fire Protection District will take reasonable measures to safeguard valuables found at incident scenes. The Department does not have appropriate facilities for storing valuables for safekeeping. Therefore, alternatives to removing valuables from the scene of emergencies will be taken whenever practicable.

323.3 PROCEDURE

Any member encountering unsecured valuables, such as cash or jewelry, should immediately report it to the incident commander, or the member's commanding officer.

If the property or valuables cannot be secured at the location or with a responsible person at the scene, the member should request any on-site law enforcement officer to take the valuables for safekeeping. The member should document the disposition of such valuables, including the identity of any receiving individual, and obtain a receipt from the officer and include it in the report of the call.

Performance of Duties

324.1 PURPOSE AND SCOPE

This policy establishes performance expectations.

324.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to provide safe and appropriate responses to emergency calls and for its members to provide professional and competent services.

324.3 RESPONSIBILITIES

All members should be familiar with and obedient to the policies, standard operating procedures, classification specifications, duties as assigned and any other lawful instruction or order from a superior officer.

324.4 EMERGENCY RESPONSE

All members, upon receipt of any emergency alarm, shall immediately, if available to do so, safely cease all activities and without delay report to their appropriate apparatus, respond immediately to the fire or other emergency dispatched, and exert reasonable effort to perform to the best of their ability, given the totality of circumstances.

324.5 COMPETENT PERFORMANCE

Members should perform their duties in a manner which will maintain the highest standards of efficiency in carrying out the functions and objectives of the Department.

Unsatisfactory performance may include, but not be limited to, the following:

- Excessive absenteeism and failure to respond.
- Tardiness
- Demonstration of a lack of knowledge
- Failure to conform to the work standards established for the member's classification, grade or position
- Any other failure to demonstrate good conduct

324.6 SAFETY

All members will exercise reasonable precautionary measures and good judgment to avoid injury to themselves or others while on-duty. Members who witness or are made aware of unsafe behavior should take appropriate steps to report or prevent such actions.

324.7 DRIVER LICENSE

All members shall possess a valid state-issued driver license for the vehicle they are operating. (Vehicle Code § 12500(d)).

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Performance of Duties

All members should be familiar with the state vehicle code, the Fire Apparatus Driver-Operator manual and all other applicable department policies and procedures.

All members shall report to their supervisor any change in their driver license status. Failure to maintain a valid driver license in accordance with an employee's current classification specification may result in disciplinary action (e.g., being placed on unpaid leave status until license reinstatement, or termination if reinstatement is not possible).

324.8 PROPER COMPLETION OF WRITTEN COMMUNICATION

All members shall complete and submit all necessary reports, forms and memos on time and in accordance with any other applicable department policy or procedure.

Reports, forms and memos submitted by members shall be truthful and complete. No member shall knowingly enter or cause to be entered any inaccurate, incomplete, false or improper information.

324.9 FIRE DEPARTMENT IDENTIFICATION

Members shall carry their badges and identification cards on their persons while on-duty and in accordance with the Badges Policy, except when impractical or dangerous to their safety or a risk to an investigation.

Members shall furnish their name and department identification number to any person requesting that information, other than in situations in which the member's personal safety is at risk.

324.10 LOSS OF EQUIPMENT

Members shall report to their supervisor the loss or recovery of any department badge, identification card, manual, key or equipment. In the case of an equipment loss, a police report should be filed in the jurisdiction where the loss occurred.

Adult Abuse

325.1 PURPOSE AND SCOPE

This policy provides members of the Bear Valley - Indian Valley Fire Protection District with guidance regarding when notification is to be made to law enforcement and/or the local ombudsman and licensing agencies of suspected abuse of certain adults.

325.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to assist victims of adult abuse by making the proper notifications to those responsible for investigating these matters.

325.3 MANDATORY NOTIFICATION

Firefighters, paramedics, Emergency Medical Technicians, and other department members certified under Division 2.5 of the Health and Safety Code are designated as mandated reporters (Welfare and Institutions Code § 15630(a)).

Members of the Bear Valley - Indian Valley Fire Protection District shall notify law enforcement or Adult Protective Services (APS) of known, suspected, or alleged instances of abuse when the member (Welfare and Institutions Code § 15630):

- (a) Has observed or has knowledge of an incident that reasonably appears to be adult abuse.
- (b) Is told by an elder or dependent adult of abuse.
- (c) Reasonably suspects abuse.

For purposes of defining adult abuse, a dependent adult is an individual, regardless of whether the individual lives independently, between 18 and 64 years of age who has physical or mental limitations that restrict their ability to carry out normal activities or to protect his/her rights, including but not limited to persons who have physical or developmental disabilities or whose physical or mental abilities have diminished because of age. This also includes those admitted as inpatients to a 24-hour health facility, as defined in state law (Welfare and Institutions Code § 15610.07; Welfare and Institutions Code § 15610.23).

For purposes of notification, abuse is physical abuse, abandonment, abduction, isolation, financial abuse, or neglect. Physical abuse includes any assault or sex crime (Welfare and Institutions Code § 15610.63). Financial abuse includes taking personal or real property by undue influence or intent to defraud (Welfare and Institutions Code § 15610.30).

325.3.1 NOTIFICATION PROCEDURE

Notification should occur by telephone or through a confidential internet reporting tool as soon as practicable. If notification is by telephone, a written report or internet report shall be sent within two working days as provided in Welfare and Institutions Code § 15630(b).

Notification should include (Welfare and Institutions Code § 15630(e)):

- Name of the person making the report.

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- Victim's name and age.
- Current location of the victim.
- Names and addresses of family members or any other adult responsible for the elder's or vulnerable adult's care.
- Nature and extent of the condition of the elder or dependent adult.
- Date of the incident.
- Any other information requested, including information that led to the suspicion of elder or dependent adult abuse.

Failure to report an incident of known or reasonably suspected adult abuse by a mandated reporter is a misdemeanor and may also result in discipline (Welfare and Institutions Code § 15630(h)).

325.3.2 LONG-TERM CARE FACILITY NOTIFICATION

If the abuse occurred in a long-term care facility (not a state mental health hospital or a state developmental center), notification shall be made to law enforcement immediately and written reports shall be made to the local ombudsman, the corresponding licensing agency, and law enforcement as required (Welfare and Institutions Code § 15630(b)(1)).

325.3.3 STATE MENTAL HOSPITAL OR DEVELOPMENTAL CENTER NOTIFICATION

If the abuse occurred in a state mental hospital or a state developmental center, notification shall be made immediately to law enforcement.

If the abuse occurred in a state mental hospital or a state developmental center and resulted in any of the following incidents, notification shall also be made to the designated investigators of the Department of State Hospitals or the Department of Developmental Services (Welfare and Institutions Code § 15630(b)(1)(E)):

- (a) Death
- (b) Sexual assault as defined by Welfare and Institutions Code § 15610.63
- (c) An assault with a deadly weapon by a nonresident
- (d) An assault with force likely to produce great bodily injury (as described by Penal Code § 245)
- (e) An injury to the genitals when the cause of the injury is undetermined
- (f) A broken bone when the cause of the break is undetermined

325.4 RELEASE OF REPORTS

Information related to incidents of adult abuse or suspected abuse shall be confidential and may only be disclosed pursuant to state law and the Release of Records Policy (Welfare and Institutions Code § 15633).

Requests for information about an incident referred to law enforcement should be referred to the law enforcement agency.

Traffic Collisions

326.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines for the reporting and investigation of traffic collisions involving department vehicles and department personnel on official business. This policy applies to collisions involving any department-owned vehicle and to collisions any time department business is being conducted, regardless of who owns the vehicle involved.

326.2 POLICY

It is the policy of this department to investigate all department traffic collisions, with the intent of learning the cause of the collision, identifying contributing factors and implementing corrective measures when appropriate.

326.3 REPORTING RESPONSIBILITIES

All department members involved in a traffic collision in a vehicle owned by the Department or while conducting department business, regardless of who owns the vehicle, shall immediately report the collision to the appropriate local law enforcement agency and notify an on-duty supervisor.

All department members involved in a traffic collision shall also complete and submit to the supervisor a report of the collision, in addition to any report taken by law enforcement. If the member is incapable, the immediate supervisor shall complete the form. Members are responsible for notifying the Fire Chief of traffic collisions.

Once notified of a traffic collision, the Fire Chief is responsible for ensuring that the department investigation and review occurs in a timely manner.

326.4 TYPES OF REVIEWS

Traffic collisions subject to this policy will be classified, investigated and reviewed as follows.

326.4.1 COLLISION LEVELS

Traffic collisions subject to this policy will be classified, investigated and reviewed as follows.

- (a) A Level I collision is any traffic collision involving:
 - 1. Minor injury to any department member, a contract employee or an employee of another public agency when the injury does not result in treatment at an emergency treatment facility or in subsequent hospitalization.
 - 2. Minor damage to department property or vehicles.
 - 3. Minor damage to non-department property or vehicles while conducting department business.
- (b) A Level II collision is any traffic collision involving:
 - 1. Any injury to persons other than department members, except contract and other public agency employees noted in Level I.

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2. Any injury requiring immediate transport and treatment of any department member, contract employee or an employee of another public agency at an emergency treatment facility.
 3. Major damage to a vehicle owned or operated by the Department or major damage to department property.
- (c) A Level III collision is any traffic collision involving:
1. The death or anticipated disabling injury of a member of this department.
 2. The death or anticipated disabling injury of other than a member of this department, a contract employee or other public agency employee when the traffic collision involves any department member, vehicle or property.

326.4.2 REVIEW TEAMS

Reviews shall be conducted by the on-duty Captain or respective manager for Level I collisions.

Level II and Level III collisions will be reviewed by a Captain or respective manager and a Fire Chief selected by the Board of Directors, a designated safety officer or risk manager and a labor representative of the involved member. The Captain or manager is the team leader.

326.5 COLLISION REPORTS

The investigation team leader is responsible for the preparation and completion of a written report that describes the traffic collision, any contributing factors, all persons and equipment involved and recommendations for preventing a recurrence.

Reports involving Level I collisions will be submitted through the chain of command to the Fire Chief in charge of the involved member. Reports involving Level II and Level III collisions will be submitted through the chain of command to the Board of Directors.

Following review by the Board of Directors or Fire Chief, the completed report and all related documentation from the investigation will be forwarded to the department's custodian of records for filing.

A completed report should include the following:

- (a) Investigation methods: Identify the members of the investigation team and the agencies involved in the investigation and describe the process of the investigation, including the names of any persons interviewed.
- (b) People, vehicles and equipment: List and identify all people, vehicles and equipment involved in the traffic collision.
- (c) Collision scene and environmental conditions: Describe the location, roadways, vehicle positioning, weather conditions, road/ground surface condition and/or visibility. Include diagrams, drawings, photographs and reports from any investigating law enforcement agencies.

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- (d) Collision description: Describe the collision based on the facts gathered. Provide time frame sequence, movements, relative positioning, performance of vehicles and equipment and the actions of persons involved.
- (e) Policies and procedures assessments and recommendations: Identify any department policies and procedures that are relevant to the collision. Assess the effectiveness of such policies and procedures as applied to the collision and, with the intent of preventing future injury, property loss or liability, make recommendations regarding changes.
- (f) If it is determined that an employee may have violated any department policies or procedures, the Captain should recommend that the matter be submitted for the initiation of possible administrative action.

326.6 CONFIDENTIALITY OF DEPARTMENT COLLISION INVESTIGATION

All internally generated reports, statements, photographs, diagrams and other materials shall be considered confidential and may not be released except as required by law. Copies of any collision reports obtained from involved law enforcement agencies shall also be considered confidential and subject to release only as authorized by law (Vehicle Code § 20012).

Line-of-Duty Death Investigations

327.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines for the investigation of a line-of-duty death, the documentation of the events leading to the death and to make recommendations directed toward preventing similar occurrences in the future.

327.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to identify the causal factors pertaining to any event involving a line-of-duty death, and to document and secure evidence which may be a factor in any regulatory actions or litigation resulting from the event. An investigation into the circumstances of the line-of-duty death is separate and distinct from any investigation being conducted regarding the cause of a fire.

327.3 PROCEDURE

As soon as practicable after a line-of-duty death has occurred, the Fire Chief or the authorized designee, shall assign an investigation team to conduct an investigation into the circumstances of the event.

- (a) The Fire Chief or designee should function as the team leader and direct the investigation of the incidents involved in the line-of-duty death. The investigation team should report to the team leader, who is responsible for the management of the investigative process.
- (b) All members of the Bear Valley - Indian Valley Fire Protection District shall give their full and complete cooperation to the investigation team.
- (c) The California Division of Occupational Safety and Health (Cal/OSHA) will conduct an investigation of the incidents involving the death of an employee. The investigation team shall provide a liaison to the Cal/OSHA investigators.
- (d) The Bear Valley - Indian Valley Fire Protection District should cooperate with all other government agencies that have a legal cause to be involved in the investigation of a line-of-duty death and should voluntarily share relevant information with other organizations working in areas of fire service occupational safety and health education and training. Participation by these agencies shall be at their own discretion, depending on the circumstances of the incident. These agencies may or may not produce their own reports of the incident with recommendations for corrective actions. These reports do not supersede the investigation team report.
- (e) The investigation team report and all related documentation shall be an internal Bear Valley - Indian Valley Fire Protection District administrative report.
- (f) Any public release of the report requires the approval of the Fire Chief or the authorized designee. Such release will generally be processed in accordance with the provisions of the California Public Records Act.
- (g) The local County Sheriff's department will conduct all line of duty death with complete cooperation from department members.

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Line-of-Duty Death Investigations

327.4 INVESTIGATION TEAM

The investigation team shall consist, at a minimum, of the following team members:

- (a) Captain
- (b) Fire investigator
- (c) Department Safety Officer
- (d) Risk manager

Additional personnel may be added as required by the specific circumstances of the incident, including an investigative representative from the appropriate law enforcement agency, when there is reasonable cause to believe a crime may be connected with the investigation.

327.4.1 DUTIES AND RESPONSIBILITIES

The duties of the investigation team include, but are not limited to, the following:

- (a) Gather and analyze all physical evidence related to the incident.
- (b) Interview all witnesses with direct or indirect knowledge of the circumstances. When interviewing members, represented employees shall have the right to have their labor representatives present, and all firefighter interviews shall comply with the Firefighter Bill of Rights.
- (c) Collect and preserve recordings and copies of radio traffic, telephone conversations, photographs, film, videotape, incident histories and other related information. The pertinent aspects of the radio and telephone recordings should be transcribed.
- (d) Consult with persons having special knowledge of the factors involved in the incident, including private sector experts and consultants.
- (e) Liaison with other agencies involved in the investigation of the incident.
- (f) Establish and maintain ongoing communication between the team leader and the legal counsel for the Department.
- (g) Develop a written report of the incident, including conclusions and recommendations.
- (h) Coordinate activities with Cal Fire to avoid interference with any criminal investigation.

327.4.2 DOCUMENTATION

The investigation team should ensure that the scene where the line-of-duty death occurred is documented, including diagrams, photographs and observations. When feasible, all witness interviews should be recorded or transcribed. When recording or transcription is not feasible, the investigator's notes of the interview should be preserved. In addition, the investigation team should:

- (a) Obtain, examine and secure all protective clothing, breathing apparatus and equipment used by the deceased employee.

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Line-of-Duty Death Investigations

1. A complete physical description of the protective clothing, breathing apparatus and equipment shall be included in the report of the incident.
 2. A performance evaluation report conducted by a qualified professional on all safety equipment should be included in the report of the incident.
- (b) Review and comment on the application of policies and procedures to the incident, the observance of policies and procedures and their effect on the situation. Recommend changes, additions or deletions to such policies and procedures.
- (c) Attempt to obtain any photographs, videotape or other information relating to the incident from news media or other sources. Such evidence should be obtained with the agreement that it will only be used for investigative and educational purposes.

327.5 FINAL REPORT

The investigation team should present the final report to the Board of Directors. The Board of Directors should determine the schedule and method of presentation of the final report.

National Fire Incident Reporting System (NFIRS)

328.1 PURPOSE AND SCOPE

The Federal Fire Prevention and Control Act of 1974 (P.L. 93-498) authorizes the National Fire Data Center in the U.S. Fire Administration (USFA) to gather and analyze information on the magnitude of the nation's fire problem, as well as its detailed characteristics and trends. To do so, the National Fire Data Center has established the National Fire Incident Reporting System (NFIRS). The purpose of this policy is to provide guidance regarding NFIRS reporting to ensure department response information is properly reported to (NFIRS).

328.2 POLICY

The Bear Valley - Indian Valley Fire Protection District is committed to improving fire reporting and analysis capability both locally and on the national level. Therefore, it is the policy of the Bear Valley - Indian Valley Fire Protection District to participate in the NFIRS.

328.3 RESPONSIBILITIES

The USFA has developed a standard NFIRS package that includes incident and casualty forms, a coding structure for data processing, manuals, computer software and procedures, documentation and a National Fire Academy training course for utilizing the system.

The Board of Directors Fire Chief should designate a NFIRS coordinator, who should develop and maintain familiarity with NFIRS resources and reporting requirements and ensure department information is compliant with the NFIRS reporting format and is forwarded to the state Fire Marshal.

Grocery Shopping On-Duty

329.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the guidelines for grocery shopping on-duty.

329.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to encourage suppression personnel to bring an adequate supply of food to work to meet their nutrition needs for the hours to be worked. When circumstances allow, companies may be permitted to shop for groceries as well.

329.3 PROCEDURE

Company grocery shopping may be permitted under the following circumstances:

- (a) All companies shopping for groceries shall remain in service.
- (b) Companies choosing to grocery shop while on-duty shall make shopping a part of the daily routine to avoid making a separate trip.
- (c) Companies shall shop within their initial response area or at the closest store approved by the Captain.
- (d) Multiple company stations shall have one unit shop for the entire station.
- (e) Daily grocery shopping for the entire station is to be accomplished in one visit to the store.
- (f) Members entering the store shall take a portable radio and if dispatched to a call shall leave the store immediately.
- (g) Except for groceries, under the conditions noted in this policy, personal shopping while on-duty is not permitted.
- (h) Use of a personal vehicle for grocery shopping while on-duty is not authorized.
- (i) One crew member shall remain with the unit at all times for purposes of apparatus security, response readiness and public/community outreach.
- (j) Apparatus shall not be parked in red zones, along red curbs, in zones limited exclusively to the vehicles of disabled persons or any location that will restrict pedestrian or vehicular traffic.

Chaplains

330.1 PURPOSE AND SCOPE

This policy establishes the guidelines for Bear Valley - Indian Valley Fire Protection District chaplains to provide counseling or emotional support to members of the Department, their families and members of the public.

330.2 POLICY

The Bear Valley - Indian Valley Fire Protection District shall ensure that department chaplains are properly appointed, trained and supervised to carry out their responsibilities without financial compensation. Reasonable efforts shall be made to incorporate chaplains from varying denominations reflective of the community to the best extent possible.

330.3 ELIGIBILITY

Requirements for participation as a chaplain for the Department may include, but are not limited to:

- (a) Being above reproach, temperate, prudent, respectable, hospitable, able to teach, free from addiction to alcohol or other drugs, and free from excessive debt.
- (b) Managing his/her household, family and personal affairs well.
- (c) Having a good reputation in the community.
- (d) Successful completion of an appropriate-level background investigation.
- (e) A minimum of five years of successful counseling or ministry experience.
- (f) Being in good health.
- (g) Possessing a valid driver license.

The Board of Directors may allow exceptions to these eligibility requirements based on organizational and community needs and the qualifications of the individual.

330.4 RECRUITMENT, SELECTION AND APPOINTMENT

The Bear Valley - Indian Valley Fire Protection District shall endeavor to recruit and appoint only those applicants who meet the high ethical, moral and professional standards set forth by the Department.

All applicants shall be required to meet and pass the same pre-employment procedures as department members before appointment with the exception of any entry level Firefighter knowledge or physical agility tests.

330.4.1 RECRUITMENT

Chaplains should be recruited on a continuous and ongoing basis consistent with department policy on equal opportunity and non-discriminatory practices. A primary qualification for participation in the application process should be an interest in and an ability to assist the Department in serving the public. Chaplain candidates are encouraged to participate in ride-alongs with department members before and during the selection process.

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330.4.2 SELECTION AND APPOINTMENT

Chaplain candidates shall successfully complete the following process prior to appointment as a chaplain:

- (a) Submit the appropriate written application.
- (b) Include a recommendation from employers or volunteer programs.
- (c) Interview with the Board of Directors and the chaplain coordinator.
- (d) Successfully complete an appropriate-level background investigation.
- (e) Complete an appropriate probationary period as designated by the Board of Directors.

Chaplains are volunteers and serve at the discretion of the Board of Directors. Chaplains shall have no property interest in continued appointment. However, if a chaplain is removed for alleged misconduct, the chaplain will be afforded an opportunity solely to clear his/her name through a liberty interest hearing, which shall be limited to a single appearance before the Bear Valley - Indian Valley Fire Protection District or the authorized designee.

330.5 IDENTIFICATION AND UNIFORMS

As representatives of the Bear Valley - Indian Valley Fire Protection District, chaplains are responsible for presenting a professional image to the community. Chaplains shall dress appropriately for the conditions and performance of their duties. Uniforms and necessary safety equipment or personal protective equipment (PPE) will be provided for each chaplain. Identification symbols worn by chaplains shall be different and distinct from those worn by other members through the inclusion of "Chaplain" on the uniform and other identifying PPE. Chaplain uniforms and PPE shall not reflect any religious affiliation.

Chaplains will be issued Bear Valley - Indian Valley Fire Protection District identification cards, which must be carried at all times while on-duty. The identification cards will be the standard Bear Valley - Indian Valley Fire Protection District identification cards, with the exception that "Chaplain" will be indicated on the cards. Chaplains shall be required to return any issued uniforms, PPE or other department property at the termination of service.

Chaplains shall conform to all uniform regulations and appearance standards of the Department.

330.6 CHAPLAIN COORDINATOR

The Board of Directors may delegate certain responsibilities to a chaplain coordinator. The coordinator shall be appointed by and directly responsible to the Board of Directors or the authorized designee.

The chaplain coordinator shall serve as the liaison between the chaplains and the Board of Directors. The function of the coordinator is to provide a central coordinating point for effective chaplain management within the Department, and to direct and assist efforts to jointly provide more productive chaplain services. Under the general direction of the Board of Directors or the authorized designee, chaplains shall report to the chaplain coordinator and/or Incident Commander (IC).

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The chaplain coordinator may appoint a senior chaplain or other designee to assist in the coordination of chaplains and their activities.

The responsibilities of the coordinator or the authorized designee include, but are not limited to:

- (a) Recruiting, selecting and training qualified chaplains.
- (b) Conducting chaplain meetings.
- (c) Establishing and maintaining a chaplain callout roster.
- (d) Maintaining records for each chaplain.
- (e) Tracking and evaluating the contribution of chaplains.
- (f) Maintaining a record of chaplain schedules and work hours.
- (g) Completing and disseminating, as appropriate, all necessary paperwork and information.
- (h) Planning periodic recognition events.
- (i) Maintaining a liaison with other agency chaplain coordinators.

An evaluation of the overall use of chaplains will be conducted on an annual basis by the coordinator and a written report provided to the Board of Directors.

330.7 DUTIES AND RESPONSIBILITIES

Chaplains assist the Department, its members and the community as needed. Assignments of chaplains will usually be to augment the Board of Directors Division, but chaplains may be assigned to other areas within the Department as needed. Chaplains should be placed only in assignments or programs that are consistent with their knowledge, skills and abilities and the needs of the Department.

All chaplains will be assigned duties by the chaplain coordinator or the authorized designee or an IC.

Chaplains may not proselytize or attempt to recruit members of the Department[or the public into a religious affiliation while representing themselves as chaplains with this department. If there is any question as to the receiving person's intent, chaplains should verify that the person is desirous of spiritual counseling or guidance before engaging in such discussion.

Chaplains may not accept gratuities for any service, or any subsequent actions or follow-up contacts that were provided while functioning as a chaplain for the Bear Valley - Indian Valley Fire Protection District.

330.7.1 COMPLIANCE

Chaplains are volunteer members of the Department and, except as otherwise specified within this policy, are required to comply with the Volunteer Program Policy and other applicable policies.

330.7.2 OPERATIONAL GUIDELINES

- (a) Chaplains will be asked to be available for call on an as-needed basis.

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- (b) Chaplains operating at emergency incidents or large-scale department events shall operate within and as part of the Incident Command System (ICS) at all times, including participating in and replying to Personal Accountability Reports (PAR) conducted as part of the incident or event.
- (c) Each chaplain should serve with the Bear Valley - Indian Valley Fire Protection District a minimum of four hours per month to maintain the necessary proficiencies and contacts necessary to be effective in their service.
- (d) At the end of each period of service or response to an incident the chaplain will complete a chaplain's report and submit it to the Board of Directors and chaplain coordinator or the authorized designee.
- (e) Chaplains shall be permitted to ride with members during any shift and observe Bear Valley - Indian Valley Fire Protection District operations or training sessions, provided the on-duty Captain has been notified and is aware of the activity.
- (f) Chaplains shall not be evaluators of members of the Bear Valley - Indian Valley Fire Protection District.
- (g) In responding to incidents, a chaplain shall never function in a hazardous area or serve as an assistant other than the chaplain's role.
- (h) When responding to in-progress calls for service, chaplains will be required to stand-by in a secure area until the situation has been deemed safe.
- (i) Chaplains shall serve only within the jurisdiction of the Bear Valley - Indian Valley Fire Protection District unless otherwise authorized by the Board of Directors or the authorized designee.
- (j) Each chaplain shall have access to current member rosters, addresses, telephone numbers, duty assignments and other information that may assist in his/her duties. Such information will be considered confidential, and each chaplain will exercise appropriate security measures to prevent unauthorized access to the data.

330.7.3 ASSISTING DEPARTMENT MEMBERS

The responsibilities of a chaplain related to department members include, but are not limited to:

- (a) Assisting in making notification to families of members who have been seriously injured or killed and, after notification, responding to the hospital or home of the member.
- (b) Visiting sick or injured members in the hospital or at home.
- (c) Attending and participating in funerals of active or retired members, when requested.
- (d) Serving as a resource for members who are dealing with the public during significant incidents (e.g., accidental death, suicide, suicidal subjects, serious accident, drug and alcohol abuse or a mass casualty incident (MCI)).
- (e) Providing counseling and support for members and their families.
- (f) Being alert to the needs of members and their families.

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330.7.4 ASSISTING THE DEPARTMENT

The responsibilities of a chaplain related to the Bear Valley - Indian Valley Fire Protection District include, but are not limited to:

- (a) Assisting members in defusing a conflict or incident, when requested.
- (b) Responding to any significant incident (e.g., natural and accidental death, suicide and attempted suicide, family disturbance or MCI) in which the IC or supervisor believes the chaplain could assist in accomplishing the mission of the Department.
- (c) Responding to all major disasters, such as a natural disaster, bombing, MCI and similar critical incidents.
- (d) Being available, or if possible, on-duty during major demonstrations or any public function that requires the presence of a large number of department members.
- (e) Attending department functions such as academy graduations, ceremonies and social events and offering invocations and benedictions, as requested.
- (f) Participating in in-service training classes.
- (g) Training others to enhance the effectiveness of the Department.

330.7.5 ASSISTING THE COMMUNITY

The duties of a chaplain related to the community include, but are not limited to:

- (a) Fostering familiarity with the role of fire and Emergency Medical Services (EMS) members in the community.
- (b) Providing an additional link between the community, other chaplain coordinators and the Department.
- (c) Providing a liaison with various civic, business and religious organizations.
- (d) Assisting the community when they request representatives or leaders of various denominations.
- (e) Assisting the community in any other function, as needed or requested.
- (f) Making referrals in cases where specialized attention is needed or in cases that are beyond the chaplain's ability to assist.

330.7.6 CHAPLAINS MEETING

Chaplains may be required to attend scheduled meetings. Absences from such meetings should be satisfactorily explained to the chaplain coordinator.

330.8 PRIVILEGED COMMUNICATIONS

No person who provides chaplain services to members of the Department may work or volunteer for the Bear Valley - Indian Valley Fire Protection District in any capacity other than that of chaplain.

Chaplains shall be familiar with state evidentiary laws and rules pertaining to the limits of the clergy-penitent, psychotherapist-patient and other potentially applicable privileges and shall inform members when it appears reasonably likely that the member is discussing matters that are not

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subject to privileged communications. In such cases, the chaplain should consider referring the member to an appropriate counseling resource or available program.

No chaplain shall provide counsel to or receive confidential communications from any Bear Valley - Indian Valley Fire Protection District member concerning an incident personally witnessed by the chaplain or concerning an incident involving the chaplain.

330.9 TRAINING

The Department may establish a minimum number of training hours and standards for department chaplains. The training, as approved by the Training Safety Officer, may include:

- Stress management
- Death notifications
- Symptoms of post-traumatic stress
- Burnout for department members and chaplains
- Legal liability and confidentiality
- Ethics
- Responding to crisis situations
- The fire and EMS family
- Substance abuse
- Member injury or death
- Sensitivity and diversity

Active Shooter and Other Violent Incidents

331.1 PURPOSE AND SCOPE

Violence committed in schools, workplaces, and other locations by any individual or group of individuals who are determined to target or kill persons or to create mass casualties presents a difficult situation for Fire/Emergency Medical Services (EMS). The purpose of this policy is to identify guidelines and factors that will assist members in making decisions in these rapidly unfolding and tense situations.

331.2 POLICY

The Bear Valley - Indian Valley Fire Protection District will endeavor to plan for a rapid response to violent incidents involving an active shooter or other violent situations. The Bear Valley - Indian Valley Fire Protection District is committed to preparing and planning for rapid responses to these incidents by coordinating with law enforcement and other EMS personnel, as well as with those responsible for operating sites that may be the potential target of a violent incident.

331.3 ACTIVE SHOOTER/VIOLENT INCIDENT PLAN

The Board of Directors should designate a member who is responsible for developing and managing an active shooter/violent incident (AS/VI) plan to assist in the Bear Valley - Indian Valley Fire Protection District's response to an AS/VI.

The AS/VI plan should address:

- (a) Any applicable EMS Mass Casualty Incident (MCI) protocols.
- (b) Identification of state, local, and regional agencies that are likely to respond to an AS/VI.
- (c) Procedures to facilitate interagency sharing of information related to AS/VIs.
- (d) The joint development of protocols for responding to AS/VIs with fire, EMS, and law enforcement personnel, including but not limited to:
 - 1. Identification of likely critical incident target sites and the availability of plans or schematics of such locations and associated outcomes.
 - 2. Effects and outcomes of cascading or complex coordinated incidents.
 - 3. Rapid entry and evacuation routes.
 - 4. Equipment needs.
 - 5. Communication interoperability.
 - 6. Tactical EMS (TEMS) personnel or Rescue Task Forces (RTFs) deployment.
- (e) Any mutual aid agreements that may exist.
- (f) Integrated use of the National Incident Management System and Incident Command System approach by personnel likely to respond to an AS/VI. Emphasis should be placed on the establishment of a Unified Command.

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- (g) Any guidelines for an AS/VI that are established by the Federal Emergency Management Agency, the Interagency Board, and the National Fire Protection Association.
- (h) Common communications and terminology to be utilized by responding personnel.
- (i) Use of readily identifiable and visible identification by responding personnel to make them easily discernible.
- (j) Procedures and agreements governing self-deployment of emergency response personnel.
- (k) Identification of which personnel will need additional personal protective equipment (PPE), including ballistic gear (e.g., vests, helmets) and what training will be needed for the use of such gear.
- (l) Coordination and planning with local hospitals regarding communication and patient distribution.
- (m) Procedures for dissemination of information to the public during and after an AS/VI.
- (n) Procedures for continuity of [agency_department] operations during and after an AS/VI.
- (o) Establishing areas designated for victim reunification and recovery.
- (p) Procedures for completion of post-incident reviews of AS/VIs.

The AS/VI plan manager should, in conjunction with appropriate law enforcement and other EMS personnel, review the [agencyName]'s plan annually and make any necessary updates.

331.4 FIRST RESPONDERS

When responding to AS/VIs, members must decide, often during difficult and rapidly evolving circumstances, whether to enter the scene or to stage at a safe area. When deciding on a course of action members should:

- (a) Determine whether law enforcement has secured the scene or developed a plan for entry. If the scene has not been secured, members should work in teams with law enforcement and other EMS personnel on-scene to develop a plan for entry and contact with victims with life-threatening injuries.
 - 1. Members tasked with entry should wear PPE appropriate for the circumstances.
- (b) Coordinate with available law enforcement personnel to create a staging area for additional member resources.
- (c) Identify and prepare members for operations in areas of higher risk, if appropriate.
- (d) Decide whether individuals who are under imminent threat can be moved out of danger with reasonable safety.
- (e) Plan for rapid triage, treatment, and extraction of individuals with life-threatening injuries (e.g., in a warm zone).
- (f) Utilize TEMS support personnel or RTFs, if available.

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Active Shooter and Other Violent Incidents

1. In areas where there is a known hazard or direct and immediate threat to life (i.e., a hot zone), members should await arrival of TEMS support personnel or RTFs.
 2. Members who unexpectedly find themselves in a hot zone should limit treatment to the control of life-threatening external hemorrhage by use of tourniquets or hemostatic gauze and the repositioning of airways.
- (g) Rapid extraction to safety is paramount.
- (h) Coordinate full triage and transport of patients to definitive care outside of the area of imminent threat.
- (i) Consider the risk of fire hazards and secondary devices at any main or secondary scenes if there is a reasonable belief that improvised explosive devices have been or may be used.

331.5 TRAINING

The AS/VI plan manager should coordinate with the Training Safety Officer so that members are provided with AS/VI training. The training should include:

- (a) Review of the AS/VI plan.
- (b) Review of any applicable EMS MCI protocols.
- (c) Review of trauma care guidelines in high-threat pre-hospital situations and the various treatment methods available during an AS/VI.
- (d) Interagency training with law enforcement and other EMS personnel.
- (e) Reality-based training at locations that may be a potential target of a critical incident.

The AS/VI plan manager should ensure that all training sessions and exercises are documented and that all training records are kept in accordance with the department Records Management Policy.

Chapter 4 - Fire Prevention

Fire Investigations

400.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that all fires and explosions responded to by the Bear Valley - Indian Valley Fire Protection District and occurring within this jurisdiction are investigated and properly documented in accordance with state and federal laws as well as national standards.

400.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to promptly investigate the cause, origin, and circumstances of fires and explosions occurring in this jurisdiction that involve the loss of life or injury to a person, or the destruction of or damage to property.

400.3 RESPONSIBILITIES

The Fire Chief has overall responsibility for fire investigations. The Fire Marshal is responsible for the management of the fire investigations program. The Incident Commander (IC) of each incident is responsible for ensuring that each fire is investigated for origin and cause.

400.4 PRELIMINARY INVESTIGATION

The first-in Captain should conduct a preliminary investigation of each fire or explosion to identify the origin, cause, and circumstances. The Captain will notify the IC of the results of the preliminary investigation.

If the origin of a fire or explosion appears to be suspicious, the IC should take immediate charge of all physical evidence relating to the fire or explosion, coordinate with investigators, and contact local law enforcement.

The IC is responsible for determining when fire investigators, fire investigators with arrest authority, or sworn law enforcement investigators, from this or another agency, are appropriate to investigate an incident.

The immediate response of an appropriate investigator should be requested when any of the following circumstances exist:

- (a) Major or unusual fires that exceed the investigative abilities of the IC.
- (b) Any fire resulting in a major injury or death
- (c) Incidents involving special circumstances, such as an especially high dollar loss, extensive damage, political sensitivity, or any other circumstance deemed appropriate by the Captain
- (d) Arson and/or incendiary devices are involved, or the origin of the fire is otherwise suspicious
- (e) There has been an explosion
- (f) There is evidence or suspicion that a crime has occurred in connection with a fire or explosion
- (g) A fire has been started by a juvenile

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- (h) Any illegal activity that potentially could cause a fire and/or explosion has occurred

400.5 INCIDENT REPORTS

To ensure department incidents are documented in the National Fire Incident Reporting System (NFIRS), investigators should complete and submit a report to the Fire Marshal for each investigation conducted. All areas of the report are to be filled out, and when an item is not applicable, N/A is to be placed in the box. For additional information, see the National Fire Incident Reporting System (NFIRS) Policy.

The Fire Marshal is responsible for reviewing and approving the investigative reports.

Public Education

401.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the methods the Department uses to interact with the community, share information about the workings of a fire station and demonstrate the capabilities of various apparatus and equipment through educational activities conducted by the Emergency Services Division.

401.2 POLICY

The Bear Valley - Indian Valley Fire Protection District will aggressively promote fire safety and public awareness through a variety of public information and education activities, including a fire station visit program operated by the Fire Chief

401.3 PROCEDURE

The fire station visit program is an educational activity intended to allow school groups, service clubs, youth organizations, church groups and other civic-minded organizations to schedule and participate in a tour of a working fire station. The types of groups and organizations appropriate for inclusion in the fire station visit program include, but are not limited to, the following:

- Pre-school classes or groups (public or private)
- Kindergarten classes or groups (public or private)
- Primary and secondary school groups (public, church-based or private)
- Chaperoned, organized youth groups that generally include persons 17 years of age and under and are sponsored and accompanied by adult representatives of a formal organization (e.g., Girl Scouts, Boy Scouts, Cub Scouts, Indian Scouts and Brownies).
- Service clubs and organizations that are generally voluntary non-profit organizations, where members meet regularly to perform charitable work either by direct hands-on efforts or by raising money for other organizations (e.g., Kiwanis, Rotary and Masons).

The fire station visit program is not intended, nor should it be used as an entertainment opportunity or for a commercial or for-profit purpose. The following types of groups, entities and activities are not appropriate for inclusion in the fire station visit program:

- Birthday party groups
- Social networking groups
- Business networking groups
- For-profit tour groups, including profit-based foreign student groups
- Any group, entity or activity that is part of a for-profit enterprise

Neither of the lists above is intended to be all-inclusive, rather they are general representations of the types of groups that are either appropriate or inappropriate for inclusion in the fire station visit program.

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Groups or organizations can request a fire station visit by completing and submitting a request to the Fire Chief. Applications must be submitted at least 45 days prior to the date requested for the fire station visit. The Fire Chief will evaluate each application in accordance with this policy. Each evaluation will be considered uniformly and without discrimination as part of the application process.

401.3.1 ADDITIONAL CONSIDERATIONS

The fire station visit program will operate within the following parameters:

- Participating group size will generally be limited to 30 persons, including chaperones, and drivers. Larger groups may apply but approval of the request will depend on the availability of the Fire Chief. Cal Fire Division
- Station visits should be scheduled for a maximum of two hours and generally during regular business hours.
- The crew assigned to manage a station visit should remain in-service and available for emergency calls during the visit. Visiting groups should be notified in advance that the crew may be called away from the station at any time and the visit may then be canceled.
- Station visit participants should not be allowed to enter the private crew sleeping or dressing areas of the station.
- The fire crews managing each station visit should ensure that no confidential information or information protected by the Health Insurance Portability and Accountability Act (HIPAA) is visible or accessible to the station visit participants. Specific areas of the station may be closed to the visiting groups as needed to protect confidential and/or protected materials.

401.4 RECORDKEEPING

The Fire Chief should maintain a record of all requests for the station visit program. The records should include:

- The name of the group or organization applying for a fire station visit.
- The name of the group leader or person submitting the application.
- Information regarding the approval or denial of the application. For denied applications, the reason for the denial should be listed (e.g., non-conforming group, scheduling conflict or no crew availability).
- The scheduled date and time of each approved visit.
- The Captain, station, and crew assigned to manage the visit.
- Confirmation that the group or organization completed the station visit or the reason it was not completed.

These records should be retained in accordance with the department's established records retention schedules.

Hazardous Materials Disclosures

402.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the requirements for the review of Hazardous Materials Business Plan (HMBP) submittals and for the inspection of the businesses that handle hazardous materials (Health and Safety Code § 25500 et seq.).

402.2 POLICY

When designated as the administering agency under Health and Safety Code § 25502, the Bear Valley - Indian Valley Fire Protection District will administer and enforce Chapter 6.95 of Division 20 of the Health and Safety Code.

402.3 PROCEDURE

Businesses handling hazardous materials in excess of threshold quantities shall be required to submit HMBPs to the Department and submit to inspection by the Fire Marshal or the authorized designee (Health and Safety Code § 25503 et seq.).

402.3.1 REQUIRED PLANS

- (a) The Department will require an HMBP from the following:
 - 1. A business that handles a hazardous material or a mixture containing a hazardous material in quantities identified in Health and Safety Code § 25507
 - 2. A business required to submit chemical inventory information pursuant to 42 USC § 11022 (Health and Safety Code § 25506)
 - 3. A business handling a quantity of material that the Department finds raises public health, safety, or environmental concerns and requires submission of an HMBP (Health and Safety Code § 25507)
- (b) HMBPs shall comply with the requirements of 19 CCR 5030.2 through 19 CCR 5030.8, 19 CCR 5030.9, and 19 CCR 5030.10, including but not limited to:
 - 1. The Business Activities page of the Unified Program Consolidated Form, as required by 19 CCR 5030.3, and Business Owner/Operator Identification page.
 - 2. The Hazardous Materials and Chemical Description page.
 - 3. An annotated site map.
 - 4. A business emergency plan, including the following emergency response procedures for a release or threatened release of hazardous materials, scaled appropriately for the size and nature of the business, the nature of the damage potential of the hazardous materials handled, and the proximity of the business to residential areas and other populations (19 CCR 5030.9).
 - (a) Immediate notification of the following:
 - 1. Local emergency response personnel

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2. The administering agency and the Office of Emergency Services (OES)
3. Persons within the facility who are necessary to respond to an incident
- (b) Identification of local emergency medical assistance appropriate for potential accident scenarios.
- (c) Mitigation, prevention, or abatement of hazards to persons, property, or the environment.
- (d) Immediate notification and evacuation of the facility.
- (e) Identification of areas of the facility and mechanical or other systems that require immediate inspection or isolation because of their vulnerability to earthquake related ground motion.

402.3.2 SUBMITTAL

- (a) HMBPs that do not satisfy the requirements of this policy shall be returned to the submitting facility with a letter specifying the deficiencies, any necessary corrective actions, and notice that the facility has 30 days to submit a revised HMBP.
- (b) Facilities subject to the requirements of this policy are required to review their HMBP at least once every three years after initial submission and certify to the Department that the review was made and that any necessary changes were made. A copy of any changes shall be submitted to the Department as a part of the certification.
- (c) The hazardous materials inventory shall be submitted to the Department annually on or before March 1. Businesses shall submit an amendment to the inventory within 30 days of the following events:
 1. A 100 percent or more increase in the quantity of a previously disclosed material
 2. Any handling of a previously undisclosed hazardous material subject to the inventory requirements of this chapter
 3. Change of business address
 4. Change of business ownership
 5. Change of business name
- (d) If no change in an inventory has occurred, a business subject to the hazardous materials reporting requirements of this policy may comply with the annual inventory reporting requirements by submitting a certification statement to the Department if all the following apply:
 1. The business has previously filed the hazardous materials inventory pursuant to the requirements of this policy.
 2. The business owner or officially designated representative signs and attests to these statements:

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- (a) The information contained in the hazardous materials inventory most recently submitted to the Department is complete, accurate, and up to date.
- (b) There has been no change in the quantity of hazardous materials reported in the most recently submitted inventory.
- (c) No hazardous materials subject to inventory requirements are being handled that are not listed on the most recently submitted inventory.
- (d) No hazardous materials subject to inventory requirements are being handled that are not listed on the most recently submitted inventory.
- (e) If a change in the hazardous materials inventory has occurred, a business subject to the hazardous materials reporting requirements may comply with the annual inventory reporting requirements by submitting the following:
 - (a) Signed Business Owner/Operator page for the current reporting year
 - (b) Updated Chemical Description pages showing additions, deletions, or revisions to previously submitted hazardous materials inventory
- (f) Facilities subject to EPCRA must annually submit the following, regardless of whether a change as occurred:
 - 1. Business Activities page of the Unified Program Consolidated Form
 - 2. Signed Business Owner/Operator page for the current reporting year
 - 3. Chemical Description page for each federally listed Extremely Hazardous Substance (EHS) handled in quantities equal to or greater than applicable federal threshold planning quantities or 500 pounds, whichever is less

402.3.3 INSPECTIONS

The Department shall conduct field inspections of facilities that are subject to the requirements of this policy at least once every three years. Any deficiencies noted during field inspections shall be documented and the facility shall be given a set time frame to make the necessary corrections (Health and Safety Code § 25511).

Where appropriate, the Department will enforce any applicable laws and suggest preventive measures designed to minimize the risk of the release of hazardous material into the workplace or environment.

402.4 PUBLIC RECORDS

Members of the public may request to inspect any HMBP for which the Department is responsible for receiving or reviewing. The Department shall not charge for a request to obtain this information from a business or for the public examination of the HMBP during the department's normal working hours (Health and Safety Code § 25509).

Inventory information and other information is subject to trade secret protection pursuant to Health and Safety Code § 25512.

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Those portions of the HMBP specifying the precise location where hazardous materials are stored and handled on-site, including any maps of the site, shall not be available for inspection (Health and Safety Code § 25509).

Chapter 5 - Emergency Medical Services

Pre-Hospital Care Reports

500.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the requirements for documentation of patient responses, and the related document distribution, storage, and disclosure (Health and Safety Code § 1797.200; Health and Safety Code § 1797.227; 22 CCR 100170; 22 CCR 100171).

500.1.1 DEFINITIONS

Definitions related to this policy include:

Patient - A person who meets any one of the following criteria:

- Has a chief complaint
- Has obvious symptoms or signs of injury or illness
- Has been involved in an event that the average first responder would believe could cause an injury
- Appears to be disoriented or to have impaired psychiatric function
- Has evidence of suicidal intent
- Is deceased

Patient refusing medical care against medical advice (AMA) - A competent patient who is determined by an Emergency Medical Technician (EMT) or base hospital to have a medical problem that requires the immediate treatment and/or transportation capabilities of the Emergency Medical Services (EMS) system, but who declines medical care despite being advised of his/her condition and the risks and possible complications of refusing medical care.

500.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to follow the patient documentation and distribution guidelines developed by the local, regional, or state EMS authority.

500.3 PROCEDURE

A Pre-Hospital Care Report (PCR) shall be completed for every patient response (22 CCR 100171). This includes a patient who is released at the scene, meets the criteria for pronouncing death in the field, is an inter-facility transport, or is involved in a multi-casualty incident.

A PCR and a patient release form must be completed for all patients who refuse evaluation, treatment, and/or transport.

Contact with persons who do not meet the criteria required for the definition of a patient should be recorded in the department's incident reporting system to document that assistance was offered and declined. The department's reporting requirements concerning personal identification information, including a person's name, age, date of birth, and sex, should be followed.

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Pre-Hospital Care Reports

An EMS evaluation, performed minimally by an EMT or EMR, may or may not be required for non-medical requests for assistance, such as "service calls" or "back-to-bed" requests. A PCR shall be completed for any person meeting the patient criteria.

For continuous quality improvement, the local or regional EMS authority, department EMS supervisors, and the designated hospital receiving center shall review their copies of the PCR and discuss any areas of concern.

500.4 DISTRIBUTION OF PCR COPIES

- (a) If a patient is transported to a designated hospital receiving center, copies should be distributed as follows:
 - 1. Copy retained by the Department
 - 2. Copy sent with transporting unit.
- (b) If a patient is not transported or refuses care and leaves AMA, copies should be distributed as follows:
 - 1. Copy retained by the Department
- (c) If a patient is declared dead and is not transported, copies should be distributed as follows:
 - 1. Copy retained by the Department
 - 2. Copy left with the body for the coroner's office

500.4.1 FORM OF COPIES

Copies should be sent to the local EMS authority in the form required by Health and Safety Code § 1797.227 or any written agreement with the EMS authority entered into before January 2016.

500.5 PCR STORAGE

PCRs shall be maintained and secured in a manner in which they are accessible only to individuals who are members of the health care team, are involved in education and training, are part of the quality assurance review, or are affiliated with the local EMS authority. All copies of the PCRs must be secured to prevent access by non-authorized individuals.

500.6 ADDITIONAL REPORTING REQUIREMENT

In addition to a PCR, if the patient contact involves an injury inflicted by a firearm or is a result of assaultive or abusive conduct (as defined by Penal Code § 11160(d)), a report shall be made (Penal Code § 11160):

- (a) By telephone or radio, immediately or as soon as practicable, to local law enforcement.
- (b) By written report to local law enforcement while on scene, on the appropriate form as provided in Penal Code § 11160.

Patient Refusal of Pre-Hospital Care

501.1 PURPOSE AND SCOPE

This policy establishes guidelines to be followed any time a patient refuses pre-hospital emergency medical evaluation, care and/or transport.

501.1.1 DEFINITIONS

Definitions related to this policy include:

Competent - The patient has the capacity to understand the circumstances surrounding his/her illness or impairment and the risks associated with refusing treatment or transport. The patient is alert and his/her judgment is not significantly impaired by illness and/or injury. Mental illness, drugs, alcohol intoxication or physical/mental impairment may significantly affect a patient's competence. Patients who have attempted suicide or verbalized suicidal intent, or if other factors lead pre-hospital care personnel to suspect intent, should not be regarded as competent.

Emancipated minor - An individual under the age of 18 years who is married, on active duty in the military, or is 14 years or older and emancipated by declaration of a court.

Mental health hold or 5150 hold - A patient who is held against his/her will for evaluation because the patient is a danger to him/herself, a danger to others, and/or is gravely disabled or unable to care for him/herself (Welfare and Institutions Code § 5150). This hold may be written by a law enforcement officer, a county mental health worker or an emergency room physician certified by the county to place an individual on a 5150 hold.

Patient - A person who meets any one of the following criteria:

- Has a chief complaint
- Has obvious symptoms or signs of injury or illness
- Has been involved in an event that the average first responder would reasonably believe could cause an injury
- Appears to be disoriented or to have impaired psychiatric function
- Has evidence of suicidal intent
- Is deceased

Patient not requiring transport or release at the scene - A patient who, after an assessment by an Emergency Medical Technician (EMT), does not appear to have a medical problem that requires the immediate treatment and/or transportation capabilities of the Emergency Medical Services (EMS) system.

Patient refusing medical care against medical advice (AMA) - A competent patient who is determined by an EMT or base hospital to have a medical problem that requires the immediate treatment and/or transportation capabilities of the EMS system, but who declines medical care

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Patient Refusal of Pre-Hospital Care

despite being advised of his/her condition and the risks and possible complications of refusing medical care.

501.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that a Pre-Hospital Care Report (PCR) and a patient release form be completed any time a patient refuses emergency medical evaluation, care and/or transportation.

501.3 PROCEDURE

In the pre-hospital setting of the sick and injured patient, these guidelines may be interpreted and applied broadly. The EMT should err on the side of providing patient care, even if the patient is later found to have been competent to refuse care. Patients likely to have a serious medical problem should be evaluated more carefully for their decision-making capacity.

- (a) A competent adult or an emancipated minor has the right to determine the course of his/her own medical care and shall be allowed to make decisions affecting his/her medical care, including the refusal of care.
- (b) Spouses or relatives, unless they are a legal representative, cannot necessarily consent to the refusal of care for their spouse or relative. They may provide insight into what an incompetent relative would desire and may be used as surrogates for decision-making after an incompetent patient enters the hospital. Patients less than 18 years old must have a parent or legal representative present to refuse evaluation, medical care and/or transport unless they are an emancipated minor. The parent or legal representative must be competent to make this decision. If the parent or legal representative's decision seems to grossly endanger the minor, or the parent or legal representative does not appear to be competent, the EMT should make contact with the base hospital for further guidance.
- (c) The EMT must evaluate and document the patient's ability to comprehend and whether his/her ability to do so is impaired by the medical condition. The EMT should assess the patient with particular attention to:
 - 1. The patient's complaint or the reason for the call.
 - 2. Any important circumstances surrounding the call for assistance.
 - 3. Significant patient medical history.
 - 4. Complete physical assessment, including vital signs and mental status.
 - 5. Signs of drug and/or alcohol use/intoxication and physical or mental conditions affecting judgment, such as injury, developmental disability or mental illness. Examples of conditions affecting the patient's decision-making capacity include, but are not limited to, a significantly altered level of consciousness or blood pressure, hypoxia or severe pain.

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Patient Refusal of Pre-Hospital Care

- (d) The EMT should establish to the best of his/her ability what treatment the patient requires and the potential risks/consequences if the patient refuses care, and should communicate to the patient the benefits and risks of the proposed medical care or transport.
- (e) If the patient refuses treatment or transport and the EMT believes the patient is competent, the EMT should make reasonable efforts to ensure that the patient understands the risk and consequences of refusing medical attention and to understand why the patient is refusing care. The EMT should present to the patient alternatives to obtaining care, transport or modification of services offered, and attempt to overcome the patient's objections, if reasonable. Any evaluation, including base hospital contact, should be thoroughly documented for conditions the EMT believes are potentially serious.
- (f) The base hospital should be contacted regarding any patient exhibiting symptoms meeting the base hospital criteria for treatment and transport. If the patient refuses treatment and/or transport and there is some question on the part of field personnel as to the capacity of the patient, base hospital consultation should be obtained prior to leaving the scene.
- (g) A patient who meets the criteria for release at the scene may be released by an EMT. However, the patient should be advised, if applicable, to seek alternate medical care. If the patient requires additional medical advice, the base hospital should be contacted.
- (h) When a patient exhibits signs of being a danger to him/herself or others, is gravely disabled or cannot care for him/herself and cannot be treated and/or transported, the EMT should notify the proper authorities to obtain a 5150 hold. The EMT should remain with the patient until the proper authorities have made a determination regarding the hold. Patients on a 5150 hold cannot be released at the scene.
- (i) If the base hospital and/or the EMT determine that the patient is not competent to refuse evaluation or transport, the following alternatives exist:
 - 1. The patient should be transported to an appropriate facility under implied consent. In this case a 5150 hold is not necessary.
 - 2. If the base hospital determines it is necessary to transport the patient against his/her will and the patient resists or the EMT believes the patient will resist, the EMT shall call for law enforcement assistance in transporting the patient. Law enforcement may consider the placement of a 5150 hold on the patient but a 5150 hold is not required for transport.
 - 3. At no time are members to put themselves in danger by attempting to transport or treat a patient who refuses treatment. At all times, good judgment should be used and appropriate assistance obtained.

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Patient Refusal of Pre-Hospital Care

501.4 DOCUMENTATION

The EMT or EMR should document the following for all patients who refuse medical care AMA:

- (a) All relevant patient medical history and assessment
- (b) A description of the patient that clearly indicates his/her decision-making capacity
- (c) Reasons given why the patient refused care, treatment or transport
- (d) A statement that the patient was advised of the risk/consequences of refusing medical attention and that he/she acknowledged understanding those risks
- (e) Any alternatives that were presented to the patient
- (f) A description of base hospital contact, including information given and received

After advising the patient and any associated witnesses concerning the consequences of refusing medical care, the EMT should obtain the signature of the patient and one witness on the patient release form. Preferably the witness should be a member of the patient's family, if available at the scene.

If the patient is a minor, the parent or legal guardian should sign the patient release form.

If the patient refuses to sign the patient release form, that fact should be documented on the form. The release should include the department-specific incident number, the signature of the field personnel and that of any witnesses.

A PCR for a patient refusing care shall be reviewed by the EMS supervisor to ensure compliance with this policy. The patient release form and copy of the PCR should also be sent to the base hospital for review.

Advance Health Care Directives

502.1 PURPOSE AND SCOPE

This policy identifies the circumstances and types of documents required for department Emergency Medical Services (EMS) members to withhold or withdraw resuscitative or life-sustaining measures based on the Health Care Decisions Law (Probate Code § 4600 et seq.).

Nothing in this policy should be interpreted to limit EMS members from relieving an airway obstruction.

502.1.1 DEFINITIONS

Definitions related to this policy include:

Advance health care directive (or Advance Directive) - A document executed pursuant to the Health Care Decisions Law, used to give health care instructions, including directions to withhold or withdraw life-sustaining measures and CPR (Probate Code § 4605). A valid Advance Directive must contain the date of its execution, signature of the patient or of another adult in the patient's name, and be acknowledged by a notary or signed by at least two adult witnesses to the signing (Probate Code § 4674).

Attorney-in-fact - A person granted legal authority in a written document to act for another in health matters (Probate Code § 4670).

Do Not Resuscitate (DNR) request - A document that directs a health care provider not to make resuscitative efforts, such as chest compressions, defibrillation, assisted ventilation, basic airway adjuncts, advance airway adjuncts (e.g., endotracheal tube, Combitube®), cardiotoxic medications or other medications or means intended to initiate a heartbeat or to treat a non-perfusing rhythm. A DNR request includes:

- An Advance Directive that directs the withholding of life sustaining or resuscitating measures.
- A pre-hospital DNR request approved by the EMS authority or the California Medical Association, or an equivalent document from another jurisdiction.
- An order written by a physician or a patient in hospice care, a skilled nursing facility or other licensed care facility.
- Physician Orders for Life-Sustaining Treatment (POLST) Form

A DNR request can also be evidenced by a DNR medallion.

DNR medallion - A medic alert medallion/bracelet engraved with the words "Do Not Resuscitate," the letters "DNR" or "DNR-EMS," a patient identification number and a 24-hour toll-free telephone number (Probate Code § 4780).

Health care agent - A person designated in a written power of attorney for health care to make health care decisions (Probate Code § 4670).

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Palliative care - The total care of patients who are not responsive to curative treatment, designed to achieve the highest quality of life possible.

Physician Orders for Life-Sustaining Treatment (POLST) Form - A form available statewide that allows an individual to express his/her desires concerning resuscitation and various resuscitation modalities (Probate Code § 4780).

502.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that EMS members honor DNR requests to withhold or withdraw resuscitative measures.

502.3 PROCEDURES

The following guidelines should be used by members who are presented with a DNR request:

- (a) EMS members shall honor a DNR request when it can be reasonably established that the patient is the subject of the DNR request and:
 - 1. EMS members have identified a DNR request, DNR medallion or POLST form as defined in this policy, or
 - 2. EMS members have personally seen the DNR request in the patient's medical record in a health care facility and they reasonably believe it has not been revoked.
- (b) DNR patients should receive non-resuscitation-related palliative care and other comfort measures, as would any other person.
- (c) A DNR request shall be disregarded if the patient requests resuscitative measures.
- (d) EMS members may accept a verbal request to withhold or withdraw resuscitative measures under the following circumstances:
 - 1. A licensed physician identified as the patient's physician and present with the patient gives a verbal order and writes the DNR order on the Pre-hospital Care Report (PCR) and signs it. The physician's name, address, telephone number and medical license number must be recorded on the PCR.
 - 2. A DNR request is communicated by an attorney-in-fact or a health care agent and the attorney-in-fact or health care agent signs the PCR as the attorney-in-fact or health care agent (Probate Code § 4671).
- (e) When EMS members honor a DNR request, they should note on the PCR that a DNR request was presented and honored, and shall document the circumstances surrounding the DNR request on a PCR.
- (f) Base hospital contact should be made, the base hospital physician consulted and resuscitation initiated:
 - 1. If there are any questions concerning the validity of the DNR request.

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2. If a DNR request is incomplete or not signed.
 3. When a document other than those noted in this policy is presented.
 4. Any time EMS members have concerns or require assistance.
- (g) DNR patients who are in cardiopulmonary arrest should not be transported. EMS members shall contact local law enforcement and/or coroner's office to report the death and should support family members on-scene as appropriate.
- (h) DNR patients who decline transport to the hospital, including patients for whom transport is declined on their behalf, should not be transported. EMS members should make reasonable efforts to preserve the patient's privacy, dignity and comfort before leaving the scene.
- (i) If a DNR patient is transported to a hospital, the following shall apply:
1. A valid DNR request shall be honored during transport of the patient.
 2. The DNR request shall accompany the patient.
 3. The attorney-in-fact or health care agent (if applicable) should accompany the patient to the hospital.

Latex Sensitivity

503.1 PURPOSE AND SCOPE

The purpose of this policy is to establish procedures to ensure that all department members are aware of the potential for severe allergic reactions caused by contact with products containing latex and how to mitigate patient exposure.

503.1.1 DEFINITIONS

Definitions related to this policy include:

Latex sensitivity - Allergic reactions after exposure to products containing latex/natural rubber (e.g., balloons, rubber gloves, other consumable medical products or medical devices).

503.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that members shall take precautions to minimize latex exposure any time a patient is exhibiting signs of allergy or anaphylaxis, or any time members are advised that a patient is known to have a latex sensitivity. Every reasonable precaution shall be taken to prevent a latex sensitivity reaction in a patient.

503.3 PROCEDURE

If treating members are aware that a patient has a history of latex sensitivity, efforts to minimize exposure should be initiated. If a patient begins exhibiting signs of latex sensitivity or anaphylaxis, members should initiate treatment and continue to make reasonable efforts to minimize exposure to latex products.

If time permits before the loading the patient into the ambulance, the interior surfaces should be wiped down with a wet towel to reduce the presence of powder that contains latex proteins. All members wearing latex gloves should cover them with a pair of non-latex gloves. Latex gloves should not be removed as this can put dust or powder in the ambient environment for up to five hours. Members should provide a barrier between equipment and the patient by covering all latex-containing medical devices with stockinet or plastic wrap.

All nonessential equipment should be stored in closed compartments. Care should be taken to remove or replace latex-containing caps from medication vials and to keep intravenous (IV) ports covered to prevent injections. Latex dressings and IV tourniquets should not be used.

Treating members should notify the paramedic receiving center that a latex-sensitive patient is en route to the facility, and should document the patient's sensitivity and patient management (e.g., nitrile gloves, plastic wrap on blood pressure cuff) on the Pre-Hospital Care Report as appropriate. This information should also be communicated to the hospital staff immediately upon arrival.

Field units should carry the following latex-free equipment:

- Nitrile exam gloves

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Latex Sensitivity

- Airway equipment (bag valve masks, oxygen masks, nasal cannulas, oral airways and suction catheters)
- Plastic or soft cloth tape
- Stockinet or plastic wrap to use as a barrier on medical equipment (e.g., blood pressure cuff, splints and stethoscopes)

Care should be taken to avoid storing uncovered latex gloves with other medical and/or airway equipment.

Chapter 6 - Training

Fire Equipment Driver/Operator Training

600.1 PURPOSE AND SCOPE

The purpose of this policy is to enhance the safety of members and the public by ensuring that all Bear Valley - Indian Valley Fire Protection District members, including tiller operators, who operate firefighting equipment as part of their duties, receive appropriate training.

600.1.1 DEFINITIONS

Definitions related to this policy include (Vehicle Code § 12804.11):

Firefighting equipment - A motor vehicle that meets the definition of a class A or class B vehicle as described in Vehicle Code § 12804.9(b), that is used to travel to and from the scene of an emergency situation or to transport equipment used in the control of an emergency situation, and that is owned, leased, rented by, or is under the exclusive control of this department.

Tiller operator - The driver of the rear free-axle portion of a ladder truck.

600.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that all members who operate firefighting equipment, including tiller operators, shall successfully complete driver training that meets or exceeds the requirements of the State Fire Marshal Fire Apparatus Driver/Operator 1A course (Vehicle Code § 12804.11).

600.3 PROCEDURES

All members who operate firefighting equipment, including tiller operators, shall have a valid class A, B or C California Driver License (CDL), with a firefighter endorsement. To qualify for a firefighter endorsement, the member shall complete the following (Vehicle Code § 12804.11):

- (a) Provide the California Department of Motor Vehicles (DMV) with proof of current employment as a firefighter by providing a letter from the Board of Directors or the authorized designee.
- (b) Provide the DMV with proof of successful completion of either the Fire Apparatus Driver/Operator 1A course taught by an instructor registered with the Office of the State Fire Marshal or fire department driver training that meets all of the requirements in Vehicle Code § 12804.11. This proof should be in the form of a letter from the Board of Directors or the authorized designee.
- (c) Pass the written firefighter examination that has been developed by the DMV with the cooperation of the Office of the State Fire Marshal.
- (d) Submit a report of medical examination on a form approved by the DMV.

A member is not required to obtain and maintain a firefighter endorsement if the member is operating the firefighting equipment for training purposes, during a non-emergency or while under

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the direct supervision of a member who is properly licensed to operate the equipment and is authorized by the Department to provide training (Vehicle Code § 12804.11).

600.4 TRAINING DIVISION RESPONSIBILITIES

It shall be the responsibility of the Training Division to ensure that any member required to drive fire apparatus as a part of his/her normal duties has received the mandated training. The Training Safety Officer shall coordinate with the department member appointed to monitor driver license status to ensure members have valid driver licenses with the proper endorsements, in accordance with the Driver License Requirements Policy.

Automated External Defibrillator Training

601.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the training requirements for members to maintain the current and valid certificate that is required to utilize an Automated External Defibrillator (AED) (22 CCR 100017 et seq.).

601.1.1 DEFINITIONS

Definitions related to this policy include:

Automated External Defibrillator (AED) - An external defibrillator capable of cardiac rhythm analysis that will charge and deliver a shock either automatically or by user interaction after electronically detecting and assessing ventricular fibrillation or rapid ventricular tachycardia (22 CCR 100005).

Public Safety AED Service Provider - An agency or organization that is responsible for, and is approved to operate, an AED (22 CCR 100006).

601.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that all members whose duties include the use of an AED shall receive training and recertification training to maintain the current and valid certificate that is required to utilize an AED.

601.3 GUIDELINES

AED training shall be included in the initial first aid and CPR course and comply with the training standards set forth in 22 CCR 100017.

In order to be authorized to utilize the defibrillator, an individual shall pass a written and skills examination with a pre-established standard. The skills test measures the ability to evaluate and manage the conditions presented during incidents where an AED may be used.

All AED training provided by the Department shall be approved and monitored by the District EMS authority, which shall also approve any written and skills examinations required for course completion. It shall also approve AED instructors and designate Public Safety AED Service Providers.

601.4 TRAINING RECORDS

The Training/Safety Division shall be responsible for maintaining records of all AED training provided to members. Records should include, but are not limited to:

- (a) The dates of the training sessions.
- (b) A list of the topics or a summary of the content of the training sessions.
- (c) The names or other identifiers and job titles of the members who received the training.
- (d) The names, certificate numbers and qualifications of the persons conducting the training.

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Automated External Defibrillator Training

The Training/Safety Division should maintain the training records in accordance with established records retention schedules.

Bloodborne Pathogen Training

602.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a state-mandated training program to ensure members have the skills and knowledge to protect themselves against occupational exposure to potentially infectious blood or bodily fluids (8 CCR 5193(g)(2)).

602.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to make members' health and safety a priority by providing initial and recurring bloodborne pathogen training. All members of the Department whose duties have a risk of occupational exposure to potentially infectious blood or bodily fluids shall receive bloodborne pathogen training (8 CCR 5193(g)(2)).

602.3 PROCEDURES

The Board of Directors will assign a person as the department's Exposure Control Officer (ECO). The ECO shall be responsible for the following:

- (a) The overall management of the bloodborne pathogen Exposure Control Plan (ECP).
- (b) Establishing written procedures and a training program related to aerosol transmissible diseases, as required by 8 CCR 5199.
- (c) Working with management to develop and administer any additional related policies and practices necessary to support the effective implementation of this plan.
- (d) Remaining current on all legal requirements concerning bloodborne pathogens and other communicable diseases, as required by 8 CCR 5193.
- (e) Acting as a liaison during Cal/OSHA inspections, conducting program audits to maintain an up-to-date ECP and ensuring exposure report forms are available and adequate for members to properly report incidents of exposure.
- (f) Maintaining an up-to-date list of personnel requiring training.
- (g) Developing and implementing a training program, maintaining class rosters and quizzes, and periodically reviewing and updating the training program.
- (h) Reviewing and updating the ECP annually (on or before January 1 of each year).

Department officers are responsible for exposure control in their respective areas. They shall work directly with the ECO and any affected members to ensure that the proper exposure control procedures are followed.

602.4 TRAINING REQUIREMENTS

Any member whose duties place him/her at risk for exposure to bloodborne pathogens shall receive department-provided, no-cost training during working hours that shall include all of the state requirements (8 CCR 5193).

Bloodborne Pathogen Training

602.5 TRAINING RECORDS

The Training/Safety Division shall be responsible for maintaining records of all bloodborne pathogen training provided to members. Records should include, but are not limited to, the following:

- (a) The dates of the training sessions
- (b) A list of the topics or a summary of the content of the training sessions
- (c) The names or other identifier and job title of the members who received the training
- (d) The names, certificate number and qualifications of persons conducting the training

The Training/Safety Division should maintain the training records in accordance with established records retention schedules.

CPR Training

603.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a training program to ensure department members have the skills and knowledge to perform CPR when necessary (Health and Safety Code § 1797.182).

603.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that all firefighters, except those whose duties are primarily clerical or administrative, shall be trained to administer first aid and CPR as soon as practicable after hire but in all cases within the first year of employment. Recurrent CPR training shall occur at least once every three years (Health and Safety Code § 1797.182).

603.3 TRAINING REQUIREMENTS

First aid and CPR training shall be provided to firefighters by the Department at no cost to the member. The first aid and CPR training curriculum shall meet the standards prescribed by the county Emergency Medical Services (EMS) authority. The EMS authority may designate a public agency or private non-profit agency to provide training that meets the standards. Examples of such agencies include, but are not limited to, the American Red Cross and the American Heart Association (Health and Safety Code § 1797.182).

603.4 TRAINING RECORDS

The Training/Safety Division shall be responsible for maintaining records of all CPR training provided to members. Records should include, but are not limited to, the following:

- (a) The dates of the training sessions
- (b) A list of topics or a summary of the content of the training sessions
- (c) The names or other identifier and job title of the members who received the training
- (d) The names, certificate number and qualifications of persons conducting the training
- (e) The name of the CPR program or nationally recognized authority that provided the curriculum
- (f) Copies of the certification cards issued to members upon completion of the CPR training

The Training/Safety Division should maintain the training records in accordance with established records retention schedules.

Emergency Action Plan and Fire Prevention Plan Training

604.1 PURPOSE AND SCOPE

The purpose of this policy is to establish training in support of the Bear Valley - Indian Valley Fire Protection District Emergency Action Plan (EAP) and Fire Prevention Plan (FPP) in a manner consistent with California regulations for all Bear Valley - Indian Valley Fire Protection District facilities (8 CCR 3220; 8 CCR 3221).

604.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to provide training to all members regarding the EAP and FPP.

604.3 TRAINING GUIDELINES

The EAP and FPP training shall include, but is not limited to (8 CCR 3220; 8 CCR 3221):

- (a) A review of the department's EAP and FPP including any information specific to each member's workplace or assignment.
- (b) Information on where written copies of the EAP and FPP are located and how members may review the plans.
- (c) The Department shall designate and train a sufficient number of people to assist in the safe and orderly emergency evacuation of members and visitors in the event of an emergency.
- (d) The Department shall advise each member of his/her responsibility under the plan at the following times:
 - 1. Initially when the plans are developed
 - 2. Whenever the member's responsibilities or designated actions under the plans change
 - 3. Whenever the plans are changed
- (e) The Department shall review with each member upon initial assignment those parts of the EAP and FPP which the member must know to protect the member in the event of an emergency.

604.4 TRAINING SAFETY OFFICER RESPONSIBILITIES

The Training/Safety Division shall be responsible for developing and scheduling the department's EAP and FPP training. The Training Safety Officer shall maintain records of all EAP and FPP training provided to members. Records should include, but are not limited to:

- (a) The dates of the training sessions.
- (b) A list of the topics or a summary of the content of the training sessions.
- (c) The names or other identifiers and job titles of the members who received the training.

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- (d) The names, certificate numbers and qualifications of persons conducting the training.

The Training/Safety Division should maintain the training records in accordance with established records retention schedules.

Hazard Communication Program Training

605.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the required training regarding the department's hazard communication program. This policy identifies who must receive training, training content requirements, when additional or supplemental training is required and what record keeping is necessary to comply with state law (8 CCR 5194).

605.1.1 DEFINITIONS

Definitions related to this policy include:

Hazardous substance - Any substance that is a physical hazard or a health hazard or is included in the list of hazardous substances (Labor Code § 6382).

Health hazard - Any substance for which there is statistically significant evidence that acute or chronic health effects may occur in exposed employees. Such effects include acute toxicity, skin corrosion or irritation, serious eye damage or eye irritation, respiratory or skin sensitization, germ cell mutagenicity, carcinogenicity, reproductive toxicity, specific target organ toxicity, aspiration toxicity or simple asphyxiant (8 CCR 5192).

605.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District, in accordance with the Hazard Communication Policy, to provide members with effective information and training on hazardous substances in their work area at the time of their initial assignment and whenever a new hazard is introduced (8 CCR 5194).

605.3 TRAINING REQUIREMENTS

The initial hazard communication program training shall include, but is not limited to, the following topics (8 CCR 5194):

- (a) Members shall be informed of any operations in their work area where hazardous substances are present.
- (b) Members shall be informed of the location and availability of information regarding any hazardous substances and Safety Data Sheets (SDS), as required by the state.
- (c) Members shall be trained in the methods and observations that may be used to detect the presence or release of a hazardous substance in the work area.
- (d) Members shall be trained in the physical and health hazards of the substances in the work area and the measures they can take to protect themselves, including specific procedures the Department has implemented to protect them from exposure to hazardous substances. These include appropriate work practices, emergency procedures and personal protective equipment (PPE).

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- (e) Members shall be provided with an explanation of the labeling system and the SDS, and how they can obtain and use the appropriate hazard information.
- (f) The Department shall inform its members of the following rights:
 - 1. Members have the right to personally receive information regarding hazardous substances to which they may be exposed.
 - 2. Members have the right for their physician or collective bargaining agent to receive information regarding hazardous substances to which the member may be exposed.
 - 3. Members are protected against discharge or other discrimination that may result from the exercise of their rights, as afforded pursuant to the provisions of the Hazardous Substances Information and Training Act.
- (g) Whenever the Department receives a new or revised SDS and the new information indicates significantly increased risks or identifies different protective measures than those stated on the previously provided sheet, such information shall be provided to members in a timely manner, not to exceed 30 days after receipt by the Department.

605.4 TRAINING RECORDS

The Training/Safety Division shall be responsible for maintaining records of all hazard communications program training provided to members. Records should include, but are not limited to:

- (a) The dates of the training sessions.
- (b) A list of the topics or a summary of the content of the training sessions.
- (c) The names or other identifiers and job titles of the members who received the training.
- (d) The names, certificate numbers and qualifications of persons conducting the training.

The Training/Safety Division should maintain the training records in accordance with established records retention schedules.

Hazardous Materials (HAZMAT) Training

606.1 PURPOSE AND SCOPE

The purpose of this policy is to establish training that will meet state requirements regarding the Bear Valley - Indian Valley Fire Protection District Hazardous Materials (HAZMAT) response program. This policy identifies the level of training members must receive, when additional or supplemental training is required, and the training records required to meet the provisions of the code (8 CCR 5192).

606.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that any member whose duties include a role in the HAZMAT response program shall receive training to the level in which they are expected to operate in a HAZMAT environment or at an incident involving hazardous materials. Members shall be trained by the Department to the California Hazardous Substances Incident Response Training and Education Program standards (Government Code § 8574.19 et seq.).

606.3 TRAINING REQUIREMENTS

HAZMAT training shall be based on the duties and functions to be performed by each member. The skill and knowledge levels required for all new members shall be conveyed to them through training before they are permitted to take part in actual emergency operations on an incident. Any member who participates or is expected to participate in an emergency response involving hazardous materials shall objectively demonstrate competency in the following areas (8 CCR 5192(q)(6)).

The California Office of Emergency Services manages the standardized statewide HAZMAT training at the California Specialized Training Institute (CSTI) (Government Code § 8574.20).

606.3.1 FIRST RESPONDER AWARENESS

First responder awareness level training should be provided to all individuals who are likely to witness or discover a hazardous substance release and who have been trained to initiate an emergency response sequence by notifying the proper authorities of the release. A member with this level of training should take no further action beyond notifying the authorities of the release.

606.3.2 HAZMAT FIRST RESPONDER OPERATIONS (FRO)

First responder operations (FRO) level training should be provided for individuals who respond to releases or potential releases of hazardous substances as part of the initial response to the site for the purpose of protecting nearby persons, property, or the environment from the effects of the release. Members with this level of training can respond in a defensive fashion without actually trying to stop the release. Their function is to contain the release from a safe distance, keep it from spreading, and prevent exposures.

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Hazardous Materials (HAZMAT) Training

606.3.3 HAZMAT TECHNICIAN

HAZMAT technician level training should be provided to all individuals who respond to releases or potential releases of hazardous substances for the purpose of stopping the release. A member with this level of training would assume a more aggressive role by approaching the point of release in order to plug, patch, or otherwise stop the release of a hazardous substance.

606.3.4 HAZMAT SPECIALIST

HAZMAT specialist level training should be provided to all individuals who respond with, and provide support to, HAZMAT technicians. A member with this level of training has a more directed or specific knowledge of the various hazardous substances requiring containment. A HAZMAT specialist may also act as a site liaison to government authorities regarding site activities.

606.3.5 HAZMAT INCIDENT COMMANDER

HAZMAT Incident Commander level training should be provided to all individuals who could be responsible for all decisions relating to the management of a HAZMAT incident.

606.3.6 TREATMENT, STORAGE, AND DISPOSAL (TSD) FACILITIES

Employers conducting operations at treatment, storage, and disposal (TSD) facilities shall provide and implement the following training programs (8 CCR 5192(p)):

- (a) **New employees** - The employer shall develop and implement a training program, which is part of the employer's safety and health program, for employees exposed to health hazards or hazardous substances at TSD operations to enable employees to perform their assigned duties and functions in a safe and healthful manner so as not to endanger themselves or other employees. The initial training shall be for 24 hours, and refresher training shall be for eight hours annually. Employees who have received the initial training required by this subsection shall be given a written certificate attesting that they have successfully completed the necessary training.
- (b) **Current employees** - Employers who can show by an employee's previous work experience and/or training that the employee has had training equivalent to the initial training required by 8 CCR 5192(p)(7)(B) shall be considered to have met the initial training requirements of 8 CCR 5192(p)(7)(B) with respect to that employee. Equivalent training includes the training that existing employees may have already received from actual site work experience. Current employees shall receive eight hours of refresher training annually.
- (c) **Trainers** - Trainers who teach initial training shall have satisfactorily completed a training course for teaching the subjects they are expected to teach, or they shall have the academic credentials and instruction experience necessary to demonstrate a good command of the subject matter of the courses and competent instructional skills.

606.3.7 HAZMAT EMERGENCY RESPONSE PLAN

An emergency response plan shall be developed and implemented to handle anticipated emergencies prior to the commencement of emergency response operations. The plan shall be in writing and available for inspection and copying by employees, their representatives, and division personnel. Employers who will evacuate their employees from the danger area when

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an emergency occurs, and who do not permit any of their employees to assist in handling the emergency, are exempt from the requirements of 8 CCR 5192(q) if they provide an emergency action plan in accordance with 8 CCR 3220 (8 CCR 5192(q)(1)).

606.3.8 HAZMAT ANNUAL REFRESHER TRAINING

Members who receive an initial level of training in accordance with this policy shall receive annual refresher training of sufficient content and duration to maintain their competencies, or shall demonstrate competency in those areas at least yearly.

606.4 BASELINE PHYSICAL FOR HAZMAT TEAM MEMBERS

The federal Occupational Safety and Health Administration (OSHA) requires medical examinations and consultations be made available to members of HAZMAT teams within prescribed time periods. All members of a designated HAZMAT team shall receive medical examinations and consultations on the following schedules (29 CFR 1910.120(b)(1)(ii)(E), 8 CCR 5192(q)(9)(A)) and 8 CCR 5192(f) et seq.):

- (a) Prior to assignment
- (b) At least once every 12 months
- (c) At termination of employment or reassignment to duties not covered by this policy
- (d) As soon as possible upon notification that the employee has developed signs or symptoms indicating possible overexposure to hazardous substances or health hazards
- (e) As soon as possible upon notification that the employee has been injured or exposed above the permissible exposure limits or published exposure levels in an emergency situation.

The frequency of a member's examinations may be increased if the examining physician determines that it is medically necessary. Medical examinations should include medical and work history. Emphasis should be placed on any symptoms related to the handling of, or exposure to, hazardous substances or health hazards. Medical examinations should address fitness for duty, especially as it pertains to wearing personal protective equipment under conditions that may be encountered on duty. The content of medical examinations should be made available to the employee as determined by the attending physician.

606.4.1 HAZMAT MEDICAL SURVEILLANCE FOLLOWING EXPOSURE

Members of an organized and designated HAZMAT team and HAZMAT specialists shall receive a baseline physical examination and be provided with medical surveillance (8 CCR 5192(q)(9)(A) and 8 CCR 5192(f) et seq.).

Any emergency response member who exhibits signs or symptoms which may have resulted from exposure to hazardous substances during the course of an emergency incident, either immediately or subsequently, shall be provided with medical consultation (8 CCR 5192 (q)(9)(B)).

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Hazardous Materials (HAZMAT) Training

Accurate records of the medical surveillance required by this policy shall be retained for the duration of the employee's employment plus 30 years. This record shall contain at least the following information (8 CCR 3204(d) et seq.):

- (a) The name of the employee.
- (b) The physician's written opinions, recommended limitations, and results of examinations and tests.
- (c) Any employee medical complaints related to exposure to hazardous substances.
- (d) A copy of the information provided to the physician by the department, with the exception of department policies and OSHA standards.

606.5 TRAINING RECORDS

The Training/Safety Division shall be responsible for maintaining records of all HAZMAT training provided to members. Records should include but are not limited to:

- (a) Dates of the training sessions
- (b) A list of the topics or a summary of the content of the training sessions
 - 1. Specific content required by regulation covered
 - 2. Manufacturer's recommendations (as applicable)
 - 3. Manufacturer's operations/service/maintenance manuals (as applicable)
- (c) The names or other identifiers and job titles of all members who received the training.
- (d) The names, certificate numbers, and qualifications of persons conducting the training
- (e) Demonstration that learning took place (e.g., evaluation, quiz, test)

The Training/Safety Division should maintain the training records in accordance with established records retention schedules.

Hearing Conservation and Noise Control Training

607.1 PURPOSE AND SCOPE

The purpose of this policy is to establish and maintain Hearing Conservation and Noise Control Training for members exposed to noise above levels predetermined by state code (8 CCR 5097).

607.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to promote member health and safety by establishing Hearing Conservation and Noise Control Training and requiring member participation. The Hearing Conservation Program shall include parameters for permissible noise exposure limits, monitoring guidelines, audiometric testing procedures, hearing protection equipment and training, and documentation of the department's efforts (8 CCR 5097).

607.3 PROCEDURES

The following procedures shall comprise the Hearing Conservation and Noise Control Training for the Bear Valley - Indian Valley Fire Protection District (8 CCR 5097). The Training Safety Officer shall be responsible for ensuring that the appropriate members are enrolled in the training. Fire captains shall be responsible for ensuring that members attend scheduled testing and training.

607.3.1 NOISE EXPOSURE LIMITS

The Bear Valley - Indian Valley Fire Protection District shall ensure that each member is provided with protection against the effects of noise exposure any time the sound levels exceed those shown in 8 CCR 5096(b) Permissible Noise Exposure [Table N-1](#) when measured on the A-scale of a standard sound level meter at slow response. Feasible engineering or administrative controls shall be utilized for known sound levels exceeding those of the table (8 CCR 5096).

607.3.2 HEARING PROTECTORS

If control measures fail to reduce sound levels to an acceptable level for the amount of exposure, the Department shall provide personal protective equipment to all members subject to the noise exposure and require that it be used. Employees shall have the opportunity to select hearing protectors from a variety provided by the Department (8 CCR 5098).

The Department shall ensure proper initial fit and correct use of hearing protectors and shall provide training in the use and care of the equipment.

607.3.3 HEARING PROTECTOR ATTENUATION

The Bear Valley - Indian Valley Fire Protection District shall evaluate hearing protector attenuation for the specific noise environments in which the protector will be used. Evaluation methods shall be consistent with those described in 8 CCR 5098 [Appendix E](#). The Department will provide more effective hearing protectors where necessary (8 CCR 5098(b)).

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Hearing Conservation and Noise Control Training

607.3.4 MONITORING

The Bear Valley - Indian Valley Fire Protection District shall monitor noise levels in the workplace by either area monitoring or personal monitoring that is representative of a member's exposure, to enable the proper selection of hearing protectors (8 CCR 5097(b)).

607.3.5 AUDIOMETRIC TESTING PROGRAM

The Bear Valley - Indian Valley Fire Protection District shall provide audiometric testing and evaluation to all members who are exposed to noise levels in excess of those permissible pursuant to 8 CCR 5096(b) Permissible Noise Exposure Table N-1. The Department shall provide baseline audiometric testing (preceded by at least 14 hours without exposure to workplace noise) within six months of the first noise exposure, and annually thereafter (8 CCR 5097(c)).

Each member's annual audiogram shall be compared to that member's baseline audiogram to determine if the audiogram is valid and if a standard threshold shift has occurred (8 CCR 5097(d)).

All audiometric testing shall be conducted by licensed or certified medical professionals in compliance with state testing requirements (8 CCR 5097(c)(3) and 8 CCR 5097(e)).

607.4 TRAINING RECORDS

The Training/Safety Division shall be responsible for maintaining records of all Hearing Conservation Program training provided to members. Records should include, but are not limited to, the following:

- (a) The dates of the training sessions
- (b) A list of topics or a summary of the content of the training sessions
- (c) The name or other identifier and job title of the members who received the training
- (d) The names, certificate number and qualifications of persons conducting the training
- (e) Copies of baseline and annual audiometric testing and evaluation documents

The Training/Safety Division shall maintain the training records in accordance with established records retention schedules.

Heat Illness Prevention Training

608.1 PURPOSE AND SCOPE

The purpose of this policy is to establish and maintain a training program that complies with state mandates for the prevention of heat illness in members who are exposed to high-heat conditions. This policy identifies which members must receive training, the required curriculum, supervisory training and responsibilities and training record documentation (8 CCR 3395).

608.1.1 DEFINITIONS

Definitions related to this policy include (8 CCR 3395(b)):

Acclimatization - The temporary adaptation of the body to work in the heat. Acclimatization peaks in most people within four to 14 days of working at least two hours per day in the heat.

Heat illness - A serious medical condition resulting from the body's inability to cope with a particular heat load and includes heat cramps, heat exhaustion, heat syncope (temporary loss of consciousness usually related to insufficient blood flow to the brain) and heat stroke.

608.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to promote member health and safety by establishing a heat illness prevention training program and requiring member participation. In addition to the safety precautions described in the Heat Illness Prevention Program Policy, the Department shall ensure that effective training is provided to members before the member begins work that should reasonably be anticipated to result in heat illness (8 CCR 3395(h)).

608.3 TRAINING REQUIREMENTS

Training shall be provided to all members whose duties may include exposure to high-heat conditions and shall include (8 CCR 3395(f); 8 CCR 3395(h)):

- (a) The environmental and personal risk factors for heat illness.
- (b) The department's procedures for complying with the state requirements for the prevention of heat illness.
- (c) The importance of frequent consumption of small quantities of water and electrolyte replacement fluid, up to 4 cups per hour, when the work environment is hot and members are likely to be sweating more than usual in the performance of their duties.
- (d) The concept and importance of acclimatization.
- (e) The different types of heat illness, the common signs and symptoms of heat illness and the possibility that heat illness may progress quickly from mild to serious or life-threatening.
- (f) The importance of members immediately reporting to a supervisor, directly or through others, symptoms or signs of heat illness in themselves or in coworkers.

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Heat Illness Prevention Training

- (g) The department's procedures for responding to symptoms of possible heat illness, including how first aid or Emergency Medical Services (EMS) will be provided if necessary.
- (h) The department's procedures for contacting EMS and, if necessary, for transporting members to a place where they can be reached by an EMS provider.
- (i) The department's procedures for ensuring that, in the event of an emergency, clear and precise directions to the work site can and will be provided to other emergency responders.
- (j) The member's right to follow the department's procedures without retaliation.

608.4 SUPERVISOR TRAINING REQUIREMENTS AND RESPONSIBILITIES

Supervisors shall be provided additional training on the following topics prior to supervising members who will be working in the heat (8 CCR 3395(h)(2)):

- (a) The procedures to follow to implement the applicable provisions in this policy
- (b) The procedures to follow when a member exhibits symptoms consistent with possible heat illness, including emergency response procedures
- (c) How to monitor weather reports and respond to hot weather advisories

Supervisors shall be responsible for observing members for alertness and signs or symptoms of heat illness and reminding members throughout the work shift to drink plenty of water. New members should be closely supervised by a supervisor or the authorized designee for the first 14 days of work (8 CCR 3395(g)).

608.5 TRAINING RECORDS

The Training/Safety Division shall be responsible for maintaining records of all heat illness prevention training provided to members. Records should include, but are not limited to:

- (a) The dates of the training sessions.
- (b) A list of the topics or a summary of the content of the training sessions.
- (c) The names or other identifiers and job titles of all members who received the training.
- (d) The names, certificate numbers and qualifications of persons conducting the training.

The Training/Safety Division should maintain the training records in accordance with established records retention schedules.

Health Insurance Portability and Accountability Act (HIPAA) Training

609.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure all members receive proper training in recognizing and handling Protected Health Information (PHI), as set forth in the Health Insurance Portability and Accountability Act (HIPAA) and its implementing regulations (42 USC § 201 and 45 CFR 164.530).

609.1.1 DEFINITIONS

Definitions related to this policy include:

Health information - Information, whether oral or recorded in any form or medium, that is created or received by a health care provider, health plan or employer and relates to a person's past, present or future physical or mental health or condition, or past, present or future payment for the provision of health care (45 CFR 160.103).

Individually identifiable health information - Health information, including demographic information, created or received by a covered entity or employer that relates an individual's past, present or future physical or mental health or condition, the provision of health care to an individual, or the past, present or future payment for the provision of health care to an individual, that can either identify the individual or provide a reasonable basis to believe the information can be used to identify the individual (45 CFR 160).

Protected Health Information (PHI) - Individually identifiable health information that is created or received by a covered entity or employer. Information is protected whether it is in writing, in an electronic medium or is communicated orally (45 CFR 160).

609.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to provide HIPAA privacy training to all members as necessary and appropriate for their duties, and to apply appropriate sanctions against members who violate the privacy policies and procedures (45 CFR 164.530(b) and 45 CFR 164.530(e)).

It is also the policy of the Department that no member shall be retaliated or discriminated against for filing a complaint about violations of the HIPAA regulations (45 CFR 164.530(g)).

609.3 TRAINING REQUIREMENTS

To ensure confidentiality and compliance with the HIPAA regulations, the Department shall provide training to all members likely to have access to PHI. The training shall be completed for all newly hired members prior to them being allowed access to PHI. Training for all current members shall also occur any time material changes are made to the department's privacy policies and procedures.

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Health Insurance Portability and Accountability Act (HIPAA) Training

The Training Safety Officer shall be responsible for establishing a periodic schedule for retraining and a method of ensuring that all members acknowledge receipt of all HIPAA training (45 CFR 164.530(b)).

Training should include a review of the:

- (a) Department's statutory obligations imposed by HIPAA.
- (b) Patient Medical Record Security and Privacy Policy, including a thorough treatment of the security procedures the Department uses to protect written and electronic health information.
- (c) Methods and procedures to be used during the collection of PHI.
- (d) HIPAA-imposed statutory limitations on the dissemination of PHI to the family members of patients.
- (e) Proper procedures when responding to media requests for information regarding incidents at which the Department provided medical services.
- (f) Procedures for the secure destruction of written instruments containing PHI, including handwritten field notes, pre-hospital care records or other documents containing PHI.
- (g) Approved method for transferring PHI to receiving hospitals or other receiving medical facilities.
- (h) Photography and Electronic Imaging Policy as it pertains to PHI.
- (i) Department's procedures for protecting employee health information.

609.4 TRAINING RECORDS

The Training/Safety Division shall be responsible for maintaining the records of all HIPAA-related training for all members for six years (45 CFR 164.530(j)).

National Incident Management System (NIMS) Training

610.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the training requirements for members to successfully operate under the Incident Command System (ICS) Policy and the National Incident Management System (NIMS).

610.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to adhere to the ICS in order to effectively manage personnel and resources when responding to a wide range of emergency incidents. All Bear Valley - Indian Valley Fire Protection District members whose job duties may include a role in emergency management or incident response shall be appropriately trained to the NIMS standards to improve all-hazards capabilities nationwide.

610.3 PROCEDURE

All department personnel with job duties that include a direct role in emergency management or incident response must complete the Federal Emergency Management Agency (FEMA) NIMS IS-700 course.

Additional training is available on an as-needed basis, depending on the regional role of the Department or the role of a member within the Department as follows:

- (a) Entry Level:
 - 1. FEMA IS-700: NIMS, An Introduction
 - 2. ICS-100: Introduction to ICS or equivalent
- (b) First Line, Single Resource, Field Supervisors:
 - 1. IS-700, ICS-100, and ICS-200: Basic ICS or its equivalent
- (c) Middle Management: Strike Team Leaders, Division Supervisors, Emergency Operations Center (EOC) Staff:
 - 1. IS-700, IS-800: National Response Framework, an Introduction; ICS-100, ICS-200, and ICS-300 Intermediate ICS for Expanding Incidents
- (d) Command and General Staff; Area, Emergency, and EOC Managers:
 - 1. IS-700, IS-800, ICS-100, ICS-200, ICS-300, and ICS-400: Advanced ICS

Refresher training will be offered on a regular basis to ensure that ICS knowledge and skills are maintained, especially for personnel who are not regularly involved in complex multi-jurisdictional incidents nationwide (i.e., incidents that require responders to hold credentials under the National Emergency Responder Credentialing System).

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National Incident Management System (NIMS) Training

610.4 TRAINING RECORDS

The Training/Safety Division shall be responsible for maintaining records of all NIMS training provided to members. Records should include but are not limited to:

- (a) The dates of the training sessions
- (b) A list of the topics or a summary of the content of the training sessions
- (c) The name or other identifier and job title of the members who received the training
- (d) The names, certificate number, and qualifications of persons conducting the training

The Training/Safety Division should maintain the training records in accordance with established records retention schedules.

Repetitive Motion Injuries and Ergonomics Training

611.1 PURPOSE AND SCOPE

The purpose of this policy is to minimize the occurrence of work-related repetitive motion injuries (RMI) through work site evaluation, control of exposures, and training of members whose assigned duties have a risk of RMIs (8 CCR 5110(b)).

611.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that members shall be provided initial training any time their assigned duties have a risk of RMIs, as duties change, and when members encounter new exposures to the risk of RMIs (8 CCR 5110(b)(1)).

The Department shall correct any exposure that has caused an RMI in a timely manner. If the exposure cannot be corrected, the Department shall take steps to minimize member exposure to the degree feasible, considering engineering controls such as workstation redesign, adjustable fixtures, or tool redesign and administrative controls such as job rotation, work pacing, or work breaks (8 CCR 5110 (b)(2)).

611.3 TRAINING REQUIREMENTS

- (a) Members shall be provided training that includes but is not limited to an explanation of the following (8 CCR 5110(b)(3)):
 - 1. The department's program to minimize RMIs
 - 2. The exposures that have been associated with RMIs
 - 3. The symptoms and consequences of injuries caused by repetitive motion
 - 4. The importance of reporting symptoms and injuries to the Department
 - 5. Methods used by the Department to minimize RMIs
- (b) Refresher training should be provided on an annual basis (8 CCR 5110).
- (c) Members shall receive RMI prevention training prior to performing duties that are known to be associated with the following circumstances:
 - 1. Work-related causation - RMIs have been predominantly caused (e.g., 50 percent or more) by a repetitive job, process, or operation.
 - 2. Relationship between RMIs at the workplace - Members incurring the RMIs were performing a job, process, or operation of identical work activity. Identical work activity means that the members were performing the same repetitive motion task (e.g., word processing, assembly, loading).
 - 3. The RMIs were musculoskeletal injuries that a licensed physician objectively identified and diagnosed.

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Repetitive Motion Injuries and Ergonomics Training

4. The RMIs were reported by members to the Department in the previous 12 months.

611.4 ADDITIONAL TRAINING AND INFORMATION

Additional training and information should be provided to members in the following circumstances:

- (a) When the work site evaluation is updated.
- (b) When exposure control measures are updated.
- (c) When the Department becomes aware of new work-related exposures associated with RMIs.

At a minimum, the Department should provide refresher training on an annual basis.

611.5 TRAINING RECORDS

The Training/Safety Division shall be responsible for maintaining records of all RMI prevention training provided to members. Records should include, but are not limited to, the following:

- (a) The dates of the training sessions
- (b) A list of the topics or a summary of the content of the training sessions
- (c) The name or other identifier and job title of the members who received the training
- (d) The names, certificate number and qualifications of the persons conducting the training

The Training/Safety Division should maintain the training records in accordance with established records retention schedules.

Respiratory Protection Training

612.1 PURPOSE AND SCOPE

The purpose of this policy is to protect the health of members through the use of a respirator to avoid breathing air that is contaminated with harmful dusts, fogs, fumes, mists, gases, smokes, sprays and vapors.

In the event that engineering control measures cannot effectively eliminate exposure risks, suitable respirators and appropriate training shall be applied to hazardous conditions in accordance with the Respiratory Protection Program Policy.

This policy identifies which members must receive respiratory protection training, the minimum training curriculum and the requirements for recurrent training (8 CCR 5144(a)).

612.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to protect the health of members by providing respiratory protection training (8 CCR 5144 (k)).

612.3 PROCEDURE

The Department shall provide effective respiratory protection training to all members who are required or expected to utilize respirators. For the purposes of this policy, respirators will include any tool, implement or device that filters ambient air, delivers compressed air, or recirculates filtered or treated air for inhalation by humans. Such devices include, but are not limited to, self-contained breathing apparatus (SCBA), supplied-air respirators, canister or cartridge-type breathing masks, biohazard masks, over-the face dust or particle masks, rebreather units or any type of gas mask.

Respiratory protection training shall include, but not be limited to, the following (8 CCR 5144(k)):

- (a) The Department shall ensure that each member can demonstrate knowledge of:
 - 1. Why the respirator is necessary and how improper fit, usage or maintenance can compromise its effectiveness.
 - 2. The limitations and capabilities of the respirator.
 - 3. How to use the respirator effectively in emergency situations, including situations in which the respirator malfunctions.
 - 4. How to inspect, put on, remove, use and check the seals of the respirator.
 - 5. The procedures for maintenance and storage of the respirator.
 - 6. How to recognize the medical signs and symptoms that may limit or prevent the effective use of a respirator.
 - 7. The general requirements of this policy.
- (b) The training shall be conducted in a manner that is easily understood by the member.

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Respiratory Protection Training

- (c) The Department shall provide the training prior to requiring the member to use a respirator in the workplace.
- (d) Retraining shall be administered annually and when the following situations occur:
 - 1. Changes in the workplace or the type of respirator render previous training obsolete
 - 2. Inadequacies in the member's knowledge or use of the respirator indicate that the member has not retained the requisite understanding or skill
 - 3. Any other situation arising in which retraining appears necessary to ensure safe respirator use

612.4 TRAINING RECORDS

The Training/Safety Division shall be responsible for maintaining records of all respiratory protection training that is provided to members. At a minimum, the Department should document the following:

- (a) The dates of the training sessions
- (b) A list of the topics or a summary of the content of the training sessions
- (c) The name or other identifier and job title of the members who received the training
- (d) The names, certificate number and qualifications of persons conducting the training
- (e) Documentation of each member's demonstrated performance in meeting the standards detailed in this policy (8 CCR 5144(m))

The Training/Safety Division should maintain the training records in accordance with established records retention schedules.

612.5 APPENDIX D ADVISORY

Basic advisory information on respirators shall be provided by the Department in any written or oral format to any member who chooses to wear a respirator, even if the use of the respirator is not mandated by the department or law (8 CCR 5144(k)(6)). The appendix D advisory content is shown below:

612.5.1 8 CCR 5144 APPENDIX D CONTENT

Respirators are an effective method of protection against designated hazards when properly selected and worn. Respirator use is encouraged even when exposures are below the exposure limit in order to provide an additional level of comfort and protection. However, if a respirator is used improperly or not kept clean, the respirator itself can become a hazard to the worker.

Members may wear respirators to avoid exposures to hazards, even if the amount of hazardous substance does not exceed the limits set by Cal/OSHA. If the Department provides respirators for voluntary use or if a privately owned respirator is available, certain precautions should be taken to ensure that the respirator itself does not present a hazard.

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Respiratory Protection Training

Members should:

- Read and heed all instructions provided by the manufacturer on use, maintenance, cleaning and care, and warnings regarding the respirator's limitations.
- Choose respirators certified for use to protect against the contaminant of concern. The National Institute for Occupational Safety and Health (NIOSH) certifies respirators. A label or statement of certification should appear on the respirator or respirator packaging. The certification will define what the respirator is designed for and the protection level to be expected.
- Not wear a respirator into areas containing contaminants for which the respirator is not designated to protect against. For example, a respirator designed to filter dust particles will not protect against gases, vapors or very small solid particles of fumes or smoke.
- Keep track of the respirator so it is not mistakenly shared.

Wildland Fire Shelter Deployment Training

613.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure members who may participate in wildland firefighting, who perform in-field investigations of wildland fires or provide in-field support services to wildland firefighting operations have thorough and recurrent training on the quick and proper deployment of a wildland fire shelter.

613.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to provide thorough and recurrent wildland fire shelter deployment training to all department members who may be exposed to wildland fire conditions.

The highest priority for a firefighter in wildland fire conditions is to stay out of situations that can lead to entrapment. A fire shelter does not guarantee safety. It is a last resort in emergency conditions when there are no other options.

613.3 PROCEDURE

The Training/Safety Division shall be responsible for scheduling wildland fire shelter deployment training annually, prior to the anticipated beginning of the main wildland fire season. All new members shall receive wildland fire shelter deployment training prior to being assigned to field operations.

Annual fire shelter deployment training shall include, but not be limited to, the following:

- (a) A review of the National Wildfire Coordinating Group (NWCG) pamphlet entitled National Fire Equipment System (NFES) #2710 "[The New Generation Fire Shelter](#)"
- (b) Either instructor-based fire shelter orientation or viewing of the NWCG Fire Shelter Training video NFES #2711 or #2712
- (c) Performance of practice fire shelter deployment using NWCG recommended tasks and scenarios that include:
 1. Standard fire shelter deployment, including clearing a 4-foot by 8-foot site in preparation for deploying the shelter.
 2. Proper use of fire shelter shake handles. Members should practice locating and grasping the shake handles correctly to ensure that the shelter opens quickly, allowing the user to get inside the tent shelter quickly.
 3. Deployment of the shelter while lying on the ground, including practical exercises in deploying the shelter from the ground.
 4. Practical exercise of discarding extra gear and removing the shelter while escaping and utilizing the partially unfolded shelter as a heat shield while escaping.
 5. Practical exercise deploying the fire shelter in a strong wind (utilizing natural or machine-created wind).

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Wildland Fire Shelter Deployment Training

6. Practical exercise lying inside the shelter for a prolonged time.

Fire shelter deployment training should not be conducted in a live fire situation.

613.4 TRAINING RECORDS

The Training/Safety Division shall be responsible for maintaining records of all wildland fire shelter deployment training that is provided to members. Training documentation should include:

- (a) The dates of the training sessions.
- (b) A list of topics or a summary of the content of the training sessions.
- (c) The name or other identifier and job title of the members who received the training.
- (d) The names, certificate number and qualifications of persons conducting the training.
- (e) Documentation of each member's demonstrated performance in meeting the standards detailed in this policy.

The Training/Safety Division should maintain training records in accordance with established records retention schedules.

Training Records

614.1 PURPOSE AND SCOPE

The purpose of this policy is to establish procedures for accumulating and maintaining records of all training provided by the Department and all training received by individual department members. This policy shall apply to all training received but particularly training that is mandated by an external force such as a law, statute or regulation.

614.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to maintain comprehensive records of all training provided by the Department, and all training received by department members. The Training Safety Officer or the authorized designee shall be responsible for creating and maintaining training records. All members of the Department are responsible for assisting the Training Safety Officer in documenting training activities by signing course rosters, submitting certificates of completion from outside training or providing other means of training documentation.

Training records may be documented utilizing either hard copies stored in a traditional filing system or via electronic files. All electronic training records will be redundantly stored using department-approved secure electronic file storage systems.

614.3 MASTER TRAINING CALENDAR

The training division will create and maintain an annual master training calendar for the Department. This calendar will document all department-provided, regularly scheduled training opportunities. The master training calendar should be a living document, reflecting any changes made in the actual training schedule or actual training opportunities provided throughout the year. The training opportunities in the master training calendar should include, but are not limited to:

- (a) All federal or state mandated training. Examples include courses that address sexual harassment prevention, heat illness prevention, medical records privacy, personal protective equipment, bloodborne pathogens, CPR and hearing protection.
- (b) All federal or state mandated training drills, manipulative drills, skills or equipment testing, including annual audiograms and fit testing for Occupational Safety and Health Administration/National Institute for Occupational Safety and Health (OSHA/NIOSH)-approved masks and respirators.
- (c) All California Incident Command Certification System (CICCS) training provided by the Department.
- (d) Specific training and certification for "all-hazards" positions, based on the Incident Command System (ICS), the National Incident Management System (NIMS) or Standardized Emergency Management System (SEMS) courses.
- (e) All NIMS, ICS, SEMS and NIMS-compliant incident management system courses.
- (f) All Emergency Medical Services (EMS) pre-hospital care, continuing education courses or programs provided by the Department.

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Training Records

- (g) Any training opportunity scheduled through the Training Safety Officer and intended to be provided division-wide to each of the Divisions.
- (h) Any training opportunity utilizing instruction from outside the Department.
- (i) Any interagency cooperative training program or activity.
- (j) Any regularly scheduled skills or job performance training and testing evolutions.

Copies of each year's master training calendar will be maintained and retained in the Training Safety Officer files based on department-established records retention schedules.

614.4 DIVISION TRAINING RECORDS

The training division shall be responsible for maintaining records of all training provided to all members of the Department. All members are required to sign all documentation for each training session offered. The information in each record shall include, but is not limited to:

- (a) The course title.
- (b) An outline of the subject matter and specific details of any information mandated by federal or state code, OSHA regulation or other requirement.
- (c) The dates the course was provided to members.
- (d) The instructor names, qualifications and/or certifications.
- (e) Copies of course curriculum, course duration, information sheets or other course content provided to students.
- (f) Copies of course evaluations submitted by students.
- (g) Attendance records for each course session, including each member's name or other identifier.

614.5 INDIVIDUAL TRAINING RECORDS

The Training Safety Officer will create and maintain an individual training file for each member of the Department. The training files will be kept separate from the department's personnel files. The member training files should be used to document a member's training courses and training-related programs and activities.

The training files shall not be used to store any work-performance records, member conduct records, member disciplinary records or any other documentation that is not specifically training-related. Information entered into the member training files will be a permanent part of that record. No training information or entries will be removed from the file unless the record is found to be factually incorrect or erroneously entered into that member's training file. Each member's training file will be part of that member's permanent record of activity while employed by the Department.

When a member ends employment with the Department, that member's training file will be archived and maintained for a minimum of seven full calendar years following the member's separation from service or in accordance with the department's established records retention schedule.

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Training Records

Members of the Department shall be provided access to their individual training file upon request. A member may request to review his/her training file either verbally or in writing. The Training Safety Officer should facilitate those requests as soon as practicable but in all cases within 21 days of the member's request to review his/her file. Members may not remove any document or information from the training file without the express approval of the Training Safety Officer. Members may not add any documents or entries to their training file without the approval of the Training Safety Officer. Members shall be allowed to photocopy or otherwise reproduce images of any entries in their individual training file.

Member training files should be organized to readily allow for the retrieval of specific training subject documentation, particularly in regard to documentation of any mandated training subject compliance.

Member training files should contain documentation of all work- or job-related licensing and certification that the member earns, achieves or is awarded. Information regarding member progress toward or application for licensing and certification should also be stored in the member training files. Examples include CICCIS coursework, CICCIS position task books and certification, NIMS certifications, SEMS certifications, California State Fire Marshal certifications, California Office of Emergency Services certifications (OES) and State of California pre-hospital care provider continuing education coursework, licensing and certification records (paramedic and Emergency Medical Technician).

614.6 TRAINING RECORDS FROM PREVIOUS EMPLOYERS

Members of the Department may submit training records from previous employers to the Training Safety Officer for inclusion in their individual training file. The Training Safety Officer will evaluate any submitted training records obtained during previous employment and will add any pertinent information to the member's training file as appropriate. New members should submit to the Training Safety Officer copies of any licenses, certifications and coursework that are pertinent to their position with the Bear Valley - Indian Valley Fire Protection District.

The Training Safety Officer staff may request that new members obtain and submit copies of any previous employer training files for inclusion in their Bear Valley - Indian Valley Fire Protection District training file.

614.7 RELEASE OF FORMER MEMBER TRAINING RECORDS

Upon written request, the individual training file of any former Bear Valley - Indian Valley Fire Protection District member may be copied and released to either the former member or to a third-party upon receipt of a signed written request from a former member of the Department. The written request should include the past member's full name, approximate dates of employment with the Department and date of separation from employment with the Department. In the event that the former member is requesting that copies of his/her file be sent directly to a third party, the written request should include a statement authorizing the Bear Valley - Indian Valley Fire Protection District to release copies to the named third party.

Firefighter Health, Safety and Survival

615.1 PURPOSE AND SCOPE

The purpose of this policy is to encourage a culture of safety first in an effort to increase firefighter health, safety and survival, and reduce the number of preventable injuries and deaths.

615.2 POLICY

The Bear Valley - Indian Valley Fire Protection District is committed to providing leadership, accountability and training regarding firefighter health, safety and survival.

615.3 MEMBERS RESPONSIBILITIES

Members are responsible for participating in health, safety and survival training required by the Department. Members are also responsible for their own actions and are expected to follow Bear Valley - Indian Valley Fire Protection District safety standards, practices and training.

Any member who observes another member engaging in unsafe behavior should report the behavior to his/her supervisor as soon as reasonably practicable.

615.4 SUPERVISOR RESPONSIBILITIES

Company officers are responsible for ensuring members attend required health, safety and survival training.

All supervisors are expected to model safe behaviors and take appropriate action when unsafe behaviors are observed or reported.

615.5 TRAINING SAFETY OFFICER RESPONSIBILITIES

The Training/Safety Division is responsible for identifying health, safety and survival training required by the Department.

Required training may include safety-related courses of the National Fallen Firefighters Foundation (NFFF), National Fire Academy, International Association of Fire Chiefs, International Association of Firefighters or other nationally recognized fire service organizations.

Required training should include the Courage to Be Safe® course of the NFFF for all members and should include the Leadership So Everyone Goes Home® course of the NFFF for all supervisors.

615.6 TRAINING RECORDS

The Training/Safety Division is responsible for maintaining records of health, safety and survival training received by members. Records should include, but are not limited to:

- (a) The dates of the training sessions.
- (b) A list of the topics or a summary of the content of the training sessions.
- (c) The names or other identifiers and job titles of the members who received the training.
- (d) The names, certificate numbers and qualifications of persons conducting the training.

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Firefighter Health, Safety and Survival

The Training/Safety Division should maintain the training records in accordance with established records retention schedules.

Live-Fire Training

616.1 PURPOSE AND SCOPE

The purpose of this policy is to protect the health and safety of members by providing guidelines and responsibilities for live-fire training.

616.2 POLICY

It is the policy of the Department to conduct live-fire training in a safe and effective manner that meets the standards of NFPA 1403 and any applicable state or local law.

616.3 MEMBER PREREQUISITES

Before participating in any live-fire training exercise, members shall, at a minimum, have completed training equivalent to the requirements of NFPA 1001, Firefighter I.

616.4 TRAININGMANAGER RESPONSIBILITIES

The Training/Safety Division shall be responsible for:

- (a) Scheduling live-fire training.
- (b) Confirming that the Training/Safety Division is notified when live-fire training is scheduled.
- (c) Ensuring that all live-fire training provided by the agency is conducted in accordance with state and local requirements.
- (d) Providing a secure structure for the live-fire training consistent with the requirements of this policy.
- (e) Ensuring that all required permits and authorizations, if applicable, have been approved and received before conducting any training exercises.
- (f) Confirming that a sufficient number of instructors will be present for the live-fire training.
 - 1. In no event shall there be fewer than four instructors.
 - 2. There shall be no more than a 5:1 student-to-instructor ratio at any time.
- (g) Confirming that the number of instructors and instructor assignments are detailed in the live-fire training curriculum.
- (h) Designating a qualified safety officer for all live-fire training exercises.
- (i) Ensuring that all live-fire training is conducted using qualified instructors who meet the following requirements
 - 1. For the lead instructor, NFPA and any applicable state requirements for Fire Instructor II.
 - 2. For all other instructors, NFPA and any applicable state requirements for Fire Instructor I.
- (j) Ensuring all injuries sustained during live-fire training are documented.

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Live-Fire Training

616.5 SAFETY OFFICER

A safety officer shall be designated for all live-fire training exercises and shall have the same qualifications as the lead instructor. The safety officer has the authority to intervene and control any aspect of the operations when a potential or actual danger, potential accident, or unsafe condition exists. The safety officer may require additional safety personnel as deemed necessary.

The safety officer shall not be assigned duties that interfere with their safety responsibilities.

The safety officer shall be knowledgeable about all the safety features at the training location.

616.6 TRAINING REQUIREMENTS

Before beginning any live-fire training, the designated safety officer shall be responsible for:

- (a) Inspecting all burn locations.
- (b) Ensuring that all members participating in the training meet the prerequisites for participation.
- (c) Inspecting each participant's personal protective equipment (PPE) and SCBA.
- (d) Ensuring that a pre-burn walk-through and briefing for all members and instructors has been conducted.
- (e) Ensuring an Emergency Medical Services (EMS) unit and advanced life support (ALS) crew capable of transporting a patient are on location.

In no event shall a person be used as a simulated victim during live-fire training exercises.

All structures used for live-fire training shall be inspected after use.

616.7 USE OF ACQUIRED STRUCTURES

An acquired structure should not be used for live-fire training unless there is no equivalent purpose-built structure or space for live-fire training (e.g., burn building) available.

Prior to using any acquired structure for live-fire training, the Training/Safety Division shall:

- (a) Inspect the structure to determine whether it can be made sufficiently safe for live-fire training.
- (b) Facilitate the preparation of the structure for safe use (e.g., removal of all asbestos-containing materials).
- (c) Confirm that the live-fire training will comply with all local, state, and federal regulations applicable to the open burning of buildings, including the Clean Air Act (42 U.S.C. § 7401 et seq.).

616.8 TRAINING RECORDS

The Training/Safety Division shall be responsible for maintaining records of all live-fire training that is provided to members. At a minimum, the Department should document:

- (a) The dates of the training sessions.
- (b) A list of the topics or a summary of the content of the training sessions.

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- (c) The names or other identifiers and job titles of the members who received the training.
- (d) The names, certificate numbers, and qualifications of persons conducting the training.
- (e) Documentation of injuries sustained during training exercises.

The Training/Safety Division should maintain the training records in accordance with established records retention schedules.

Chapter 7 - Equipment and Technology

Use of Department-Owned and Personal Property

700.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines for the care and maintenance of department property entrusted to department members and the return of department property at the end of employment or affiliation with the Department. This policy also provides guidelines for members to claim damage to or loss of personal property used in an occupational capacity.

700.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to issue equipment to members for the purpose of performing their assigned duties. Members shall be responsible for the safekeeping, serviceable condition, proper care, use and request for replacement of all department property issued or entrusted to their care. A member's intentional or negligent abuse or misuse of department property may lead to discipline, including, but not limited to, the cost of repair or replacement of the property, and up to and including termination.

700.3 PROCEDURE

The following procedures shall be in effect regarding department property issued to members:

- (a) Members shall promptly report via the chain of command any loss, damage or unserviceable condition of department-issued property or equipment assigned for member use.
- (b) The use of damaged or unserviceable department property should be discontinued as soon as practicable and a supervisor notified so that the item may be replaced.
- (c) No member should attempt to repair damaged or unserviceable department property without supervisory approval.
- (d) Use of department property should be limited to official purposes in the capacity for which it was designed. Except when otherwise directed and/or required by circumstances, department property shall only be used by the member to whom it was assigned.
- (e) Department property shall not be discarded, sold, traded, donated, destroyed or otherwise disposed of without supervisory approval.

700.3.1 SURRENDERING DEPARTMENT PROPERTY UPON SEPARATION

Members who separate from the Department shall return all department property, regardless of its condition. The following guidelines shall apply:

- (a) All department property, including keys, identification cards, electronic devices and system access cards, shall be returned to the Department no later than the member's departure date or as directed by the Board of Directors or the authorized designee.

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- (b) Badge surrender shall be consistent with the Badges Policy.
- (c) A member who fails to return all department property in his/her possession may be required to reimburse the Department for the value of the property or may be subject to legal action brought by the District.

700.4 FILING CLAIMS FOR PERSONAL PROPERTY

Members are responsible for exercising reasonable care and caution to avoid damage to or loss of personal property while on-duty. However, consistent with collective bargaining agreements and District and department rules, personal property that is lost or damaged during the proper performance of a member's job duties may be replaced or the cost reimbursed by the District when such loss or damage is not the result of intentional or negligent abuse or misuse by the member.

Any claim for the replacement or cost reimbursement for damage to or loss of a member's personal property must be submitted on the proper claim form to the member's immediate supervisor.

The supervisor is responsible for reviewing the claim to assess whether the lost or damaged property was reasonably required for the proper performance of the member's job duties. The supervisor will make a determination as to whether reasonable care was taken to prevent loss or damage and whether proper procedures were followed just prior to the occurrence of the loss or damage. A supervisor may direct a member to submit additional details in a separate written report, if needed.

If approved, the supervisor will forward the claim and related reports to the Fire Chief, who will determine the appropriate reimbursement value of the property and will forward the claim for payment to the proper entity.

700.4.1 COVERED PERSONAL PROPERTY

Property that is necessary in the performance of the member's job duties or has been specifically stipulated by a collective bargaining agreement shall be considered a covered item. The age and condition of the damaged or lost property shall be considered when determining replacement or reimbursement value.

700.4.2 EXCLUDED PERSONAL PROPERTY ITEMS

Members are discouraged from wearing expensive jewelry or watches or bringing personal property items to the workplace that may be damaged, lost or stolen. Personal property that is not eligible for replacement or reimbursement includes:

- (a) Any personal property that is lost or damaged directly or indirectly due to negligence of the member.
- (b) Personal computers, communication devices, cell phones, MP3 players, GPS devices or any other electronic devices that the member voluntarily brings to the workplace and that are not required by the Department for the performance of the member's duties.
- (c) Any personal property used in place of department-issued property, unless required by the Department.

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Use of Department-Owned and Personal Property

- (d) Any jewelry, with the exception of watches, which shall not exceed a \$100 reimbursement.

700.4.3 PERSONAL VEHICLES

The Department will not provide vehicle insurance coverage for members who use their personal vehicles for department business. All members must rely on their personal vehicle insurance carrier for replacement or cost reimbursement of damage to or loss of a personal vehicle. Members using a personal vehicle for department business shall have the minimum evidence of financial responsibility required for that vehicle (Vehicle Code § 16056).

700.4.4 LOSS OR DAMAGE OF PROPERTY OF ANOTHER

Members intentionally or unintentionally may cause damage to the real or personal property of another while performing their duties. Any member who damages or causes to be damaged any real or personal property of another while performing any department function, regardless of jurisdiction, shall report it as provided below:

- (a) A verbal report shall be made to the member's immediate supervisor as soon as practicable.
- (b) A written report shall be submitted before the member goes off-duty or within the time frame directed by the supervisor to whom the verbal report was made.

700.4.5 DAMAGE BY PERSON OF ANOTHER AGENCY

If members of another jurisdiction cause damage to real or personal property belonging to the District, it shall be the responsibility of the member present or the member responsible for the property to make a verbal report to his/her immediate supervisor as soon as practicable. The member shall submit a written report before going off-duty or as otherwise directed by the supervisor.

All reports should be completed immediately after the incident or as soon as practicable if extenuating circumstances delay the member's ability to complete the report.

All reports, including the supervisor's written report, shall promptly be forwarded to the appropriate Fire Chief.

Personal Communication Devices

701.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for the use of mobile telephones and communication devices, whether issued or funded by the Department or personally owned, while on-duty or when used for authorized work-related purposes.

This policy generically refers to all such devices as Personal Communication Devices (PCDs) but is intended to include all mobile telephones, personal digital assistants (PDAs) and similar wireless two-way communications and/or portable Internet access devices. PCD use includes, but is not limited to, placing and receiving calls, text messaging, blogging and microblogging, emailing, using video or camera features, playing games and accessing sites, or services on the Internet.

701.2 POLICY

The Bear Valley - Indian Valley Fire Protection District allows members to utilize and possess personally owned PCDs in the workplace, subject to certain limitations.

Any PCD used while on or off-duty for business related purposes, or reasonably associated with work-related misconduct, will be subject to monitoring and inspection consistent applicable law and this policy.

Additionally, the use of a PCD either on-duty or off-duty for business-related purposes, or reasonably associated with work-related misconduct, may subject the member and the member's PCD records to civil or criminal discovery or disclosure under applicable public records laws.

Members who have questions regarding the application of this policy or the guidelines contained herein are encouraged to seek clarification from the Board of Directors.

701.3 PRIVACY EXPECTATION

Members forfeit any expectation of privacy with regard to emails, texts, or anything published, shared, transmitted, or maintained through file-sharing software or any Internet site that is accessed, transmitted, received, or reviewed on any PCD issued by the Department and shall have no expectation of privacy in their location should the device be equipped with location-detection capabilities.

This includes records of all keystrokes or web-browsing history made on the PCD. The fact that access to a database, service, or website requires a username or password will not create an expectation of privacy if it is accessed through department PCDs or networks.

The Department reserves the right to access, audit, and disclose, for whatever reason, any message, including attachments, and any information accessed, transmitted, received, or reviewed over any technology that is issued or maintained by the Department.

Members have no expectation of privacy regarding any communications while using a personally owned PCD for department-related business or when the use reasonably implicates work-related misconduct.

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701.4 DEPARTMENT-ISSUED PCD

Depending on a member's assignment and the needs of the position, the Department may, at its discretion, issue or fund a PCD. Department-issued PCDs for the member use to facilitate on-duty performance. Department issued or funded PCDs may not be used for personal business either on- or off-duty unless Department authorized by the Board of Directors or the authorized designee. Such devices and the associated telephone number, if any, shall remain the sole property of the Department and shall be subject to inspection or monitoring (including all related records and content) at any time without notice and without cause.

Unless a member is expressly authorized by the Board of Directors or the authorized designee for off-duty use of the PCD, the PCD will either be secured in the workplace at the completion of duty or will be turned off when leaving the workplace.

701.5 PERSONALLY OWNED PCD

Members may carry a personally owned PCD while on-duty, subject to the following conditions and limitations:

- (a) Permission to carry a personally owned PCD may be revoked if it used contrary to the provisions of this policy.
- (b) The Department accepts no responsibility for loss of or damage to a personally owned PCD.
- (c) The PCD and any associated services shall be purchased, used, and maintained solely at the member's expense.
- (d) The device should not be used for work-related purposes except in exigent circumstances (e.g., unavailability of radio communications). or as otherwise authorized by department procedures.
 - 1. Use of a personally owned PCD for work-related business constitutes consent for the Department to access the PCD to inspect and copy the work-related data (e.g., for litigation purposes, public records retention and release obligations, internal investigations).
 - 2. Use of and data within a personally owned PCD may be discoverable in cases when there is reason to believe it is associated with work-related misconduct.
 - 3. Searches of a personally owned PCD by the Department should be limited to those matters reasonably associated with the work-related business or work-related misconduct.
- (e) The device shall not be utilized to record or disclose any department business-related information, including photographs, video, or the recording or transmittal of any information or material obtained or made accessible as a result of employment or appointment with the Department, without the express authorization of the Board of Directors or the authorized designee.
- (f) If the PCD is carried on-duty, members will provide the Department with the telephone number of the service.

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- (g) All work-related documents, emails, photographs, recordings, and other public records created or received on a member's personally owned PCD should be transferred to the Bear Valley - Indian Valley Fire Protection District no later than the end of the member's shift and deleted from the member's PCD as soon as reasonably practicable.

701.6 USE OF PCD

The following protocols shall apply to all PCDs that are carried while on-duty or used to conduct department business:

- (a) A PCD shall not be carried in a manner that allows it to be visible while in uniform, unless it is in an approved carrier.
- (b) A PCD may not be used to conduct personal business while on-duty except for brief personal communications (e.g., informing family of extended hours). Members shall endeavor to limit their use of PCDs to authorized break times, unless an emergency exists.
- (c) Members may use a PCD to communicate with other personnel in situations where the use of radio communications is either impracticable or not feasible. PCDs should not be used as a substitute for, as a way to avoid, or in lieu of regular radio communications.
- (d) Members are prohibited from taking pictures, making audio or video recordings or making copies of any such picture or recording media unless it is directly related to official department business. Disclosure of any such information to any third party through any means, requires express authorization of the Board of Directors or the authorized designee.
- (e) Members will not access social networking sites for any purpose that is not official department business. This restriction does not apply to a personally owned PCD used during authorized break times.
- (f) Using PCDs to harass, threaten, coerce, or otherwise engage in inappropriate conduct with any third party is prohibited. Any member having knowledge of such conduct shall promptly notify the Fire Chief or designee, who will report the conduct to the board of directors.

701.7 SUPERVISOR RESPONSIBILITIES

The responsibilities of supervisors include, but are not limited to:

- (a) Ensuring that members under their command are provided appropriate training on the use of PCDs consistent with this policy.
- (b) Monitoring, to the extent practicable, PCD use in the workplace and taking prompt corrective action if a member is observed or reported to be improperly using a PCD.
 - 1. An investigation into improper conduct should be promptly initiated when circumstances warrant.
 - 2. Before conducting any administrative search of a member's personally owned device, supervisors should consult with the Board of Directors or the authorized designee.

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701.8 OFFICIAL USE

Members are reminded that PCDs are not secure devices and conversations may be intercepted or overheard. Caution should be exercised while utilizing PCDs to ensure that sensitive information is not inadvertently transmitted. As soon as reasonably possible, members shall conduct sensitive or private communications on a land-based or other department communications network.

701.9 USE WHILE DRIVING

The use of a PCD while driving can adversely affect safety, cause unnecessary distractions and present a negative image to the public. Firefighters operating emergency vehicles should restrict the use of these devices to matters of an urgent nature and should, where practicable, stop the vehicle at an appropriate location to use the PCD.

Except in an emergency, members who are operating vehicles that are not equipped with lights and siren shall not use a PCD while driving unless the device is specifically designed and configured to allow hands-free use (Vehicle Code § 23123(a)). Hands-free use should be restricted to business-related calls or calls of an urgent nature. No member shall write, send or read a text-based communication on a PCD while driving (Vehicle Code § 23123.5).

Vehicle/Apparatus Inspections And Maintenance

702.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the inspection and maintenance responsibilities of members with regard to department vehicles and apparatus, to ensure the vehicles comply with all regulations specified in the California Vehicle Code and the California Commercial Driver Handbook. Inspections also ensure that vehicles and apparatus are properly equipped, maintained, refueled and present a professional appearance.

702.1.1 DEFINITIONS

Definitions related to this policy include:

Apparatus - All self-propelled firefighting vehicle capable of carrying at least one person.

Commercial vehicle - A vehicle or combination of vehicles that requires a class A or class B license (Vehicle Code § 15210(b)(1)).

In-reserve - Any vehicle or apparatus that, while not currently staffed, is ready for service or deployment as needed, regardless of whether it is fully equipped with tools and equipment.

In-service - Any vehicle or apparatus that is either staffed or cross-staffed by members of the Emergency Services Division or that is pre-positioned to be readily available to on-duty Emergency Services personnel for calls for service (e.g., airport rescue or firefighting apparatus).

Staff vehicles - Typically, department vehicles that do not qualify as commercial vehicles (Vehicle Code § 15210(b)(1)).

Vehicle - Any self-powered or self-propelled vehicle, including cars, pick-up trucks, fire apparatus of all types, ambulance units, command vehicles, crew-carrying vehicles, tractors, boats or powered watercraft and off-highway vehicles.

702.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that all vehicles and apparatus be inspected monthly, including in-service and reserve apparatus. Vehicles and apparatus that are out-of-service for maintenance or repair need not be inspected until they are returned to service or released to in-reserve status.

702.3 PROCEDURE

Department vehicles generally fall into one of two categories: those that meet the definition of commercial vehicle pursuant to the Vehicle Code, and those that do not. The inspection requirements for department vehicles will differ based on this distinction.

702.3.1 APPARATUS INSPECTIONS

Members shall be responsible for conducting a inspection of apparatus that includes all of the items and provisions identified as part of the California Commercial Vehicle Pre-Trip Inspection. The inspection list is detailed in the current version of the California Commercial Driver Handbook.

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Vehicle/Apparatus Inspections And Maintenance

When an apparatus becomes inoperative or in need of a repair that affects safe operation, it shall be immediately removed from service.

Members should maintain a written record of inspections for each vehicle or apparatus using the appropriate inspection form for the vehicle type. Completed inspection forms should be forwarded to the Fire Chief and retained by the Department for at least two years.

702.3.2 STAFF VEHICLE INSPECTIONS

Members who are assigned staff vehicles shall be responsible for the inspection and maintenance of their assigned vehicle. Maintenance should include checking and maintaining engine and transmission fluids, checking and maintaining tire inflation pressure, monitoring tire wear, and any other inspection needed to ensure the safe operation of the vehicle.

Any vehicle issues discovered during inspection should be promptly addressed. When a vehicle becomes inoperative or in need of repair that affects the safe operation of the vehicle, it shall be immediately removed from service for repair.

Members also are responsible for completing a monthly inspection and equipment inventory for each assigned vehicle and documenting it on the appropriate inspection form. When completed, the form should be forwarded to the Fire Chief in the member's chain of command. The monthly checklists should be retained by the Department for at least two years.

702.4 CLEANLINESS

All apparatus and staff vehicles shall be maintained in a condition presenting a professional appearance, weather conditions permitting.

Members shall obtain clearance from the Fire Chief before going out-of-service for vehicle maintenance.

Members using a staff vehicle shall remove any trash or debris at the end of a shift. Any confidential material should be placed in a designated receptacle provided for the shredding of this matter.

Use of Department Vehicles

703.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the procedures for the off-duty use of department take-home vehicles. The use of take-home vehicles is an essential component of the department's response, which ensures resources are available in the event of an emergency or critical incident. To facilitate faster response or for other legitimate department needs, members may be allowed to take department vehicles home. These vehicles provide the means to respond directly to an incident without first diverting to a fire station to retrieve a vehicle and/or needed equipment.

703.1.1 DEFINITIONS

Definitions related to this policy include:

Take-home vehicle - A vehicle owned by the Department that is authorized for commuting between work and home and/or off-duty use. Department vehicles secured at a location other than the member's assigned work location for the purpose of shortening a member's commute shall also be considered take-home vehicles.

703.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to authorize take-home vehicles for members under certain specific conditions:

- **Emergency recall** - A member's assignment requires immediate response during off-duty hours to other than the member's normal work location to handle an emergency action.
- **Investigative recall** - A member's assignment requires timely response during off-duty hours to other than the member's normal work location to handle a fire investigation.
- **Maintenance use** - A member's assignment routinely necessitates transporting and/or housing a vehicle or resource owned by the Department.

The assignment of take-home vehicles is at the sole discretion of the Fire Chief or Designee or the authorized designee and is subject to change with notice.

703.3 PROCEDURE

Department members authorized to use take-home vehicles must adhere to the following guidelines. Department members may use the vehicle to:

- Commute between their residence and workplace.
- Conduct legitimate department-related business that occurs outside normal working hours, including, but not limited to, attendance at special meetings and recall to duty.
- Firefighters authorized to use take-home vehicles are to monitor the radio whenever they are operating the vehicle. They are to make appropriate notification or take appropriate action on any fire-related matter that may come to their attention via the radio or through personal observation.

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Use of Department Vehicles

- Department members are prohibited from driving department vehicles any time their driving ability may be impaired by prescription or non-prescription drugs or alcoholic beverages.
- Passengers must be those required for department business unless otherwise authorized by the Board of Directors.
- Department take-home vehicles are to be left at a fire facility during vacations or other period of leave in excess of seven days.
- Department members shall not relinquish control of, nor allow any person to operate department vehicles if that person is not a member of the Department, except in the case of an emergency where the member is unable to drive him/herself.
- Department members should not use department vehicles for personal errands or business, except for minor deviations from official business for personal reasons and with the approval of the member's supervisor and within the department's jurisdiction.

703.3.1 VEHICLES SUBJECT TO INSPECTION

All department-owned vehicles are subject to inspection and/or search at any time by a supervisor. No member assigned to or operating such a vehicle shall be entitled to any expectation of privacy with respect to the vehicle or its contents.

703.3.2 VEHICLE SECURITY

Take-home vehicles shall be subject to the following criteria:

- (a) Off-street parking shall be available at the member's residence.
- (b) Vehicles shall be secured when not attended.

703.3.3 ACCESSORIES AND/OR MODIFICATIONS

No modifications, additions or deletions of any equipment or accessories shall be made to department vehicles without written permission from the designated vehicle manager.

Information Technology Use

704.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines for the proper use of department information technology resources, including computers, electronic devices, hardware, software and systems.

704.1.1 DEFINITIONS

Definitions related to this policy include:

Computer system - All computers (on-site and portable), hardware, software, and resources owned, leased, rented or licensed by the Bear Valley - Indian Valley Fire Protection District that are provided for official use by members. This shall include all access to, and use of, Internet Service Providers (ISP) or other service providers provided by or through the Department or department funding.

Hardware - Includes, but is not limited to, computers, computer terminals, network equipment, electronic devices, telephones including cellular and satelliteH, pagers, modems or any other tangible computer device generally understood to comprise hardware.

Software - Includes, but is not limited to, all computer programs, systems and applications, including shareware. This does not include files created by the individual user.

Temporary file, permanent file or file - Any electronic document, information or data residing or located, in whole or in part, on the system, including, but not limited to, spreadsheets, calendar entries, appointments, tasks, notes, letters, reports or messages, photographs or videos.

704.2 POLICY

Bear Valley - Indian Valley Fire Protection District members shall use information technology resources, including computers, software and systems, that are issued or maintained by the Department in a professional manner and in accordance with this policy.

704.3 PRIVACY EXPECTATION

Members forfeit any expectation of privacy with regard to emails, texts, or anything published, shared, transmitted, or maintained through file-sharing software or any Internet site that is accessed, transmitted, received, or reviewed on any department technology system.

The Department reserves the right to access, audit, and disclose, for whatever reason, any message, including attachments, and any information accessed, transmitted, received, or reviewed over any technology that is issued or maintained by the Department, including the department email system, computer network, or any information placed into storage on any department system or device. This includes records of all keystrokes or Web-browsing history made at any department computer or over any department network. The fact that access to a database, service, or website requires a username or password will not create an expectation of privacy if it is accessed through department computers, electronic devices, or networks.

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Information Technology Use

The Department shall not require a member to disclose a personal username or password for accessing personal social media or open a personal social website; however, the Department may request access when it is reasonably believed to be relevant to the investigation of allegations of work-related misconduct (Labor Code § 980).

704.3 INSPECTION OR REVIEW

A supervisor or the authorized designee has the express authority to inspect or review the computer system, all temporary or permanent files, related electronic systems or devices, and any contents thereof, whether such inspection or review is in the ordinary course of his/her supervisory duties or based on cause.

Reasons for inspection or review may include, but are not limited to, computer system malfunctions, problems or general computer system failure, a lawsuit against the Department involving one of its members or a member's duties, an alleged or suspected violation of any department policy, a request for disclosure of data, or a need to perform or provide a service.

The IT designee may extract, download or otherwise obtain any and all temporary or permanent files residing or located in or on the department computer system when requested by a supervisor or during the course of regular duties that require such information.

704.3 RESTRICTED USE

Members shall not access computers, devices, software or systems for which they have not received prior authorization or the required training. Members shall immediately report unauthorized access or use of computers, devices, software or systems by another member to their supervisor or Board of Directors.

Members shall not use another person's access passwords, logon information and other individual security data, protocols and procedures unless directed to do so by a supervisor.

704.3.1 SOFTWARE

Members shall not copy or duplicate any copyrighted or licensed software except for a single copy for backup purposes, in accordance with the software company's copyright and license agreement.

To reduce the risk of a computer virus or malicious software infection, members shall not install any unlicensed or unauthorized software on any department computer. Members shall not install personal copies of any software on any department computer. Any files or software that a member finds necessary to install on department computers or networks shall be installed only with the approval of department information systems technology (IT) designee and only after being properly scanned for malicious attachments.

No member shall knowingly make, acquire or use unauthorized copies of computer software that is not licensed to the Department while on department premises, computer systems or electronic devices. Such unauthorized use of software exposes the Department and involved members to severe civil and criminal penalties.

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Information Technology Use

Introduction of software by members should only occur as a part of the automated maintenance or update process of department- or District-approved or installed programs by the original manufacturer, producer or developer of the software. Any other introduction of software requires prior authorization from IT designee.

704.3.2 HARDWARE

Access to technology resources provided by or through the Department shall be strictly limited to department-related activities. Data stored on or available through department computer systems shall only be accessed by authorized members who are engaged in an approved department-related project or program or who otherwise have a legitimate department-related purpose to access such data. Any exceptions to this policy must be approved by a supervisor.

704.3.3 INTERNET USE

Internet access provided by or through the Department shall be strictly limited to department-related activities. Internet sites containing information that is not appropriate or applicable to department use and which shall not be intentionally accessed include, but are not limited to, adult forums, pornography, gambling, chat rooms, and similar or related Internet sites. Certain exceptions may be permitted with the express approval of a supervisor as a function of a member's assignment.

Downloaded information from the Internet shall be limited to messages, mail and data files.

704.3.4 OFF-DUTY USE

Members shall only use technological resources related to their job while on-duty or in conjunction with specific on-call assignments unless specifically authorized by a supervisor. This includes the use of telephones, cell phones, texting, email or any other "off-the-clock" work-related activities.

704.3 PROTECTION OF SYSTEMS AND FILES

All members have a duty to protect the computer system and related systems and devices from physical and environmental damage and are responsible for the correct use, operation, care and maintenance of the computer system.

Members shall ensure department computers and access terminals are not viewable by persons who are not authorized users. Computers and terminals should be secured, users logged off and password protections enabled whenever the user is not present. Access passwords, logon information and other individual security data, protocols and procedures are confidential information and are not to be shared. Password length, format, structure and content shall meet the prescribed standards required by the computer system or as directed by a supervisor and shall be changed at intervals as directed by IT designee or a supervisor.

It is prohibited for a member to allow an unauthorized user to access the computer system at any time or for any reason. Members shall promptly report any unauthorized access to the computer system or suspected intrusion from outside sources (including the Internet) to a supervisor.

Communications Operations

705.1 PURPOSE AND SCOPE

The purpose of this policy is to establish standards for two-way radio communications during routine, local emergency, regional emergency and mutual aid events. The basic function of the communications system is to satisfy the immediate information needs of the Department in the course of its activities. Standards of performance are necessary if the system is to remain functional during emergencies.

705.1.1 FCC COMPLIANCE

All Bear Valley - Indian Valley Fire Protection District radio operations shall be conducted in accordance with the Federal Communications Commission (FCC) procedures and guidelines.

705.2 POLICY

The Bear Valley - Indian Valley Fire Protection District will provide access to a two-way radio communication system to facilitate a more efficient response to emergency situations. The communication system is intended for official job-related communications between fire apparatus and Colusa County. Fire apparatus and members shall be equipped with the appropriate types of two-way radios, personal communication devices and/or satellite paging system for the jurisdiction, type of work anticipated and local and regional interagency/multi-agency incidents.

705.3 COMMUNICATIONS LOG

It shall be the responsibility of the dispatchers in Colusa County to record all relevant information on an incident. Dispatchers shall attempt to elicit as much information as possible to enhance the safety of the firefighters/paramedics who are responding and assist in anticipating conditions that may be encountered at the scene. Desirable information includes, but is not limited to, the following:

- Location of incident reported
- Type of incident reported
- Date and time the report was received
- Name and address of the reporting party, if possible
- Incident number
- Time of dispatch
- Apparatus dispatched to the incident, including member identification numbers
- Time of apparatus arrival
- Requests from members during the incident
- Time the apparatus returned to service
- Disposition or status of the reported incident.

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Communications Operations

705.4 RADIO COMMUNICATIONS

Operations are more efficient and member safety is enhanced when dispatchers, supervisors and fellow members know the status of other companies, including their locations and the nature of the incidents to which they are assigned. Most critical incident communication should occur verbally, over the radio, for this reason.

705.4.1 APPARATUS IDENTIFICATION

Apparatus radio identification systems shall be based on the type of apparatus and the station responsibility/jurisdiction. Members should use the entire call sign when initiating communication with a dispatcher. The use of a call sign allows for a brief pause so that the dispatcher can acknowledge the appropriate company. Members initiating communication with other agencies shall use their entire call sign. This requirement does not apply to continuing conversation between the mobile unit and dispatcher once the mobile unit has been properly identified.

705.4.2 RADIO TESTING

Members assigned to an apparatus for a shift should check for radio functionality at the beginning of each shift to ensure that the mobile and portable radios are working as designed.

Radios that are inoperable or malfunctioning shall be placed out-of-service, an appropriate repair tag completed and the radio or apparatus placed in the area specified by the maintenance section or contractor.

Public Alerts

706.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines for notifying the public of vital fire safety information and/or emergency evacuation instructions via Facebook or an authorized social media site approved by the Board and the Fire Chief.

706.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to use Public Alerts to notify the public of critical fire prevention campaigns, fire hazard warnings and emergency evacuation instructions. A Public Alert shall require the authorization of a Captain or higher rank.

706.3 PROCEDURE

Public Alerts are intended to inform the public about incidents and recruit public assistance through proactive activities via a widespread media alert. In addition to any local radio, television, and press affiliates, the public will be notified of the circumstances of an emergency affecting the health and safety of people in a geographic area, and what the public can do to assist emergency responders during the incident.

The Fire Chief should be involved in any communiqué released via a Public Alert, if time permits, but certainly in the case of fire prevention campaigns, fire hazard warnings, weather alerts, or notification of health information (e.g., pandemics, heat events).

In the event of a widespread emergency, such as a hazardous material (HAZMAT) release, biological threat, or a major fire, Colusa County will likely be operating at or beyond capacity. Any Public Alert should include a telephone number outside Colusa County for the public to call for additional information and explicit instructions not to call Colusa County for additional information.

A Public Alert should include but not be limited to the following:

- The Bear Valley - Indian Valley Fire Protection District has generated the alert
- The nature of the alert
- The location and scope of the incident/prevention campaign/fire hazard
- What the listener should do to assist in the effort
- Established routes and/or destinations, if applicable
- Where the listener can call to get additional information, if applicable
- Instructions regarding what the listener should not do, if applicable

706.3.1 GUIDELINES FOR PUBLIC SAFETY EMERGENCIES

Public safety emergency alerts should be activated by following the guidelines issued by the Office of Emergency Services (Government Code § 8593.7).

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Public Alerts

706.4 SYSTEM ADMINISTRATION

The Board of Directors or the authorized designee shall appoint an administrator for the Public Alert system. The administrator shall be responsible for all liaison contact with the Public Alert system vendor, all maintenance and upgrades of the system and will ensure the address/telephone number database is updated periodically in accordance with the vendor contract.

The administrator shall also conduct periodic audits of the system to ensure peak performance in terms of volume of calls reaching the desired number of recipients in a reasonable time. Based on audit results, adjustments may need to be made on the number of outgoing telephone lines or the system capacity.

The Training Safety Officer and the administrator shall coordinate training in the use of the Public Alert system and ensure that the appropriate members receive training.

706.5 LANGUAGE REQUIREMENTS FOR PUBLIC EMERGENCIES

In the event of an emergency (as defined in Government Code § 7299.7), the Bear Valley - Indian Valley Fire Protection District shall provide information to the public relating to the emergency in all languages jointly spoken by the local population as provided in Government Code § 7299.7.

Photography And Electronic Imaging

707.1 PURPOSE AND SCOPE

The purpose of this policy is to authorize department members to utilize photography and electronic imaging to document incidents while also protecting the privacy of citizens and ensuring department compliance with the mandates of the Health Insurance Portability and Accountability Act (HIPAA).

This policy establishes legal ownership of all photographs and electronic images collected by department members, establishes the parameters for the types of incidents, subjects and activities that may be photographed or electronically imaged, and establishes restrictions on the use of such photographs and electronic images.

707.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to authorize members to utilize photography and electronic imaging to document incidents and department activities that are subject to compliance with specific regulations, conditions, restrictions and guidelines.

The use of photography or electronic imaging of medical patients, injured victims or other people who are medically evaluated or treated by department members must also comply with the requirements of HIPAA.

The Bear Valley - Indian Valley Fire Protection District shall respect the privacy rights established in the state and federal constitutions.

707.3 OWNERSHIP AND COMMERCIAL USE OF PHOTOGRAPHS AND ELECTRONICIMAGES

All photographs and electronic images taken by department members while on-duty or acting in an official capacity are the sole property of the Department and may not be sold, transferred for commercial use, bartered or otherwise distributed for profit by any member of the Department without the express prior approval of the Board of Directors (17 USC § 201).

707.4 AUTHORIZED USE OF PHOTOGRAPHY AND ELECTRONIC IMAGING

707.4.1 NON-INCIDENT EVENTS

Photography and electronic imaging may be utilized by department members for non-incident events, including:

- (a) Documentation of department training events, exercises, lectures, classes or activities, and all fire academy-related activities.
- (b) Documentation of internal department events and activities, such as promotional ceremonies, member recognition or award presentations, meetings, seminars, workshops and other activities involving department members.

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- (c) Documentation of public events, such as safety seminars, fire station open house events, Cal Fire education events and activities, school safety presentations and club or service organization events.
- (d) Documentation of all department vehicles, apparatus, tools and equipment, facilities and other department-owned property.
- (e) Creating and maintaining a photo/image bank depicting all department members.
- (f) Documentation of all buildings, structures, facilities, infrastructure components, landmarks and recreational areas within the department's jurisdiction for later use in disaster mitigation, recovery and cost-recovery efforts.
- (g) To document any condition, activity or event related to the department's code enforcement responsibilities.
- (h) To document inspections, code compliance activities or any other activity of Cal Fire.
- (i) Unless prohibited elsewhere in this policy, to document any department activity for future use in training.
- (j) For any other purpose authorized by the Board of Directors, Captain or any Fire Chief.

707.4.2 INCIDENT-RELATED EVENTS

Photography and electronic imaging may be utilized by department members at incident scenes, including:

- (a) Documentation of the conditions on arrival and during suppression activities at any fire incident.
- (b) Documentation of fire, smoke, water, structural collapse or any other damage or conditions resulting from any fire or fire-related event.
- (c) Documentation of people at the scene of a fire or a fire-related incident for the purpose of future investigation.
- (d) Documentation of anything of evidentiary value found at a fire or incident scene where any type of investigation may be initiated.
- (e) Documentation of the location, position, trauma, injuries or any other factor of investigative interest related to deceased victims at a fire or fire-related incident or other incidents.
- (f) Documentation of the condition of vehicles, apparatus, bicycles or other items involved in collisions, accidents, entrapments or other rescue or medical events.
- (g) Documentation of the extrication of trapped individuals in any rescue situation.
- (h) Documentation of the cause, location, extent, severity and nature of traumatic injuries of patients at the scene. These images may be transferred to the receiving physician, nurse or other authorized representative who assumes medical care for the patient.

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- (i) Documentation of all aspects of any incident involving hazardous materials.
- (j) Documentation of severe weather events, including any damage, injuries or fatalities caused by such events.
- (k) Documentation of any other event, situation or activity as deemed appropriate and necessary by the Incident Commander of any event.

707.5 PROHIBITED USE OF PHOTOGRAPHY OR ELECTRONIC IMAGING

Department members are prohibited from using photography or electronic imaging except as permitted in this policy.

Prohibited use of photography or electronic imaging shall include, but is not limited to:

- (a) Photographs and/or electronic images may not be taken, transmitted or used in violation of any HIPAA regulation.
- (b) Photographs and/or electronic images may not be taken, transmitted or used for personal purposes.
- (c) Unless requested by the receiving hospital or controlling medical authority or deemed necessary for the future treatment of the patient, no photographs or electronic images should be taken inside a private residence during a non-traumatic medical aid incident.
- (d) Unless requested by the receiving hospital or controlling medical authority or deemed necessary for the future treatment of the patient, no photographs or electronic images should be taken of a minor (under 18 years of age) patient resulting from a medical aid response.
- (e) Unless requested by the receiving hospital or controlling medical authority or deemed necessary for the future treatment of the patient, no photographs or electronic images depicting patient genitalia or the exposed breasts of female patients should be taken by department members.
- (f) Unless requested by the receiving hospital or controlling medical authority or deemed necessary for the future treatment of the patient, no photograph or electronic image should be taken of a patient being treated by department members if the person expresses or indicates that he/she does not wish to be photographed. In the event that the need arises to take a photograph or electronic image of a medical patient against the patient's wishes, the medical need for taking the image will be explained to the patient with a witness present. Details regarding the need for the photograph or electronic image, the explanation provided to the patient and the identity of the witness present shall be included in a patient care report and/or incident report for the response.

Non-Official Use of Department Property

708.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidance on the non-official use of department property. Department property includes, but is not limited to, all portable pumps, chain saws, rescue saws, generators, fire hoses, hose adapters, suction hoses, ladders, rescue equipment, small tools or any power driven tools.

708.2 POLICY

The personal use of department property is not authorized. No equipment shall be loaned or used by a member for any purpose other than official department business without the express prior approval of the fire chief.

Requests from water companies or other District agencies for hose adapters or other equipment should be forwarded to the fire chief for consideration.

Department Use of Social Media

709.1 PURPOSE AND SCOPE

This policy provides guidelines to ensure that any use of social media on behalf of the Department is consistent with the department mission.

This policy does not address all aspects of social media use. Specifically, it does not address:

- Personal use of social media by department members (see the Member Speech, Expression, and Social Networking Policy).
- Use of social media in personnel processes (see the Recruitment and Selection Policy).
- Use of social media for issuance of fire hazard warnings, emergency evacuation instructions, and widespread emergencies (see the Public Alert Policy).

709.1.1 DEFINITIONS

Definitions related to this policy include:

Social media - Any of a wide array of internet-based tools and platforms that allow for the sharing of information, such as the department website or social networking services.

709.2 POLICY

The Bear Valley - Indian Valley Fire Protection District will use social media as a method of effectively informing the public about department services, issues, investigations, and other relevant events.

Department members shall ensure that the use or access of social media is done in a manner that protects the constitutional rights of all people.

709.3 AUTHORIZED USERS

Only members authorized by the Board of Directors or the authorized designee may utilize social media on behalf of the Department. Authorized members shall use only department-approved equipment during the normal course of duties to post and monitor department-related social media, unless they are specifically authorized to do otherwise by their supervisors.

The Board of Directors may develop specific guidelines identifying the type of content that may be posted. Any content that does not strictly conform to the guidelines should be approved by a supervisor prior to posting. Requests to post information over department social media by members who are not authorized to post should be made through the member's chain of command.

709.4 AUTHORIZED CONTENT

Only content that is appropriate for public release, supports the department mission, and conforms to all department policies regarding the release of information may be posted. Examples of appropriate content include:

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- (a) Announcements.
- (b) Tips and information related to fire prevention.
- (c) Investigative requests for information.
- (d) Requests that ask the community to engage in projects that are relevant to the department mission.
- (e) Real-time safety information that is related to in-progress fire incidents, geographical warnings, or disaster information.
- (f) Media releases.
- (g) Recruitment of personnel.

709.4.1 INCIDENT-SPECIFIC USE

In instances of active incidents where speed, accuracy, and frequent updates are paramount (e.g., incident alerts, public safety information), the Fire Chief or the authorized designee will be responsible for the compilation of information to be released, subject to the approval of the Incident Commander.

709.5 PROHIBITED CONTENT

Content that is prohibited from posting includes but is not limited to:

- (a) Content that is abusive, discriminatory, inflammatory, or sexually explicit.
- (b) Any information that violates individual rights, including confidentiality and/or privacy rights and those provided under state, federal, or local laws.
- (c) Any information that could compromise an ongoing investigation.
- (d) Any information that could tend to compromise or damage the mission, function, reputation, or professionalism of the Bear Valley - Indian Valley Fire Protection District or its members.
- (e) Any information that could compromise the safety and security of department operations, members of the Department, victims, patients, or the public.
- (f) Any content posted for personal use.
- (g) Any content that has not been properly authorized by this policy or a supervisor.

Any member who becomes aware of content on this department's social media site that they believe is unauthorized or inappropriate should promptly report such content to a supervisor. The supervisor will ensure its removal from public view and investigate the cause of the entry.

709.5.1 PUBLIC POSTING PROHIBITED

Department social media sites shall be designed and maintained to prevent posting of content by the public.

The Department may provide a method for members of the public to contact department members directly.

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Department Use of Social Media

709.6 MONITORING CONTENT

The Board of Directors will appoint a supervisor to review, at least annually, the use of department social media and report back on, at a minimum, the resources being used, the effectiveness of the content, any unauthorized or inappropriate content, and the resolution of any issues.

709.7 RETENTION OF RECORDS

The Board of Directors should work with the Custodian of Records to establish a method of ensuring that public records generated through the use of social media are retained in accordance with established records retention schedules.

709.8 TRAINING

Authorized members should receive training that, at a minimum, addresses legal issues concerning the appropriate use of social media sites, as well as privacy, civil rights, and the dissemination and retention of information posted on department sites.

Chapter 8 - Records Management

Records Management

800.1 PURPOSE AND SCOPE

This policy provides guidelines for the management of all department documents, including those in fire stations, to ensure that department records are maintained and available as needed. This policy also provides guidance on the retention, disposition, and security of records.

800.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to promote the efficient and cost-effective conduct of department business by reducing the number of records in active file areas, eliminating unnecessary retention of duplicate or obsolete documents, and providing for timely transfer of inactive files in compliance with legal requirements.

800.3 CUSTODIAN OF RECORDS

The Board of Directors shall appoint a Custodian of Records, who will oversee the records management program, including the records retention schedule. The Custodian of Records or the authorized designee should:

- (a) Remain familiar with the California Secretary of State Local Government Records Management Guidelines.
- (b) Identify what records the Department has, where the records are kept, the volume, and how the records are used.
- (c) Maintain and update the department's records retention schedule, including:
 - 1. Preparing any amendments to the schedule and obtaining the necessary approvals for the amendments.
 - 2. Coordinating with the District district clerk to ensure all department records are properly classified and that the retention periods are appropriate for each document.
 - 3. Maintaining a current version of the department's records retention schedule and making it available to members for reference.
- (d) Coordinate the placement of inactive records in storage, including:
 - 1. Maintaining a storage inventory.
 - 2. Providing an annual reminder to Fire Chiefs and section managers to review files to determine if any records should be transferred to storage.
- (e) Manage the destruction of department records, including:
 - 1. Annually reviewing the records retention schedule and storage inventory list to determine which records are eligible for destruction.
 - 2. Providing a list to Fire Chiefs and section managers of records eligible to be destroyed.
 - 3. Obtaining any required approvals for the destruction of eligible records.

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Records Management

4. Maintaining a list of records that have been destroyed.
- (f) Ensure confidential and other sensitive records are stored or maintained to protect the sensitive nature of the records.
- (g) Process subpoenas and requests for records as provided in the subpoenas, the Release of Records and Public Records Act, and the Patient Medical Record Security and Privacy policies.
- (h) Manage a document imaging or other process for bulky or rarely accessed records with long retention periods.
- (i) Establish rules regarding the inspection and copying of department records as reasonably necessary for the protection of such records (Government Code § 7922.525; Government Code § 7922.530) This includes:
 1. Identifying records or portions of records that are confidential under state or federal law and not open for inspection or copying.
 2. Maintaining a schedule of fees for public records as allowed by law.
- (j) Determine how the department website may be used to post public records in accordance with Government Code § 7922.545.
- (k) Ensure that public records posted on the department website meet the requirements of Government Code § 7922.680, including but not limited to posting in an open format where a record may be retrieved, downloaded, indexed, and searched by a commonly used internet search application.
- (l) Ensure that a list and description, when applicable, of enterprise systems (as defined by Government Code § 7922.700) is publicly available upon request and posted in a prominent location on the department website (Government Code § 7922.710; Government Code § 7922.720).

800.4 MEMBERS' RESPONSIBILITY

All members are expected to handle department records in a responsible manner and as provided in this policy.

Members are responsible to ensure that records in their control are maintained as provided in the records retention schedule.

800.5 SUPERVISORS' RESPONSIBILITIES

Chief or designee are responsible for the management of records at the fire station level, they shall ensure that all records at the fire stations are retained in accordance with this policy.

800.6 TRAINING

The fire chief or designee should coordinate with the Training Safety Officer to provide training regarding the records management program to the appropriate department members.

Release of Records

801.1 PURPOSE AND SCOPE

This policy establishes guidelines for the public to inspect and obtain copies of public records.

Inspection and release of records with protected health information is covered in the Patient Medical Record Security and Privacy Policy.

801.2 POLICY

It is the policy of Bear Valley - Indian Valley Fire Protection District that records not exempt from disclosure by state or federal law will be open for public inspection with the least possible delay and expense to the requesting party (Government Code § 7920.000 et seq.)

801.3 INSPECTING PUBLIC RECORDS

Public records are generally open to inspection during regular business hours.

Records that in part or whole are exempt from disclosure or require redaction will not be provided for inspection. Upon written request, a redacted copy of the record may be produced as provided in this policy.

801.4 PROCESSING REQUESTS FOR PUBLIC RECORDS

Any member of the public, including the media and elected officials, may obtain copies of unrestricted records of this department by submitting a written and signed request for each record sought and paying any associated fees (Government Code § 7922.530).

- (a) All requests for records shall be forwarded to the Bear Valley - Indian Valley Fire Protection District Custodian of Records for review and disposition. Information in the request should include:
 1. A statement that information is being requested under the California Public Records Act.
 2. A clear and specific description of the record being requested, including, if possible, dates, subjects, titles, or authors of the documents requested.
 3. If requesting a waiver of fees, a description of why the requestor believes a waiver is in the public interest.
 4. Requestor contact information, including name, address, phone, and email.
 5. Any accommodation needed under the Americans with Disabilities Act.
- (b) The processing of requests is subject to the following limitations (Government Code § 7922.530; Government Code § 7922.535):
 1. All requests should be date stamped upon receipt and logged on the Public Records Act request log.
 2. The Custodian of Records or the authorized designee shall determine if the requested record is available and, if so, whether the record is exempt from disclosure.

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- (a) Either the requested record or the reason for nondisclosure will be provided promptly but no later than 10 days from the date of request, unless unusual circumstances preclude doing so.
 - (b) If more time is needed, an extension of up to 14 additional days may be authorized by the Board of Directors or the authorized designee.
 - (c) If an extension is authorized, the Custodian of Records shall provide written notice of the extension to the requesting party.
3. The Department is not required to create records that do not otherwise exist in order to accommodate a request for information or records.
4. If the record requested is available on the department website, the requester may be directed to the location on the website where the record is posted. If the requester is unable to access or reproduce the record, a copy of the record shall be provided promptly.
5. Released records shall be logged on the Public Records Act request log.

801.5 RECORDS IN ELECTRONIC FORMAT

Upon request, the Department shall make available any public record in any electronic format in which the Department holds the information or in the format requested if the format has been used by the Department to create copies for its own use or for other agencies. The Department may not provide the records only in electronic format unless specifically asked by the requestor (Government Code § 7922.570; Government Code § 7922.580).

801.6 FEES

A copy of a requested public record not exempt from disclosure shall be made available upon payment of fees established by the Bear Valley - Indian Valley Fire Protection District governing body (Government Code § 7922.530).

The Custodian of Records may exercise discretion to waive all or part of the fee if the requestor demonstrates that a waiver is in the public interest.

801.6.1 FEES FOR RECORDS IN ELECTRONIC FORMAT

The requestor shall bear the direct costs of duplication to produce a copy of a record in an electronic format and shall also bear the programming costs involved to construct a record and any computer services necessary if the request for electronic records is either (Government Code § 7922.575):

- (a) For a record that is produced only at specific scheduled intervals.
- (b) For a record that requires data compilation, extraction, or programming.

801.7 RELEASE RESTRICTIONS

In balancing the public's right to access public records, the statutory individual right of privacy and the need for the Bear Valley - Indian Valley Fire Protection District to be able to efficiently perform its duties, the Legislature has established certain categories of records that may be exempt from

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public disclosure. A complete list of statutory exemptions is found in the California Public Records Act. Absent a valid court order or other statutory authority, the Public Records Act exempts certain records from disclosure in whole or part. Those pertaining to the Bear Valley - Indian Valley Fire Protection District include but are not limited to the following (Government Code § 7920.000 et seq.):

- (a) Preliminary drafts, notes, or interagency or intra-agency memoranda that are not retained by the Bear Valley - Indian Valley Fire Protection District in the ordinary course of business, provided that the public interest in withholding such records clearly outweighs the public interest in disclosure. If a draft contains facts and recommendations, the facts must be disclosed but the recommendations may be withheld.
- (b) Records pertaining to pending litigation to which the Bear Valley - Indian Valley Fire Protection District is a party or to claims made, but only until such litigation or claim has been finally adjudicated or otherwise settled. The complaint, claim, records filed in court, records that pre-date the suit, reports about projects or activities that ended in litigation, and settlement records are subject to disclosure.
- (c) Personnel, medical, or similar files, the disclosure of which would constitute an unwarranted invasion of personal privacy.
 - 1. Home addresses, home telephone numbers, personal cellular telephone numbers, and birth dates of members are exempt from disclosure except in certain circumstances as provided in Government Code § 7927.700.
- (d) Records of complaints to or investigations conducted by the Bear Valley - Indian Valley Fire Protection District for law enforcement purposes.
- (e) Attorney-client discussions are confidential.
- (f) Test questions, scoring keys, and other examination data used to administer a licensing examination, examination for employment, or academic examinations.
- (g) Contents of real estate appraisals or engineering or feasibility estimates and evaluations made for or by the Bear Valley - Indian Valley Fire Protection District relative to the acquisition of property or to prospective public supply and construction contracts, until all of the property has been acquired or all contract agreements executed.
- (h) Records whose disclosure is exempt or prohibited pursuant to provisions of federal or state law, including but not limited to provisions of the Evidence Code relating to privilege.
- (i) Records that relate to archeological site information.

The Bear Valley - Indian Valley Fire Protection District retains the discretion to claim an exemption from public disclosure for any record that does not qualify for a specific exemption under the Public Records Act when the Bear Valley - Indian Valley Fire Protection District determines that the public interest served by not making the record public clearly outweighs the public interest served by disclosure.

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Records subject to exemption may nevertheless be made available for inspection if waiving the exemption will serve the public interest, as determined by the Bear Valley - Indian Valley Fire Protection District on a case-by-case basis. However, the Bear Valley - Indian Valley Fire Protection District's determination to disclose a record, which may otherwise be exempt from disclosure, does not constitute a waiver with respect to any other records (Government Code § 7921.505).

When the Custodian of Records determines that a record is exempt and disclosure should be denied, the Custodian of Records should contact legal counsel for the Department for further guidance. If legal counsel concurs with denying disclosure of the record, the Custodian of Records shall log the denial on the Public Records Act request log and provide a summary of the denial, in writing, to the Board of Directors.

801.8 RELEASED RECORDS TO BE MARKED

Each page of any record released pursuant to this policy should be stamped in a colored ink or otherwise electronically marked to indicate the department name and to whom the record was released.

Subpoenas

802.1 PURPOSE AND SCOPE

The purpose of this policy is to establish procedures for receiving, processing and responding to summons and subpoenas to appear or to produce records or evidence.

802.1.1 DEFINITIONS

Definitions related to this policy include:

Subpoena - A time sensitive court order requiring a person or entity to appear at a particular time and place to testify as a witness at a deposition, trial or hearing and/or to provide documents, records or evidence in a legal proceeding.

Subpoena duces tecum - A time sensitive court order requiring a person to produce in court specific documents or evidence.

Subpoena/Summons Request (SSR) log - The department log documenting the receipt of each subpoena or summons delivered to the Department, and that includes the document's source, the date received and the date of response to a request to produce documents or delivery to a member.

802.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to make reasonable efforts to comply with valid subpoena requests for records or evidence and personal appearances and to cooperate with court processes.

802.3 PROCEDURE

All subpoenas should be directed to the Custodian of Records or the authorized designee.

802.3.1 CUSTODIAN OF RECORDS

The Custodian of Records and any authorized designees should receive training in proper intake and processing of subpoenas. Members not designated by the Custodian of Records and properly trained are not authorized to accept subpoenas for department records.

If the Custodian of Records determines that a subpoena or a request for public records involves a request for a confidential record or relates to pending litigation against the Department or District, the request should be promptly brought to the attention of the Board of Directors and legal counsel for the Department.

802.3.2 SUBPOENAS FOR RECORDS

Subpoenas for records shall be date-stamped and logged on the subpoena/summons request (SSR) log.

The Custodian of Records will consult with the department privacy officer regarding any request for medical records. The Custodian of Records or the authorized designee will only produce the

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requested records as provided in this policy and the Patient Medical Record Security and Privacy Policy.

A Declaration of Records shall be prepared, signed, copied and attached to the records provided in response to a subpoena (Evidence Code § 1271; Evidence Code § 1561). The Custodian of Records shall make reasonable efforts to produce the requested records, or provide a response noting the lack of records, by the date specified in the subpoena.

The Department is entitled to recoup any reasonable costs incurred in production of business records in response to a subpoena duces tecum. The Custodian of Records should provide a statement reflecting the assessment of these reasonable costs and require payment at the time subpoenaed records are delivered.

802.3.3 CIVIL SUBPOENAS FOR DEPOSITION OR NOTICE TO APPEAR

Upon receipt of a civil subpoena for a deposition or notice to appear, the Custodian of Records shall date-stamp and log the subpoena on the SSR log.

The Custodian of Records shall ensure timely delivery of the subpoena to the identified member, noting on the log the date and time it was accepted. The receiving member should acknowledge receipt by signing and dating the log.

No subpoena for a member of this department as a witness in a civil action should be accepted unless it is accompanied by the statutory fee of \$275 for each day the member's appearance is required pursuant to the subpoena (Government Code § 68097.2).

Members shall notify their Captain of receipt of a subpoena. Members should contact the attorney issuing the subpoena to confirm the date and time of appearance or to confirm an on-call status. The member shall comply with all instructions on the subpoena and monitor the status of all required appearances to ensure compliance with judicial process. In the event a member will be unavailable to respond to a subpoena, the member shall promptly notify the attorney issuing the subpoena and the member's Captain.

Members who are deposed will request a copy of the transcript.

802.3.4 ON-CALL SUBPOENAS

Upon receipt of a subpoena and after contacting the issuing attorney, a member may make arrangements with the issuing attorney to be placed in an on-call status.

The subpoenaed member shall promptly notify his/her fire chief of the subpoena and any on-call status and make arrangements regarding any potential scheduling conflicts, potential overtime compensation or other follow-up required to coordinate on-call appearance status.

802.3.5 CRIMINAL SUBPOENAS

Upon receipt of a criminal subpoena related to department business, the member shall promptly notify the fire chief of his/her appearance and contact legal counsel if he/she has any questions.

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802.3.6 CIVIL SUBPOENAS UNRELATED TO OFFICIAL DEPARTMENT BUSINESS

Members served with or receiving subpoenas for civil matters unrelated to their department duties shall comply with the requirements of the subpoena. Members are not entitled to compensation for any such appearance or deposition and arrangements for time off should be coordinated with their supervisor.

802.3.7 WORKER'S COMPENSATION

A copy of any subpoena for a matter related to workers' compensation shall be promptly provided to the Board of Directors and/or the risk manager.

802.4 RESPONSIBILITIES

802.4.1 MEMBERS

Members subpoenaed to appear in court for any department-related reason or who are subpoenaed to produce records or evidence shall:

- (a) Document the date, time and manner of receipt.
- (b) Promptly contact the Custodian of Records and provide the Custodian with a copy of the subpoena.
- (c) Make arrangements through the Custodian of Records to obtain any related reports or information.
- (d) Notify their supervisor of the subpoena.
- (e) Contact counsel for the Department for any necessary guidance.

Employees who are subpoenaed to testify about department-related matters shall receive their normal wages. Any witness fees provided to an on-duty employee shall be promptly transmitted to the Department. Members shall coordinate any scheduled appearances with their company officer to ensure minimization of any appearances requiring the payment of overtime.

Employees subpoenaed to testify about non work-related matters shall be permitted to take time off to testify but are not entitled to receive wages. Employees shall be entitled to use vacation, personal leave or compensatory time off for the time they will be away from work.

Members appearing in court or appearing for court-related functions such as depositions shall appear for court or other judicial proceedings in uniform or conservative business attire.

Any questions regarding this policy or its requirements shall be promptly directed to a supervisor or department legal counsel.

802.4.2 SUPERVISORS

Supervisors should monitor the schedules of members who have been served subpoenas requiring their appearance to ensure appropriate shift coverage and compensation for the subpoenaed member.

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Supervisors shall not intentionally adjust a member's duty schedule for the purpose of creating overtime.

802.5 TESTIFYING AGAINST THE INTEREST OF THE DISTRICT

Any member who has been subpoenaed to testify, has agreed to testify or who anticipates testifying or providing information on behalf of, or at the request of, any party other than the state, any city, county or any of their officers, agents or employees in which any of those entities or persons are parties to the litigation, will promptly notify his/her supervisor. The supervisor shall notify the Board of Directors, prosecuting attorney in a criminal case and the department's legal counsel, as may be indicated by the case.

(a) This requirement includes:

1. Providing testimony or information for the defense in any criminal trial or proceeding.
2. Providing testimony or information for the plaintiff in a civil proceeding against any city, county or their officers, agents or employees.
3. Providing testimony or information on behalf of, or at the request of, any party other than any city, county or District official in any administrative proceeding, including, but not limited to, personnel and/or disciplinary matters.

802.6 RECEIPT AND PROCESSING OF A SUMMONS

Upon receipt of a summons and complaint in a matter related to department business, the member shall document the date, time and manner of receipt and promptly notify his/her fire chief and contact legal counsel for the Department.

802.7 JURY DUTY

If a member receives a summons for jury duty and it falls on an on-duty day, the member shall promptly notify his/her supervisor. Members shall be granted leave for jury duty for the hours required by the court.

The member should obtain a jury duty excuse form from the court and present the document to his/her fire chief upon returning to work.

Patient Medical Record Security and Privacy

803.1 PURPOSE AND SCOPE

The purpose of this policy is to establish appropriate administrative, technical, and physical safeguards for patient medical records and to provide reasonable safeguards against prohibited uses and disclosures of protected health information (PHI) in accordance with federal and state law, to include the following:

- Health Insurance Portability and Accountability Act (HIPAA) (42 USC § 201 et seq.)
- California Confidentiality of Medical Information Act (CMIA) (Civil Code § 56 et seq.)
- Health and Safety Code § 1797.220
- Health and Safety Code § 1798

803.1.1 DEFINITIONS

Definitions related to this policy include:

Health information - Any information, whether oral or recorded in any form or medium, that is created or received by the Department and relates to a person's past, present, or future physical or mental health or condition, or past, present, or future payment for the provision of health care to a person (45 CFR 160.103).

Individually identifiable health information - Health information, including demographic information, created or received by the Department that relates to an individual's past, present, or future physical or mental health or condition, the provision of health care to the individual, or the past, present, or future payment for the provision of health care to an individual that can either identify the individual or provide a reasonable basis to believe the information can be used to identify the individual (45 CFR 160.103).

Limited data set - PHI that excludes the following direct identifiers of an individual or of relatives, employers, or household members of the individual (45 CFR 164.514(e)):

- Names
- Postal address information, other than town or city, state, and ZIP code
- Telephone or fax numbers
- Email addresses
- Social Security numbers
- Medical record numbers
- Health plan beneficiary numbers
- Account numbers
- Certificate or license numbers

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- Vehicle identifiers and serial numbers, including license plate numbers
- Device identifiers and serial numbers
- Web Universal Resource Locators (URLs)
- Internet Protocol (IP) address numbers
- Biometric identifiers, including finger and voice prints
- Full-face photographic images and/or any comparable images

Patient medical records - Department records or data containing any information identifying a patient.

Protected health information (PHI) - Individually identifiable health information that is created or received by the Department. Information is protected whether it is in writing, in an electronic form, or communicated orally (45 CFR 160.103).

Protected personal information (PPI) - Information that includes but is not limited to PHI, pictures or other forms of voice or image recording, patient address, telephone numbers, Social Security number, date of birth, age, or any other information that could be reasonably used to uniquely identify the patient or that could result in identity theft if released for unauthorized purposes or to unauthorized personnel.

803.2 POLICY

It is the policy of the Department to reasonably safeguard PHI and comply with the HIPAA and the implementing regulations through the use of policy and procedures, system access security and passwords, and limited physical access to hard copy files (45 CFR 164.530(c)).

803.3 RESPONSIBILITIES

Members shall protect the security, confidentiality, and privacy of all patient medical records in their custody at all times.

Possessing, releasing, or distributing PPI, including for unauthorized purposes, is prohibited and may violate the HIPAA and/or other applicable laws. Members who have not received department training on the proper handling of these records shall not access patient medical records.

Members with occupational access to patient medical records shall be trained in the proper handling of PHI in accordance with the Health Insurance Portability and Accountability Act (HIPAA) Training Policy and shall reasonably ensure that no unauthorized person shall have access to PHI without the valid authorization of the patient, except as provided by law (45 CFR 164.530(b); 45 CFR 164.512; Welfare and Institutions Code § 5328(24)).

803.4 PRIVACY OFFICER

The fire chief or designee shall be responsible for all matters relating to the privacy of patient medical information, including PHI. The privacy officer shall (45 CFR 164.530):

- (a) Identify who may have access to PPI and PHI.

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- (b) Resolve complaints under the HIPAA.
- (c) Mitigate to the extent practicable any harmful effects known to the Department regarding any use or disclosure of PHI in violation of this policy or the HIPAA regulations.
- (d) Ensure members are trained in the proper handling of PHI in accordance with the Health Insurance Portability and Accountability Act (HIPAA) Training Policy.
- (e) Ensure technical and physical safeguards are implemented to maintain security and confidentiality of PHI and to allow access to PHI only to those persons or software programs that have been granted access rights.

803.5 PROCEDURE

Records containing PHI or PPI, including Pre-Hospital Care Reports (PCRs), shall be kept out of view unless the report is being completed during an incident, during input of information into the National Fire Incident Reporting System (NFIRS), or during processing or review at Bear Valley - Indian Valley Fire Protection District facilities by authorized personnel (45 CFR 164.530(c)).

803.6 SECURITY

All patient records containing PHI or PPI shall be kept secure at all times whether the record is in written, verbal, electronic, or any other visual or audible format (45 CFR 164.306(a)).

Documents provided by a patient or caregiver will receive the same level of confidentiality and security as department records during the time department personnel retain possession of the documents.

No patient record, including documents and electronic images containing PHI, shall be visible to the public.

803.6.1 ELECTRONIC PHI SECURITY

All computer workstations and servers within the Department shall require appropriate security measures, such as user identification and login passwords, to access electronic documents, including electronic PHI (45 CFR 164.308(a)(5)).

Members with access to electronic data shall lock their workstations when left unattended and shall shut down their workstations when leaving for the day to prevent unauthorized access to electronic PHI (45 CFR 164.310; 45 CFR 164.312).

Remote access to department computer workstations requires that appropriate security measures be provided for access to PHI (45 CFR 164.312).

PHI may be transmitted electronically, provided the transmission occurs through a secure process that allows end-to-end authentication and the recipient is authorized to receive the information. Electronic transmission consists of email, file transfer protocol, internet web posting, and any configurable data stream. End-to-end authentication is accomplished when the electronic referral does not leave a secure network environment and the recipient is known, or when encryption and authentication measures are used between sender and recipient, thus verifying full receipt by

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the recipient. Any electronic PHI traveling outside a secure network environment, via the internet, requires encryption and authentication measures (45 CFR 164.312(e)).

803.6.2 HARD COPIES

Hard copies of PCRs shall be kept in a secured area when unattended by authorized personnel. An area of the Department is considered unattended when members are physically outside of the area and unable to maintain record security. This includes but is not limited to breaks, lunch, and meetings outside the Department.

Hard copies of PCRs should be stored in a locked area whenever practicable for ease of record retention and retrieval.

Patient records shall not be removed from the Department without express authorization from the Custodian of Records.

803.7 PHI RECORD REQUESTS

The following procedures apply to PHI record requests:

- (a) Requests and subpoenas for copies of patient records shall be processed by the Custodian of Records.
- (b) The Custodian of Records or the authorized designee shall not release records containing PHI without a properly completed authorization to release medical records that is signed by the patient or legal representative of the patient.
 1. Verification that the person completing the authorization is the patient or the legal representative of the patient shall be made with government-issued identification and documentation (45 CFR 164.508(c)).
- (c) Unless the request for records is from the patient or the parent of a minor patient, PHI shall be redacted from the record. A photocopy of the record shall be distributed to the requestor.
- (d) Requests for records via a valid subpoena do not require that PHI be redacted.
- (e) Fulfilled records requests shall be placed in a sealed envelope for release to the requestor.
- (f) A full copy of the valid subpoena or authorization to release medical records form shall be maintained in the file with the PCR.

803.7.1 PROHIBITED DISCLOSURES OF PHI AND PPI

The Department shall not use or disclose PHI or PPI without authorization. Prohibited disclosures include any form of communication, except as permitted in this policy, including but not limited to (45 CFR 160.103):

- (a) PHI or PPI contained in email or other forms of written communication.
- (b) Sharing of PHI or PPI on any website, blog, or other form of social or public media.
- (c) Verbal discussions.

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- (d) The use of any imaging device capable of capturing and storing still or moving images, such as digital or other cameras, video cameras, cellular telephones with picture-taking or video-recording capability, or any other device with picture-taking or video-recording capability, while engaged in patient care, while at the scene of a medical emergency or hospital, or at any time when such use could reasonably be expected to result in the inappropriate capture of PHI or PPI.

803.7.2 PERMITTED DISCLOSURES OF PHI AND PPI

The Custodian of Records may release records containing PHI or PPI without authorization from the patient under any of the following circumstances:

- (a) For the department's use to carry out treatment, payment, or health care operations (45 CFR 164.506)
- (b) Where the PHI is requested pursuant to a valid subpoena or court order (45 CFR 164.512(e))
- (c) Where the PHI is part of a limited data set (45 CFR 164.514(e))
- (d) Where the PHI is used for public health activities authorized by law, including when the information is necessary to report child abuse or neglect (45 CFR 164.512(b))
- (e) Where the PHI is disclosed to a government authority because the person is believed to be a victim of abuse, neglect, or domestic violence (45 CFR 164.512(c))
- (f) To law enforcement as provided in this policy (45 CFR 164.512(f))
- (g) Where the Department believes that disclosure of the information is necessary to avert a serious threat to the health or safety of a person or the public (45 CFR 164.512(j))
- (h) Where the PHI is required for workers' compensation purposes (45 CFR 164.512(l))

803.7.3 REQUIRED DISCLOSURES

The Department must disclose PHI when:

- (a) The PHI is requested by and provided to the individual to whom the PHI belongs (45 CFR 164.502(a)(2)).
- (b) The information is required by the U.S. Secretary of Health and Human Services to investigate compliance with HIPAA (45 CFR 164.502(a)(2)).

803.7.4 SUBPOENAS

Records containing PHI or PPI will be disclosed only if one of the following is present (45 CFR 164.512(e)(1)):

- (a) A court order or subpoena signed (or stamped) by a judge that requires no additional assurances or notification to the individual whose records are requested.
- (b) A subpoena or discovery order signed by an attorney which requires additional proof of service that written notification has been given to the individual whose records are requested. In such a case, the subpoena or discovery order must be accompanied by one of the following:
 - 1. A qualified protective order.

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2. A notice to consumer (Code of Civil Procedure § 1985.3) or a declaration by the requesting party showing that reasonable efforts have been made to ensure that notice has been provided to the individual whose records are being requested.
 - (a) No records relating to the person named in the notice will be produced until the time to respond to the notice has lapsed and no objections to the production of the materials requested have been made. If a notice to consumer is not provided, the declaration must establish that:
 1. The requesting party has made a good faith effort to provide written notice to the individual.
 2. The notice includes sufficient information about the litigation or proceeding for which the PHI is requested to allow the individual to raise an objection.
 3. The time for the individual to raise objections to the court or tribunal has elapsed.
 4. No objections were filed or all objections have been resolved.
 - (b) In lieu of a declaration, records may be released if there is a court order or a stipulation by the parties to the litigation that both (45 CFR 164.512(e)(1)(v)):
 1. Prohibits the parties from using or disclosing the PHI for any purpose other than the litigation or proceeding for which such information was requested.
 2. Requires the return to the Department or destruction of the PHI (including all copies made) at the end of the litigation or proceeding.

803.7.5 RELEASE OF PHI TO LAW ENFORCEMENT

The release of PHI to a law enforcement agency is permitted under the following circumstances:

- (a) In response to a law enforcement officer who completes the department's release of PHI to law enforcement form and requires the PHI (45 CFR 164.512(f)(1)):
 1. To report certain types of wounds or other physical injuries.
 2. In compliance with a court order or court-ordered warrant, a subpoena or summons, a grand jury subpoena, or an administrative request for which a response is required by law.
- (b) In response to a law enforcement officer who completes the department's release of PHI to law enforcement form for the purpose of identifying or locating a suspect, fugitive, material witness, or missing person. In such a case, the Department may only disclose the following PHI (45 CFR 164.512(f)(2)):
 1. Name and address
 2. Date and place of birth
 3. Social Security number

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4. ABO blood type and Rh factor
5. The character and extent of injuries
6. Date and time of treatment
7. Date and time of death, if applicable
8. A description of distinguishing physical characteristics

803.7.6 ADDITIONAL RESTRICTIONS FOR REPRODUCTIVE HEALTH CARE RECORDS

Records related to reproductive health records as defined by 45 CFR 160.103 are subject to additional disclosure restrictions as provided in 45 CFR 164.502 and 45 CFR 164.509. Requests that may include reproductive health care records should be evaluated by the Custodian of Records in consultation with legal counsel before disclosure to ensure compliance with federal law.

803.8 INDIVIDUAL RIGHTS

The privacy officer is responsible for ensuring the Department complies with all of the following rights of patients:

- (a) The right to request restrictions on certain uses and disclosures of PHI (45 CFR 164.522(a))
- (b) The right to receive their PHI confidentially (45 CFR 164.522(b))
- (c) The right to inspect and copy their PHI (45 CFR 164.524)
- (d) The right to request amendments to their PHI (45 CFR 164.526)
- (e) The right to receive an account of disclosures of PHI (45 CFR 164.528)

803.8.1 PHI AMENDMENT REQUESTS

Patients have the right to review their PHI records and, if necessary, request that amendments be made. A patient must make a request in writing to have their medical record amended. Included in the request must be the patient's account of the incident and what specific amendment is being requested (45 CFR 164.526(b)(1)).

The privacy officer has the authority to deny the request for amendment where the PHI (45 CFR 164.526(a)(2)):

- (a) Was not created by the Department.
- (b) Is not part of the designated record.
- (c) Is not available for inspection by the requestor pursuant to 45 CFR 164.524.
- (d) Is accurate and complete.

Within 60 days of receipt of the request for amendment, the privacy officer must provide the basis for its denial in writing or, in the case that the request is approved, provide notice of approval (45 CFR 164.526(b)(2)).

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The time for response may be extended for up to 30 days with a written statement to the requestor identifying the reasons for the delay and the date by which the action will be completed (45 CFR 164.526(b)(2)).

Chapter 9 - Safety

Illness and Injury Prevention Program

900.1 PURPOSE AND SCOPE

The purpose of this policy is to establish an ongoing and effective plan to reduce the incidence of injury and illness for members of the Bear Valley - Indian Valley Fire Protection District, in accordance with the requirements of Labor Code § 6401.7 and 8 CCR 3203.

Although this policy provides the essential guidelines for a plan that reduces injury and illness, it may be supplemented by department procedures outside the Policy Manual.

This policy supplements but does not supersede any related Districtwide safety efforts.

900.2 POLICY

The Bear Valley - Indian Valley Fire Protection District will adopt an Illness and Injury Prevention Program (IIPP) in order to increase the safety of its members.

900.3 ILLNESS AND INJURY PREVENTION PROGRAM PLAN

The Health and Safety Officer (HSO) is responsible for developing an IIPP that shall include:

- (a) Workplace safety and health training programs.
- (b) A Workplace Violence Prevention Plan that meets the requirements of Labor Code § 6401.9.
- (c) A Workplace Violence Prevention Plan for EMS members that meets the requirements of 8 CCR 3343.
- (d) Safety inspections.
- (e) Informing members of IIPP guidelines.
- (f) Recognizing members who perform safe work practices.
- (g) Member evaluation processes, including member safety performance.
- (h) A system ensuring that all safety and health policies and procedures are clearly communicated and understood by all members.
- (i) A communication system facilitating the continuous flow of safety and health information between supervisors and members. This system shall include:
 - 1. New member orientation, including a discussion of safety and health policies and procedures.
 - 2. Regularly scheduled safety meetings.
 - 3. Regular member review of the IIPP.
 - 4. Providing access to the illness and injury prevention plan to members or their representatives as set forth in 8 CCR 3203.
- (j) Establishing Division Safety Coordinators and defining their responsibilities.
- (k) Posting or distributing safety information.

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- (l) A system for members to anonymously inform management about workplace hazards.
- (m) Availability of forms that address:
 - 1. Identification, documentation, and correction of hazards, any unsafe condition or work practice, and actions taken to correct them.
 - 2. Investigations and corrective actions taken regarding individual incidents or accidents.
 - 3. Training records of each member, including the member's name or other identifier, training dates, type of training, and training providers.
- (n) Establishing a safety and health committee, which will:
 - 1. Meet regularly.
 - 2. Prepare a written record of safety and health committee meetings.
 - 3. Review the results of periodic scheduled inspections.
 - 4. Review investigations of accidents and exposures.
 - 5. Make suggestions to command staff for the prevention of future incidents.
 - 6. Review investigations of alleged hazardous conditions.
 - 7. Submit recommendations to assist in the evaluation of member safety suggestions.
 - 8. Assess the effectiveness of efforts made by the Department to meet standards.

The HSO must conduct and document a review of the IIPP at least annually.

900.3.1 REVIEW OF SAFETY MANDATES

The IIPP shall also include a process to review compliance with safety mandates (Labor Code § 6407). The process should include a review of safety mandates relating to:

- (a) Communicable diseases (see the Communicable Diseases Policy).
- (b) Respiratory protection (see the Respiratory Protection Program Policy).
- (c) Personal protective equipment (see the Personal Protective Equipment Policy).
- (d) Emergency Action Plan and Fire Prevention Plan (see the Emergency Action Plan and Fire Prevention Plan Policy).
- (e) Walking-Working Surfaces (see the Fire Station Living Policy).
- (f) Heat illness (8 CCR 3395; 8 CCR 3396).
- (g) Workplace Violence Prevention Plan for EMS (8 CCR 3342).
- (h) Workplace Violence Prevention Plan for non-EMS members (Labor Code § 6401.9) (see the Workplace Violence Policy).
- (i) Hazards associated with wildfire smoke (8 CCR 5141.1).

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900.4 TRAINING SAFETY OFFICER

Training /Safety Officer responsibilities include but are not limited to:

- (a) Ensuring member compliance with injury and illness prevention guidelines and answering questions from members about this policy.
- (b) Training, counseling, instructing, or making informal verbal admonishments any time safety performance is deficient. Supervisors may also initiate discipline when it is reasonable and appropriate under the Conduct and Behavior Policy.
- (c) Establishing and maintaining communication with members on health and safety issues. This is essential for an injury-free, productive workplace.
- (d) Completing required forms and reports relating to injury and illness prevention; such forms and reports shall be submitted to the Fire Chief.
- (e) Notifying the Fire Chief when:
 - 1. New substances, processes, procedures, or equipment that present potential new hazards are introduced into the work environment.
 - 2. New, previously unidentified hazards are recognized.
 - 3. Occupational injuries and illnesses occur.
 - 4. New and/or permanent or intermittent members are hired or reassigned to processes, operations, or tasks for which a hazard evaluation has not been previously conducted.
 - 5. Workplace conditions warrant an inspection.

900.5 HAZARDS

All members should report and/or take reasonable steps to correct unsafe or unhealthy work conditions, practices, or procedures in a timely manner. Members should make their reports to a supervisor (as a general rule, their own supervisors).

Supervisors should make reasonable efforts to correct unsafe or unhealthy work conditions in a timely manner, based on the severity of the hazard. These hazards should be corrected when observed or discovered when it is reasonable to do so. When a hazard exists that cannot be immediately abated without endangering members or property, supervisors should protect or remove all exposed members from the area or item, except those necessary to correct the existing condition.

Members who are necessary to correct the hazardous condition shall be provided with the necessary protection.

All significant actions taken and the dates they are completed shall be documented on the appropriate form. This form should be forwarded to the Fire Chief via the chain of command.

The Fire Chief will take appropriate action to ensure the IIPP plan addresses potential hazards upon such notification.

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900.6 INSPECTIONS

Safety inspections are crucial to a safe work environment. These inspections identify and evaluate workplace hazards and permit mitigation of those hazards. A hazard assessment checklist should be used for documentation and to ensure a thorough assessment of the work environment.

The TSO shall ensure that the appropriate documentation is completed for each inspection.

900.7 RECORDS

Records relating to injury and illness prevention will be maintained in accordance with the established records retention schedule.

Cal/OSHA Inspections

901.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines and responsibilities for Bear Valley - Indian Valley Fire Protection District members to follow in the event that a California Division of Occupational Safety and Health (Cal/OSHA) inspector requests access to department property or work operations (Labor Code § 6314).

This policy does not address those inspections requested by the Bear Valley - Indian Valley Fire Protection District as part of a consultation service by Cal/OSHA.

901.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District for the Board of Directors or the authorized designee to designate one or more department representatives who will be responsible for facilitating a Cal/OSHA inspection. An adequate number of representatives shall be designated to accommodate the needs of the Cal/OSHA inspector without excessive delays. Designated representatives shall make every reasonable effort to promptly meet with the Cal/OSHA inspector once he/she has arrived (Labor Code § 6314(d)).

Department members should work cooperatively with any Cal/OSHA inspector to provide access to all necessary areas, equipment and records to facilitate a cohesive inspection process. Failure on the part of the Department to begin the inspection in a timely manner could result in the Cal/OSHA inspector obtaining an inspection warrant to enter department property. This could unnecessarily create an adversarial relationship and should be avoided if at all possible.

901.3 PROCEDURE

Cal/OSHA inspections may be unannounced (Labor Code § 6321). Typically inspections occur when there has been a serious accident, serious injury, occupational fatality, when a member has charged that a serious safety violation exists or at a worksite where an imminent danger has been identified.

Upon entering the department worksite, the inspector will present his/her identification and will ask to meet with the department representative. There will usually be an initial meeting during which the inspector will:

- Explain the nature and scope of the inspection.
- Request that a member/representative accompany the inspector.
- Ask to review appropriate safety records, plans and documentation.

Cal/OSHA inspectors are, by law, permitted to interview members in private, take photographs, conduct tests and collect environmental samples. Department representatives should make reasonable accommodations to provide inspectors access to available members and materials required to complete the inspection. Any statements made to inspectors are admissible in judicial hearings. Questions of a sensitive nature or to which the member is unsure of how to respond

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Cal/OSHA Inspections

may be referred to the person at the Department who is the subject matter expert on the topic (Labor Code § 6314(a)).

At the conclusion of the inspection, the Cal/OSHA inspector will hold a closing meeting with the department representative to discuss any alleged safety standard violations and any requirements for abatement.

Any time there is a Cal/OSHA inspection, violation and/or citation, the Board of Directors shall ensure that notifications are made to the department's Training and Safety Officer, risk manager, and legal counsel, and that the Department conducts an appropriate internal investigation and adequately addresses all Cal/OSHA findings.

Cal/OSHA Notification of Injury, Illness, or Death

902.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the requirements for the Department to immediately report to Cal/OSHA any death, serious injury, or illness connected with the victim's employment (including members of this department). Immediately shall mean as soon as practicable, but generally no longer than eight hours after the Department has knowledge of the injury, illness, or death. If exigent circumstances exist, the time frame for the report shall be no longer than 24 hours after the incident (8 CCR 342(a)).

902.1.1 EMPLOYMENT RELATED DEATHS OR INJURIES

Any member of this department who responds to and determines that a death, serious illness, or serious injury has occurred as a result of an accident at or in connection with the victim's employment shall ensure that the nearest office of Cal/OSHA is notified by telephone with all pertinent information (8 CCR 342(b)).

902.2 PROCEDURE

Cal/OSHA requires the following information, if available, be submitted with the notification (8 CCR 342(c)):

- Time and date of the accident, injury, illness or death
- Reporting department's name, address and telephone number
- Name and job title of the person making the report
- Address of the incident
- Name of the person to contact at the site of the incident
- Name and address of the injured, ill or deceased member
- Nature of the injury or illness
- The location where the injured member was transferred
- The names of any other fire or law enforcement agencies present at the site of the incident, including the names and badge numbers of personnel present
- A description of the accident/incident and whether the accident scene has been altered
- If the accident/incident was caused by an instrument or machinery, whether that instrument or machinery has been altered

The fire chief or designee shall provide the information to the Board of Directors directly when the illness or injury involves a member of this department. The Board of Directors is responsible for reporting the required information to Cal/OSHA at the 24 hours a day seven days a week contact number maintained by Colusa County.

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Cal/OSHA Notification of Injury, Illness, or Death

For incident-related responses not involving members of the Bear Valley - Indian Valley Fire Protection District and requiring telephonic notification to Cal/OSHA, the company officer shall be responsible for the notification.

902.3 POLICY

The Department will comply with Cal/OSHA reporting requirements in the event of a serious illness, injury, or death.

Communicable Diseases

903.1 PURPOSE AND SCOPE

This policy is intended to provide guidelines for department members to assist in minimizing the risk of contracting and/or spreading communicable diseases. The policy offers direction in achieving the following goals:

- (a) Managing the risks associated with exposure to bloodborne pathogens (BBP), aerosol transmissible diseases, and other potentially infectious substances (8 CCR 5193, 8 CCR 5199 and 29 CFR 1910.134).
- (b) Assisting department members in making decisions concerning the selection, use, maintenance, limitations, storage, and disposal of personal protective equipment (PPE).
- (c) Protecting the privacy rights of all department members who may be exposed to or contract a communicable disease during the course of their duties.
- (d) Providing appropriate treatment and counseling should a member become exposed to a communicable disease.

903.2 POLICY

The Bear Valley - Indian Valley Fire Protection District is committed to providing a safe and healthful work environment for its members by providing each member with the best available protection from occupationally acquired communicable disease. Communicable disease is an occupational health hazard, and transmission is possible during emergency responses and other department and in-station operations.

903.3 EXPOSURE CONTROL PLAN

The Department has developed an Exposure Control Plan (ECP) to eliminate or minimize occupational exposure to communicable diseases. The Board of Directors or the authorized designee shall designate an Exposure Control Officer (ECO), who will be responsible for the administration of the ECP and the designated responsibilities. The responsibilities shall include the establishment, implementation, and maintenance of effective written infection control procedures to control and reduce the risk of acquiring BBPs and aerosol transmissible diseases.

The ECP shall include the following core elements:

- Provide fire, rescue, and Emergency Medical Services (EMS) to the public without regard to known or suspected existence of communicable diseases.
- Regard all patient contacts as potentially infectious. Universal precautions will be observed at all times and will be expanded to include all bodily fluids and other potentially infectious material.
- Provide all at-risk department members with training, immunizations, TB skin test, and PPE necessary for protection from communicable diseases.
- Provide any department member exposed to a communicable disease with a post-exposure follow-up in compliance with state standards.

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The ECP shall be in writing, shall comply with all legal requirements, and shall (8 CCR 5193 et seq.):

- (a) Determine and note positions with the potential for exposure and whether the positions require respiratory protection.
- (b) Establish a schedule and method for implementing the plan.
- (c) Establish source control measures and the method of informing members of the source control measures.
- (d) Establish procedures for evaluation of the circumstances of exposure incidents and for appropriate follow-up.
- (e) Address the distribution and use of PPE related to communicable diseases.
- (f) Establish an effective procedure to track the frequency of use and the types and brands of sharps involved in exposure incidents; this should be documented on a sharps injury log.
- (g) Establish a process for vaccinating members.
- (h) Establish an effective procedure and method to identify currently available engineering controls and selecting such controls, where appropriate, for the procedures performed by department members in their respective work areas.
- (i) Establish a training program to educate department members on the ECP.
- (j) Be accessible to department members (8 CCR 3204(e)).
- (k) Be reviewed annually by the ECO, to include the input of members from various work areas.
- (l) Be reviewed for new or modified tasks and procedures affecting occupational exposures.
- (m) Reflect changes in technology that eliminate or reduce exposure.
- (n) Consider and/or implement any appropriate, commercially available needle-less systems and needle devices and sharps with engineered sharps injury protection.
- (o) Include new or revised member positions with occupational exposures.
- (p) Be available to the National Institute for Occupational Safety and Health (NIOSH) or the respective designee upon a request.

903.3.1 EXPOSURE TO BLOOD, BODILY FLUIDS, OR AEROSOL TRANSMISSIBLE DISEASES

All department members who are exposed to another person's blood, bodily fluids, or an aerosol transmissible disease shall follow the ECP procedures and guidelines.

Exposure to blood or other potentially infectious materials includes but is not limited to the contact of such substances with the eye, mouth, other mucous membranes, non-intact skin, needle sticks, human bites, cuts, or abrasions, or any other qualifying exposure (Health and Safety Code § 121060.1 or 8 CCR 5193).

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Exposure to an aerosol transmissible disease is any event in which all of the following have occurred (8 CCR 5199):

- (a) A member has been exposed to an individual who has or is suspected of having a reportable aerosol transmissible disease, or to a work area or to equipment that is reasonably expected to contain aerosol transmissible pathogens associated with a reportable aerosol transmissible disease.
- (b) The exposure occurred without the benefit of applicable exposure controls required by this policy.
- (c) It reasonably appears from the circumstances of the exposure that transmission of disease is sufficiently likely to require medical evaluation.

903.3.2 TRAINING AND SAFETY OFFICER

The TSO shall be responsible for the following:

- (a) Establishing and maintaining written procedures and a training program related to BBPs (8 CCR 5193).
- (b) Establishing and maintaining written procedures and a training program related to aerosol transmissible diseases (8 CCR 5199).
- (c) Working with management to develop and administer any additional related policies and practices necessary to support the effective implementation of the ECP.
- (d) Investigating all reports of exposures or suspected exposures to communicable disease.
- (e) Providing guidance and follow-up instructions when an exposure occurs.
- (f) Communicating with hospital infection control personnel.
- (g) Coordinating the collection, management, and security, and maintaining the confidentiality of all exposure records (8 CCR 5193).
- (h) Remaining current on all legal requirements concerning BBPs and other communicable diseases (8 CCR 5193).
- (i) Coordinating the immunization and vaccination of department members.
- (j) Acting as a liaison during Occupational Safety and Health Administration (OSHA) inspections, conducting program audits to maintain an up-to-date ECP, and ensuring exposure report forms are available and adequate for members to properly report incidents of exposure.
- (k) The training division shall maintain an up-to-date list of department members requiring training.
- (l) Coordinate with the training division in developing and implementing a training program, maintaining class rosters and quizzes, and periodically reviewing and updating the training program.
- (m) Reviewing and updating the ECP annually, on or before January 1 of each year.

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- (n) Establishing procedures to ensure that members request exposure notification from health facilities when transporting a person who may have a communicable disease, and that the member is notified of any exposure as required by Health and Safety Code § 1797.188.
- (o) Informing members of the provisions of Health and Safety Code § 1797.188 (exposure to communicable diseases and notification).
- (p) Acting as the designated officer liaison with health care facilities regarding communicable disease or condition exposure notification. The designated officer should coordinate with other department members to fulfill the role when not available. The designated officer shall ensure that the name, title, and telephone number of the designated officer is posted on the Department website (Health and Safety Code § 1797.188).

All members are responsible for exposure control in their respective areas. They shall work directly with the TSO and any affected members to ensure that the proper exposure control procedures are followed.

903.3.3 EXPOSURE DETERMINATION

The Department shall actively involve members in the preparation of an exposure determination that identifies the job classifications with potential for exposure to occupational BBPs. Exposure determination shall be made without regard to the PPE worn (8 CCR 5193(c)(1)(B)(8)).

903.3.4 UNIVERSAL PRECAUTIONS

All human blood and bodily fluids such as saliva, urine, semen, and vaginal secretions are to be treated as if they are known to be infectious. Where it is not possible to distinguish between bodily fluid types, all bodily fluids are to be assumed potentially infectious.

The minimum number of members required to complete a task safely will be used for all on-scene operations. Members who are not immediately needed will remain a safe distance (at least 6 feet) from operations when a communicable disease exposure is possible or anticipated. When transporting a patient with a potential aerosol transmissible disease, members should notify hospital staff prior to arrival to allow for the proper isolation of the patient immediately upon arrival.

Universal precautions extend beyond the emergency incident and should be observed in the communal living environment of the fire station as follows:

- (a) Members shall not report to work with signs or symptoms of a febrile aerosol transmissible disease or any wounds that cannot be completely covered or in which exudates from the wounds cannot be contained with dressings.
- (b) Members shall wash their hands thoroughly for a minimum of 15 seconds with soap and water:
 - 1. Before and after handling or preparing food.
 - 2. Before eating.
 - 3. After using the restroom.

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4. After sneezing or coughing into the hands and/or handling contaminated facial tissue.
 5. After each patient contact.
 6. After removing any PPE.
 7. After handling potentially infectious materials.
 8. After cleaning and/or decontaminating equipment.
- (c) If hand washing with soap and water is not possible, germicidal hand wipes or a waterless hand cleanser shall be used.
- (d) Exercise equipment shall be wiped down with germicidal cleaner between users.
- (e) Members shall not share utensils, towels, bedding, or personal care items (e.g., razors, toothbrushes, nail clippers).
- (f) Members shall cover the mouth and nose with a tissue when coughing or sneezing. If tissue is not readily available, members should avoid coughing or sneezing into their hands and cover their mouth and nose with their arm.
- (g) All eating, drinking, smoking, applying of cosmetics or lip balm, and handling of contact lenses is prohibited in areas where there is an expectation of communicable disease exposure.
- (h) Food and drink shall not be stored in areas where there is an expectation of communicable disease exposure.
- (i) Perishable food that requires cold storage shall be kept at a temperature of 3 degrees Celsius or 38 degrees Fahrenheit or lower.
- (j) Perishable food that requires freezer storage shall be kept at a temperature of -18 degrees Celsius or 0 degrees Fahrenheit or lower.
- (k) All food that is removed from original manufacturer packaging shall be kept in a tightly sealed food container or shall be wrapped with plastic food wrap.

903.3.5 PERSONAL PROTECTIVE EQUIPMENT

PPE is the last line of defense against communicable disease. Therefore, the following procedures should be followed:

- (a) Department-issued disposable latex or nitrile gloves shall be worn prior to initiating any patient treatment. If the situation dictates reusable gloves (i.e., structural or wildland gloves) and the risk of communicable disease is also present, disposable gloves shall be worn under the utility gloves.
- (b) Disposable gloves shall be replaced as soon as practicable when contaminated, torn, or punctured, or any time the ability to function as a barrier is compromised, and before contact with any other person.
- (c) When possible, gloves should be changed between patients in multiple casualty situations, and hands should be cleaned with disinfectant wipes.
- (d) Disposable gloves shall not be washed or decontaminated for reuse.

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- (e) Approved medical aid eye protection and masks or full-face shields are mandatory whenever splashes, spray, or droplets of bodily fluid may be generated, and eye, nose, or mouth contamination can be reasonably anticipated. Procedures that put the member at risk for splash or spray exposure include but are not limited to inserting airways, suctioning, childbirth procedures, and the treatment of a patient who is bleeding, vomiting, or spitting.
- (f) An N95 respirator mask shall be worn when encountering an individual who is actively coughing or has a suspected or known aerosol transmissible pathogen.
- (g) A disposable mask may be placed on a patient with a potential aerosol transmissible pathogen only when the patient has not exhibited respiratory distress or potential respiratory compromise and pulse oximetry confirms that the patient is not hypoxic.
- (h) An approved spit hood may be placed over a patient's head who is attempting to bite or intentionally spit at the care providers. The use of a spit hood shall not replace the donning of a mask and goggles for the care provider when indicated. The spit hood should not be used if the patient:
 - 1. Is or has the potential of developing respiratory distress.
 - 2. Has a clinical indication for supplemental oxygen administration, oral suctioning, or insertion of an airway adjunct.
 - 3. Has a condition that indicates the need to closely monitor skin signs.
- (i) If the circumstances dictate head and foot covering are needed, firefighting gear, boots, and helmets shall be worn.
- (j) It is the responsibility of the company officer to ensure that all appropriate PPE measures are utilized as soon as it is apparent that PPE is appropriate.
- (k) A mechanical breathing or a mask with a one-way valve will be used when providing respiratory assistance. Mouth-to-mouth ventilation may be performed only as a last resort if the needed equipment is not available.
- (l) Disposable resuscitation devices will be immediately available at all times when on-duty. The airway bag is to be brought to the patient's side for all medical emergency calls to ensure that all equipment necessary to ventilate the patient is accessible.
- (m) When in public but not assigned to a medical aid call (e.g., grocery shopping, inspections), one member of the company should carry a mask with a one-way valve, gloves, goggles, and an N95 mask.
- (n) A fluid resistant gown or turnout shall be worn when bodily fluid splashes and sprays to clothing are possible.
- (o) The following chart should be used as a guide for the situation and PPE required:

Task/ Situation	Gloves	Gown/ Turnouts	Eyewear and Mask

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Any light contact with blood or other bodily fluids. This includes IVs, drawing blood, or applying dressings to wounds.	X		
Heavy bleeding or large amounts of other bodily fluids, including vomiting, childbirth, urine, or fecal contamination.	X	X	X
Spraying or splattering of bodily fluid or situations when this can be anticipated.	X	X	X
Endotracheal intubation, Bag-Valve-Mask ventilation, or airway suctioning.	X	X	X

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Administering aerosolized medication to a patient with a potential for having an airborne infectious disease.	X	X	X
Patient coughing, sneezing, or febrile.	X		X

903.3.6 IMMUNIZATIONS

All department members who, in the line of duty, may be exposed to or have contact with a communicable disease shall be offered appropriate treatment immunization.

903.3.7 WORK PRACTICES

All members shall use the appropriate barrier precautions to prevent skin and mucous membrane exposure whenever contact with blood or bodily fluid is anticipated.

Disposable gloves shall be worn on all medical emergency responses. Disposable gloves shall be worn before making physical contact with any patient and/or when handling items that are soiled with blood or other bodily fluids. Disposable gloves that become contaminated with blood or other bodily fluids shall be disposed of as contaminated waste. Care should be taken to avoid touching other items (e.g., pens, books, personal items in general) while wearing the disposable gloves in a potentially contaminated environment.

When possible, open the back or side windows of an ambulance and turn on ventilation systems when transporting a patient with a potential aerosol transmissible pathogen. The window between the patient care compartment and the driver compartment must remain closed.

All procedures involving blood or other potentially infectious materials shall be performed in a manner that will minimize splashing, spraying, or otherwise generating droplets of those materials.

Eating, drinking, smoking, applying lip balm, and handling contact lenses shall be prohibited in areas where a potential for an exposure exists.

903.3.8 SHARPS AND ITEMS THAT CUT OR PUNCTURE

Members should take care when handling needles or sharps at all times, using the following guidelines:

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- (a) A needle-free or self-sheathing device or a sharp with engineered sharps protection will be utilized to start intravenous (IV) medications or obtain blood samples at all times except when:
 - 1. A needle-free or self-sheathing device or a sharp with engineered sharps protection is not available due to market availability.
 - 2. The use of a needle-free or self-sheathing device or a sharp with engineered sharps protection would jeopardize the patient's safety or the success of the intervention.
- (b) When a needle-free or self-sheathing device or a sharp with engineered sharps protection is not available, the sharps shall be placed into the authorized needle guard device using a one-hand technique prior to placement in the sharps container.
- (c) After use, all sharps must be immediately placed into a sharps container. This includes those devices that are self-sheathing.
- (d) The sharps container shall be located in the designated pouch of the airway bag. The airway bag with the sharps container shall be taken into every scene of a medical incident. A sharps container shall be easily accessible to members and located as close as possible to the immediate area where sharps are used.
- (e) The sharps container shall be stored in the upright position at all times. At no time shall department members reach into a sharps container.
- (f) Once a sharps container is half full, the container's lid will be secured, and the sharps taken to the hospital for disposal. Disposal will follow the hospital's policies and procedures.
- (g) Sharps containers will be inspected at morning checkout to ensure the container is not more than half full.
- (h) Broken glass shall not be picked up by hand. It shall be cleaned up with utility, structural, or wildland gloves, and using mechanical means, such as tongs or a brush and dustpan.

903.3.9 SHARPS INJURY LOG

The EMS supervisor shall maintain a sharps injury log that records all exposure incidents involving a sharp. Entries into this log will be recorded within 14 working days of the date the incident is reported to the EMS supervisor. The information on the log will include the following information, if it is known or reasonably available (8 CCR 5193(c)(2)):

- (a) Date and time of the exposure
- (b) Type and brand of the sharp involved in the exposure incident
- (c) Description of the exposure shall include the following:
 - 1. Job classification of the member involved in the exposure
 - 2. Work location where the exposure occurred
 - 3. Procedure the member was performing at the time of the exposure
 - 4. How the exposure occurred

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5. The body part involved in the exposure
 6. Whether the sharp had engineered sharp-injury protection, whether the protection mechanism was activated, and whether the injury occurred before the mechanism was activated, during activation, or after activation, if applicable
 7. The member's opinion as to how or whether mechanism could have prevented the injury
- (d) Each member incident shall be recorded on the sharps injury log within 14 working days of the date the incident is reported to the Department.
- (e) The information in the sharps injury log shall be recorded and maintained in a manner that protects the confidentiality of the member.

903.4 DISPOSAL AND DECONTAMINATION

Equipment, supplies, and vehicles that have been contaminated by blood, bodily fluid, respiratory or airborne droplets, or other potentially infectious material, and members whose clothing or equipment has been contaminated, shall not respond to additional calls, or engage in other work activities until all contaminated clothing, supplies, equipment, and vehicle interior has been exchanged, disposed of, or cleaned and decontaminated.

Contaminated supplies and equipment shall be kept in a separate location from clean or sterile supplies and equipment. Disposable gloves and goggles shall be worn when washing or handling contaminated equipment, clothing, or materials. A fluid-resistant gown shall be worn when there is the possibility of contaminated fluid splashes to clothing during clean-up procedures. When possible, one member should handle clean or sterile items and a different member should be assigned to handle contaminated items.

Kitchen facilities will never be utilized for cleaning, decontaminating, storing, or disposing of any contaminated material or waste. Designated sinks will be utilized for this procedure, followed by decontamination using an approved EPA germicide or a 1:100 solution of chlorine bleach (one-quarter cup of bleach per one gallon of water).

903.4.1 USE OF WASTE CONTAINERS

Members shall dispose of biohazards on-scene in the appropriate containers on the apparatus or at the attending clinic or hospital, with hospital approval, or in an appropriately marked biohazard waste container at the station immediately upon arrival.

The biohazard waste container located at the station shall be collapsible, leakproof, red in color or appropriately labeled with a biohazard warning, and routinely emptied.

903.4.2 DECONTAMINATION OF SKIN AND MUCOUS MEMBRANES

Members shall wash their hands immediately (on-scene if possible) or as soon as possible following the removal of potentially contaminated gloves. Antibacterial soap and warm water or an approved disinfectant shall be used to wash one's hands, paying particular attention to the fingernails.

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If a member's intact skin contacts someone else's blood or bodily fluids or other potentially infectious materials, the member shall wash the exposed part of their body with soap and warm water and/or an approved disinfectant as soon as possible. If the skin becomes grossly contaminated, body washing shall be followed by an approved hospital-strength disinfectant. If large areas of the member's skin are contaminated, the member shall shower as soon as possible, using warm water and soap and/or an approved disinfectant. Medical treatment should be obtained. Eyes should be flushed and other exposed mucous membranes appropriately disinfected.

Contaminated non-intact skin (e.g., injured skin, open wound) shall be washed/irrigated/cleaned using an approved disinfectant and then dressed or bandaged as needed. Medical treatment is required.

903.4.3 DISPOSABLE PROTECTIVE EQUIPMENT

Contaminated disposable supplies (e.g., gloves, dressings, CPR masks) shall be transported with the patient in the ambulance. The waste material shall then be disposed of in a biohazard waste container at the hospital. Disposable gloves are to be worn while placing the waste into the biohazard waste container, placing the gloves in with the waste.

903.4.4 DECONTAMINATION OF PPE

After using any reusable PPE, it shall be washed or disinfected and stored appropriately. If the PPE is non-reusable (e.g., disposable gloves), it shall be discarded in a biohazard waste container as described in this policy.

Any PPE that becomes punctured, torn, or loses its integrity shall be removed as soon as feasible. The member shall wash and replace the PPE if the job has not been terminated. If this situation resulted in a contaminated non-intact skin event, the decontamination procedures in this policy shall be implemented.

Contaminated reusable PPE that must be transported prior to cleaning shall be placed into a red biohazard waste bag and labeled with the member's name, station, contents, and type of contamination. This bag should be given to the TSO for cleaning by an approved vendor.

The fire chief or designee should be contacted regarding the replacement of structural protection garments and PPE.

903.4.5 DECONTAMINATION OF NON-DISPOSABLE EQUIPMENT

Contaminated non-disposable equipment shall be decontaminated as soon as possible. If it is to be transported, it shall be done by first placing it into a biohazard waste bag.

Grossly contaminated non-disposable equipment items shall be transported to a hospital or the fire station for proper cleaning and disinfecting. Porous surfaces such as nylon bags and straps shall be brushed and scrubbed with a detergent and hot water, laundered, and allowed to dry. Non-porous surfaces (e.g., plastic or metal) shall be brushed and scrubbed with detergent and hot water, sprayed with a bleach solution, rinsed, and allowed to dry. Delicate equipment (e.g., radios)

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should be brushed and scrubbed very carefully using a minimal amount of a type of germicide that is approved by the Environmental Protection Agency (EPA).

While cleaning equipment, pay close attention to handles, controls, portable radios, and corners (tight spots). Equipment cleaning shall not be done in the kitchen, bathroom, or other areas not designated as the cleaning/decontamination area.

Contaminated equipment should be cleaned using an EPA-approved germicide or a 1:100 solution of chlorine bleach (one-quarter cup of bleach per one gallon of water) while wearing disposable gloves and goggles. Large particles of contaminants, such as vomit, feces, and blood clots, should first be removed (using a disposable towel or other means to prevent direct contact) and properly disposed.

903.4.6 DECONTAMINATION OF CLOTHING

Contaminated clothing such as uniforms and undergarments shall be removed as soon as feasible and rinsed in cold water to prevent the setting of bloodstains. Contaminated clothing and gear shall not be taken into the station living quarters or taken home for cleaning.

If the clothing may be washed in soap and hot water, do so as soon as possible. If the clothing must be dry cleaned, place it into a biohazard waste bag and give it to the TSO. The TSO will secure a dry cleaner that is capable of cleaning contaminated clothing and inform them of the potential contamination. This dry cleaning will be done at the department's expense.

Contaminated leather boots shall be brushed and scrubbed with detergent and hot water. If the contaminant has soaked through the boot, the boot shall be discarded.

903.4.7 DECONTAMINATION OF VEHICLES AND EQUIPMENT

Equipment such as exposed portions of the apparatus, transport ambulance, gurney, backboards, blood pressure cuffs, and traction splints should be washed as soon as possible after the incident. After removal of gross contamination with soap and water, an approved EPA germicide, or a 1:100 solution of chlorine bleach (one-quarter cup bleach to one gallon of water) and hot water at a minimum of 140 degrees should be used to clean the item. It should then be rinsed and allowed to air dry. A spray bottle of the approved EPA germicide solution must be carried on all apparatus to facilitate expedient cleanup. The bleach solution must be prepared every 24 hours to maintain potency.

Delicate electronic equipment, such as monitors, defibrillators, radios, and suction equipment, shall be cleaned and decontaminated following the manufacturer's recommendation and never immersed in water.

Equipment left at the hospital should be cleaned by the hospital staff prior to return of the item. Contact the emergency department supervisor or the EMS supervisor if a hospital fails to clean the equipment in a timely manner.

All disposable contaminated supplies are to be placed in a red biohazard bag and delivered to the receiving hospital for disposal. The exception is sharps, which are to be placed in sharps

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containers. Disposal at the hospital must be in the areas and containers designed for biohazard waste.

903.4.8 DECONTAMINATION OF STATION AND CLEANING AREA

The TSO shall designate a location at each fire station that will serve as the area for cleaning/decontamination. This area is to be used to keep equipment clean and sanitary and for members to wash any potential contamination from their bodies. This area is to be thoroughly cleaned after each use and to be maintained in a clean and sanitary order at all times between each use. The application of cosmetics, smoking cigarettes, food, and drink are prohibited in this designated area at all times.

903.5 POST-EXPOSURE REPORTING AND FOLLOW-UP REQUIREMENTS

In actual or suspected exposure incidents, proper documentation and follow-up action must occur to limit potential liabilities and to ensure the best protection and care for the member. The priority shall be to provide the exposed member with the appropriate medical care, testing, and counseling to prevent or minimize the risk of contracting or spreading the disease (Health and Safety Code § 120260, Health and Safety Code § 120261, Health and Safety Code § 120262 and Health and Safety Code § 120263).

903.5.1 MEMBER RESPONSIBILITY TO REPORT EXPOSURE

To provide appropriate and timely treatment should exposure occur, all members shall verbally report the exposure to their immediate supervisor and complete a written exposure report as soon as possible following the exposure or suspected exposure. That report shall be submitted to the member's immediate supervisor. Additionally, members should document in the exposure report whether they would like the person who was the source of the exposure to be tested for communicable diseases.

In addition, the exposure or suspected exposure should be reported to the Paramedic Receiving Center (PRC), and to the EMS supervisor.

If the EMS supervisor is notified of a potential exposure to an aerosol transmissible disease by the hospital staff or county public health, the EMS supervisor shall notify the exposed member as soon as practicable, but no later than 72 hours after becoming aware of the exposure.

903.5.2 SUPERVISOR REPORTING REQUIREMENTS

The supervisor on-duty shall investigate every exposure that occurs as soon as possible following the incident, while gathering the following information:

- (a) Name and Social Security number of the members exposed
- (b) Date and time of the incident
- (c) Location of the incident
- (d) What potentially infectious materials were involved
- (e) Source of material or person

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- (f) Current location of material or person
- (g) Work being done during the exposure
- (h) How the incident occurred or was caused
- (i) PPE in use at the time of the exposure
- (j) Actions taken post-event (e.g., cleanup, notifications)

The supervisor shall advise the member of the laws and regulations concerning disclosure of the identity and infectious status of a source.

If the TSO is unavailable to seek testing of the person who was the source of the exposure, it is the responsibility of the exposed member's supervisor to ensure testing is sought pursuant to this policy.

903.5.3 MEDICAL CONSULTATION, EVALUATION, AND TREATMENT

Any member who was exposed or who suspects they were exposed to Human Immunodeficiency Virus (HIV) or to hepatitis B or hepatitis C should be seen by a physician or qualified health care provider as soon as possible. The doctor or qualified health care provider should be provided with the supervisor's report and the member's medical records relevant to the visit and examination. The blood of the exposed member shall be tested.

The health care professional will provide the ECO and/or the District's risk manager with a written opinion of the exposed member's medical condition. This opinion should only contain the following information:

- If a post-exposure treatment is indicated for the member
- If the member received a post-exposure treatment
- Confirmation that the member received the evaluation results
- Confirmation that the member was informed of any medical condition resulting from the exposure incident and whether further treatment or evaluation will be required
- Whether communicable disease testing from the source is warranted and if so, which diseases should the testing include

All other findings or diagnosis shall remain confidential and are not to be included in the written report.

903.5.4 COUNSELING

The Department shall provide the exposed member, and their family if necessary, the opportunity for counseling and consultation.

903.5.5 CONFIDENTIALITY OF REPORTS

Most of the information involved in this process must remain confidential. The TSO shall ensure that all records and reports are kept in the strictest confidence. The TSO shall be responsible for

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maintaining records containing the member's treatment status and the results of examinations, medical testing, and follow-up procedures.

The risk manager shall be responsible for maintaining the name and Social Security number of the member and copies of any information provided to the consulting health care professional.

903.6 SOURCE TESTING

Testing for communicable diseases of a person who was the source of an exposure should be sought when it is desired by the exposed member or when it is otherwise appropriate. There are several methods to obtain such testing. It is the responsibility of the TSO to ensure that the proper testing and reporting occur. These methods are:

- (a) Obtaining voluntary consent from any person who may be the source of an exposure to cover testing for any communicable disease.
- (b) Filing a report with the county health officer when a member is exposed to the bodily fluids of an arrestee. The county health officer may pursue testing for HIV or hepatitis B or hepatitis C (Penal Code § 7510 et seq.).
- (c) Seeking consent for testing or applying for a court order for HIV, hepatitis B, and hepatitis C testing (Health and Safety Code § 121060 et seq.).
- (d) Seeking a court order when the person who may be the source of an exposure will not consent to testing and the exposure does not fall under the statutory schemes for testing. This covers testing for any communicable disease as deemed appropriate by a health care professional and documented in the request for the court order.
- (e) Under certain circumstances, a court may issue a search warrant for the purpose of HIV testing an adult or juvenile when a member of the Bear Valley - Indian Valley Fire Protection District qualifies as a crime victim (Penal Code § 1524.1).

When the risk is a BBP, the source patient must be tested for hepatitis B, hepatitis C, and HIV, with a rapid HIV test being the preferred method and a hepatitis B surface antibody titer used to evaluate the member's immunity. If other contact transmissible or aerosol transmissible disease possibilities exist, other tests may be indicated and shall be determined by the treating emergency room physician.

903.6.1 EXPOSURE FROM A NON-ARRESTEE

Upon notification of a member's exposure to a person who was not arrested, the ECO should attempt to determine if the person who was the source of the exposure will voluntarily consent to testing. If consent is indicated, the following steps should be taken:

- (a) A licensed health care provider should notify the person to be tested of the exposure and make a good faith effort to obtain voluntary informed consent from the person or their authorized legal representative to perform a test for HIV, hepatitis B, hepatitis C, and other communicable diseases the health care provider deems appropriate.
- (b) The voluntary informed consent obtained by the health care provider must be in writing and include consent for three specimens of blood for testing. The ECO should document the consent as a supplement to an Exposure Control Report.

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- (c) The results of the tests should be made available to the source and the exposed member.

If consent is not obtained, the ECO should promptly consult with the County Counsel and consider requesting that a court order be sought for appropriate testing.

903.6.2 EXPOSURE FROM AN ARRESTEE

Upon notification of an exposure by a person who was arrested, the TSO should take the following steps:

- (a) Comply with the statutory scheme of Health and Safety Code § 121060. This includes seeking consent from the person who was the source of the exposure and seeking a court order if consent is not given.
- (b) Take reasonable steps to immediately contact the county health officer and provide preliminary information regarding the circumstances of the exposure and the status of the involved individuals to determine whether the county health officer will order testing (Penal Code § 7510).
- (c) In all cases, comply with the reporting and testing scheme of Penal Code § 7510 et seq. This includes completing a State Department of Health Services Form CDPH 8479 and submitting it to the county health officer with a copy of the Exposure Control Report by the end of the member's shift. If submission by the end of the shift is not practicable, it must occur as soon as possible but no later than two days after the incident. The exposed member's name should not appear on this form.
- (d) Remain in contact with the county health officer to determine whether testing of the arrestee will occur and whether the testing satisfies the medical needs of the member.
- (e) The results of the tests should be made available to the source and the exposed member.

Since there is potential for overlap between the two statutory schemes, the TSO is responsible for coordinating the testing with the county health officer to prevent unnecessary or duplicate testing.

In the rare event that the exposed member is not covered by either statutory scheme, the TSO should seek consent or a court order in the same manner as for a non-arrestee.

903.7 TRAINING

Any member whose duties place them at risk for exposure to BBPs shall receive department-provided, no-cost training during working hours that shall include all of the state requirements (see the Bloodborne Pathogen Training Policy) (8 CCR 5193).

903.8 MEDICAL RECORDS

The Department shall establish and maintain an accurate medical record for each member who has the potential for occupational exposure to BBPs as follows (8 CCR 3204):

- (a) Member status regarding all required vaccinations
- (b) Results of TB skin tests
- (c) Copies of information regarding exposures

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Medical records that are required by this policy are to be kept confidential and shall be retained for the duration of the member's employment with the Department, plus 30 years (8 CCR 3204(d)(1)(A)).

High-Visibility Safety Vests

904.1 PURPOSE AND SCOPE

The purpose of this policy is to describe the guidelines to protect members who may be exposed to hazards presented by passing traffic, construction vehicles and disaster recovery equipment and to comply with applicable safety regulations (Federal Manual on Uniform Traffic Control Devices, 23 CFR 655.601 and 8 CCR 1598).

904.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that all personnel shall wear class II high-visibility safety vests in addition to required personal protective equipment (PPE) whenever the emergency scene is located on or near a roadway where firefighters are subject to the hazards of moving traffic, construction vehicles or disaster recovery equipment. Members who are working on roadways and are not directly exposed to fire, flame, excessive heat or hazardous materials are expected to wear a high-visibility vest. This includes pump operators, support personnel and command officers. When it is anticipated that the emergency scene will be located on a roadway, high-visibility safety vests should be donned along with other appropriate personal protective equipment (PPE) at the time of dispatch.

High-visibility vests should also be worn any time a member or a supervisor believes increased visibility would improve safety or efficiency.

904.3 PROCEDURE

Although the high-visibility safety vests that are currently available are fire resistant, they do not meet the same fire resistant standards set by the National Fire Protection Association (NFPA). Therefore, members who are directly engaged in fire suppression activities on or near roadways should not wear the vest over their PPE. Once the situation is under control, personnel can then don a vest for the remainder of the incident.

Should the need arise, other department personnel on-scene could easily remove (tear-away) the vest in reaction to unusual circumstances, to render assistance with direct firefighting.

904.3.1 ASSIGNMENT OF HIGH-VISIBILITY SAFETY VESTS

High-visibility vests shall be assigned to members or apparatus as follows:

- (a) Four vests will be assigned to each engine, truck, reserve patrol and squad.
- (b) Three vests will be assigned to each paramedic van unit (one additional for a paramedic trainee).
- (c) Two vests will be assigned to each Captain, battalion utility, reserve water tender, and helicopter support vehicle.
- (d) One vest will be assigned to the Fire Chief, Assistant Chiefs, and safety officers.
- (e) One vest will be assigned to each support vehicle used by department members who may be required to work on or near roadways.

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High-Visibility Safety Vests

All high-visibility safety vests will be visibly numbered according to the radio number and position on the unit. No other markings or materials shall be applied.

904.3.2 STORAGE AND CARE

High-visibility safety vests are part of the standard issue PPE and should be stowed so they are readily available for immediate use. Should cleaning be necessary for routine soiling, follow the manufacturer's care instructions or the Selection, Care and Maintenance of Firefighting PPE Policy.

Body Armor

905.1 PURPOSE AND SCOPE

The Bear Valley - Indian Valley Fire Protection District is committed to reducing or eliminating occupational risks and hazards whenever possible in an effort to improve member safety. The purpose of this policy is to identify body armor as a practical safety measure that should be used to reduce some of the occupational risks and hazards confronting members.

905.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to provide body armor to department members who may be exposed to any of the occupational risks and hazards the armor is designed to protect against. The Bear Valley - Indian Valley Fire Protection District authorizes members to utilize department-issued body armor whenever members believe it may be prudent or appropriate to do so. It is not the intent of the Department to have members utilize body armor on a routine basis, but rather to have body armor available to personnel for situations that may be violent, potentially violent, or otherwise pose a risk to safety that the use of body armor could reduce or eliminate.

A supervisor may mandate the use of body armor in any situation or circumstance that may warrant the use of armor.

905.3 PROCEDURE

For the purposes of this policy a supervisor may be defined as:

- The Incident Commander directing any incident.
- Any supervisor in the Incident Command System chain of command directing or supervising the activities of assigned personnel.
- The captain in charge of any apparatus or crew.
- The senior member of any crew or functional unit when no clear lines of rank or authority exist (e.g., the senior member of a two-person rescue unit crew).

In certain situations, supervisors and members of the Department should strongly consider utilizing body armor. These situations include:

- Incidents involving mass civil disturbances, rioting, or looting.
- Incidents involving large-scale protesting or organized civil disturbances.
- Incidents involving confrontations between rival street gangs, motorcycle gangs, or other criminal enterprises.
- Incidents involving gunshots fired when reports or personal observations indicate that shooting is ongoing.
- Incidents involving groups or organizations with a known history of violent encounters or activities.

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- Any incident when law enforcement representatives recommend the use of body armor.

905.4 CONCEALMENT OF BODY ARMOR

Whenever practicable, members of the Department who utilize body armor should cover with an overgarment that effectively conceals the armor from public view or recognition. In the event of an unanticipated violent encounter during an incident, members may don body armor without regard to concealment.

905.5 STORAGE OF BODY ARMOR

All department-issued body armor should be stored in full compliance with the manufacturer's guidance. Generally, all body armor should be stored such that it is not subject to direct sunlight or extreme temperatures and is protected from moisture or high humidity. Body armor should be stored in a location that is reasonably accessible to members as needed. During times of known or anticipated violent events, body armor may be temporarily moved to and stored in any location that makes it more readily and quickly accessible to members.

905.6 MAINTENANCE AND SERVICE LIFE OF BODY ARMOR

All department-issued body armor shall be inspected and maintained in accordance with the manufacturer's instructions or in accordance with nationally recognized standards. All department body armor will be immediately removed from service at any time that it is obviously damaged, any time it fails the manufacturer's inspection criteria, or when it has exceeded its rated service life.

905.7 SELECTION AND PROCUREMENT OF BODY ARMOR

Body armor provided by the Department shall be compliant with nationally recognized standards for body armor for public safety. Body armor provided to personnel exposed to ballistic risks or other hostile threats should be consistent with expected duties.

Apparatus / Vehicle Backing

906.1 PURPOSE AND SCOPE

The purpose of this policy is to help members avoid the dangers inherent to vehicle backing operations and reduce the high incidence of firefighter injuries and fatalities.

906.1.1 DEFINITIONS

Definitions related to this policy include:

Apparatus - Any department vehicle that is designed and equipped to support firefighting and rescue operations, including those equipped with an aerial ladder, elevating platform or water tower that may position members, handle materials, provide continuous egress or discharge water at positions elevated from the ground.

Driver - The member charged with driving the vehicle or apparatus. This member is in control of the vehicle or apparatus and therefore is responsible for its movement.

Officer - The member responsible for the operation of the vehicle or apparatus and its personnel.

Spotter - A member designated to direct the driver while backing up the vehicle or apparatus. This position may be referred to as a back-up person.

Vehicle - Any automobile or light utility vehicle owned or leased by the Bear Valley - Indian Valley Fire Protection District and used for department business.

906.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that operators, when feasible, will drive around the block rather than backing an apparatus or vehicle. Hose lines shall be picked up by driving forward over the hose rather than backing.

906.3 OFFICER AND DRIVER RESPONSIBILITIES

Firefighter safety is extremely important. Backing operations are the most common cause of fire service vehicle collisions. Training and awareness of the potential dangers of backing operations is anticipated to reduce the incidence of firefighter injuries and fatalities.

Before backing-up an apparatus or vehicle, all potential backing-up impediments should be reviewed to ensure that obstructions are clear to avoid a collision.

The officer is responsible for deploying spotters when backing-up or as necessary to allow the safe movement of an apparatus.

The driver should not move the vehicle or apparatus until the spotters have been deployed in a backing-up situation.

If the driver loses sight of the spotter, the member shall stop apparatus until the spotter is back in sight.

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If more than one spotter is being used, the driver will need to maintain contact with both spotters. This means shifting attention from one spotter to another frequently so as to safely move the apparatus, while maintaining the safety of the spotters. This will require the apparatus to be moving at a slower than normal rate.

If at any time the driver feels that the situation is not safe, he/she should stop the vehicle or apparatus until the situation is corrected. This may mean getting out and physically walking around the apparatus or down the road in the direction the apparatus is headed.

906.4 SPOTTER RESPONSIBILITIES

Spotters are generally used when backing-up large vehicles or fire apparatus.

Voice communication between the spotter and driver is good, but the driver may not hear the spotter over the noise of the vehicle or apparatus and other background noise. The use of portable radios to communicate between the spotter and driver may prove beneficial in certain circumstances. The spotters, the driver and the officer should maintain radio contact as well as eye contact.

In congested or tight areas, one spotter may be needed at the rear and one at the front of the vehicle being moved either forward or backward. Spotters should also be used when going forward in tight areas.

Spotter responsibilities include, but are not limited to, the following:

- (a) Be constantly aware of the surroundings while performing this function.
- (b) Look and listen for other vehicles and people that may enter the path of the vehicle or apparatus that is backing up.
- (c) Stop any oncoming hazard or stop the vehicle or apparatus being backed-up.
- (d) Be aware of objects in the path of the vehicle or apparatus and direct the driver safely around them.
- (e) Be attentive to ground level obstructions as well as overhead hazards (e.g., tree branches, wires, signs, canopies, ladders).
- (f) Maintain visual contact with the driver at all times.
- (g) Be in the line-of-sight of the mirrors of the vehicle or apparatus being backed-up at all times.
- (h) Illuminate him/herself at night with a rear spotlight or flashlight, to remain visible to the driver.
- (i) Use hand signals to direct the driver. Hand signals should be somewhat exaggerated for clear understanding by the driver.
- (j) Stand on the ground; never on the apparatus.
- (k) Practice skills as time permits.

Heat Illness Prevention Program

907.1 PURPOSE AND SCOPE

The purpose of this policy is to promote member health and safety by establishing a heat illness prevention program requiring member participation and implementing an effective training program (see Heat Illness Prevention Training Policy).

This policy is in no way intended to diminish initial fire attack aggressiveness. The intent is to establish a procedure to lessen the risk of illness or injury due to exposure to high-heat working conditions and to establish fireground rehabilitation guidelines to ensure the physical and mental condition of members does not deteriorate to the point that it negatively affects emergency operations (8 CCR 3395).

907.1.1 DEFINITIONS

Definitions related to this policy include:

Fireground rehabilitation - A system for on-scene management of firefighter heat stress, dehydration, and fatigue. The primary goals of rehabilitation are rehydration, rest, and cooling; assessment of remaining work capacity; and recognition and treatment of heat strain injuries.

Heat exhaustion - A condition caused by the loss of large amounts of fluid by sweating. A worker suffering from heat exhaustion still sweats but experiences extreme weakness or fatigue, giddiness, nausea, or headache. In more serious cases, the victim may vomit or lose consciousness. Skin may be clammy or moist, pale, or flushed. Body temperature is normal to slightly elevated. Mild heat exhaustion will respond to copious water and a cool environment. Those with severe cases may require extended care for several days.

Heat stress - The aggregate of environmental and physical work factors that constitute the total heat load imposed on the body. Heat load is derived from two major sources:

- Internally generated metabolic heat, which is a by-product of chemical processes that occur within the cells, tissue, and organs of firefighters exerting themselves in turnout clothing
- Externally imposed environmental heat, which influences the rate at which body heat can be exchanged with the environment and consequently the ease with which the body can regulate and maintain a normal temperature

Heat strain - The series of physiological responses to heat stress. These responses reflect the degree of heat stress. When the strain is excessive for the individual, a heat disorder (heat exhaustion or heat stroke) will follow.

Heat stroke - A condition where the body's temperature regulatory system fails, sweating becomes inadequate, and the body's only effective means of removing excess heat is compromised. Early recognition and treatment of heat stroke is the only means of preventing permanent brain damage or death. Signs and symptoms of heat stroke may include mental

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confusion, convulsions, an altered level of consciousness, and skin that is hot, usually dry, and red or spotted. Temperature is usually 104 or higher.

907.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to require member participation in the heat illness prevention program and the accompanying training. The training provided shall comply with all state mandates (8 CCR 3395).

New members shall receive this training prior to being assigned work that is reasonably anticipated to result heat illness. Supervisory personnel shall receive specific heat illness training prior to being assigned any supervisory duties (8 CCR 3395).

907.3 PROCEDURE

This procedure shall apply to all emergency operations and training exercises where personnel are exposed to heavy physical exertion and/or extreme heat conditions.

A rehabilitation group will be established by the Incident Commander (IC) when conditions dictate that rest and rehabilitation are needed at an emergency scene. Rehabilitation considerations should include but are not limited to the following:

- **Length of the operation** - The two-bottle rule should generally be observed. After the use of two self-contained breathing apparatus (SCBA) air bottles, or 30 to 60 minutes of strenuous activity, a firefighter should be evaluated in the rehabilitation area. Rehabilitation should generally be considered for second-alarm fires or greater. Prolonged motor vehicle incidents and heavy rescues in hot weather are other examples.
- **Amount of exertion** - Company officers should maintain an awareness of the exertion/exhaustion level of crews. The degree of exertion can vary greatly in each incident. Individuals who are under-hydrated or are on the first day back after any gastrointestinal illness are particularly susceptible to early onset of heat illness.
- **Adverse climatic conditions** - Temperatures in excess of 90 degrees have historically produced early onset of heat exhaustion and/or collapse. Rehabilitation efforts should generally be established when ambient air temperature is over 85 degrees and there is a potential for extended operations. High humidity also plays a role and should be considered.
- **Communication** - It may be difficult for the IC to assess the exertion or exhaustion level of the firefighters. If a firefighter needs rest, he/she is responsible for communicating his/her needs to a supervisor. If one individual is experiencing heat exhaustion, supervisors should be aware that there may be additional firefighters in need of rehabilitation.

It is the responsibility of the IC to make an early determination of situations that may require a rehabilitation group and institute the appropriate rehabilitation efforts accordingly.

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It is the responsibility of every company officer to monitor the condition of all firefighters for signs of heat stress or fatigue. When these conditions are noted, the officer shall advise the IC and request assignment of the company to the rehabilitation group.

It is the responsibility of all personnel operating at an incident to report to their immediate supervisors if they are feeling the strain of overexertion. There is a point at which even the most physically fit individual becomes a liability rather than an asset due to intense physical exertion in turnout clothing. Taking 10 to 20 minutes in rehabilitation to cool down and rehydrate can prevent illness and injury.

907.4 ACCESS TO SHADE

ICs should attempt to locate rehabilitation in shaded areas when the temperature exceeds 80 degrees for members operating on emergency scenes or participating in training exercises. Shaded rehabilitation areas should be located in a safe zone near where the members are working and allow for members to sit without being crowded. Even when the temperature does not exceed 80 degrees, rehabilitation should be located in a shady area during warm-weather operations and should be readily accessible upon request of a member (8 CCR 3395).

Members should be allowed and encouraged to take a preventive cool-down rest and report to rehabilitation to protect themselves from overheating. A member who takes a preventive cool-down rest should be monitored by Emergency Medical Services (EMS) personnel assigned to rehabilitation and should be asked if he/she is experiencing symptoms of heat illness; should be encouraged to remain in the shade or cooling area; and should not be ordered back to work until any signs or symptoms of heat illness have abated (at least 5 minutes) (8 CCR 3395).

If a member exhibits signs or reports symptoms of heat illness during a preventive cool-down rest period, EMS personnel assigned to rehabilitation should provide appropriate first aid or emergency response (8 CCR 3395).

If rehabilitation has not been established, the member should be moved to a shaded area or area where alternative cooling measures and hydration can be safely administered, along with appropriate first aid or additional emergency medical response.

Safe alternative cooling measures, such as misting machines, should be considered when providing shade is not feasible or is unsafe (8 CCR 3395).

907.5 EMERGENCY RESPONSE PROCEDURES

Emergency response procedures related to heat illness should include (8 CCR 3395):

- (a) Ensuring that effective communication by voice, observation, or radio is maintained so that members at the emergency scene or training evolution can contact a supervisor and have access to EMS when necessary.
- (b) Responding to signs and symptoms of possible heat illness, including but not limited to first aid measures and how EMS will be provided.
- (c) Contacting additional EMS and, if necessary, transporting members to a place where they can be reached by an emergency medical provider.

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907.6 ACCLIMATIZATION

Members should be monitored during a heat wave. Consideration should be given to changing temperatures and how that may affect members over time (8 CCR 3395).

907.7 HEAT ILLNESS PREVENTION PROCEDURES

The Board of Directors or the authorized designee should develop a heat illness prevention plan to supplement this policy as needed. The plan should be made available at each station. The plan should contain supplemental information regarding (8 CCR 3395):

- (a) Procedures for the provision of water and access to shade.
- (b) Emergency response procedures.
- (c) Acclimatization methods.

Respiratory Protection Program

908.1 PURPOSE AND SCOPE

The purpose of this policy is to identify the different types of respiratory protection equipment provided by the Department, the requirements and guidelines for the use of respirators, and other mandates associated with their use (8 CCR 5144).

This policy applies to all members whose job duties could require them to use respiratory protection, due to exposure to atmospheres where there is smoke, low levels of oxygen, high levels of carbon monoxide, or the presence of toxic gases or other respiratory hazards. The policy is intended to ensure that the Department complies with the mandates of 8 CCR 3409 and 8 CCR 5144 et seq.

908.1.1 DEFINITIONS

Definitions related to this policy include (8 CCR 5140):

Aerosol - Liquid or solid particles dispersed in a gaseous medium such as air, including mists, smokes, fumes, and dusts.

Dusts - Formed when solid materials are broken down, such as by drilling, sanding, or grinding. The smaller the dust particle, the longer it hovers in the air.

Fumes - Solid condensation particulates, usually of a vaporized metal.

Gas - A substance that is in a gaseous state at normal temperature and pressure; it has neither independent shape nor volume but tends to expand indefinitely.

Immediately dangerous to life or health (IDLH) - Any atmosphere that poses an immediate threat to life, would cause irreversible adverse health effects, or would impair an individual's ability to escape from a dangerous atmosphere. Interior atmospheric conditions at structure fires beyond the incipient stage are considered IDLH, as are a variety of rescue types (8 CCR 5144(b)).

Mists - Liquid particles generated by condensation of a substance from the gaseous state to the liquid state, or by breaking up a liquid into a dispersed state (e.g., spraying).

Respiratory protection - Any device that is worn by the user to reduce or eliminate exposure to harmful contaminants through the inhalation of those contaminants.

Vapors - The gaseous form of a substance that is normally a solid or liquid at room temperature and pressure. Liquids are changed into the vapor state and mixed with the surrounding atmosphere through evaporation.

908.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to require members to use the proper level of respiratory protection, as described below, when working in hazardous conditions. The level of protection may be increased or decreased by a Captain or Incident Commander (IC), based on an evaluation of the hazard. Members shall not be required or allowed,

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to enter or work in hazardous conditions without proper respiratory protection and shall be trained in the proper use and care of the devices (8 CCR 3409; 8 CCR 5144).

908.3 RESPIRATORY PROTECTION PROGRAM ADMINISTRATOR

The fire chief or designee will oversee the objectives of this policy and ensure that the Department meets any legal mandates related to respiratory protection (8 CCR 5144(c)).

The administrator shall:

- (a) Maintain, implement, and administer a written respiratory protection program.
- (b) Ensure the written respiratory protection program and related procedures are followed and appropriate.
- (c) Ensure the procedures and written respiratory protection program address relevant mandates (8 CCR 5144).
- (d) Ensure selected respirators continue to effectively protect members.
- (e) Have supervisors periodically monitor member respirator use to make sure members are using them properly.
- (f) Regularly ask members who are required to use respirators for their input on program effectiveness and whether they have problems with the following (8 CCR 5144(l)).
 - 1. Respirator fit during use
 - 2. Any effects of respirator use on work performance
 - 3. Respirators being appropriate for the hazards encountered
 - 4. Proper use under current work site conditions
 - 5. Proper maintenance
- (g) Ensure the Department covers the costs associated with respirators, medical evaluations, fit testing, training, maintenance, travel, and wages, as applicable.
- (h) Provide direction for respirator selection.
- (i) Require medical evaluations for members who use respiratory protection as set forth in 8 CCR 5144.

908.4 USE OF RESPIRATORY PROTECTION

Members exposed to harmful exposure in the course of their assigned activities shall use respiratory protection devices (8 CCR 3409).

Members using respiratory protection shall ensure that they have no facial hair between the sealing surface of the facepiece and the face that could interfere with the seal or the valve function. Members also shall ensure that they have no other condition that will interfere with the face-to-facepiece seal or the valve function (8 CCR 5144(g)).

Members shall not wear corrective glasses, goggles, or other personal protective equipment (PPE) that interferes with the seal of the facepiece to the face, or that has not been previously tested for use with that respiratory equipment (8 CCR 5144(g)).

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For all tight-fitting respirators, members shall perform a user seal check each time they put on the respirators, using the procedures in 8 CCR 5144, Appendix B-1 or other department-approved procedures recommended by the respirator manufacturer (8 CCR 5144(g)).

Captains shall monitor members using respiratory protection and their degree of exposure or stress. When there is a change in work area conditions or when a member's degree of exposure or stress may affect respirator effectiveness, the company officer shall reevaluate the continued effectiveness of the respirator and shall direct the member to leave the respirator use area when (8 CCR 5144(g)):

- (a) It is necessary for the member to wash his/her face and the respirator facepiece to prevent eye or skin irritation associated with respirator use.
- (b) The member detects vapor or gas breakthrough, or when there is a change in breathing resistance or leakage of the facepiece.
- (c) The member needs to replace the respirator or the filter, cartridge, or canister.

Members who detect vapor or gas breakthrough, changes in breathing resistance, or leakage of the facepiece shall replace or repair the respirator before returning to the work area.

908.4.1 USE OF SELF-CONTAINED BREATHING APPARATUS

Self-contained breathing apparatus (SCBA) are atmosphere-supplying respirators for which the breathing air source is designed to be carried by the user and which operate under positive pressure, allowing breathable air to escape from the facepiece while preventing contaminants from entering the facepiece (8 CCR 5144(b)).

Members shall use SCBA when entering an atmosphere that may be IDLH (8 CCR 5144(g)). These situations may include, but are not limited to:

- Entering an area that may be oxygen deficient such as confined spaces, trenches, unventilated structures, or septic tanks.
- Engaging in any firefighting operations, with the possible exception of a vegetation fire.
- Entering the hot zone of a hazardous materials incident.
- Entering any area where contaminant levels may become unsafe without warning, or any situation where exposures cannot be identified or reasonably estimated.
- Any time use is specified by the Captain or IC.

Facepieces should be donned and regulators attached before entering any smoke-filled area or IDLH environment. Use of SCBA shall not cease until approved by the IC.

908.4.2 USE OF FULL-FACE RESPIRATORS

Full-face respirators are respirators that fit over the full face to protect the face and eyes from contaminants while they filter air.

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Company officers or the IC may allow the use of full-face respirators in situations where, due to the duration of the incident and level of exposure, the use of SCBA is not necessary or practical. These situations may include, but are not limited to:

- (a) Hazardous materials incidents where members are not working in the hot zone.
- (b) Incidents involving weapons of mass destruction where members are outside of the hot zone and not directly exposed to any known hazard.
- (c) Certain emergency medical responses where additional protection is warranted.

Full-face respirators shall not be used when there is a potential for an oxygen-deficient atmosphere.

908.4.3 USE OF CARTRIDGE RESPIRATORS

Cartridge respirators are a type of air-purifying respirator that can be fitted with mechanical pre-filters or combination cartridge/filter assemblies for use in areas where gases, vapors, dusts, fumes, or mists are present. Cartridge respirators provide limited air-purification capabilities, operate under negative pressure, and allow some inward leakage of contaminated air around the sealing surfaces of the respirator. The correct cartridge must be selected prior to use.

A Captain or IC may specify the use of cartridge respirators in situations where the use of an SCBA or full-face respirator is not necessary. These incidents may include vegetation fires, exposure to a patient with a communicable disease, and certain other incidents. Cartridge respirators shall not be used if there is a potential for an oxygen-deficient atmosphere or risk of exposure to the member's face or eyes.

Cartridge respirator filters shall be replaced whenever:

- The wearer begins to smell, taste or be irritated by a contaminant.
- The wearer begins to experience difficulty breathing due to filter loading.
- The cartridges or filters become wet.
- The expiration date on the cartridges or canisters has been reached.

908.4.4 USE OF N95 MEDICAL MASKS

N95 medical masks are a class of disposable respirators that are approved by the Food and Drug Administration and the National Institute for Occupational Safety and Health (NIOSH) as suitable for use where fluid resistance is a priority. The masks protect against particulate contaminants that are 0.3 microns or larger, and meet the Centers for Disease Control and Prevention guidelines for the prevention of tuberculosis exposure. Misuse of the N95 respirators may result in serious injury or death. N95 masks should only be used to protect the wearer from particulate contaminants and are not suitable in an oxygen-deficient atmosphere or where an unsafe level of carbon monoxide exists.

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908.4.5 USE OF P100 MEDICAL MASKS

An aerosol transmissible disease (ATD) or aerosol transmissible pathogen (ATP) is a disease or pathogen for which droplet or airborne precautions are required, as listed in 8 CCR 5199, Appendix A (8 CCR 5199(b)).

P100 medical masks are disposable respirators that should be used when members may encounter cases or suspected cases of ATDs or ATPs. P100 masks should be used if the member suspects a patient may have an aerosolized infectious disease and when administering aerosolized medications. P100 masks should only be used to protect the wearer from particulate contaminants and are not suitable in an oxygen-deficient atmosphere or where an unsafe level of carbon monoxide exists (8 CCR 5199(g)(3)).

908.4.6 TRAINING

Members should not use SCBA, full-face respirators or cartridge respirators unless they have completed the mandatory training requirements for the selected device. Annual training on the proper use of respiratory protection devices is mandatory for members (see the Respiratory Protection Training Policy) (8 CCR 5144(k)).

908.5 EQUIPMENT ACQUISITION AND SPECIFICATIONS

908.5.1 SCBA REQUIREMENTS

Bear Valley - Indian Valley Fire Protection District's SCBA shall meet the standards found in the most current National Fire Protection Association (NFPA) publication and approved for use by NIOSH (8 CCR 5144(d)).

The Bear Valley - Indian Valley Fire Protection District shall use only the respirator manufacturer's NIOSH-approved breathing-gas containers, marked and maintained in accordance with the quality assurance provisions of the NIOSH approval for the SCBA as issued in accordance with the NIOSH respirator certification standard at 42 CFR part 84.1 (8 CCR 5144(i)).

908.5.2 COMPRESSED BREATHING AIR

Compressed breathing air used in SCBA should meet at least the requirements for Grade D breathing air as described in the American National Standards Institute (ANSI) Compressed Gas Association Commodity Specification for Air (G-7.1-2018; 8 CCR 5144(i)).

Compressed breathing air must contain:

- (a) An oxygen content of 19.5 percent to 23.5 percent.
- (b) A hydrocarbon (condensed) content of 5 milligrams per cubic meter of air or less.
- (c) A carbon monoxide (CO) content of 10 parts per million (ppm) or less.
- (d) A carbon dioxide content of 1,000 ppm or less.
- (e) A lack of noticeable odor.

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908.6 RESPIRATOR FIT TESTING

Fit tests are used to qualitatively or quantitatively evaluate the fit of a respirator on an individual (8 CCR 5144(b)). Each new member shall be fit tested before being permitted to use SCBA in a hazardous atmosphere. Fit tests may only be administered by persons determined to be qualified by the program administrator (8 CCR 5144(f)).

All members who are required to wear SCBA and rely on a mask-to-face seal shall complete fit testing for all respiratory protection devices they may use.

After initial testing, fit testing shall be repeated:

- (a) At least once every 12 months.
- (b) Whenever there are changes in the type of SCBA or facepiece used.
- (c) Whenever there are significant physical changes in the user (e.g., obvious change in body weight, scarring of the face seal area, dental changes, cosmetic surgery, any other condition that may affect the fit of the facepiece seal).

All members require initial fit testing for use of N95 or P100 masks to ensure a proper fit prior to responding to an incident that may expose them to a communicable disease.

908.6.1 RESPIRATOR FIT TESTING PROCEDURES

All respirator fit testing shall be conducted in accordance with Appendix A of 8 CCR 5144 including, but not limited to (8 CCR 5144(f)(5)):

- Qualitative testing for subjective sensation (e.g., taste, irritation, smell) of the respirator wearer to a particular contaminant.
- Quantitative instrument testing to measure face seal leakage.

Fit testing of tight-fitting respirators is to be done only in a negative-pressure mode. If the facepiece is modified for fit testing, the modification shall not affect the normal fit of the device. Such modified devices shall only be used for fit testing and not for field use (8 CCR 5144(f)).

Prior to the use of a respirator, the user shall also perform a user seal check to determine if the respirator is properly seated to the face (8 CCR 5144(b)). The user seal check shall be performed by conducting both positive and negative fit checks as follows:

- **Positive user seal check:** With palms over exhalation valve opening, exhale gently into the mask. Pressure should be felt in the facepiece.
- **Negative user seal check:** With palms over cartridge openings, inhale for 10 seconds. The mask should be felt pulling in toward the face.

908.6.2 FIT TESTING RECORDS

The training division shall be responsible for maintaining records of all fit testing.

Current fit test records shall be retained as required by the department records retention schedule, but in all cases at least until the next fit test is administered. Fit test records should include (8 CCR 5144(m)):

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- (a) Name of person tested.
- (b) Test date.
- (c) Type of fit test performed.
- (d) Description (e.g., type, manufacturer, model, style size) of the respirator tested.
- (e) Results of fit tests (e.g., quantitative fit tests should include the overall fit factor and a printout or other recording of the test).
- (f) The written guidelines for the respirator fit testing program, including pass/fail criteria.
- (g) Instrumentation or equipment used for the test.
- (h) Name or identification of test operator.

908.7 RESPIRATOR MEDICAL EVALUATION QUESTIONNAIRE

All members who are required to use respiratory protection must complete a medical evaluation questionnaire upon initial fit testing and annually thereafter as well as if any of the following conditions arise between annual tests (8 CCR 5144(e)):

- (a) A member reports medical signs or symptoms that are related to the ability to use a respirator.
- (b) A Physician or Licensed Health Care Professional (PLHCP), a supervisor, or the respirator program administrator informs the employer that an employee needs to be re-evaluated.
- (c) Information from the respiratory protection program, indicates a need for an employee re-evaluation; this includes observations made during fit testing and program evaluation.
- (d) A change occurs in workplace conditions (e.g., physical work effort, protective clothing, temperature) that may result in a substantial increase in the physiological burden placed on an employee.

The questionnaires will be reviewed by a PLHCP selected by the Department to determine which, if any, members need to complete physical examinations.

The training division shall be responsible for maintaining records of all annual respirator medical evaluation questionnaires and any subsequent physical examination results pursuant to state law (8 CCR 5144(m)).

908.8 INSPECTION AND MAINTENANCE OF RESPIRATORS

Members are required to physically inspect and operate all SCBA and respirators that are on frontline fire apparatus. If the equipment is not in daily use, it should be inspected at least once a month and after each cleaning. Inspection should include, but is not limited to (8 CCR 5144(h)):

- (a) All alarm devices on the SCBA should be tested for proper operation.
- (b) Any SCBA or respirator that is not operating properly or is below department standard air volume shall be taken out of service immediately until the problem is remedied. All in-service SCBA cylinders shall be maintained in a fully charged state and

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shall be recharged when the air pressure falls to 90 percent of the manufacturer's recommended pressure level.

(c) Rubber facepiece:

1. Excessive dirt
2. Cracks, tears, holes
3. Distortion from improper storage
4. Cracked, loose, or scratched lenses (full facepiece)
5. Broken or missing mounting clips

(d) Head straps:

1. Breaks or tears
2. Loss of elasticity
3. Broken or malfunctioning buckles or attachments
4. Excessively worn serrations of the head harness which might allow the facepiece to slip

(e) Inhalation and exhalation valves:

1. Detergent residue, dust particles, or dirt on valve seal
2. Cracks, tears, or distortion in the valve material or valve seal
3. Missing or defective valve covers

(f) Filter elements:

1. Proper filter for the hazard
2. Approved designation (NIOSH)
3. Missing or worn gaskets
4. Worn thread
5. Cracks or dents in filter housing

908.8.1 MAINTENANCE, INSPECTION, AND ANNUAL SERVICE

Members should thoroughly clean and sanitize all SCBA and respirators after each use. Respirators should be cleaned and sanitized according to manufacturer recommendations.

All partially empty bottles should be replaced with full bottles. Members should perform the inspections noted above before placing an SCBA or respirator back in service.

Every SCBA shall be inspected monthly by the Department and serviced on an annual basis by individuals who have been trained and certified by the SCBA manufacturer to perform such annual servicing. SCBA bottles shall be hydrostatically tested pursuant to applicable federal regulations, state standards, and manufacturer recommendations.

All maintenance, inspection, and cleaning mandates of 8 CCR 5144(h) shall apply.

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908.8.2 STORAGE

Respirators in storage shall be protected against (8 CCR 5144(h)):

- Damage.
- Contamination.
- Dust.
- Sunlight.
- Extreme temperatures.
- Excessive moisture.
- Damaging chemicals.

Freshly cleaned respirators can be stored in reusable plastic bags or in a storage cabinet. Care must be taken so that distortion or deformation of the facepiece, exhalation valve, and rubber or elastic parts does not occur. Respirators shall not be stored in lockers or vehicles unless the respirators are stored in individual containers and are protected from damage.

All filters, cartridges, and canisters shall be properly labeled and color coded with NIOSH approval labels. Labels shall not be removed and must remain legible (8 CCR 5144(j)).

908.8.3 FLOW TESTING

The Department shall conduct annual flow testing on all SCBA. A flow test, also known as a performance test, ensures that the SCBA is performing to the manufacturer's specifications. Unlike basic inspections and functional testing, flow testing requires specialized equipment. The Department shall use NFPA standards or the SCBA manufacturer's requirements for flow testing, whichever is more stringent.

Exposing SCBA to extreme temperatures, water, or chemicals can degrade SCBA performance. If an SCBA is exposed to any type of corrosive material that could lead to a component failure, it should be sent to a certified SCBA technician for testing. If a member suspects that an SCBA has been compromised or damaged, a flow test should be conducted to ensure that it is in good working order.

All annual flow testing must be performed by a certified SCBA technician.

908.9 FIRE INSPECTORS

Fire inspectors may be at risk for exposure to hazardous atmospheres during routine inspection activities. To avoid exposure, inspectors should employ common sense, awareness of potential hazards and their effects, and any necessary site-specific training.

Fire inspectors should not knowingly enter a room or area containing a hazardous atmosphere. If the inspector cannot verify the safety of the atmosphere, they should consult a representative of the location being inspected prior to entry to avoid accidental exposure.

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908.10 PROGRAM EVALUATION

The Department must conduct ongoing evaluations of the respiratory protection program to identify deficiencies and to make corrections as needed. The process of evaluating the effectiveness of the department respiratory protection program includes (8 CCR 5144(I)):

- (a) Verifying that there are no feasible alternatives to respirators.
- (b) Conducting regular workplace evaluations for respiratory hazards.
 - 1. These evaluations will determine whether the correct respirators are being used and worn properly.
 - 2. Such evaluations will also serve to determine whether the training program needs to be changed or updated.

908.11 EXPOSURES

Any member who is exposed to a hazardous atmosphere should immediately leave the room or area and move to an area containing fresh, uncontaminated air. Physical symptoms of hazardous atmosphere exposure may include, but are not limited to:

- Difficulty breathing.
- Dizziness, headache, or other distress symptoms.
- A sense of irritation.
- A smell or taste of contaminants.

If a member feels ill or impaired in any way, a supervisor should be notified, and emergency medical personnel summoned if not already available on-scene. Any time there is a doubt about the need for medical care, medical care shall be obtained. Any injury or exposure must be documented on an injury reporting form. Under most circumstances, the exposed member should not drive a vehicle.

An attempt should be made to identify the exposure agent by questioning the facility representative or by reviewing the hazardous materials inventory. A supervisor should attempt to make this determination. If possible, a Safety Data Sheet (SDS) for the exposure agent should be obtained.

Personal Alarm Devices

909.1 PURPOSE AND SCOPE

The purpose of this policy is to safeguard members who are engaged in interior structural firefighting activities or atmospheric hazards such as immediately dangerous to life and health (IDLH) atmospheres that require the use of a self-contained breathing apparatus (SCBA) by providing each member so engaged with a personal alarm device. Such devices may also be known as a Personal Alarm (or Alert) Safety System (PASS) device, an Automatic Distress Signal Unit (ADSU), or another telemetry system that is designed to monitor responder movement and alert others to a lack of movement (8 CCR 3408).

909.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to provide all members engaged in interior structural firefighting activities or other emergency operations that require an SCBA with a personal alarm device.

909.3 USE OF PERSONAL ALARM DEVICES

All personal alarm devices shall meet the requirements of the National Fire Protection Association (NFPA) standard 1982 and 8 CCR 3408 and be labeled or otherwise certified to indicate compliance with the requirements (8 CCR 3408).

Members shall wear a personal alarm device any time they are directed by the Incident Commander (IC) or Incident Safety Officer or in atmospheres that are IDLH (8 CCR 3408).

The IC shall apply personnel accountability measures to track the entry and exit of members from hazardous areas. A personal alarm device should be viewed as a last resort for members to summon help when they are unable to notify others that they are in distress.

909.4 MAINTENANCE OF PERSONAL ALARM DEVICES

All personal alarm devices shall be repaired and maintained by qualified members or service representatives in accordance with manufacturer recommendations.

Health and Safety Officer

910.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the minimum qualifications for, and specify the duties and responsibilities of, the Health and Safety Officer (HSO).

910.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that the HSO will be appointed by the Board of Directors or the authorized designee and shall be responsible for the duties described in this policy and other duties as assigned. When the HSO is unavailable, the Board of Directors or the authorized designee shall identify a replacement.

910.3 QUALIFICATIONS

The department's HSO should be a member with qualifications and training that include:

- Knowledge of federal, state, and local laws regarding occupational health and safety applicable to the fire service.
- Knowledge of the physical and behavioral health and fitness factors unique to the fire service.
- Knowledge of health and safety hazards involved in firefighting and related activities.
- Experience in fire suppression, Emergency Medical Services (EMS), and instruction.
- Familiarity with the operation of the department's apparatus and equipment, including emergency communications equipment.
- Management skills appropriate to the operation of a safety and health program.
- The physical capability to conduct operations at an incident scene.
- The following certifications and courses:
 - CFSTES (California Fire Service Training and Education System)
 - Fire Instructor I (NFPA Instructor I)
 - NFPA Instructor II
 - NFPA Fire Officer I
 - Training Program Management
 - Incident Safety Officer
 - Safety and Health Officer

910.4 ADMINISTRATIVE RESPONSIBILITIES

The HSO's administrative responsibilities shall include but are not limited to the following:

- Developing and maintaining the Illness and Injury Prevention Program (IIPP) and general department safety standards, and serving as the chair of the Health and Safety Committee. See the Illness and Injury Prevention Program Policy.

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- Ensuring that safety and health regulations are followed and that any violations or deficiencies are immediately corrected and reported to the Board of Directors or the authorized designee.
- Ensuring that information provided to the Board of Directors or the authorized designee involving safety issues is also provided to the Health and Safety Committee for review.
- Conducting regular safety inspections.
- Serving as a resource for department officers regarding safety and health matters.
- Identifying, documenting, and notifying members of workplace safety hazards.
- Researching, identifying, and recommending appropriate safety equipment and personal protective equipment (PPE) (8 CCR 3401).
- Coordinating with the Training Safety Officer for the development and implementation of behavioral and physical health and safety training topics.
- Providing safety supervision at training activities when requested.
- Developing and distributing safety information to members.
- Ensuring that accidents, exposures, and injuries are thoroughly investigated.
- Developing and maintaining accident, injury, and exposure statistics, reporting on trends, and making recommendations to prevent a reoccurrence.

910.5 RESPONSE DUTIES

Whenever available, the HSO will respond to the following incidents and assume the position of Safety Officer to monitor scene safety and enforce appropriate safety and health practices:

- Working structure fires
- Greater alarm assignments
- Hazardous materials incidents
- Rescue response incidents, including trench, confined space, high angle, structural collapse, and water rescues
- Serious injury or death of an on-duty member
- Injuries to third parties that may result in hospitalization
- Upon the request of an Incident Commander due to special or unusual circumstances

910.6 SAFETY AND HEALTH INCIDENT REVIEW

The HSO should review safety and health incident reports and ensure copies are forwarded to the Health and Safety Committee (see the Illness and Injury Prevention Program Policy).

Vehicle Safety Belts

911.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that all members of the Department wear safety belts while operating or riding in department vehicles or privately owned vehicles while conducting department business. The use of seat belts and other safety restraints significantly reduces the chance of death or injury in case of a traffic collision (Vehicle Code § 27315).

911.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that all members shall wear properly adjusted safety restraints when operating or positioned in any vehicle owned, leased or rented by this department, or in any privately owned vehicle while on-duty. The member driving such a vehicle shall ensure that all occupants, including any non-members, are properly restrained (Vehicle Code § 27315).

911.3 INOPERABLE SAFETY BELTS

No person shall operate department vehicles in which the safety belt in the driver's position is inoperable. No person shall be transported in a seating position in which the seat belt is inoperable.

No person shall modify, remove, deactivate or otherwise tamper with the vehicle safety belts, except for vehicle maintenance and repair staff, who shall do so only with the express authorization of the Board of Directors.

Members who discover an inoperable restraint system shall report the defect to the appropriate supervisor. Prompt action will be taken to replace or repair the system.

Fire Station Safety

912.1 PURPOSE AND SCOPE

The purpose of this policy is to establish safety procedures for the Bear Valley - Indian Valley Fire Protection District members to follow, with the intent of reducing or eliminating injuries or illnesses to both members and the public.

912.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that all members should be involved in daily activities that are designed to reduce or eliminate injuries or illnesses, both in the field and in the fire station. This policy addresses safety activities in the fire station. All members are expected to follow the procedures outlined in the policy for the safety of themselves, other members, and any visitors to the fire station. Safety practices specific to incident type or task are addressed in other policies.

912.3 PROCEDURE

For the safety of all occupants, the on-duty captain at each fire station is responsible for ensuring the following procedures are applied to activities conducted in the fire station:

(a) Personal protective equipment (PPE)

1. Use adequate eye and face protection when there is a risk of eye injuries, such as punctures, abrasions, contusions, or burns as a result of contact with flying particles, hazardous substances, or projections. This includes but is not limited to working with grinders, drills, saws, welding equipment, mowers, and edgers, and while working under vehicles.
2. Use hand protection when the work involves exposure to materials that are likely to cause cuts, burns, or exposure to chemicals (e.g., working with trimmers, pruners, and other tools or other operations).
3. Wear hearing protection in compliance with the Hearing Conservation and Noise Control Training Policy.

(b) Housekeeping and personal hygiene

1. Maintain all rooms, kitchens, offices, hallways, stairways, storage rooms, and apparatus rooms in a clean, orderly, and sanitary condition.
2. Clean and repair the source of water leaks quickly to avoid mold growth.
3. Smoking is prohibited in the building or within 20 feet of an entrance, exit, or operable window, as provided in the Smoking/Tobacco Use Policy (Labor Code § 6404.5 and Government Code § 7596 et seq.).
4. Avoid using compressed air to blow dirt, chips, or dust from clothing while it is being worn.
5. Maintain cooking appliances and eating utensils in good working order.

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6. Clean kitchen hoods and vents at least monthly. Ensure the hood light is installed and functioning.
 7. Provide and clearly label first-aid supplies.
 8. Post signs in all restrooms reminding employees/visitors to wash their hands.
- (c) Cooking
1. Use caution while cutting food with a kitchen knife. Be sure the item is secure on a flat surface before attempting to cut it.
 2. Use potholders to avoid burns when removing hot items from the oven and/or stovetop.
 3. Do not let pot handles extend over the counter.
- (d) Safe lifting
1. Store heavy or awkward objects at approximately waist level to prevent unnecessary lifting.
 2. Use team lifting for heavy or awkward objects that need to be lifted above the waist level. Do not attempt to lift or carry more than you can easily handle. Injuries frequently occur from lifting items such as out-of-county bags, drug boxes, and map boxes.
 3. Practice safe-lifting techniques: Use the legs to lift; keep the back straight and do not twist while lifting; keep the body as close as possible to the object being lifted.
- (e) Walking surfaces and exits
1. Ensure all primary exit routes are obvious, marked with an "Exit" sign, and free of obstructions.
 2. Remove any objects that block hallways and/or passageways.
 3. Clean up or repair potential slip or trip hazards immediately on apparatus bay floors, kitchen floors, bathroom floors, hallways, and outdoor walkways.
 4. Ensure stairways are in good condition with standard railings provided for every flight having four or more risers.
 5. Ensure handrails are of sufficient strength and proper design for all stairways and floor openings.
 6. Ensure all areas of the building are adequately illuminated.
 7. Ensure beds are located to cause minimum interference during dressing.
- (f) Apparatus floor
1. Mark ladders, pike poles and other items projecting from the apparatus clearly with brightly colored flags, stripes, or other identification.
 2. Use caution and handrails when exiting apparatus.
 3. Maintain apparatus doors in a safe, operable condition.

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4. Maintain adequate clearance for vehicles under apparatus doors.
- (g) Equipment machinery and tools
1. Observe safety precautions when operating all equipment, machinery, and tools.
 2. Avoid using defective equipment, such as ladders with broken rungs or power equipment, without proper safety protection. Repair or replace before use.
 3. Mount all equipment and machinery securely to the surface on which it sits.
 4. Ensure grinders and grinding wheels are adequately guarded. Guarding must include work rests, tool rests, eye shields and spindle/nut/flange coverage.
 5. Work rests and tool rests on grinders shall be within 1/8 inch and 1/4 inch respectively to the grinding wheel.
 6. Ensure all power tools are adequately grounded.
 7. Store maintenance hand tools safely when not being used. They shall be maintained and periodically inspected to ensure they are in a safe and operable condition.
 8. Portable ladders shall be adequate for their purpose, in good condition, and have secure footing.
 9. Fixed ladders shall be equipped with side rails, cages, or special climbing devices.
- (h) Electrical wiring, fixtures, and controls
1. Maintain 36 inches of clear access around all electrical control panels.
 2. Label electrical switches and circuit breakers with their purpose.
 3. Ensure all electrical outlets have cover plates that are secured to the wall outlets.
 4. Ensure all extension cords are properly grounded and approved.
 5. Avoid using flexible cords and cables as a substitute for fixed wiring.
 6. Avoid hanging electrical cords on pipes or nail hooks.
 7. Check all electrical cords for fraying or exposed plug wiring.
 8. Ensure all electrical tools do not have damaged power cords or plugs, worn switches, defective ground circuits, or other faults that could render them unsafe for use.
- (i) Fire extinguishers and fire prevention
1. Ensure fire extinguishers are of the proper type for the expected hazards.
 2. Maintain portable fire extinguishers in a fully operable condition.
 3. Ensure fire extinguishers have a durable tag securely attached to show the maintenance or recharge date.
 4. Test the fire alarm system at least annually.

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5. Ensure a qualified person services the sprinkler system at least annually.
 6. Check smoke detectors periodically to ensure they are working properly.
 7. Maintain at least 18 inches of clearance below all sprinkler heads.
- (j) Hazardous materials and exposure prevention
1. Label all hazardous materials containers with the name of the hazardous material, applicable hazard warning, and the name and address of the manufacturer, importer, or responsible party.
 2. Evaluate compatibility of hazardous materials before they are stored. Incompatible hazardous materials shall be separated by distance, partitions, dikes, berms, or secondary containment.
 3. Store hazardous materials separately from food, food preparation, and eating areas.
 4. Use safety containers with self-closing lids for the storage of flammable liquids and soiled oily rags.
 5. Store cylinders of compressed gas in an upright position, away from combustible materials.
 6. Avoid wearing or storing turnout gear in the living quarters or buildings.
 7. Clean living quarters thoroughly on a regular basis, including vacuuming or frequently washing blankets, drapes, and upholstered furniture.
 8. Wash clothing regularly, taking care not to spread contamination by taking clothing home.
 9. Use vehicle exhaust collection systems effectively by following all guidelines and manufacturer's recommendations.
 10. Perform regular vehicle inspection and maintenance to minimize diesel particulate and gas emissions.
- (k) Communicable diseases - If a member has been exposed to a hazardous material or a communicable disease, follow the reporting procedure in the Communicable Diseases Policy.
- (l) On-duty physical fitness activities - For safety guidelines during physical fitness, see the Physical Fitness and Wellness Program policies.
- (m) Visitor safety - For visitor safety guidelines, see the Public Education Policy.

Ground Ladder Testing

913.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that the ground ladders are periodically inspected and certified to be in compliance with the National Fire Protection Association (NFPA) standards. This is a safety measure designed to reduce or eliminate the risk of injury to department members when using ground ladders.

913.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to perform testing and certification of all ground ladders for the safety of department members and to comply with NFPA standards.

913.3 PROCEDURE

All department-owned ground ladders should be tested and certified annually. The actual testing interval may exceed 12 months if that time is reasonably needed for scheduling and completion of the testing process. In addition to annual testing, all ground ladders should be tested under the following circumstances:

- (a) New ground ladders should be tested prior to being placed into service. If the manufacturer of any new ladder provides written documentation certifying that the ladder has been tested and is in full compliance NFPA standards, the ladder may be placed in service with no further initial testing.
- (b) Any time a ladder is suspected of being unsafe
- (c) Any time a ladder has been subjected to overloading, as defined by the NFPA standards
- (d) Any time a ladder has been subjected to impact loading or unusual conditions
- (e) Whenever a ladder has been exposed to or is suspected of having been exposed to direct flame
- (f) Whenever the heat sensor label affixed to a ladder has changed to indicate heat exposure
- (g) After any repairs have been completed, unless the only repair was replacing the halyard.

913.4 TESTING RECORDS

The safety officer shall be responsible for maintaining comprehensive records of all ladder testing and certification for the service life of each ladder.

Automated External Defibrillators

914.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the requirements for maintaining status as an approved Public Safety AED Service Provider through the county Emergency Medical Services (EMS) agency (22 CCR 100021).

914.1.1 DEFINITIONS

Definitions related to this policy include:

Automated External Defibrillator (AED) - An external defibrillator capable of cardiac rhythm analysis that will charge and deliver a shock either automatically or by user interaction after electronically detecting and assessing ventricular fibrillation or rapid ventricular tachycardia (22 CCR 100005).

CPR - Establishing and maintaining an open airway, ensuring adequate respiration and ensuring adequate circulation either spontaneously or by means of closed chest cardiac compression, in accordance with standards promulgated by the current American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care (22 CCR 100007).

Public Safety AED Service Provider - An agency or organization that is responsible for, and is approved to operate, an AED (22 CCR 100006).

914.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to maintain an authorized Public Safety AED Service Provider status through the county EMS agency and to provide EMS-approved training (see the Automated External Defibrillator Training Policy) to all AED-authorized members, thereby enabling them to provide AED services to the public when necessary.

914.3 GUIDELINES

The EMS supervisor shall be responsible for ensuring the Department maintains the necessary EMS agency approval to operate as an AED Service Provider and shall work with the Training Safety Officer to ensure all AED-authorized members have completed the required training.

To obtain AED Service Provider approval from the EMS agency, the Department shall provide the following to its members (22 CCR 100021):

- Orientation to the AED for all AED-authorized members
- Instruction in the proper maintenance of AED equipment
- Initial training and continued competency training for all AED-authorized members

Personal Protective Equipment

915.1 PURPOSE AND SCOPE

The purpose of this policy is to reasonably protect Bear Valley - Indian Valley Fire Protection District members by providing personal protective equipment (PPE), safety devices, and safeguards for workplace activities (8 CCR 3401; 8 CCR 3380).

PPE information related to patient care is found in the Communicable Diseases Policy.

PPE information related to respiratory protection is found in the Respirator Protection Policy.

915.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to provide PPE and safeguards of the proper type, design, strength, and quality needed to reasonably eliminate, preclude, or mitigate a hazard.

The Bear Valley - Indian Valley Fire Protection District adopts the National Fire Protection Association (NFPA) standard for the selection, care, and maintenance of PPE to reduce the safety and health risks associated with improper selection, poor maintenance, inadequate care, excess wear, and improper use.

915.3 PPE STANDARDS AND REQUIREMENTS

The Department will provide approved PPE that is appropriate for the hazard to members who are located in a workplace where there is a risk of injury. Members shall wear appropriate PPE any time there is a risk of exposure to a hazard. The Training Safety Officer shall apply the following guidelines, requirements, and standards to all PPE.

- (a) The PPE provided shall meet nationally recognized standards and all state-required standards (NFPA 1971; NFPA 1977; NFPA 1851; 8 CCR 3380 et seq.; 8 CCR 3401 et seq.).
- (b) When no authoritative standard exists for a PPE or safety device, the use of such equipment shall be subject to inspection and acceptance or rejection by the Fire Chief in charge of the division where the equipment will be used.
- (c) PPE shall be distinctly marked to facilitate easy identification of the manufacturer.
- (d) The TSO shall ensure that the member is properly instructed and uses PPE in accordance with the manufacturer's instructions.
- (e) Members are responsible for maintaining their assigned PPE in a safe and sanitary condition.
- (f) Supervisors are responsible for ensuring that all PPE is maintained in a safe and sanitary condition.
- (g) PPE shall be of such design, fit, and durability as to provide adequate protection against the hazards for which they are designed.
- (h) PPE shall be reasonably comfortable and shall not unduly encumber member movements that are necessary to perform work.

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915.3.1 HEAD PROTECTION

Members working in locations where there is a risk of head injuries from flying or falling objects and/or electric shock and burns shall wear an approved protective helmet. Each protective helmet shall bear the original marking required by the ANSI standard under which it was approved. At a minimum, the marking shall identify the manufacturer, the ANSI designated standard number and date, and the ANSI designated class of helmet. Where there is a risk of injury from hair entanglements in moving parts of machinery, combustibles, or toxic contaminants, members shall confine their hair to eliminate the hazard (8 CCR 3381; 8 CCR 3403; 8 CCR 3410.1).

915.3.2 FACE AND EYE PROTECTION

Members working in locations where there is a risk of eye injuries, such as punctures, abrasions, contusions, or burns from contact with flying particles, hazardous substances, projectiles, or injurious light rays that are inherent in the work or environment, shall be safeguarded by means of face or eye protection. Suitable screens or shields isolating the hazardous exposure may be considered adequate safeguarding for nearby members. The Department shall provide and require that members wear approved face and eye protection suitable for the hazard and in accordance with 8 CCR 3382, 8 CCR 3403, and 8 CCR 3410.1.

Self-contained breathing apparatus with full facepiece shall be considered face and eye protection (8 CCR 3403).

915.3.3 EAR AND NECK PROTECTION AND PROTECTIVE HOOD INTERFACE

Protection equipment against burns or injury to the ears and neck suitable to the hazard shall be provided to members by one or more of the following (8 CCR 3404; 8 CCR 3410.1):

- (a) Ear flap attachment to the helmet
- (b) Hood or shroud
- (c) For wildland firefighting a flared neck shield to be attached to the brim of helmet, shroud, or high collar with throat strap.

915.3.4 BODY PROTECTION

Body protection may be required for members whose work exposes parts of their body that are not otherwise protected from hazardous or flying substances or objects. Clothing appropriate for the work being done shall be worn. Loose sleeves, tails, ties, lapels, cuffs, or other loose clothing that can be entangled in moving machinery shall not be worn. Clothing saturated or impregnated with flammable liquids, corrosive substances, irritants, or oxidizing agents shall be destroyed or removed and shall not be worn until properly cleaned (8 CCR 3383).

Body protection shall consist of structural or proximity fire protective garments. Body protection for other than structural fires shall be provided as appropriate for the potential hazards (8 CCR 3405).

Chainsaw protectors shall be provided to members using chainsaws in wildland fire fighting activities and shall meet the U.S. Department of Agriculture Forest Service Specifications as identified in 8 CCR 3410.1.

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915.3.5 HAND AND WRIST PROTECTION

Hand protection shall be required for members whose work involves unusual and excessive exposure of hands to cuts, burns, harmful physical or chemical agents, or radioactive materials that are encountered and capable of causing injury or impairment. Protective gloves shall be worn when exposed to the hazards of structural and proximity firefighting activity and wildland fire activity (8 CCR 3384; 8 CCR 3406; 8 CCR 3410.1).

Hand protection (e.g., gloves) shall not be worn where there is a danger of the hand protection becoming entangled in moving machinery or materials. Use of hand protection around smooth-surfaced rotating equipment does not constitute an entanglement hazard if it is unlikely that the hand protection will be drawn into the danger zone.

Wristwatches, rings, or other jewelry should not be worn while working with or around machinery with moving parts in which such objects may be caught or around electrical equipment (8 CCR 3384).

915.3.6 FOOT PROTECTION

Appropriate foot protection shall be required for members who are exposed to foot injuries from electrical hazards; hot, corrosive, or poisonous substances; falling objects; crushing or penetrating actions; or who are required to work in abnormally wet locations. Footwear that is defective or inappropriate to the extent that its ordinary use creates the possibility of foot injuries shall not be worn. Footwear shall be appropriate for the hazard and shall comply with 8 CCR 3385.

The use of foot protection shall be coordinated with the wearing of the protective clothing system to ensure full body protection (8 CCR 3407; 8 CCR 3410.1).

915.3.7 WILDLAND FIRE SHELTERS

Fire shelters shall be provided and made immediately available for each member engaged in wildland firefighting activities and shall meet the U.S. Department of Agriculture Forest Service Specifications as identified in 8 CCR 3410.1.

915.3.8 PERSONAL FALL PROTECTION SYSTEMS

Members working in assignments where there is a risk of fall (e.g., climbing to, operating at, or rappelling from unsafe heights) shall use appropriate fall protection equipment such as ropes, harnesses, or other devices (8 CCR 1670).

915.4 SELECTION, CARE, AND MAINTENANCE OF PPE

PPE exists to provide the member with an envelope of protection from multiple hazards and repeated exposures. For structural firefighting, PPE is a system of components designed to work as an ensemble. Typical firefighting PPE consists of a hood, helmet, jacket, trousers, gloves, wristlets, and footwear. A program for selection, care, and maintenance of PPE consists of the following.

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915.4.1 SELECTION

The PPE selection process should be conducted consistent with the protocols developed by the Health and Safety Officer (see the Health and Safety Officer Policy).

The PPE selection process should include (8 CCR 3380; 8 CCR 3402.3):

- (a) A written risk assessment at least every two years to include expected hazards, frequency of use, past experiences, geographic location, and climatic conditions.
 - 1. The assessment should include a review of the current risk assessment and necessary changes.
- (b) The evaluation of comparative information on all ensemble elements to ensure they will interface and perform based on the risk assessment.
- (c) The following considerations:
 - 1. PPE performance expectations, including thermal and physiological effects
 - 2. Style and design for user comfort and wear performance
 - 3. Construction for quality, durability, and garment life
 - 4. Manufacturer ability to meet performance demand requirements, technical information, service, warranty, and customer support needs
 - 5. Any necessary changes in operating procedure.

915.4.2 WILDLAND FIREFIGHTING PPE SELECTION

Wildland firefighting PPE selection shall consist of the following (8 CCR 3410):

- (a) Prior to the selection of PPE for wildland firefighting a risk assessment shall be performed in writing to include but not limited to the hazards that can be encountered by wildland firefighters based on the following:
 - 1. Types of duties performed while wearing wildland firefighting PPE
 - 2. Identification and characterization of hazards of the duties
 - 3. Geographic location, elevation, and climate
 - 4. Seasonal effect
 - 5. Garment configurations of the wildland firefighting PPE (single-layer or multi-layer garment)
 - 6. Organizational experience and lessons learned with current wildland firefighting PPE
 - 7. Proximity and location of private residences and other habitable structures in relation to wildland vegetation and areas of refuge
- (b) Operational requirements shall be documented in writing in relation to the assessment and consist of the following:
 - 1. Identify the garment configuration and garment component that comprise the wildland firefighting PPE system

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2. Specify performance criteria for each wildland firefighting PPE garment and its components

915.4.3 INSPECTION

NFPA standards define two primary types of PPE inspection:

Routine inspection - Each firefighter shall conduct a routine inspection of their issued PPE at the beginning of each shift, after each use, and anytime the PPE has been exposed or is suspected of having been exposed to damage or contamination.

PPE should be inspected to determine the level of cleaning necessary. The inspection should include the following as applicable:

- (a) Coat, trousers, gloves, and hood should be checked for the following:
 1. Soiling
 2. Contamination from hazardous materials or biological agents
 - (a) If the garment is contaminated by blood or other potential infectious material, the garment should be handled in accordance with 8 CCR 5193 (bloodborne pathogens)
 3. Physical damage, such as:
 - (a) Rips, tears, holes, cuts, and any other irregularities
 - (b) Damaged/missing hardware and closure systems
 - (c) Thermal damage, such as charring, burn holes, and melting
 - (d) Damaged or missing reflective trim
 - (e) Shrinkage
 - (f) Loss of elasticity or flexibility at openings
 - (g) Excessive wear to liners
- (b) Helmets should be checked for the following:
 1. Soiling
 2. Contamination from hazardous materials or biological agents
 3. Physical damage to the shell, such as:
 - (a) Cracks, crazing (small cracks), dents, and abrasions
 - (b) Thermal damage to the shell, such as bubbling, soft spots, warping, or discoloration
 4. Physical damage to ear flaps, such as:
 - (a) Rips, tears, and cuts
 - (b) Thermal damage, such as charring, burn holes, and melting
 5. Damaged or missing components of suspension and retention systems

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6. Damaged or missing components of the goggle system including:
 - (a) Discoloration
 - (b) Crazing (small cracks)
 - (c) Scratches to goggle lens, limiting visibility
7. Damaged or missing reflective trim
- (c) Footwear should be checked for the following:
 1. Soiling
 2. Contamination from hazardous materials or biological agents
 3. Physical damage, such as:
 - (a) Cuts, tears, and punctures
 - (b) Thermal damage, such as charring, burn holes, and melting
 - (c) Exposed or deformed steel toe, steel midsole, or shank
 - (d) Loss of water resistance
- (d) Fall protection should be checked for the following:
 1. Soiling
 2. Contamination from hazardous materials or biological agents
 3. Physical damage, such as:
 - (a) Cuts, tears, and punctures
 - (b) Thermal damage such as charring, burn holes, and melting
 - (c) Excessive stretching
 - (d) Distorted or damaged hardware

Advanced inspection - Advanced inspection of PPE ensembles and elements shall be conducted a minimum of every 12 months or whenever routine inspections indicate a problem may exist.

Advanced inspections shall only be conducted by trained and certified members or from a manufacturer-approved vendor certified to conduct advanced inspections. All findings from advanced inspections shall be documented on an inspection form. Universal precautions shall be observed, as appropriate, when handling elements. Advanced inspections shall include, at a minimum, the inspection criteria outlined in the nationally recognizes standards.

915.4.4 CLEANING AND DECONTAMINATION

The following rules and restrictions shall apply to the cleaning and decontamination of PPE:

- (a) Soiled and contaminated PPE elements shall undergo either a routine/preliminary exposure reduction (PER), an advanced cleaning, or a specialized cleaning.

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- (b) Soiled and contaminated PPE elements shall not be taken home, washed in the home, or washed in public laundries unless the business is dedicated to handling firefighting protective clothing.
- (c) Commercial dry cleaning shall not be used.
- (d) The Member will examine the manufacturer's label and user information for specific cleaning instructions.
- (e) Chlorine bleach or chlorinated solvents shall not be used to clean or decontaminate PPE elements.
- (f) Scrubbing or spraying with high-velocity water jets, such as a power washer, shall not be used.
- (g) All contract cleaning or decontamination businesses shall demonstrate procedures for cleaning and decontamination that do not compromise the performance of PPE ensembles and elements.
- (h) NFPA standards identify and define three primary types of cleaning: routine/PER, advanced, and specialized.
 - 1. **Routine cleaning/PER** - After each use, any elements that are soiled shall receive routine cleaning. It is the firefighter's responsibility to routinely clean their PPE ensemble or elements using the following process:
 - (a) When possible, initiate cleaning at the incident scene.
 - (b) Brush off any dry debris.
 - (c) Gently rinse off debris with a water hose.
 - (d) If necessary, scrub gently with a soft bristle brush and rinse off again if necessary. Spot clean utilizing a utility sink.
 - (e) Inspect for soiling and contamination and repeat the process if necessary.
 - (f) All elements shall be air-dried in an area with good ventilation. Do not dry in direct sunlight or use a machine dryer.
 - 2. **Advanced cleaning** - Should routine cleaning fail to render the elements clean enough to be returned to service, advanced cleaning is required. In addition, elements that have been issued, used, and soiled shall undergo advanced cleaning every six months, at a minimum.
 - (a) The department's Training and Safety Officer (TSO) shall perform or manage all advanced cleaning utilizing a qualified contract cleaner.
 - (b) Advanced cleaning will be coordinated with the safety officer by either the crew or by the individual. Loaner PPE will be provided for any member scheduled to work.
 - (c) Station laundering machines designed for cleaning station uniforms and other standard items shall not be used to clean PPE elements.

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3. **Specialized cleaning** - PPE elements that are contaminated with asbestos, opioid drugs, bedbugs, hazardous materials, or biological agents shall undergo specialized cleaning as necessary to remove the specific contaminants.
 - (a) The PPE elements that are contaminated or suspected to be contaminated shall be isolated, tagged, bagged, and removed from service until they undergo specialized cleaning to remove the specific contaminant. All bagged PPE shall include the member's name, company, and shift. Universal precautions shall be observed when handling known or suspected contaminated PPE elements. For more information on decontamination of PPE after exposure, refer to the Communicable Diseases Policy.
 - (b) The department's TSO shall manage all specialized cleaning and will utilize a qualified contract cleaner. The Department, if possible, shall identify the suspected contaminant and consult the manufacturer for an appropriate decontamination agent and process.
 - (c) PPE components contaminated with blood, bodily fluids, or other biological contaminants should be sanitized (e.g., clothing, fabrics) or disinfected (e.g., helmet shells, other hard surfaces).

915.4.5 CBRNE-CONTAMINATED PPE

All PPE elements that have been contaminated by chemical, biological, radiological, nuclear, or explosive (CBRNE) agents shall be removed as soon as possible, bagged, and permanently removed from service. Such PPE elements shall be disposed of pursuant to department procedures.

915.4.6 REPAIR OF PPE

Damaged PPE shall not be used. The department's HSO shall manage all PPE repairs utilizing a manufacturer-recognized repair facility. All elements shall be subject to an advanced or specialized cleaning before any repair work is done. Loaner PPE is available to employees while repairs are being made.

915.4.7 ISSUING PPE

All PPE ensembles or elements shall be issued through the department's TSO. All fittings shall be completed by the TSO and/or by a manufacturer representative.

- Members shall only use department-issued or approved PPE, including accessories.
- Members shall minimize the public's exposure to soiled or contaminated PPE and avoid wearing PPE to non-fire related emergencies.
- Members shall not wear PPE inside station living quarters or other department facilities.

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915.4.8 MEMBER-PROVIDED PPE

Members who desire to use personally owned PPE are required to have the PPE approved and inspected by the TSO prior to use. All personally owned PPE is subject to the requirements of this policy.

915.4.9 STORAGE OF PPE

The parameters for the storage of all PPE ensembles or elements include the following:

- (a) PPE shall not be stored in direct sunlight indirect sunlight or exposed to ultraviolet radiation or fluorescent lighting when it is not being worn.
- (b) PPE shall be clean, dry, and well-ventilated before storage.
- (c) PPE shall not be stored in airtight containers unless the container is new and unused.
- (d) PPE shall not be stored at temperatures below 40 degrees F or above 180 degrees F.
- (e) PPE shall be stored in a protective case or bag to prevent damage if stored in compartments or trunks.
- (f) PPE shall not be subjected to sharp objects, tools, or other equipment that could damage the ensemble or elements.
- (g) PPE shall not be stored inside living quarters or with personal belongings, or taken or transported within the passenger compartment of personal vehicles unless it is stored in a protective case or bag.
- (h) PPE shall not be stored in contact with hydraulic fluids, solvents, hydrocarbons, hydrocarbon vapors, or other contaminants.
- (i) Proximity PPE (i.e., specialized PPE designed to protect workers from high levels of radiant heat) shall not be stored folded.

915.4.10 PPE TRAINING

The TSO should verify that members receive and demonstrate an understanding of PPE training consistent with their duties before performing work requiring the use of the PPE. This should include (8 CCR 3380; 8 CCR 3410):

- (a) Determining when PPE is necessary and what kind should be used.
- (b) How to properly wear, adjust, and remove PPE.
- (c) The limitations of the PPE.
- (d) Upon issue, all members shall be provided training on this policy along with the manufacturer's written instructions on the care, use, and maintenance of their PPE, including any warnings issued by the manufacturer.
- (e) New firefighters shall receive training in the care, use, and maintenance of their PPE before participating in any hands-on training or operations. All other firefighters shall receive training as needed when PPE ensembles or elements are upgraded or changed.
- (f) The useful life and disposal of PPE.

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- (g) Inspection procedures and frequencies.
- (h) Storage of the PPE.

Supervisors who believe a member does not have the understanding and skill required for PPE use, whether or not the member has received training on the PPE, should take appropriate steps to have the member retrained.

915.4.11 PPE RECORD KEEPING

The Department shall maintain or require contracted vendors to maintain records on all structural firefighting ensembles or elements to include:

- (a) The name of the member to whom the element is issued.
- (b) The date and condition of the element when issued.
- (c) The manufacturer, model name, or design.
- (d) The manufacturer's identification number, lot number, or serial number.
- (e) The month and year of manufacture.
- (f) The dates and findings of all advanced inspections.
- (g) The dates and findings of complete liner inspections.
- (h) The dates of advanced cleaning, specialized cleaning, or decontamination, and by whom it was performed.
- (i) The date of any repairs, the person who repaired the PPE, and a brief description of the repair.
- (j) The date the element was removed from service (retirement).
- (k) The date and method used to dispose of the element.

The Department shall maintain records on its structural and proximity firefighting protective ensemble and ensemble elements for three years from the date of retirement (8 CCR 3402.3).

915.4.12 WILDLAND FIREFIGHTING PPE RECORD KEEPING

The Department shall maintain training records that reflects the member training on wildland firefighting use of PPE for a minimum of three years. Records of retired firefighting PPE shall also be maintained for a minimum of three years (8 CCR 3410).

915.4.13 PPE RETIREMENT

PPE ensembles and elements shall be retired as follows:

- (a) When worn or damaged to the extent that the Department deems that it is not possible or cost-effective to repair.
- (b) When no longer useful for emergency operations.
- (c) Helmets shall be retired 10 years from the date of manufacture that do not meet the requirements of NFPA 1971(8 CCR 3402.3).

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- (d) Wildland firefighting protective garments shall be retired 10 years from the date of manufacture (8 CCR 3410).
- (e) If more than 10 years old, except for the reflective outer shell of proximity PPE, which should be retired after five years.

Retired PPE ensembles and elements shall be destroyed or disposed of by the Department in a manner assuring that they will not be used in any firefighting or emergency activities, including training. Retired PPE may only be used for training when that training does not include live fire. Any PPE used for training shall be clearly marked: "Training only. No live fire."

915.4.14 SPECIAL INCIDENT PROCEDURE

If any member of the Bear Valley - Indian Valley Fire Protection District suffers a serious injury or death while wearing PPE, the following procedure should be followed:

- (a) The PPE shall immediately be removed from service.
- (b) Custody of the PPE will be maintained by the Board of Directors or the authorized designee, and the PPE shall be kept in a secure location with controlled, documented access.
- (c) All PPE shall be non-destructively tagged and stored only in paper or cardboard containers to prevent further degradation or damage. Plastic airtight containers shall not be used.
- (d) The PPE shall be made available to the department's investigation team (see Line of Duty Death Investigation Policy) or outside experts as approved by the Board of Directors or the authorized designee, to determine the condition of the PPE.
- (e) The Board of Directors or the authorized designee shall determine the retention period for storage of the PPE.

915.4.15 REPORTING

The TSO should report all PPE health and safety concerns caused by, or suspected to have been caused by, element failure to the PPE element manufacturer and certifying organization.

Hazardous Energy Control

916.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the minimum control requirements mandated by 29 CFR 1910.147 and 8 CCR 3314. The control requirements are intended to isolate a machine or equipment from all energy sources to prevent the start-up of the machine or equipment or the release of stored energy, both of which could cause injury.

The control requirements apply to the servicing or maintenance of machines and equipment used in a fire station or on an apparatus. This policy includes member training and periodic control and inspection requirements.

916.1.1 DEFINITIONS

Definitions related to this policy include:

Affected member - A member whose job duties require him/her to work in an area where hazardous energy exposure could result from cleaning, repairing, servicing, setting up or adjusting machines or equipment under lockout or tagout.

Authorized member - A member who is qualified to perform lockout or tagout of machines or equipment, in order to clean, repair, service, set up or adjust its operations. An affected member becomes an authorized member when that member's duties include performing the maintenance operations covered in this policy.

Hazardous energy - The unexpected energization or activation of equipment, or the release of stored energy, that could potentially cause injury.

Lockout or tagout - The use of devices, positive methods and procedures that result in the effective isolation or securing of machinery and equipment from all hazardous energy sources (e.g., mechanical, hydraulic, pneumatic, chemical, electrical or thermal).

916.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to implement and maintain a written hazardous energy control program that is in compliance with state and federal regulations and includes, but is not limited to, the following:

- (a) Guidelines and procedures that specifically outline the scope, purpose, authorization, rules and techniques to be utilized when working in proximity to, and for the control of, hazardous energy and the means to enforce compliance, including, but not limited to:
 - 1. A statement of the intended use of the procedure.
 - 2. Procedural steps for shutting down, isolating, blocking and securing machines or equipment to control hazardous energy.
 - 3. The procedural steps for the placement, removal and transfer of lockout and tagout devices.

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4. The requirements for testing a machine or equipment to determine and verify the effectiveness of lockout, tagout and other hazardous energy control devices.
- (b) As needed, the Department shall develop separate procedural steps for the safe lockout or tagout of each machine or piece of equipment affected by the hazardous energy control program.
- (c) The Department shall develop and maintain a list of all machines or equipment affected by the hazardous energy control program. The list may include, but is not limited to, the following:
 1. Hurst® tools
 2. Chain saws
 3. Hydraulic systems (e.g., rack, jacks)
 4. Complex electrical systems (e.g., generators, pumps, radios, etc.)

916.3 LOCKOUT AND TAGOUT

An authorized member shall be responsible for the following, before working on de-energized electrical equipment or systems, unless the equipment is physically removed from the wiring system (8 CCR 2320.6 and 8 CCR 3314(e)):

- (a) Notification of all involved personnel.
- (b) Locking the disconnecting means in the “open” position with the use of lockable devices (e.g., padlocks or combination locks), or disconnecting the conductor or other positive methods or procedures. This will effectively prevent unexpected or inadvertent energizing of a designated circuit, machine or appliance.
- (c) Tagging the disconnect means with appropriate accident prevention tags. Lockout is not required when the tagging procedures are used as specified here and where the disconnect means is accessible only to personnel trained in tagout procedures.
- (d) Blocking the operation or dissipation of energy of all stored energy devices that present a hazard (e.g., capacitors or pneumatic, spring-loaded mechanisms).

916.4 INSPECTIONS

The Bear Valley - Indian Valley Fire Protection District shall conduct a periodic inspection of the hazardous energy control program components at least annually to evaluate its continued effectiveness and to determine the necessity for updating any methods or procedures (8 CCR 3314).

- (a) The periodic inspection shall be performed by an authorized member other than the members utilizing the hazardous energy control procedures that are being inspected.
- (b) Where lockout and/or tagout are used for hazardous energy control, the inspector shall provide a review of roles and responsibilities to the authorized members.

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- (c) The Safety and Health Officer shall certify that the periodic inspections have been performed. The certification shall identify the machine or equipment that was inspected, the date of the inspection, the authorized members included and the name of person performing the inspection.

916.5 TRAINING

The Training Safety Officer shall be responsible for ensuring that members receive training on hazardous energy control methods and procedures, based on the reasonably expected workplace exposure. Members shall receive training prior to any work assignment in which a potential hazard exists. Training should include, but is not limited to, the following topics (8 CCR 2320.1, 8 CCR 2320.9 and 8 CCR 3314):

- (a) Definitions of hazardous energy
- (b) Workplace hazards
- (c) Work techniques, hazards and injuries involved in energized equipment
- (d) Lockout and tagout procedures, equipment and its proper use
- (e) Authorized and affected employees
- (f) Safety precautions required when energized electrical equipment is not under the control of an authorized member
- (g) Refresher training on an annual basis, depending on the results of the annual inspection process

916.6 TRAINING RECORDS

The Training Safety Officer shall document the hazardous energy control training provided to members both initially and annually and shall retain those records for one year. Documentation shall include the following (8 CCR 3203):

- (a) The dates of the training sessions
- (b) A list of the topics or a summary of the content of the training sessions
- (c) The name or other identifier and rank of the members who received the training
- (d) The names, certificate number and qualifications of persons conducting the training

Hazard Communication

917.1 PURPOSE AND SCOPE

The purpose of this policy is to protect the health and safety of department members who may be occupationally exposed to hazardous substances in the workplace (8 CCR 5194).

917.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to develop, implement, and maintain a written hazard communication program for members to use as a reference. The program shall minimally describe how department members will receive information and training on the criteria specified for labels and other forms of warning and Safety Data Sheets (SDS) (8 CCR 5194).

917.3 PROCEDURE

The fire chief or designee shall develop, implement, and maintain a written hazard communication program that includes but is not limited to (8 CCR 5194):

- (a) A list of hazardous substances that uses an identifier referenced on the appropriate SDS. The list may be compiled for the workplace as a whole or for individual work areas.
- (b) The methods the Department will use to inform members of the hazards of non-routine tasks and the hazards associated with substances in unlabeled containers.
- (c) The Department shall make the written hazard communication program available, upon request, to members, to their designated representatives, and to the National Institute for Occupational Safety and Health (NIOSH).
- (d) The Department shall ensure that each container of a hazardous substance is labeled, tagged, or marked with the following information:
 1. Identity of the hazardous substance
 2. Appropriate hazard warnings
 3. Name and address of the manufacturer, importer, or other responsible party

917.4 SAFETY DATA SHEETS

The Department shall have an SDS for each hazardous chemical that is in use in the workplace. The SDS concerning a hazardous chemical shall be readily accessible to members and prepared in accordance with 8 CCR 5194(g).

917.4.1 CLEANING PRODUCT RIGHT TO KNOW ACT

Printable information regarding the ingredients of air care products, automotive products, general cleaning products, or polish or floor maintenance products used primarily for janitorial, domestic, or institutional cleaning purposes used by the Department shall be readily accessible to members (Labor Code § 6398.5; Health and Safety Code §108952(f); Health and Safety Code § 108954.5(c)).

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917.5 TRAINING REQUIREMENTS

See the Hazard Communication Program Training Policy.

Personal Firearms

918.1 PURPOSE AND SCOPE

The purpose of this policy is to promote the safety of all members by providing guidance on the possession of firearms in the workplace.

This policy does not apply to duty firearms authorized by the Department for use by fire investigators while performing official duties. Duty firearms are addressed in the Duty Firearms and Use of Force Policy.

918.2 POLICY

The Bear Valley - Indian Valley Fire Protection District will make reasonable efforts to reduce risk to members and the public by placing limitations on firearms being brought onto department property or carried by members while on-duty or while representing the Department in any capacity.

918.3 PROHIBITIONS

Members are prohibited from possessing a firearm while on-duty or while on or in department property or vehicles unless properly licensed (CCW) with the written permission of the Chief.

Roadway Incident Safety

919.1 PURPOSE AND SCOPE

The purpose of this policy is to set forth The Fire Chief's responsibilities for the development of practices used by members who are engaged in any operations occurring on roadways.

919.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to provide traffic incident management (TIM) practices for the protection of members, personnel responding from other agencies, and victims operating on roadways.

919.3 BOARD OF DIRECTORS RESPONSIBILITIES

The Board of Directors should ensure that the Department adopts TIM procedures. Procedures should include but not be limited to:

- Use of the Incident Command System at all roadway incidents.
- Coordination and cooperation with law enforcement on-scene, including establishing a unified command, depending on the location, size, and complexity of the incident.
- Scene identification and size-up.
- Establishing a temporary traffic control zone including:
 - Placement of apparatus.
 - Use of traffic control devices.
 - Personnel assigned to TIM duties.

919.3.1 MANUAL ON UNIFORM TRAFFIC CONTROL DEVICES (MUTCD)

Procedures should also include any requirements in the manual of uniform traffic control devices adopted by the state, including but not limited to the following (8 CCR 1598):

- Use of emergency vehicle lighting
- Safe positioning of emergency vehicles
- Use of traffic flaggers

Distracted Driving

920.1 PURPOSE AND SCOPE

The purpose of this guideline is to establish safe practices while driving. Authority vehicles and eliminate distracted driving. Distracted driving is a major cause of vehicle accidents in California. Distracted driving can come from several different causes,

- Cellphone Use
- Wireless Communication Devices
- Portable Global Positions Systems (GPS)
- Eating
- Personal Grooming
- Adjusted Climate Control and Radios
- Operating 2-Way Radios and Sirens

920.2 GUIDELINE

California Vehicle Code 23123.5 (e) exempts emergency service professionals from having to use hand free devices while operating an authorized emergency vehicle in the course and scope of his/her duties. The code does not exempt personnel from civil liabilities if involved in an incident while distracted driving has occurred.

Personnel shall limit their opportunities of being a distracted driver by the following:

- (a) Understand the functions of the emergency equipment and radios in apparatus or vehicles and use the hand-free functions when possible.
- (b) Limit cell phone and wireless device use unless it is needed while the vehicle or apparatus is moving and use hands-free functions when available.
- (c) Use the vehicles or apparatus two radio as your primary communications device.
- (d) Eating and personal grooming is prohibited while driving.
- (e) If a passenger is in the vehicle or apparatus utilize the passenger to make adjustments to radio, GPS, or other wireless devices.

All the above are ways to limit distracted driving. It is your responsibility as the driver/operator to arrive and return safely while conducting authority business.

Chapter 10 - Personnel

Recruitment and Selection

1000.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the recruiting, selection, training, and retention processes utilized by the Bear Valley - Indian Valley Fire Protection District. This policy supplements any rules that govern employment practices for the Bear Valley - Indian Valley Fire Protection District.

1000.2 POLICY

In accordance with applicable federal, state, and local law, the Bear Valley - Indian Valley Fire Protection District provides equal opportunities for applicants and department members regardless of actual or perceived race, ethnicity, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, pregnancy, genetic information, veteran status, marital status, and any other classification or status protected by law. The Department does not show partiality or grant any special status to any applicant, member, or group of members unless otherwise required by law.

1000.3 RECRUITMENT

The department should employ a comprehensive recruitment and selection strategy to recruit and select members from a qualified and diverse pool of candidates.

The strategy should include:

- (a) Identification of racially and culturally diverse target markets.
- (b) Use of marketing strategies to target diverse applicant pools.
- (c) Expanded use of technology and maintenance of a strong internet presence. This may include an interactive department website and the use of department-managed social networking sites, if resources permit.
- (d) Expanded outreach through partnerships with media, community groups, citizen academies, local colleges, universities, and the military.
- (e) Member referral and recruitment incentive programs.
- (f) Consideration of shared or collaborative regional testing processes.

The department shall avoid advertising, recruiting, and screening practices that tend to stereotype, focus on homogeneous applicant pools, or screen applicants in a discriminatory manner.

The Department should strive to facilitate and expedite the screening and testing process, and should periodically inform each candidate of his/her status in the recruiting process.

1000.4 SELECTION PROCESS

The Department shall actively strive to identify a diverse group of candidates who have in some manner distinguished themselves as being outstanding prospects. Minimally, the Department should employ a comprehensive screening, background investigation, and selection process that assesses cognitive and physical abilities and includes review and verification of the following:

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- A comprehensive application for employment (including previous employment, references, current and prior addresses, education, and military record)
- Driving record
- Reference checks
- Employment eligibility, including U.S. Citizenship and Immigration Services (USCIS) Employment Eligibility Verification Form I-9 and acceptable identity and employment authorization documents consistent with Labor Code § 1019.1 (documentation may be requested upon hire)
- Information obtained from public internet sites
- Financial history consistent with the Fair Credit Reporting Act (FCRA) and Investigative Consumer Reporting Agencies Act (ICRAA) (15 USC § 1681 et seq.; Civil Code § 1786.12)
- Local, state, and federal criminal history record checks following a conditional offer of employment unless otherwise required by law
- Polygraph or voice stress analyzer examination (when legally permissible) (Labor Code § 432.2)
- Medical and psychological examination (may only be given after a conditional offer of employment)
- Review board or selection committee assessment

1000.4.1 VETERAN PREFERENCE

Qualifying veterans of the United States Armed Forces who receive a passing score on an entrance examination shall be ranked in the top rank of any resulting eligibility list. The veteran's preference shall also apply to a widow or widower of a veteran or a spouse of a 100 percent disabled veteran (Government Code § 18973.1).

1000.5 EMPLOYMENT STANDARDS

All candidates shall meet the minimum standards required by state law. Candidates will be evaluated based on merit, ability, competence, and experience, in accordance with the high standards of integrity and ethics valued by the Department and the community.

Validated, job-related, and nondiscriminatory employment standards shall be established for each job classification and shall minimally identify the training, abilities, knowledge, and skills required to perform the position's essential duties in a satisfactory manner (see the Position Descriptions Policy). Each standard should include performance indicators for candidate evaluation. The Board of Directors should maintain validated standards for all positions.

Selection standards for promotional opportunities are detailed in the Promotions and Transfers Policy.

1000.5.1 STANDARDS FOR FIREFIGHTERS

Generally, the standards may include the following requirements. The candidate should:

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- (a) Be at least 18 years of age by the closing date of the recruitment period.
- (b) Be in possession of a high school diploma or a General Equivalency Diploma (GED).
- (c) Have good vision in both eyes, with the ability to distinguish Occupational Safety and Health Administration (OSHA) color codes for hazardous materials (e.g., blue, red, yellow, white), and have no depth or peripheral vision impairment.
- (d) Meet the objectives and minimum standards established in the International Association of Fire Chiefs (IAFC)/International Association of Fire Fighters (IAFF) Fire Service Joint Labor Management Wellness-Fitness Initiative or similar validated health screening process.
- (e) Meet the minimum standards established by the National Fire Protection Association (NFPA).
- (f) Be in possession of, or have the ability to obtain, a valid state driver license in the class required for the position sought.
- (g) Be a U.S. citizen or have proof of a legal right to work in the U.S.

1000.6 BACKGROUND INVESTIGATION

Every candidate shall undergo a thorough background investigation to verify his/her personal integrity and high ethical standards, and to identify any past behavior that may be indicative of the candidate's unsuitability to perform duties relevant to the operation of the Bear Valley - Indian Valley Fire Protection District.

1000.6.1 NOTICES

The Board of Directors shall ensure that investigations are conducted and notices provided in accordance with the requirements of the FCRA and the ICRAA (15 USC § 1681d; Civil Code § 1786.16).

1000.6.2 CRIMINAL BACKGROUND INFORMATION

Criminal background information, whether directly from criminal offender record information (CORI) or provided by a third party, may have restrictions on the access, use, security, and release of the information. The Board of Directors shall establish procedures to ensure compliance with any applicable requirements and security limitations (Government Code § 12952).

1000.6.3 REVIEW OF SOCIAL MEDIA SITES

Due to the potential for accessing unsubstantiated, private, or protected information, the Board of Directors shall not require candidates to provide passwords, account information, or access to password-protected social media accounts (Labor Code § 980).

The Board of Directors should consider utilizing the services of an appropriately trained and experienced third party to conduct open source, internet-based searches and/or review information from social media sites to ensure that:

- The legal rights of candidates are protected.
- Material and information to be considered are verified, accurate, and validated.

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- The Department fully complies with applicable privacy protections and local, state, and federal law.

Regardless of whether a third party is used, the Board of Directors should ensure that potentially impermissible information is not available to any person involved in the candidate selection process.

1000.6.4 RECORDS RETENTION

The background report and all supporting documentation shall be maintained in accordance with the established records retention schedule.

1000.6.5 DOCUMENTING AND REPORTING

The background investigator shall summarize the results of the background investigation in a report that includes sufficient information to allow the reviewing authority to decide whether to extend a conditional offer of employment. The report shall not include any information that is prohibited from use, including that from social media sites, in making employment decisions. The report and all supporting documentation shall be included in the candidate's background investigation file.

1000.7 DISQUALIFICATION GUIDELINES

As a general rule, performance indicators and candidate information and records shall be evaluated by considering the candidate as a whole, and taking into consideration the following:

- Age at the time the behavior occurred
- Passage of time
- Patterns of past behavior
- Severity of behavior
- Probable consequences if past behavior is repeated or made public
- Likelihood of recurrence
- Relevance of past behavior to public safety employment
- Aggravating and mitigating factors
- Other relevant considerations

A candidate's qualifications will be assessed on a case-by-case basis, using a totality-of-the-circumstances framework.

1000.8 TRAINING

All entry-level firefighter candidates should complete training in an accredited fire training program established by the Office of the State Fire Marshal (OSFM), including the California Fire Service Training and Education System (CFSTES) (Health and Safety Code § 13159 et seq.).

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1000.9 RETENTION

The primary focus should be on hiring those who are the best fit for a particular position. In order to retain quality members, the Department should:

- Seek member input on retention strategies.
- Develop a workplace that respects, encourages, and enables a work/life balance.
- Facilitate training and career development opportunities.
- Develop and maintain quality supervisors.
- Provide regular and meaningful performance feedback.
- Promote an environment where members are able to speak freely.
- Treat members fairly, equitably, and consistently.
- Consider ways to reward excellent performance.
- Follow up on any feedback acquired during an exit interview process.

Performance Evaluations

1001.1 PURPOSE AND SCOPE

The objective of the evaluation system is to record work performance for both the Department and the employee, giving recognition for good work and providing a guide for improvement where needed. The employee performance evaluation report is a gauge in measuring performance and is used for making personnel decisions relating to merit increase, promotion, reassignment, discipline, demotion and termination. The report also provides a guide for mutual work planning and review and an opportunity to convert general impressions into a more objective history of work performance based on job standards.

1001.2 POLICY

The Department evaluates employees in a non-discriminatory manner based upon job-related factors specific to the employee's position, without regard to actual or perceived race, ethnicity, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, pregnancy, genetic information, veteran status, marital status, and any other classification or status protected by law.

1001.3 PROCEDURE

Within one year of appointment to a supervisory position, all supervisors should attend an approved supervisory course that includes training on the completion of performance evaluations.

Each evaluation will cover a specific time period and should be based on the employee's performance during that period. At the beginning of the rating period, each supervisor should discuss the tasks of the position, standards of performance expected and the evaluation rating criteria with each employee. When a non-probationary employee's job performance falls below the established standards of the job, the supervisor should, as soon as practicable but at least 90 days prior to the end of the annual evaluation period, advise the employee in writing in order to provide an opportunity for the employee to improve performance. The involved employee should be provided the opportunity to initial any such writing and respond in writing within 30 days, if desired. Failure to meet established performance standards is justification for an unsatisfactory rating. Rating factors that are not observed are assumed to be performed at a standard level.

The performance evaluation report will be completed by the employee's immediate supervisor. Other supervisors directly familiar with the employee's performance during the rating period should be consulted by the immediate supervisor for their input.

1001.4 FULL-TIME PROBATIONARY EMPLOYEES

All personnel will serve a 12-month probationary period before being eligible for certification as permanent employees. Probationary firefighters shall be evaluated daily, weekly and monthly during the probationary period. Performance evaluation reports shall be completed as defined by the Board of Directors by specific job classification for all other full-time personnel during the probationary period.

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1001.5 FULL-TIME PERMANENT STATUS EMPLOYEES

Permanent employees are subject to three types of performance evaluations:

Regular - A performance evaluation report shall be completed once each year by the employee's immediate supervisor on the anniversary of the employee's date of hire, except for employees who have been promoted. In the case of promotion, a performance evaluation report shall be completed on the anniversary of the employee's date of last promotion.

Transfer - If an employee is transferred from one assignment to another in the middle of an evaluation period and less than six months have transpired since the transfer, an evaluation shall be completed by the current supervisor with input from the previous supervisor.

Special - A special evaluation may be completed any time the rater and the rater's supervisor believe one is necessary due to employee performance deficiencies. Generally, the special evaluation will be used to document areas of performance deemed less than standard when follow-up action is planned (e.g., action plan, remedial training, retraining). The evaluation form and associated documentation shall be submitted as one package.

1001.5.1 RATINGS

Outstanding - Performance that is well beyond that expected or required in the standards for the position. It is exceptional performance, definitely superior or extraordinary.

Exceeds standards - Performance that is better than expected of a fully competent employee. It is superior to what is expected or required by the standards for the position but is not of such rare nature to warrant outstanding.

Meets standards - Performance expected of a fully competent employee and meets the standards required of the position.

Needs improvement - Performance that is less than that expected of a fully competent employee and less than the standards required of the position. A needs improvement rating should be thoroughly discussed with the employee and include a structured plan intended to improve performance, with short interval interim evaluations.

Unsatisfactory - Performance that is inadequate or undesirable, intolerable and inferior to the standards required of the position.

Written comments should be used by the rater to document the employee's strengths, weaknesses and make any suggestions for improvement. Any job dimension rating marked unsatisfactory or outstanding should be substantiated in the rater comments section.

1001.6 EVALUATION INTERVIEW

When a supervisor has completed the preliminary evaluation arrangements shall be made for a private discussion of the evaluation with the employee. The supervisor should discuss the results with the employee and answer any questions the employee may have. If the employee has valid and reasonable protests of any of the ratings, the supervisor may make appropriate changes to the evaluation. Areas needing improvement and goals for reaching the expected level

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of performance should be identified and discussed. The supervisor should also provide relevant counseling regarding advancement and training opportunities. The supervisor and employee will sign and date the evaluation. Permanent employees may also write comments in the employee comments section of the performance evaluation report.

1001.6.1 DISCRIMINATORY HARASSMENT FORM

At the time of the annual evaluation, the reviewing supervisor shall require the employee to read the District and department harassment and discrimination policies. Following such a review, the supervisor shall provide the employee a form to be completed and returned by the employee, certifying:

- (a) That the employee understands the harassment and discrimination policies.
- (b) Whether any questions the employee has have been sufficiently addressed.
- (c) That the employee knows how and where to report harassment policy violations.
- (d) Whether the employee has been the subject of, or witness to, any conduct that violates the discrimination or harassment policy and that has not been previously reported.

The completed form should be returned to the supervisor (or other authorized individual if the employee is uncomfortable returning the form to the presenting supervisor) within one week.

The employee's completed form shall be attached to the performance evaluation report. If the employee has expressed any questions or concerns, the receiving supervisor or other authorized individual shall ensure that appropriate follow-up action is taken.

1001.7 EVALUATION REVIEW

After the supervisor finishes the discussion with the employee, the signed performance evaluation report should be forwarded to the rater's supervisor for review.

The second-level supervisor should review the evaluation for fairness, impartiality, uniformity, and consistency, and evaluate the first level supervisor on the quality of the ratings provided to employee.

1001.8 RECORDS MANAGEMENT

The original performance evaluation report should be maintained in the employee's personnel for the tenure of the employee's employment. A copy should be provided to the employee and a copy should be forwarded to the Board of Directors.

Promotions

1002.1 PURPOSE AND SCOPE

The purpose of this policy is to establish required and desirable qualifications for promotion and transfer within the ranks of the Bear Valley - Indian Valley Fire Protection District.

1002.2 POLICY

The Bear Valley - Indian Valley Fire Protection District determines promotions and transfers in a non-discriminatory manner. It is the policy of the Bear Valley - Indian Valley Fire Protection District to utilize the promotional testing criteria, study materials, and testing instruments available from authenticated and validated local, regional, and nationally recognized best practices in the fire service. This policy will establish the required and desirable qualifications for promotion and transfer within the ranks of the department based on these criteria..

Nothing in this policy is intended to supersede any contract language related to promotional requirements that may exist in a collective bargaining agreement.

1002.3 GENERAL REQUIREMENTS

The following conditions will be used in evaluating members for promotion and transfer:

- (a) Presents a professional, neat appearance
- (b) Maintains a physical condition which aids in their performance
- (c) Demonstrates the following traits:
 - 1. Emotional stability and maturity
 - 2. Stress tolerance
 - 3. Sound judgment and decision-making ability
 - 4. Personal integrity and ethical conduct
 - 5. Leadership
 - 6. Initiative
 - 7. Adaptability and flexibility
 - 8. Ability to conform to organizational goals and objectives in a positive manner

1002.4 PROMOTIONS

Specifications for promotional opportunities are on file with the Bear Valley - Indian Valley Fire Protection District.

Position Descriptions

1003.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a comprehensive description of overall duties and responsibilities of each rank or job classification within the Department.

1003.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to develop unique position descriptions for each assignment within an established rank or classification.

1003.3 PROCEDURE

The Fire Chief will generally develop and maintain classification specifications (e.g., firefighter, fire captain, Captain). Within the classification specifications there may be multiple assignments. The descriptions will detail the unique duties and responsibilities of each assignment.

Position descriptions should be considered living documents and should be reviewed and evaluated for modification. This should occur at least annually and any time duties or expectations of a specific position substantially change.

Fire Officer Development

1004.1 PURPOSE AND SCOPE

The purpose of this policy is to define the required and recommended competencies in the Bear Valley - Indian Valley Fire Protection District Fire Officer Development program.

1004.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to utilize national, state and regionally recognized standards and certification programs to train and develop members' knowledge, skills and abilities for supervisory roles.

Tuition Reimbursement

1005.1 PURPOSE AND SCOPE

The Department appreciates and encourages members who are willing to devote their time to education and training. This tuition reimbursement policy is intended to encourage members to become better qualified for their present duties and to prepare for advancement within the Bear Valley - Indian Valley Fire Protection District by taking courses from an accredited institution.

1005.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to establish a tuition reimbursement policy and to review requests for tuition reimbursement to ensure the following criteria are met.

1005.2.1 ELIGIBILITY

Tuition reimbursement eligibility will be limited to members who have completed at least one probationary period. To be approved, a course must have as its purpose the objective of improving the capacity of the member to perform the duties to which he/she is assigned or to increase his/her readiness to assume broader responsibilities within the realm of public safety. Where practical, members will be encouraged to attend local, public education institutions.

1005.2.2 FUNDS AVAILABILITY

A portion of the member's costs may be reimbursed in the amount specified by the District. This includes tuition, registration fees, laboratory or similar materials fees, and fees for parking. Specifically excluded are student body fees and fees levied for student services or social activities.

1005.2.3 MAXIMUM CREDIT HOURS PER YEAR

The maximum amount of credit hours that may be claimed for the purpose of tuition reimbursement is determined by the District. Programs with an accelerated course of study leading to a bachelor's, master's or a doctorate degree may be eligible for reimbursement as determined by the Board of Directors but in no case should exceed the limits outlined elsewhere in this policy.

1005.2.4 OTHER CONSIDERATIONS

Correspondence courses are not included in the scope or intent of this policy unless the training is of exceptional value to the Department and is not available from any educational institution located within reasonable distance of the Bear Valley - Indian Valley Fire Protection District.

Bear Valley - Indian Valley Fire Protection District vehicles may not be used for transportation to and from a class and no allowance will be given for mileage or transportation costs.

Class attendance and assignments should be completed on the member's own time. No compensation in any form will be authorized for class attendance or the completion of class assignments.

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Tuition Reimbursement

In order to request a tuition reimbursement, a grade of satisfactory (e.g., C or better) must be achieved for undergraduate courses and a grade of above average (e.g., B or better) must be achieved for graduate courses.

1005.3 PROCEDURE

Approval of the Board of Directors or the authorized designee should be obtained in advance of enrollment. To request reimbursement, satisfactory evidence of fees paid, other allowable expenses and proof of satisfactory completion of the course must be submitted to the Board of Directors for approval and then forwarded for processing of the payment. Copies of diplomas, certificates or grade notices shall be retained in the member's file.

1005.4 RESPONSIBILITY

The Board of Directors is responsible for District-wide administration and coordination of this policy. The Department should use this policy for employee development in keeping with city goals and with the current and anticipated department needs. The Board of Directors should administer this policy for the members within the limits of the funds that have been allocated for this purpose.

1005.5 RECORDS

The Training/Safety Division should retain all records of training completed by members in accordance with established records retention schedules.

1005.6 TAX CONSIDERATIONS

It is highly recommended that members receiving a reimbursement consult with their tax adviser. Tuition reimbursement may be considered taxable income in some instances. The Department will report tuition reimbursement payments to the Internal Revenue Service (IRS) in accordance with state and federal tax codes.

Reporting for Duty

1006.1 PURPOSE AND SCOPE

This policy describes the department's expectations of its employees when reporting for duty, to ensure that all members are fully capable of functioning in their capacity.

1006.2 POLICY

It is the policy of this department to maintain sufficient staffing levels to provide efficient and quality services to the community and to provide for the safety its members.

1006.3 PUNCTUALITY

All members should be punctual and be ready to immediately perform their duties at the assigned time.

1006.4 READINESS FOR DUTY

Upon reporting for duty, all members should prepare themselves and their gear to be immediately available to respond to calls for service. This should include, but not be limited to, placing personal protective equipment on the member's assigned apparatus and donning the appropriate uniform.

1006.5 PERSONAL APPEARANCE

All members should be properly attired at all times when representing the Department. Each member should wear the appropriate uniform or protective equipment that has been approved for the activity being performed.

1006.6 CLEANLINESS

All members should keep their department property in service and in clean condition. If a persistent problem is noticed, the member should be notified immediately.

1006.8 INABILITY TO REPORT FOR DUTY

Members should notify a supervisor of any inability to report for calls or training if it will be an extended period of time.

1006.8 EMERGENCY DISPATCH

Upon receipt of an emergency call, without delay, members should secure and/or stabilize their home and family, and report for duty at the appropriate work location. Members shall recognize the potential for emergency call and take measures in advance to properly prepare their families. Except when otherwise instructed, members should travel as safely as possible to their normal work assignment once they have received the notice of call. Members shall follow the procedures detailed in the Emergency Dispatch Policy.

1006.9 RELIEVED FROM DUTY FOR VIOLATIONS

Any supervisor may relieve a member under his/her command from duty, when in the supervisor's judgment an alleged offense committed is sufficiently serious to warrant immediate action. A report

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Reporting for Duty

of such action shall be immediately made to the appropriate Captain, followed by written charges and documentation in accordance with department procedures.

Discriminatory Harassment

1007.1 PURPOSE AND SCOPE

The purpose of this policy is to prevent department members from being subjected to discriminatory harassment, including sexual harassment and retaliation (Government Code § 12940(k); 2 CCR 11023). Nothing in this policy is intended to create a legal or employment right or duty that is not created by law.

1007.2 POLICY

The Bear Valley - Indian Valley Fire Protection District is an equal opportunity employer and is committed to creating and maintaining a work environment that is free of all forms of discriminatory harassment, including sexual harassment and retaliation. The Department will not tolerate discrimination against a member in hiring, promotion, discharge, compensation, fringe benefits, and other privileges of employment. The Department will take preventive and corrective action to address any behavior that violates this policy or the rights and privileges it is designed to protect.

The nondiscrimination policies of the Department may be more comprehensive than state or federal law. Conduct that violates this policy may not violate state or federal law but still could subject a member to discipline.

1007.3 DEFINITIONS

Definitions related to this policy include:

1007.3.1 DISCRIMINATION

The Department prohibits all forms of discrimination, including any employment-related action by a member that adversely affects an applicant or member and is based on actual or perceived race, ethnicity, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, pregnancy, genetic information, veteran status, marital status, and any other classification or status protected by law.

Discriminatory harassment, including sexual harassment, is verbal or physical conduct that demeans or shows hostility or aversion toward an individual based upon that individual's protected class. It has the effect of interfering with an individual's work performance or creating a hostile or abusive work environment.

Conduct that may, under certain circumstances, constitute discriminatory harassment can include making derogatory comments; making crude and offensive statements or remarks; making slurs or off-color jokes; stereotyping; engaging in threatening acts; making indecent gestures, pictures, cartoons, posters, or material; making inappropriate physical contact; or using written material or department equipment and/or systems to transmit or receive offensive material, statements, or pictures. Such conduct is contrary to department policy and to a work environment that is free of discrimination.

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1007.3.2 RETALIATION

Retaliation is treating a person differently or engaging in acts of reprisal or intimidation against the person because the person has engaged in protected activity, filed a charge of discrimination, participated in an investigation, or opposed a discriminatory practice. Retaliation will not be tolerated.

1007.3.3 SEXUAL HARASSMENT

The Department prohibits all forms of discrimination and discriminatory harassment, including sexual harassment. It is unlawful to harass an applicant or a member because of that person's sex.

Sexual harassment includes but is not limited to unwelcome sexual advances, requests for sexual favors, or other verbal, visual, or physical conduct of a sexual nature when:

- (a) Submission to such conduct is made either explicitly or implicitly as a term or condition of employment, position, or compensation.
- (b) Submission to, or rejection of, such conduct is used as the basis for any employment decisions affecting the member.
- (c) Such conduct has the purpose or effect of substantially interfering with a member's work performance or creating an intimidating, hostile, or offensive work environment.

1007.3.4 ADDITIONAL CONSIDERATIONS

Discrimination and discriminatory harassment do not include actions that are in accordance with established rules, principles, or standards, including:

- (a) Acts or omission of acts based solely upon bona fide occupational qualifications under the Equal Employment Opportunity Commission and the California Civil Rights Department guidelines.
- (b) Bona fide requests or demands by a supervisor that the member improve the member's work quality or output, that the member report to the job site on time, that the member comply with District or department rules or regulations, or any other appropriate work-related communication between supervisor and member.

1007.4 RESPONSIBILITIES

This policy applies to all department members who shall follow the intent of these guidelines in a manner that reflects department policy, professional standards, and the best interest of the Bear Valley - Indian Valley Fire Protection District and its mission.

Members are encouraged to promptly report any discriminatory, retaliatory, or harassing conduct or known violations of this policy to a supervisor. Any member who is not comfortable with reporting violations of this policy to the member's immediate supervisor may bypass the chain of command and make the report to a higher-ranking supervisor or manager. Complaints may also be filed with the Board of Directors, the Board of Directors, or the Board of Directors.

Any member who believes, in good faith, that the member has been discriminated against, harassed, or subjected to retaliation, or who has observed harassment, discrimination, or

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retaliation, is encouraged to promptly report such conduct in accordance with the procedures set forth in this policy.

Supervisors and managers receiving information regarding alleged violations of this policy shall determine if there is any basis for the allegation and shall proceed with a resolution as stated below.

1007.4.1 QUESTIONS OR CLARIFICATION

Members with questions regarding what constitutes discrimination, sexual harassment, or retaliation are encouraged to contact a supervisor, a manager, the Board of Directors, the Board of Directors, the Board of Directors, or the California Civil Rights Department for further information, direction, or clarification (Government Code § 12950).

1007.4.2 SUPERVISOR RESPONSIBILITIES

The responsibilities of supervisors and managers shall include but are not limited to:

- (a) Continually monitoring the work environment and striving to ensure that it is free from all types of unlawful discrimination, including harassment or retaliation.
- (b) Taking prompt, appropriate action within their work units to avoid and minimize the incidence of any form of discrimination, harassment, or retaliation.
- (c) Ensuring that their subordinates understand their responsibilities under this policy.
- (d) Ensuring that members who make complaints or who oppose any unlawful employment practices are protected from retaliation and that such matters are kept confidential to the extent possible.
- (e) Making a timely determination regarding the substance of any allegation based upon all available facts.
- (f) Notifying the Fire Chief or the Board of Directors in writing of the circumstances surrounding any reported allegations or observed acts of discrimination, harassment, or retaliation no later than 3 business days.

1007.4.3 SUPERVISOR'S ROLE

Supervisors and managers shall be aware of the following:

- (a) Behavior of supervisors and managers should represent the values of the Department and professional standards.
- (b) False or mistaken accusations of discrimination, harassment, or retaliation can have negative effects on the careers of innocent members.

Nothing in this section shall be construed to prevent supervisors or managers from discharging supervisory or management responsibilities, such as determining duty assignments, evaluating or counseling members, or issuing discipline, in a manner that is consistent with established procedures.

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1007.5 INVESTIGATION OF COMPLAINTS

Various methods of resolution exist. During the pendency of any such investigation, the supervisor of the involved member should take prompt and reasonable steps to mitigate or eliminate any continuing abusive or hostile work environment. It is the policy of the Bear Valley - Indian Valley Fire Protection District that all complaints of discrimination, retaliation, or harassment shall be fully documented, and promptly and thoroughly investigated.

1007.5.1 SUPERVISOR RESOLUTION

Members who believe they are experiencing discrimination, harassment, or retaliation should be encouraged to inform the individual that the behavior is unwelcome, offensive, unprofessional, or inappropriate. However, if the member feels uncomfortable or threatened or has difficulty expressing the member's concern, or if this does not resolve the concern, assistance should be sought from a supervisor or manager who is a rank higher than the alleged transgressor.

1007.5.2 FORMAL INVESTIGATION

If the complaint cannot be satisfactorily resolved through the supervisory resolution process, a formal investigation will be conducted.

The Board of Directors shall investigate the complaint will have full authority to investigate all aspects of the complaint. Investigative authority includes access to records and the cooperation of any members involved. No influence will be used to suppress any complaint and no member will be subject to retaliation or reprisal for filing a complaint, encouraging others to file a complaint, or for offering testimony or evidence in an investigation.

Formal investigation of the complaint will be confidential to the extent possible and will include but is not limited to details of the specific incident, frequency and dates of occurrences, and names of any witnesses. Witnesses will be advised regarding the prohibition against retaliation, and that a disciplinary process, up to and including termination, may result if retaliation occurs.

Members who believe they have been discriminated against, harassed, or retaliated against because of their protected status are encouraged to follow the chain of command but may also file a complaint directly with the Fire Chief, the Board of Directors..

1007.5.3 ALTERNATIVE COMPLAINT PROCESS

No provision of this policy shall be construed to prevent any member from seeking legal redress outside the Department. Members who believe that they have been harassed, discriminated against, or retaliated against are entitled to bring complaints of employment discrimination to federal, state, and/or local agencies responsible for investigating such allegations. Specific time limitations apply to the filing of such charges. Members are advised that proceeding with complaints under the provisions of this policy does not in any way affect those filing requirements.

1007.6 DOCUMENTATION OF COMPLAINTS

All complaints or allegations shall be thoroughly documented on the appropriate forms and in a manner designated by the Board of Directors. The outcome of all reports shall be:

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- (a) Approved by the Fire Chief,, or the Board of Directors, depending on the ranks of the involved parties.
- (b) Maintained in accordance with the established records retention schedule.

1007.6.1 NOTIFICATION OF DISPOSITION

The complainant and/or victim will be notified in writing of the disposition of the investigation and the actions taken to remedy or address the circumstances giving rise to the complaint.

1007.7 TRAINING

All new members shall be provided with a copy of this policy as part of their orientation. The policy shall be reviewed with each new member. The member shall certify by signing the prescribed form that the member has been advised of this policy, is aware of and understands its contents, and agrees to abide by its provisions during the member's term with the Department.

All members shall receive annual training on the requirements of this policy and shall certify by signing the prescribed form that they have reviewed the policy, understand its contents, and agree that they will continue to abide by its provisions.

1007.7.1 STATE-REQUIRED TRAINING

The TSO should ensure that employees receive the required state training and education regarding sexual harassment, prevention of abusive conduct, and harassment based on gender identity, gender expression, and sexual orientation as follows (Government Code § 12950.1; 2 CCR 11024):

- (a) Supervisory employees shall receive two hours of classroom or other effective interactive training and education within six months of assuming a supervisory position.
- (b) All other employees shall receive one hour of classroom or other effective interactive training and education within six months of their employment or sooner for seasonal or temporary employees as described in Government Code § 12950.1.
- (c) All employees shall receive refresher training every two years thereafter.

If the required training is to be provided by the Civil Rights Department online training courses, the Training Safety Officer should ensure that employees are provided the website address for the training course: <https://calcivilrights.ca.gov> (Government Code § 12950; 2 CCR 11023).

1007.7.2 TRAINING RECORDS

The Training Safety Officer shall be responsible for maintaining records of all discriminatory harassment training provided to members. Records shall be retained in accordance with established records retention schedules and for a minimum of two years (2 CCR 11024).

1007.8 REQUIRED POSTERS

The Department shall display the required poster regarding discrimination, harassment, and transgender rights in a prominent and accessible location for members (Government Code § 12950).

Conduct and Behavior

1008.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines to prevent activities or behaviors that may lead to disciplinary actions or dismissal.

1008.2 POLICY

It is the policy of this department that its members strive to attain the highest professional standard of conduct and discharge their duties in a courteous and professional manner.

1008.3 PROFESSIONAL CONDUCT

All members should be governed by the ordinary and reasonable rules of behavior observed by law-abiding and self-respecting citizens, and should conduct themselves at all times in such manner as to reflect favorably on the Department. Conduct unbecoming a member shall include that which discredits the Department or the person as a member of the Department or which impairs the operation or efficiency of the Department or its members.

All members should conduct themselves in a manner that will not impair the good order and discipline of the Department. Members should not, while on-duty or representing the department, indulge in offensive, obscene or uncivil language, verbal or physical altercations or threats thereof or conduct which might cause injury to another person.

All members of the Department should be familiar with the expected standard of behavior, both on- and off-duty.

1008.4 INTERACTION WITH THE PUBLIC

In the performance of their duties, members should be courteous to the public and tactful. They should control their tempers, exercise reasonable patience and discretion, and should not engage in any argumentative discussions even when provoked.

In the performance of their duties, members should not use coarse, violent, profane, or insolent language or gestures, and should not express prejudice or discrimination (Government Code § 12940 et seq.).

1008.5 COURTESY TO MEMBERS

Members should be courteous and respectful in their relations with all members of the Department. Members shall not use coarse, violent, profane, or insolent language or gestures, and shall not express prejudice or discrimination (Government Code § 12940 et seq.).

1008.6 DISCRIMINATION, OPPRESSION, OR FAVORITISM

Unless required by law or policy, discriminating against, oppressing, or providing favoritism to any person because of actual or perceived characteristics such as race, ethnicity, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, economic status, cultural group, veteran status, marital status, and any other classification or status protected

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by law, or intentionally denying or impeding another in the exercise or enjoyment of any right, privilege, power, or immunity, knowing the conduct is unlawful, is prohibited.

1008.7 CONFORMANCE TO LAWS

Members shall obey all laws of the United States and of any state and local jurisdiction in which the member is present.

1008.8 DEROGATORY OR MALICIOUS STATEMENTS

Members should not be a party to any malicious gossip, report or activity which would tend to disrupt department morale or bring discredit to the Department or any member thereof. Member questions concerning department policy, activities, officers and/or safety issues shall be submitted by official written communication to the member's immediate supervisor.

1008.9 POLITICAL ACTIVITY

Members should not engage in political activities of any kind while on-duty. Members are also prohibited from engaging in any political activity off-duty while wearing any uniform items or equipment that could identify them as members of the Department.

1008.10 SEXUAL ACTIVITY

Members should not engage in any sexual activity while on-duty. This includes use of any electronic device to communicate or receive messages, photos or any other content of a sexual or provocative nature.

1008.11 ILLEGAL GAMBLING

Members should not engage or participate in any form of illegal gambling at any time while on-duty. This includes accessing gaming websites from computers or any electronic device, whether department-issued or owned by the member.

1008.12 GIFTS AND GRATUITIES

Members should not solicit or accept any gift, including money, tangible or intangible personal property, or any service, gratuity, favor, entertainment, hospitality, loan, promise, or any other thing of value from any person, business, or organization that is doing business with, or seeking to do business with, the Department or the District.

If it may reasonably be inferred that the person, business, or organization seeks to influence the actions of an official or seeks to affect the performance of an official while on-duty, the incident should be immediately reported to the next level supervisor. This rule does not take the place of any relevant requirements applicable to individuals under Government Code § 1090 et seq. or the State Political Reform Act, Government Code § 87100 et seq.

1008.13 OFFERS OF DONATIONS AND GIFTS OF THE HEART

Members who are approached with monetary donations following major disasters shall direct the person or entity to the Board of Directors for instruction on proper ways to donate.

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At no time should a member accept any monetary donation from the public. If a citizen offers a gift of a non-monetary nature, such as food or product, the gift shall be placed in an area of the station or office to be shared by all members.

At no time shall a member consider a gift of the heart as a personal present.

1008.14 ABUSE OF POSITION

Members should not use their official positions, official identification cards, or badges to avoid the consequences of illegal acts or for other non-work related personal gain. Members shall not lend to another person their identification cards or badges or permit their identification cards or badges to be photographed or reproduced without the approval of the Board of Directors.

Members should not authorize the use of their name, photograph, or official title that identifies them as department members (e.g., in connection with testimonials or advertisements of any commodity or commercial enterprise) without the approval of the Board of Directors.

1008.15 PUBLIC STATEMENTS AND APPEARANCES

Members should not address public gatherings, appear on radio or television, prepare any articles for publication, act as correspondents to a newspaper or periodical, or release or divulge investigative information or information on any other matter of the Department while presenting themselves or in any way identifying themselves as representing the Department, without the approval of the Board of Directors.

Personnel Complaints

1009.1 PURPOSE AND SCOPE

This policy provides guidelines for reporting, investigation and disposition of complaints regarding the conduct of members of this department and the service provided by this department. This policy shall not apply to any questioning, counseling, instruction, informal verbal admonishment or other routine or unplanned contact of a member in the normal course of duty, by a supervisor or any other member, nor shall this policy apply to a criminal investigation.

This policy is intended to be applied in accordance with the procedures, rights or status that may be contained in any policy established by the District's Board of Directors.

The pre- and post-disciplinary procedures set forth in this policy do not apply to complaints against at-will members who are not covered by the Firefighters Procedural Bill of Rights Act (FBOR).

1009.2 POLICY

This department takes seriously all complaints regarding service provided by the Department and the conduct of its members. The Department will accept and address all complaints of member misconduct in accordance with this policy and applicable federal, state, and local law, municipal and county rules.

It is also the policy of this department to ensure that the community can report misconduct without concern for reprisal or retaliation.

1009.3 PERSONNEL COMPLAINTS

Personnel complaints consist of any allegation of misconduct or improper job performance by any employee that, if true, would constitute a violation of department policy or rule or federal, state or local law. Allegations or complaints may be generated internally or by the public.

Inquiries about employee conduct or performance that, if true, would not violate department policy or rule or federal, state or local law may be handled informally by a supervisor and shall not be considered a personnel complaint. Such inquiries generally include clarification regarding policy, procedures or the department's response to specific incidents.

1009.3.1 CLASSIFYING COMPLAINTS

Personnel complaints shall be classified in one of the following categories:

Informal - A matter in which the fire chief or designee has taken appropriate action with the accused member. The fire chief or designee shall have the discretion to determine the appropriate manner for resolving the complaint.

Formal - A matter in which fire chief or designee determines that further action is warranted. Such complaints may be investigated by the Board of Directors, depending on the seriousness and complexity of the investigation.

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Incomplete - A matter in which the complaining party either refuses to cooperate or becomes unavailable after diligent follow-up investigation. At the discretion of the Board of Directors, such matters need not be documented as personnel complaints but may be further investigated or resolved as a complaint, depending on the seriousness of the complaint and the availability of sufficient information.

1009.4 AVAILABILITY AND ACCEPTANCE OF COMPLAINTS

1009.4.1 AVAILABILITY OF COMPLAINT FORMS

Personnel complaint forms will be available and clearly visible in public access locations within department facilities. Forms will also be available on the department website.

Every supervisor is responsible for monitoring public satisfaction or inquiries regarding the personnel complaint process and forwarding to the Captain any suggestions for improvement or changes.

1009.4.2 SOURCES OF COMPLAINTS

- (a) Members of the public may make complaints on the department complaint form.
- (b) Any department member becoming aware of alleged misconduct shall immediately notify the fire chief or designee.
- (c) Any member shall initiate a complaint based upon observed misconduct or receipt from any source alleging the misconduct of a member that, if true, could result in disciplinary action.
- (d) Anonymous complaints and third-party citizen complaints should be accepted and investigated to the extent that sufficient information is provided.

1009.4.3 ACCEPTANCE OF COMPLAINTS

All complaints will be courteously accepted by any member and promptly given to the fire chief. Although written complaints are preferred, a complaint may also be filed verbally, either in person or by telephoning the Department, and will be accepted by any member. If the fire chief is not immediately available to take a verbal complaint, the receiving member shall obtain contact information sufficient for the fire chief to contact the complainant. The fire chief, upon contact of the complainant, shall complete and submit a complaint form as appropriate.

Although not required, complainants should be encouraged to file complaints in person so that proper identification, signatures, photographs, or physical evidence may be obtained as necessary.

1009.5 COMPLAINT DOCUMENTATION AND TRACKING

The Fire Chief shall ensure that all formal and informal complaints are documented on a complaint form. The Fire Chief shall ensure that the nature of the complaint is defined as clearly as possible.

All complaints and inquiries should be documented in a log that records and tracks complaints. The log shall include the nature of the complaint and the actions taken to address the complaint.

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On an annual basis, the Department should audit the log and send an audit report to the Board of Directors.

1009.6 DISCIPLINARY INVESTIGATIONS

All allegations of misconduct will be investigated as follows:

1009.6.1 SUPERVISOR RESPONSIBILITIES

In general, the primary responsibility for the investigation of a complaint rests with the fire chief, unless the fire chief is the complainant, is the ultimate decision-maker regarding disciplinary action or has any personal involvement regarding the alleged misconduct. The Board of Directors or the authorized designee may direct that the Board of Directors investigate any complaint.

A supervisor who becomes aware of alleged misconduct shall take reasonable steps to prevent aggravation of the situation.

Supervisors shall be responsible for the following:

- (a) Department supervisors should respond to all complaints in a courteous and professional manner.
- (b) Upon receipt of a complaint involving allegations of a potentially serious nature shall ensure that the Fire Chief and Board of Directors are notified as soon as practicable.
- (c) Any member receiving or initiating any formal complaint shall ensure that a personnel complaint form has been completed as fully as possible. The original complaint form will then be directed to the fire chief, to take any appropriate action and/or assign the complaint for investigation. In circumstances where the integrity of the investigation could be jeopardized by reducing the complaint to writing or where the confidentiality of a complainant is at issue, a member may orally report the matter to the Fire Chief or Board of Directors.
- (d) When investigating any complaint the investigator should:
 - 1. Make reasonable efforts to obtain names, addresses and telephone numbers of additional witnesses.
 - 2. When appropriate, provide immediate medical attention and take photographs of alleged injuries as well as accessible areas of non-injury.
- (e) When the nature of a personnel complaint relates to sexual, racial, ethnic or other forms of prohibited harassment or discrimination, the member receiving the complaint shall promptly contact the Board of Directors and/or the fire chief for direction regarding his/her role in addressing the complaint.
- (f) Members who receive a citizen complaint that can be resolved immediately should do so. Follow-up contact with the person who made the complaint should be made within 24 hours of the Department receiving the complaint. If the matter is resolved and no further action is required, the member will note the resolution on a complaint form and forward the form to the fire chief.

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- (g) Unresolved citizen complaints shall be forwarded to the the fire chief to determine whether to contact the person who made the complaint or assign the complaint for investigation.
- (h) The fire chief shall ensure that the procedural rights of the accused member are followed.
- (i) Within five days after assignment, the complainant should be informed of the investigator's name..
- (j) Interviews of the complainant should be conducted during reasonable hours.

1009.6.2 INVESTIGATION PROCEDURES

The following procedures shall also be followed with regard to any accused member covered by FBOR (Government Code § 3253):

- (a) Not less than 48 hours before an investigator begins an interview to obtain facts and statements, the Department should:
 - 1. Provide the name and rank of the person in charge of the investigation and of those who will conduct any interviews.
 - 2. Provide the date, time and place of the interview and the names of all who will be present.
 - 3. Provide the member a written summary of the alleged misconduct and a description of the nature of the investigation.
- (b) Interviews of accused members should be conducted during reasonable work hours of the member and, if the member is off-duty, the member shall be compensated.
- (c) Off-duty interviews should only be conducted based on the seriousness of the investigation and other factors when time is of the essence.
- (d) An investigator should not interview a member at that person's home without the member's prior permission.
- (e) No more than two interviewers should ask questions of an accused member to prevent confusion or misunderstandings.
- (f) All interviews shall be for a reasonable period or duration and the member's personal needs shall be accommodated.
- (g) No member shall be subjected to offensive or threatening language nor shall any promises, rewards or other inducements be used to obtain answers. Any member refusing to answer questions directly related to the investigation may be ordered to answer questions or be subject to discipline for insubordination. Nothing administratively ordered may be provided to a criminal investigator.
- (h) Absent circumstances preventing it, the interviewer should record all interviews of members and witnesses. The member may also record interviews. If the member has

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been previously interviewed, a copy of that recorded interview should be provided to the member prior to any subsequent interview. The member shall also be entitled to a transcribed copy of any notes made by a stenographer or to any reports or complaints made by investigators or other persons, except those portions that are otherwise required by law to be kept confidential.

- (i) If the allegations involve potential criminal conduct, the member shall be advised of his/her constitutional rights. This admonishment shall be given regardless of whether the member was advised of these rights during any separate criminal investigation.
- (j) A member subjected to interviews that could result in punitive action shall have the right to have a representative of his/her choosing during any interrogation. However, in order to maintain the integrity of each individual member's statement, involved members shall not consult or meet with representatives or attorneys collectively or in groups prior to being interviewed.
- (k) All members shall provide complete and truthful responses to questions posed during interviews.
- (l) No member may be compelled to submit to a deception detection device/polygraph examination, nor shall any refusal to submit to such examination be mentioned in any investigation.

1009.6.3 INVESTIGATION FORMAT

Investigations of complaints should be timely, detailed, complete and essentially follow this format:

Introduction - Include the identity of the member, the identity of the assigned investigators, the initial date and source of the complaint.

Synopsis - Provide a very brief summary of the facts giving rise to the investigation.

Summary of allegations - List the allegations separately, including applicable policy sections, with a very brief summary of the evidence relevant to each allegation.

Evidence as to each allegation - Each allegation should be set forth with the details of the evidence applicable to each allegation and include comprehensive summaries of member and witness statements. Other evidence related to each allegation should also be detailed in this section.

Conclusion - A recommendation regarding further action or disposition should be provided.

Exhibits - A separate list of exhibits (e.g., recordings, photos and documents) should be attached to the report.

1009.6.4 ADMINISTRATIVE LEAVE

When a complaint of misconduct is of a serious nature, or when circumstances dictate that allowing the accused to continue to work would adversely affect the mission of the Department, the Fire Chief or the authorized designee may temporarily assign an accused employee to administrative

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leave. The Fire Chief or authorized designee shall notify the Board of Directors in writing of the employee's administrative leave and the cause for the leave.

1009.7 POST-INVESTIGATION PROCEDURES

Upon completion, the report should be forwarded to the Board of Directors through the chain of command of the involved member. Each level of command should review and include their comments in writing before forwarding the report. The Board of Directors may accept or modify the classification and recommendation for disciplinary action contained in the report.

1009.7.1 FIRE CHIEF RESPONSIBILITIES

Upon receipt of any completed personnel investigation, the Fire Chief of the involved member shall review the entire investigative file, the member's personnel file and any other relevant materials.

The Fire Chief may make recommendations regarding the disposition of any allegations and the amount of discipline, if any, to be imposed.

Prior to forwarding recommendations to the Board of Directors, the Fire Chief may return the entire investigation to the assigned investigator or supervisor for further investigation or action.

When forwarding any written recommendation to the Board of Directors, the Fire Chief shall include all relevant materials supporting the recommendation. Actual copies of a member's existing personnel file need not be provided and may be incorporated by reference.

1009.7.2 RESPONSIBILITIES OF THE BOARD OF DIRECTORS

Upon receipt of any written recommendation for disciplinary action, the Board of Directors shall review the recommendation and all accompanying materials. The Board of Directors may modify any recommendation and/or may return the file to the Fire Chief for further investigation or action.

Once the Board of Directors is satisfied that no further investigation or action is required by staff, the Board of Directors shall determine the amount of discipline, if any, to be imposed. In the event that disciplinary action is proposed, the Board of Directors shall provide the member with written notice of the following information:

- (a) Access to all of the materials considered by the Board of Directors in recommending the proposed discipline
- (b) An opportunity to respond orally or in writing to the Board of Directors within five days of receiving the notice
 1. Upon a showing of good cause by the member, the Board of Directors may grant a reasonable extension of time for the member to respond.
 2. If the member elects to respond orally, the presentation shall be recorded by the Department. Upon request, the member shall be provided with a copy of the recording.
- (c) Once the member has completed his/her response or, if the member has elected to waive any such response, the Board of Directors shall consider all information received

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in regard to the recommended discipline. The Board of Directors shall thereafter render a timely written decision to the member and specify the grounds and reasons for discipline and the effective date of the discipline.

- (d) Once the Board of Directors has issued a written decision, the discipline shall become effective.

1009.8 PRE-DISCIPLINE MEMBER RESPONSE

The pre-discipline process is intended to provide the accused member with an opportunity to present a written or oral response to the Board of Directors after having had an opportunity to review the supporting materials and prior to imposition of any recommended discipline. The member shall consider the following:

- (a) This response is not intended to be an adversarial or formal hearing.
- (b) Although the member may be represented by an uninvolved representative or legal counsel, the response is not designed to accommodate the presentation of testimony or witnesses.
- (c) The member may suggest that further investigation could be conducted or the member may offer any additional information or mitigating factors for the Board of Directors to consider.
- (d) In the event that the Board of Directors elects to cause further investigation to be conducted, the member shall be provided with the results of such subsequent investigation prior to the imposition of any discipline.
- (e) The member may thereafter have the opportunity to further respond orally or in writing to the Board of Directors on the limited issues of information raised in any subsequent materials.

1009.9 RESIGNATIONS/RETIREMENTS PRIOR TO DISCIPLINE

In the event that a member tenders a written retirement or resignation prior to the imposition of discipline, it shall be noted in the file. The tender of a retirement or resignation by itself shall not serve as grounds for the termination of any pending investigation or discipline.

1009.10 POST-DISCIPLINE APPEAL RIGHTS

Non-probationary members have the right to appeal a suspension without pay, punitive transfer, demotion, reduction in pay or step and termination from employment. The member has the right to appeal using to the procedures established in any operative collective bargaining agreement and/or personnel rules.

In the event of punitive action against a member covered by FBOR, the appeal process shall be in compliance with Government Code § 3254.5.

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1009.11 AT-WILL AND PROBATIONARY MEMBERS

At-will and probationary members not subject to FBOR may be disciplined and/or released from employment without adherence to any of the procedures set out in this policy and without notice or any cause at any time during the probationary period. These members are not entitled to any rights under this policy.

Any probationary period may be extended at the discretion of the Board of Directors in cases where the member has been absent for more than a week or when additional time to review the member is considered by the Board of Directors to be appropriate.

Personnel Records

1011.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the maintenance of, retention of and access to personnel files in accordance with established law.

1011.1.1 PERSONNEL RECORDS DEFINED

Personnel records shall include any record maintained under an individual member's name relating to:

- (a) Personal data, including marital status, family members, educational and employment history or similar information.
- (b) Medical history, including medical leave-of-absence forms, fitness-for-duty examinations, workers' compensation records, medical releases and all other records that reveal a member's past, current or future medical conditions.
- (c) Election of employee benefits.
- (d) Member advancement, appraisal or discipline.
- (e) Complaints or investigations of complaints concerning an event or transaction in which the member participated that pertain to the manner in which the member performed official duties.
- (f) Any information that if disclosed would constitute an unwarranted invasion of personal privacy.

1011.1.2 EMPLOYEE RECORD LOCATIONS

Personnel records will generally be maintained in one of the following files:

Department file - Any file maintained in the office of the Department or the as a permanent record of a member's employment with the Department. Any file maintained internally by a member's supervisor in an assigned division for the purpose of collecting information to prepare performance evaluations.

Supervisor log entries - Any written comment, excluding actual performance evaluations, made by a supervisor, concerning the performance or conduct of a member of the Department.

Training file - Any file containing the training records of a member.

Personnel records - Any file containing written comments regarding harassment or discrimination claims, misconduct claims, background investigations or reference check responses.

1011.2 POLICY

It is the policy of the Department to maintain the confidentiality of its members' personnel records.

1011.3 REQUESTS FOR DISCLOSURE

All records kept by California public agencies are considered public unless they are covered by specific disclosure statutes (Government Code § 7920.000 et seq.).

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Only written requests for the disclosure of any information contained in a member's personnel record will be considered. Since the format of such requests may be strictly governed by law, with specific responses required, all such requests shall be promptly brought to the attention of the Custodian of Records.

Upon receipt of a request for disclosure of personnel records, the member's supervisor shall be notified and shall be responsible for notifying the affected member as soon as practicable that such a request has been made.

The Custodian of Records shall ensure that an appropriate response to the request is made in a timely manner, in accordance with applicable law. In many cases, this will require assistance of the department's legal counsel.

All requests for the disclosure of personnel records that result in access to a member's file shall be logged in the corresponding file.

Nothing in this section is intended to preclude review of personnel files by the Board of Directors, County Counsel, or attorneys or representatives of the District in connection with official business.

1011.4 RELEASE OF CONFIDENTIAL INFORMATION

Except as provided by this policy or pursuant to lawful process, no information contained in any confidential personnel file shall be disclosed to any unauthorized person without the express prior consent of the involved member or the written authorization of the Board of Directors or the authorized designee.

Any person who maliciously and with the intent to obstruct justice or the due administration of the law, publishes, disseminates or otherwise discloses the residence address or telephone number of any member of this department will be subject to discipline and/or termination and the penalties of all applicable laws.

1011.5 MEMBER ACCESS TO OWN FILE

Any member may request access to his/her own personnel file during the normal business hours of the individual responsible for maintaining such files (Government Code § 3256.5; Labor Code § 1198.5).

Any adverse written comments, including those from supervisor log entries, shall be reviewed by the firefighter and signed before they are placed in the personnel file or any other file used for personnel purposes. If the member refuses to sign the document, it may be placed into the personnel record without signature if it contains a notation that the member refused to sign. If the member submits a response to the adverse comment within 30 days, the member's response must be attached to the adverse comment and included in the file (Government Code § 3255; Government Code § 3256).

Any member seeking the removal of any item from his/her personnel file shall submit a written request to the Board of Directors via the chain of command. The Department shall thereafter

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remove any such item, if appropriate, or within 30 days provide the member with a written explanation why the contested item will not be removed (Government Code § 3256.5).

The request and the department's written response shall be retained, with the contested item, in the personnel file. Nothing herein shall require the removal of any item from the file.

Members may be restricted from accessing files containing any of the following information:

- Ongoing investigations, to the extent the Department, in its sole discretion, determines that disclosure could jeopardize or compromise the investigation, pending final disposition or notice to the member of the intent to discipline.
- Confidential portions of an investigation which have not been sustained against the member.

Grievance Procedure

1013.1 PURPOSE AND SCOPE

This policy establishes processes for resolving disputes or concerns regarding conditions of employment, unethical, wasteful or other inappropriate conduct.

This policy does not apply to complaints related to alleged acts of discrimination or harassment or complaints of discrimination on the basis of other protected categories subject to the Discriminatory Harassment Policy. This policy also does not apply to complaints consisting of any alleged misconduct or improper job performance by any member that, if true, would constitute a violation of federal, state or local law, or a violation of department policy or the standards established in the Personnel Complaints Policy.

This policy does not prohibit adverse administrative action taken for legitimate non-discriminatory or non-retaliatory reasons, including for-cause discipline.

The procedures set forth herein are intended to supplement and not limit a member's access to other applicable remedies. Nothing in this policy shall diminish the rights or remedies of a member pursuant to any applicable federal law, provision of the U.S. Constitution, state law, local ordinance.

1013.1.1 GRIEVANCE DEFINED

A grievance is any difference of opinion concerning terms or conditions of employment or the dispute involving the interpretation or application of any of the following documents:

- This Policy Manual
- Rules and regulations covering personnel practices or working conditions of members

A grievance includes any claim of waste, abuse of authority, gross mismanagement and any practice within the Department which may pose a threat to health, safety or security.

Grievances may be brought by an individual member or by a group representative.

1013.2 POLICY

It is the policy of this department that all grievances be handled quickly and fairly without retaliation against a member who files a grievance, whether or not there is a basis for the grievance. It is the philosophy of this department is to promote free verbal communication between members and supervisors.

1013.3 RETALIATION PROHIBITED

No member may retaliate against any person for reporting or making a complaint under this policy or for opposing a practice believed to be improper, unethical, wasteful, retaliatory or participating in any investigation pursuant to this policy or any other policy in this policy manual.

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Employees found to be in violation of this policy are subject to discipline. Supervisors who condone or ignore violations of this policy or otherwise fail to take appropriate action to enforce this policy are also subject to discipline.

1013.4 PROCEDURE

Grievances as defined above, should be resolved using the following procedure.

1013.4.1 COMMUNICATING GRIEVANCES

Members are encouraged to communicate with command personnel regarding any workplace problem or issue they feel needs immediate attention. Generally, any concern about a workplace situation should be first raised with the member's immediate supervisor unless that supervisor is part of the member's concern. It is recognized, however, that there may be occasions where the use of the normal chain of command may not be appropriate.

Any member who feels threatened in any manner or is otherwise concerned about reporting to his/her immediate supervisor may report this information directly to the Board of Directors or without first reporting the information to their immediate supervisor or following the chain of command.

This alternate process shall not be used to circumvent or avoid addressing issues through the normal chain of command.

1013.4.2 GRIEVANCE RECEIPT

Upon receipt of an oral or written grievance, the receiving supervisor will promptly document the grievance, initiate the investigative process and ensure that the appropriate supervisor and the Board of Directors are notified.

Investigations are generally more effective when the identity of the grieving member is known, thereby allowing investigators to obtain additional information from the reporting member. However, a grievance may be made anonymously.

All reasonable efforts should be made to protect the reporting member's identity. However, confidential information may be disclosed to the extent required by law or to the degree necessary to conduct an adequate investigation and make a determination regarding a grievance. In some situations, the investigative process may not be complete unless the source of the information and a statement by the member is produced as part of the process.

The supervisor receiving the grievance should explain to the grieving member how the matter will be handled.

1013.4.3 RESOLVING GRIEVANCES

- (a) Supervisors receiving grievances should attempt to resolve the issue through informal discussion with member.
- (b) If after a reasonable amount of time, generally seven days, the grievance cannot be settled by the immediate supervisor, the member may request a meeting with the Fire Chief.

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- (c) If a successful resolution is not found with the Fire Chief, the member may request a meeting with the Board of Directors.
 - 1. Submit in writing a written statement of the grievance and deliver one copy to the Board of Directors and another copy to the Fire Chief and include the following information:
 - (a) The basis for the grievance
 - (b) What remedy or goal is being sought by this grievance
- (d) The Board of Directors will receive the grievance in writing. The Board of Directors and the executive will review and analyze the facts or allegations and respond to the member within 14 calendar days. The response shall identify any corrective measures or other remedies as appropriate. The decision of the Board of Directors executive is considered final.

1013.5 RESPONSIBILITIES

1013.5.1 MEMBER RESPONSIBILITIES

This policy is intended to support efforts to identify and remediate when appropriate, workplace issues. Members are encouraged to identify workplace issues to bring about positive change in the Department. Members shall act in good faith and not file trivial grievances or grievances intended to harass or deflect scrutiny or blame to another.

Members shall make reasonable efforts to verify facts before making a grievance. Members shall not report or threaten to report information or a grievance knowing it to be false, with willful or reckless regard for the truth or falsity of the information or otherwise made in bad faith.

When making a grievance, members should provide as much information as possible and should cooperate fully with all investigations. Members shall maintain the confidentiality of any statements made in conjunction with an active grievance pursuant to this policy. This provision is not intended to diminish a member's rights or remedies afforded by applicable federal law, constitutional provision or collective bargaining agreement.

Any employee who believes that he/she has been subjected to reprisal or retaliation should immediately report the matter to a supervisor in the member's chain of command or to the Board of Directors.

1013.5.2 SUPERVISORS

Supervisors should make reasonable efforts to identify and remediate workplace issues and bring about positive change in the Department before issues escalate to the grievance level. Once a member has made the decision to file a grievance, supervisors shall not attempt to discourage the member, shall accept grievances and shall ensure that reasonable efforts are made to reach a prompt and fair resolution.

Supervisory personnel will:

- (a) Document all grievances received and all steps taken to resolve the issue.

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- (b) Forward the documentation to the Board of Directors Fire Chief through the chain of command.
- (c) Monitor the work environment to ensure that any member making a grievance is treated with respect and no differently than non-complaining employees.
- (d) Communicate to all members the obligation not to engage in retaliation and follow-up periodically with the grieving member to ensure that retaliation is not occurring.

1013.5.3 COMMAND STAFF

Command staff should ensure prompt resolution of all grievances, including the following:

- (a) Timely grievance recognition and acceptance
- (b) Appropriate documentation of the process and investigation
- (c) Remediation of any inappropriate conduct or condition and the implementation of measures to minimize the likelihood of reoccurrence
- (d) Timely communication of the outcome to the grieving member

1013.6 MEMBER REPRESENTATION

Members are entitled to have representation during the grievance process and may seek advice, counsel or the assistance of other employees or representatives in their presentation of a grievance.

1013.7 GRIEVANCE RECORDS

At the conclusion of the grievance process, all documents pertaining to the process shall be forwarded to the Board of Directors or Fire Chief.

1013.8 GRIEVANCE AUDITS

The Board of Directors or Fire Chief or the authorized designee should perform an annual audit of all grievances filed the previous calendar year to evaluate whether any policy, procedure or training changes may be appropriate. The Fire Chief shall record these findings in a confidential memorandum to the Board of Directors without including any identifying information from any individual grievance.

Wellness Program

1014.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidance on establishing and maintaining a proactive wellness program for department members.

The wellness program is intended to be a holistic approach to a member's well-being and encompasses aspects such as mental health and overall wellness.

Additional information on member wellness is provided in the:

- Critical Incident Stress Debriefing Policy.
- Chaplains Policy
- Drug- and Alcohol-Free Workplace Policy.
- Physical Fitness Policy.

1014.1.1 DEFINITIONS

Peer support – Mental and emotional wellness support provided by peers trained to help members cope with critical incidents and certain personal or professional problems.

1014.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to prioritize member wellness to foster fitness for duty and support a healthy quality of life for [department_agency] members. The Department will maintain a wellness program that supports its members with proactive wellness resources, critical incident response, and follow-up support.

1014.3 WELLNESS COORDINATOR

The Health and Safety Officer (HSO) is the designated department wellness coordinator. The coordinator should report directly to the [agencyHead] or the authorized designee and should collaborate with advisers (e.g., Board of Directors, legal counsel, licensed psychotherapist, qualified health professionals) as appropriate to fulfill the responsibilities of the position, including but not limited to:

- (a) Identifying wellness support providers (e.g., licensed psychotherapists, external peer support providers, physical therapists, dietitians, physical fitness trainers holding accredited certifications).
 1. As appropriate, selected providers should be trained and experienced in providing mental wellness support and counseling to public safety personnel.
 2. When practicable, the Department should not use the same licensed psychotherapist for both member wellness support and fitness-for-duty evaluations.
- (b) Developing management and operational procedures for department peer support members, such as:

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1. Peer support member selection and retention.
 2. Training and applicable certification requirements.
 3. Deployment.
 4. Managing potential conflicts between peer support members and those seeking service.
 5. Monitoring and mitigating peer support member emotional fatigue (i.e., compassion fatigue) associated with providing peer support.
 6. Using qualified peer support personnel from other public safety agencies or outside organizations for department peer support as appropriate.
- (c) Verifying members have reasonable access to peer support or licensed psychotherapist support.
- (d) Facilitating the delivery of wellness information, training, and support through various methods appropriate for the situation (e.g., phone hotlines, electronic applications).
- (e) Verifying a confidential, appropriate, and timely Employee Assistance Program (EAP) is available for members. This also includes:
1. Obtaining a written description of the program services.
 2. Providing for the methods to obtain program services.
 3. Providing referrals to the EAP for appropriate diagnosis, treatment, and follow-up resources.
 4. Obtaining written procedures and guidelines for referrals to, or mandatory participation in, the program.
 5. Obtaining training for supervisors in their role and responsibilities, and identification of member behaviors that would indicate the existence of member concerns, problems, or issues that could impact member job performance.
- (f) Making annual medical examinations available to members. Medical examination specifics should be established by a qualified health professional.
- (g) Coordinating with qualified health care professionals to develop a fitness assessment questionnaire to be administered to members annually. The questionnaire should evaluate both immunization and disease screening as well as physical fitness and conditioning.
- (h) Establishing an annual immunization and disease screening schedule for members. Specific vaccinations and diseases should be identified by a qualified healthcare professional.
- (i) Maintaining familiarity with the guidelines published by the following and incorporating procedures and practices, as appropriate, into the department wellness program:
1. International Association of Fire Fighters
 2. International Association of Fire Chiefs
 3. Fire Service Joint Labor Management Wellness-Fitness Initiative

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4. NFPA 1500, Standard on Fire Department Occupational Safety, Health, and Wellness Program
5. National Fallen Firefighters Foundation Initiative 13
6. NFPA 1582, Standard on Comprehensive Occupational Medical Program for Fire Departments

1014.4 DEPARTMENT AGENCY PEER SUPPORT

1014.4.1 PEER SUPPORT MEMBER SELECTION CRITERIA

The selection of a department peer support member will be at the discretion of the coordinator. Selection should be based on the member's:

- Desire to be a peer support member.
- Experience or tenure.
- Demonstrated ability as a positive role model.
- Ability to communicate and interact effectively.
- Evaluation by supervisors and any current peer support members.
- Ability to maintain confidentiality.
- Ability to learn about the psycho-social process.

1014.4.2 PEER SUPPORT MEMBER RESPONSIBILITIES

The responsibilities of department peer support members include:

- (a) Providing pre- and post-critical incident support (see the Critical Incident Stress Debriefing Policy).
- (b) Presenting department members with periodic training on wellness topics including but not limited to:
 1. Stress management.
 2. Suicide prevention.
 3. How to access support resources.
- (c) Providing referrals to licensed psychotherapists and other resources, where appropriate.
 1. Referrals should be made to [department_agency]-designated resources in situations that are beyond the scope of the peer support member's training.

1014.4.3 PEER SUPPORT MEMBER TRAINING

A department peer support member should complete department-approved training prior to being assigned.

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1014.5 PEER SUPPORT COMMUNICATIONS

Although the Department will honor the sensitivity and confidentiality of communications with and between peer support members, there is no legal privilege to such communications, unless authorized by law (e.g., California Firefighter Peer Support and Crisis Referral Services Program).

For additional policy guidance regarding the confidentiality of communications with peer support members during a CISD, see the Critical Incident Stress Debriefing Policy.

1014.6 WELLNESS PROGRAM AUDIT

At least annually, the coordinator or the authorized designee should audit the effectiveness of the departments wellness program and prepare a report summarizing the findings. The report shall not contain the names of members participating in the wellness program and should include the following information:

- Data on the types of support services provided
- Wait times for support services
- Participant feedback, if available
- Program improvement recommendations
- Policy revision recommendations

The coordinator should present the completed audit to the Board of Directors for review and consideration of updates to improve program effectiveness.

1014.7 TRAINING

The coordinator or the authorized designee should collaborate with the Training Safety Officer to provide all members with regular education and training on topics related to member wellness, including but not limited to:

- The availability and range of department wellness support systems.
- Suicide prevention.
- Recognizing and managing mental distress, emotional fatigue, post-traumatic stress, and other possible reactions to trauma.
- Alcohol and substance use disorder awareness.
- Countering sleep deprivation and physical fatigue.
- Anger management.
- Marriage and family wellness.
- Benefits of exercise and proper nutrition.
- Effective time and personal financial management skills.

Training materials, curriculum, and attendance records should be forwarded to the Training Safety Officer as appropriate for inclusion in training records.

Critical Incident Stress Debriefing

1015.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a Critical Incident Stress Debriefing Program. The Bear Valley - Indian Valley Fire Protection District recognizes that during the course of performing job duties, members may become involved in or be exposed to incidents that have the potential to cause various forms of short- or long-term emotional trauma.

1015.1.1 DEFINITIONS

Definitions related to this policy include:

Critical incident stress - A strong emotional, cognitive, or physical reaction that has the potential to interfere with daily life, including physical and emotional illness, loss of interest in the job, personality changes, marital discord, and loss of ability to function.

Critical Incident Stress Debriefing (CISD) - A standardized approach using a group format to provide education, an atmosphere and opportunity for emotional release through discussion, and support for members who are involved in emergency incidents under conditions of extreme stress. CISD is not a diagnostic or treatment process like that provided in counseling sessions by a mental health professional. Instead, it is a service that provides education and support.

1015.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to implement a CISD Program to provide support and professional intervention to members of this department following exposure to situations that are likely to create unusually strong emotional reactions.

1015.3 CISD PROGRAM

The Department should establish a committee responsible for implementing and managing the CISD Program. The Board of Directors or the authorized designee is responsible for appointing members to the committee who represent all levels of department personnel. The department's safety and health officer serves as the committee chairperson.

Functions of the committee include but are not limited to:

- Providing input and assistance to the development and implementation of the CISD Program.
- Recommending the type and content of critical incident-related programs, workshops, and seminars.
- Distributing CISD-related information to members.
- Providing the administrative and technical support needed to implement CISD activities.
- Coordinating and following-up on requests for CISD.
- Identifying state and local peer CISD organizations and teams.

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1015.4 CISD COMPONENTS

The CISD Program should include pre-incident, on-scene, and post-incident activities, including education, diffusion of emotional reactions, and debriefing. The purpose of the program is to minimize the impact of stress on members following major incidents.

Ideally, CISD should incorporate the services of both peer support members and trained professionals, such as physicians, psychologists, or counselors.

The program is intended to be consistent with the recommendations of the National Fire Protection Association (NFPA) and the Fire Service Joint Labor Management Wellness Fitness Initiative, developed by the International Association of Fire Fighters (IAFF) and the International Association of Fire Chiefs (IAFC).

1015.4.1 ACTIVATION

The following are examples of incidents that may initiate a CISD response:

- Major disaster or mass casualty incidents
- Serious injury, death, or suicide of a firefighter, police officer, or other emergency service provider
- Serious injury or death of a civilian resulting from emergency service operations
- Death of a child or similar incident involving a profound emotional response
- Any incident that attracts unusually significant media attention
- Loss of life following an unusual or extremely prolonged expenditure of emotional and physical energy by emergency services personnel
- Any unusual incident that produces an extreme, immediate, or delayed emotional response
- Cumulative trauma from multiple incidents

Any time it has been determined that a critical incident has occurred and intervention may be needed, a CISD should be requested. The request may be made either directly to peer support members or through the CISD committee. Depending on the type and magnitude of the incident and services that may be needed, the CISD may be activated either during or after a critical incident.

All members are responsible for recognizing incidents that may need a CISD. Once an incident has been identified as a critical incident, a CISD should be initiated as soon as practicable.

Debriefing may be conducted anywhere there is ample space, privacy, and freedom from distractions. Consideration should be given to including responders from other agencies who were involved in the incident, including but not limited to communications personnel, law enforcement officers, and paramedics or ambulance personnel.

For additional guidance on members requesting peer support or professional help on an individual basis, see the Wellness Program Policy.

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1015.4.2 CISD PROVIDERS

CISD providers should include mental health professionals and peer support members.

- (a) The duties and responsibilities of mental health professionals include the following:
 - 1. Supervise and advise on all clinical aspects of the program.
 - 2. Ensure the quality of CISD services.
 - 3. Offer clinical support and program guidance to the CISD committee and peer support members.
 - 4. Provide guidance to peer support members.
 - 5. Assist in training peer support members and with continuing education.
 - 6. Advise on the development of policy and written operational CISD protocols.
- (b) Mental health professionals involved in the CISD program should have the following qualifications:
 - 1. Be a licensed mental health professional.
 - 2. Be trained and experienced in a recognized CISD model.
 - 3. Demonstrate experience in counseling emergency services personnel.
- (c) The duties and responsibilities of peer support members related to CISD services include the following:
 - 1. Assist and support the CISD mental health professionals as necessary.
 - 2. Provide referrals to mental health professionals, where appropriate.
 - 3. Providing support and basic education to members and their families.
 - 4. Serving as a CISD provider with mental health professionals.

1015.5 DEBRIEFING

The form of CISD utilized should depend upon how early the intervention is activated and the nature of the incident. The use of one format does not preclude the use of others for the same critical incident.

Common formats for CISD include:

- (a) On-scene debriefing: Peer support members or mental health professionals respond to the scene as observers and advisers to watch for the development of acute reactions. They may offer encouragement and support, check on the well-being of personnel and allow for individual discussion of feelings and reactions.
- (b) Initial defusing: This usually takes place within a few hours of the incident and is generally facilitated by peer support members. It is an informal process encouraging open and free expression of feelings without a critique of the incident. The purpose is to stabilize involved members so they can go home or return to service.
- (c) Formal debriefing: Debriefing led by a CISD Program mental health professional and peer support members that usually takes place 24 to 48 hours after the conclusion of the incident. Members involved in the critical incident are given the opportunity for

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free expression of feelings. This expression should be met with acceptance, support and understanding.

- (d) Follow-up debriefing: If deemed necessary, it may be facilitated by the CISD mental health professional and peer support members several weeks or months after a critical incident. The main purpose is to resolve any issues or problems that were not initially resolved. The follow-up debriefing may include the entire group or a portion of those originally involved.

Regardless of the type of debriefing, a CISD is not a critique of department operations at the incident. The CISD provides a setting in which members can discuss their feelings and reactions as a means to reduce the stress resulting from exposure to critical incidents. Performance issues should not be discussed during the debriefing.

No one has rank during the debriefing process. Everyone is equal.

Following any intervention, members who need additional assistance should contact peer support members or the wellness coordinator to obtain information.

1015.6 ATTENDANCE

Only those involved in the incident and CISD team members should be present. Members directly exposed to the traumatic aspects of an incident are strongly encouraged to participate in CISD.

Under special circumstances, the supervising officer may make attendance mandatory. Even if attendance is mandatory, members should not be obligated to speak or express their feelings during the CISD.

During debriefings, involved members involved should be out of service with radios, personal communications devices, and other distractions turned off.

1015.7 ROTATION OF PERSONNEL

Command officers should minimize members' exposure at critical incidents by rotating or removing initial responding personnel from the immediate scene and reassigning them to less stressful operations as soon as possible. Members directly involved in critical incidents should be considered a high priority for immediate reassignment or removal from the scene. Relief from duty may also be considered.

Peer support members may make a request to their command officer for relief or reassignment during a shift to participate in CISD activities. The peer support members should provide on-scene services, including on-site evaluation, encouragement, and consultation. They should also be considered an available resource for assignment to rehab, medical, or other areas as needed.

Circumstances of a critical incident may result in a recommendation that individuals or companies be taken out of service. The Captain is responsible for making the appropriate arrangements.

Under no circumstances is being taken out of service to be construed as critical or negative. Personnel taken out of service are to be viewed as deserving of the same consideration as an injured firefighter.

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Critical Incident Stress Debriefing

1015.8 CONFIDENTIALITY

The Department considers all CISD, regardless of type, as strictly confidential. Notes, other than those specifically identified in this policy, are prohibited. No audio or video recording may be made without the express consent of all participants.

Exceptions to confidentiality include when:

- (a) There is reasonable evidence to assume a risk of harm to the member or to others. If the risk is to another person, that person is identifiable, and there are means to contact the person.
- (b) Participants divulge information that falls under any applicable state mandatory reporting duties.

1015.9 RECORD-KEEPING

Following a CISD, the committee chairperson should prepare a summary report and forward it to the CISD Program committee for statistical record-keeping. The report should be limited to the following information:

- (a) Incident date and time
- (b) Brief description of incident facts
- (c) Intervention date and location
- (d) Names of CISD team members conducting the intervention
- (e) Numbers of participants from each agency involved

Names of participants should not be recorded.

Workplace Violence

1016.1 PURPOSE AND SCOPE

The purpose of this policy is to make clear that the Department does not tolerate any direct or implied threats of violence or violent behavior in the workplace or any act or behavior that is or can be perceived as threatening, hostile, and/or violent (Labor Code § 6401.9).

This policy supplements the Workplace Violence Plan implemented by the Health and Safety Officer pursuant to the Illness and Injury Prevention Program Policy.

1016.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to provide and maintain a safe work environment for its employees, volunteers, and members of the public.

In responding to any violent behavior in the workplace, the Department is committed to providing protection to all involved parties, including protection from future physical and/or mental harm and the protection of the legal rights of victims, witnesses, and those instigating the harm.

1016.3 PROHIBITED BEHAVIOR

No member shall engage in, encourage, or promote violent behavior toward any person while conducting department business or on department property.

No member engaged in department business shall carry or possess weapons or explosives unless either:

- (a) Permitted by department policy
- (b) State or local law prohibits the Department from restricting the possession of the weapon or explosive

1016.4 REPORTING AND INVESTIGATING

1016.4.1 MEMBER RESPONSIBILITY

Department members who experience, observe, or have knowledge of prohibited behaviors and actions in the workplace, have a responsibility to report the situation as soon as practicable to a supervisor and to the local sheriff department if a threat has been made or a crime has occurred.

Members should render aid to anyone who may be in need and be prepared to assist emergency responders, as requested, following any incident of violence in the workplace.

1016.4.2 SUPERVISOR, MANAGER, CAPTAIN, AND FIRE CHIEF RESPONSIBILITIES

Upon receipt of a report of potential or actual workplace violence, supervisors shall gather as much information as possible to assess and determine the severity and potential of the situation. If the report is found to be credible, the next immediate supervisor shall be notified as soon as practicable and appropriate action taken.

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Workplace Violence

Local law enforcement personnel shall be notified immediately of all threatening or violent behavior.

1016.4.3 INVESTIGATION

The Board of Directors will promptly, impartially, and with as much confidentiality as practicable coordinate the investigation of all reports of violent behavior.

Department members are required to cooperate in any investigation. A timely resolution of each report should be reached and communicated to all parties involved as quickly as possible.

1016.4.4 REPORTING NON-WORK-RELATED THREATENING OR VIOLENT BEHAVIOR

Department members who are victims of domestic violence or other threatening behavior outside of the workplace or who believe they are potential victims of such behavior and fear it may enter the workplace, are encouraged to report the situation as soon as possible to their supervisors.

Supervisors receiving any such report shall contact the Board of Directors as soon as practicable so that any appropriate safety measures or plans may be developed.

1016.5 RETALIATION PROHIBITED

Any form of retaliation against a member for making a report concerning violent behavior in the workplace is prohibited.

Any member who becomes aware of any retaliation or threatened retaliation shall immediately notify their supervisor.

1016.6 RESTRAINING ORDERS

Members who obtain a restraining order listing their workplace, person, or the Department as a protected area must provide a copy of the restraining order to their immediate supervisor or the Board of Directors. The Department needs this information in order to provide a safe workplace.

1016.7 FOLLOW-UP ACTION

Any employee reported to have exhibited violent or potentially violent behavior will be afforded all rights provided by law, the applicable memorandum of understanding, and/or the Firefighter Bill of Rights provisions before the Department takes any disciplinary action.

Actions that may be taken when an employee has been found to have violated this policy include but are not limited to the following:

- Mandatory participation in counseling
- Placing the employee on paid administrative leave pending investigation into an alleged threat or act
- Corrective/disciplinary action up to and including termination
- Criminal arrest and prosecution
- Special procedures, such as job relocation or initiation of a court order

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If, upon investigation, it is determined that an allegation is false or was made maliciously, the employee who provided the false information will be subject to disciplinary action, up to and including termination, as well as possible criminal arrest and prosecution.

1016.8 LEGAL ACTION

The Board of Directors Division, in consultation with the department's legal counsel, will determine if the Department will seek a temporary restraining order or injunction to reduce future or threatened violent behavior or harassment in the workplace (Code of Civil Procedure § 527.8).

1016.9 CORRECTIVE ACTIONS

At the completion of the investigation and a review of the incident, or in the case of a threat of violence, non-disciplinary corrective actions should be implemented or requested to ensure overall workplace safety. These actions may include but are not limited to:

- Placing the involved member on administrative leave pending further review and determination of permanent action. Administrative leave would be unpaid in the case of a volunteer.
- Reassigning the member to a different work location.
- Referring the member to conflict resolution training sessions.
- Referring the member to the Employee Assistance Program (EAP).
- Modifying workstation designs and office traffic flow patterns.
- Requiring the member to attend a fitness-for-duty evaluation.
- Developing specific workplace violence procedures for incident response, prevention, and corrective actions.

1016.10 WORKPLACE VIOLENCE PREVENTION

All department members are responsible for assisting in the prevention of violence in the workplace.

The Department shall provide initial and annual training to members regarding this policy and the department Workplace Violence Prevention Plan (Labor Code § 6401.9).

In the event a violent incident occurs in the workplace, the Board of Directors is responsible for ensuring that all responsibilities have been met and actions carried out, as detailed in this policy and the department Workplace Violence Prevention Plan. The Board of Directors shall review the results of any investigation and ensure appropriate action is taken. Information gathered during an investigation should be used for the continuous improvement of policies and procedures to prevent workplace violence (Labor Code § 6401.9).

1016.11 VIOLENT INCIDENT LOG

All workplace violence incidents shall be documented in a violent incident log as provided in Labor Code § 6401.9 and the department Workplace Violence Prevention Plan. The log shall be retained

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for a minimum of five years and as required by the department records retention schedule (Labor Code § 6401.9).

Lactation Breaks

1017.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidance regarding reasonable accommodations for lactating members (Labor Code § 1034).

1017.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to provide, in compliance with federal and state law, reasonable accommodations for lactating members. This includes break time and appropriate facilities to accommodate any member desiring to express breast milk for a nursing child (29 USC § 218d; 42 USC § 2000gg-1; 29 CFR 1636.3; Labor Code § 1030).

1017.3 LACTATION BREAK TIME

A rest period should be permitted each time the member requires a lactation break (29 USC § 218d; 42 USC § 2000gg-1; 29 CFR 1636.3; Labor Code § 1030). In general, lactation breaks that cumulatively total 30 minutes or less during any four-hour work period or major portion of a four-hour work period would be considered reasonable. However, individual circumstances may require more or less time.

Lactation breaks, if feasible, should be taken at the same time as the member's regularly scheduled rest or meal periods. While a reasonable effort will be made to provide additional time beyond authorized breaks, any such time exceeding 15 minutes will be unpaid (Labor Code § 1030).

Members desiring to take a lactation break shall notify Colusa County or a supervisor prior to taking such a break. Such breaks may be reasonably delayed if they would seriously disrupt department operations (Labor Code § 1032).

Once a lactation break has been approved, the break should not be interrupted except for emergency or exigent circumstances.

1017.4 PRIVATE LOCATION

The Department will make reasonable efforts to accommodate members with the use of an appropriate room or other location to express milk in private. Such room or place should be in close proximity to the member's work area and shall be other than a bathroom or toilet stall. The location must be shielded from view, free from intrusion from coworkers and the public, and otherwise satisfy the requirements of federal and state law (29 USC § 218d; 42 USC § 2000gg-1; 29 CFR 1636.3; Labor Code § 1031).

Members occupying such private areas shall either secure the door or otherwise make it clear to others that the area is occupied with a need for privacy. All other members should avoid interrupting a member during an authorized break, except to announce an emergency or other urgent circumstance.

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Lactation Breaks

Authorized lactation breaks for members assigned to the field may be taken at the nearest appropriate private area.

1017.5 STORAGE OF EXPRESSED MILK

Any member storing expressed milk in any authorized refrigerated area within the Department shall clearly label it as such and shall remove it at the end of their shift.

1017.6 STATE REQUIREMENTS

Employees have the right to request lactation accommodations. If a break time or location accommodation cannot be provided, the supervisor shall provide the member with a written response regarding the reasons for the determination (Labor Code § 1034).

Lactation rooms or other locations should comply with the prescribed feature and access requirements of Labor Code § 1031.

Employees who believe that their rights have been violated under this policy, or who believe that they have been the subject of discrimination or retaliation for exercising or attempting to exercise their rights under this policy, are encouraged to follow the chain of command in reporting a violation, but they may also file a complaint directly with the Labor Commissioner (Labor Code § 1033).

Smoking / Tobacco Products

1018.1 PURPOSE AND SCOPE

The U.S. Surgeon General has determined that the use of tobacco in any form can be hazardous to one's health. Tobacco products in any form may be offensive to other members and the public.

1018.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that all members are prohibited from smoking or using tobacco products while on-duty.

Smoking and use of other tobacco products is not permitted inside any department facility, office, department vehicle or fire apparatus, fire station, training facility or any other public building (Labor Code § 6404.5). Tobacco products cannot be used within close proximity to any of these facilities to prevent smoke from being inhaled by the public or other members. It is the responsibility of all members to ensure that no person smokes or uses any tobacco product inside department facilities and vehicles.

No person shall smoke tobacco products within 20 feet of a main entrance, exit or operable window of any public building (including any department facility), or buildings on the campuses of the University of California, California State University and California community colleges, whether that person is present for training, enforcement or any other purpose (Government Code § 7596 et seq.).

Drug and Alcohol Free Workplace

1019.1 PURPOSE AND SCOPE

The Bear Valley - Indian Valley Fire Protection District prohibits the use of drugs and alcohol in the workplace in order to provide a safer work environment for members and to protect the public's safety and welfare. This policy applies to all members when they are on District property or when performing District-related business elsewhere (41 USC § 8103).

1019.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to provide a drug free workplace for all members.

1019.3 GENERAL GUIDELINES

Alcohol and drug use in the workplace or on department time can endanger the health and safety of department members and the public.

Members who have consumed an amount of an alcoholic beverage or taken any medication, or a combination thereof, that would tend to adversely affect their mental or physical abilities shall not report for duty. Affected members shall notify the Board of Directors or the appropriate supervisor as soon as they are aware that they will not be able to report to work. If a member is unable to make the notification, every effort should be made to have a representative contact the supervisor in a timely manner. If the member is adversely affected while on-duty, the member shall be immediately removed and released from work (see the Work Restrictions section in this policy).

1019.3.1 USE OF MEDICATIONS

Members should not use any medications that will impair their ability to safely and completely perform their duties. Members who are medically required or need to take any such medication shall report that need to their immediate supervisor prior to commencing any on-duty status.

1019.3.2 MEDICAL CANNABIS

Possession, use, or being under the influence of medical cannabis on-duty is prohibited and may lead to disciplinary action.

1019.4 EMPLOYEE ASSISTANCE PROGRAM

A voluntary employee assistance program may be available to assist those who wish to seek help for alcohol and drug problems (41 USC § 8103). Insurance coverage that provides treatment for drug and alcohol abuse also may be available. Employees should contact the Board of Directors, their insurance providers, or the employee assistance program for additional information. It is the responsibility of each employee to seek assistance before alcohol or drug problems lead to performance problems.

1019.4 REQUESTING SCREENING TESTS

A supervisor or Captain may request that an employee submit to a screening test under any of the following circumstances:

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- (a) The supervisor or Captain reasonably believes, based upon objective facts, that the employee is under the influence of alcohol or drugs that are impairing the employee's ability to perform duties safely and efficiently.
- (b) During the performance of duties, the employee drives a motor vehicle and becomes involved in an incident that results in bodily injury to the employee or another person or substantial damage to property.

1019.4.1 CAPTAIN RESPONSIBILITY

The Captain shall ensure written records are prepared documenting the specific facts that led to the decision to request the test, and shall inform the employee in writing of the following:

- (a) The test will be given to detect either alcohol or drugs, or both.
- (b) The result of the test is not admissible in any criminal proceeding against the employee.
- (c) The employee may refuse the test, but refusal may result in dismissal or other disciplinary action.

1019.4.2 SCREENING TEST DISPOSITION

Employees may be subject to disciplinary action if they:

- (a) Fail or refuse to submit to a screening test as requested.
- (b) After taking a screening test that indicates the presence of a controlled substance, fail to provide proof, within 72 hours after being requested, that they took the controlled substance as directed, pursuant to a current and lawful prescription issued in their name.
- (c) Violate any provisions of this policy.

1019.4 MEMBER RESPONSIBILITIES

Members shall come to work in an appropriate mental and physical condition. Members are prohibited from purchasing, manufacturing, distributing, dispensing, possessing, or using controlled substances or alcohol on department premises or on department time (41 USC § 8103). The lawful possession or use of prescribed medications or over-the-counter remedies is excluded from this prohibition.

Members shall notify a supervisor immediately if they observe behavior or other evidence they believe demonstrates that a fellow member poses a risk to the health and safety of the member or others due to drug or alcohol use.

Members are required to notify their immediate supervisors of any criminal drug statute conviction for a violation occurring in the workplace no later than five days after such conviction (41 USC § 8103).

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1019.4 WORK RESTRICTIONS

If a member informs a supervisor that the member has consumed any alcohol, drug, or medication that could interfere with a safe and efficient job performance, the member may be required to obtain clearance from a physician before continuing to work.

If the supervisor reasonably believes, based on objective facts, that a member is impaired by the consumption of alcohol or other drugs, the supervisor shall prevent the member from continuing work and request that a Captain respond to the location of the impaired member. The Captain shall ensure the member is transported to a safe location and that the continuity of department operations is maintained.

1019.5 CONFIDENTIALITY

The Department recognizes the confidentiality and privacy due to its members. Disclosure of any information relating to substance abuse treatment, except on a need-to-know basis, shall only be with the express written consent of the member involved or pursuant to lawful process.

The written results of any screening tests and all documents generated by the employee assistance program are considered confidential medical records and shall be maintained separately from the employee's other personnel files.

1019.5 COMPLIANCE WITH THE DRUG-FREE WORKPLACE ACT

No later than 30 days following notice of any drug statute conviction for a violation occurring in the workplace involving a member, the Department will take appropriate disciplinary action, up to and including dismissal and/or requiring the member to satisfactorily participate in a drug abuse assistance or rehabilitation program (41 USC § 8104).

Personal Appearance Standards

1020.1 PURPOSE AND SCOPE

In order to project uniformity and neutrality, members shall maintain their personal hygiene and appearance to ensure a professional image appropriate for this department and for their assignment.

The procedures contained herein are intended to promote uniformity of the members of the Department by addressing specific grooming items. However, nothing herein shall limit the department's ability to address any other grooming or personal appearance issues that may be deemed improper for members of the Department.

1020.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that all members meet required personal hygiene and grooming standards while on-duty or conducting official business.

1020.3 GROOMING STANDARDS

The following appearance standards shall apply to all members except those whose current assignment would deem them not appropriate or where the Board of Directors or the authorized designee has granted an exception.

1020.3.1 PERSONAL HYGIENE

All members must maintain proper personal hygiene. Examples of improper personal hygiene include but are not limited to dirty fingernails, bad breath, body odor, and dirty or unkempt hair. Any member who has a condition due to a protected category (e.g., race, physical disability) which affects any aspect of personal hygiene covered by this policy may qualify for an accommodation and should report any need for an accommodation to a supervisor or the Board of Directors.

1020.3.2 HAIR

The hairstyle of all members shall be neat in appearance. Hair must be no longer than the horizontal level of the bottom of the uniform patch when the member is standing erect. Hairstyles that extend below the top edge of the uniform collar should be secured in a tightly wrapped braid or ponytail.

1020.3.3 MUSTACHES

A short and neatly trimmed mustache may be worn. Mustaches shall not extend below the corners of the mouth or beyond the natural hairline of the upper lip.

1020.3.4 SIDEBURNS

Sideburns shall not extend below the bottom of the ear and shall be trimmed and neat.

1020.3.5 BEARDS AND GOATEES

Beards, goatees, or any hair on the chin or near the bottom lip is prohibited if it interferes with the operation of an SCBA.

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1020.3.6 FACIAL HAIR

Facial hair other than sideburns, mustaches, and eyebrows shall not be worn, unless authorized by the Board of Directors or the Fire Chief.

1020.3.7 COSMETICS

Members are permitted to wear cosmetics of conservative color and amount.

1020.3.8 FINGERNAILS

Fingernails extending beyond the tip of the finger can pose a safety hazard to members working in the field. For this reason, fingernails shall be trimmed so that no point of the nail extends beyond the tip of the finger.

1020.3.9 JEWELRY AND ACCESSORIES

No jewelry or personal ornaments shall be worn by members on-duty on any part of the uniform or equipment, except those authorized within this manual. Members should be mindful of wearing jewelry that can become snagged or caught during performance of fire suppression duties.

- Necklaces or jewelry worn around the neck shall not be visible above the shirt collar.
- It is recommended that members refrain from wearing rings while assigned to suppression.

1020.4 TATTOOS

Tattoos, brands, or mutilations that are inappropriate, as determined at the sole discretion of the Board of Directors, must also be covered. Inappropriate marks may include but are not limited to marks that exhibit or advocate discrimination; marks that promote or express gang, supremacist, or extremist group affiliation; and marks that depict or promote drug use, sexually explicit acts, or other obscene material.

1020.5 BODY PIERCING OR ALTERATION

Except for a single-stud pierced earring worn in the lobe of each ear, no body piercing shall be visible while any member is on-duty or representing the Department in any official capacity.

Alteration to any area of the body visible in any authorized uniform or attire that is a deviation from normal anatomical features and which is not medically required is prohibited. Such body alteration includes but is not limited to:

- (a) Tongue splitting or piercing.
- (b) The complete or trans-dermal implantation of any material other than hair replacement.
- (c) Abnormal shaping of the ears, eyes, nose, or teeth.
- (d) Branding or scarification.

1020.6 RELIGIOUS ACCOMMODATION

The religious beliefs and needs of department members should be reasonably accommodated. Requests for religious accommodation should generally be granted unless there is a compelling security or safety reason and denying the request is the least restrictive means available to ensure

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security or safety. The Board of Directors should be advised any time a request for religious accommodation is denied.

Those who request to wear headscarves, simple head coverings, certain hairstyles, or facial hair for religious reasons should generally be accommodated absent unusual circumstances.

1020.7 EXEMPTIONS

Members who seek cultural (e.g., culturally protected hairstyles) or other exemptions to this policy that are protected by law should generally be accommodated (Government Code § 12926). A member with an exemption may be ineligible for an assignment if the individual accommodation presents a security or safety risk. The Board of Directors should be advised any time a request for such an accommodation is denied or when a member with a cultural or other exemption is denied an assignment based on a safety or security risk.

Badges

1021.1 PURPOSE AND SCOPE

The name of the Bear Valley - Indian Valley Fire Protection District and the department badge and uniform patches are property of the Department. This policy establishes the rules associated with Bear Valley - Indian Valley Fire Protection District badges and any likeness of the badge.

1021.2 POLICY

The Bear Valley - Indian Valley Fire Protection District may issue members of the Department a curved uniform badge for use or display in compliance with this policy.

Only authorized badges issued or formally authorized by this department shall be displayed, carried or worn by members while on-duty or otherwise acting in an official or authorized capacity.

1021.3 BADGE TYPES

1021.3.1 MEMBER FLAT BADGES

Sworn members may, at their own expense and with the written approval of the Board of Directors, purchase a flat badge that can be carried in a wallet.

A sworn member may sell, exchange or transfer a flat badge only to another sworn member of the Bear Valley - Indian Valley Fire Protection District and only with the written approval of the Board of Directors.

1021.3.2 RETIREE BADGES

Upon honorable retirement, a member may purchase his/her assigned curved uniform badge for memorabilia purposes. Other uses of the badge may be unlawful. The badge will remain the property of the Bear Valley - Indian Valley Fire Protection District and may be revoked in the event of misuse or abuse.

An honorably retired sworn member of the Department may keep his/her flat badge upon retirement.

1021.4 LOSS OF BADGE

Any member who loses any badge must immediately report the loss to his/her supervisor. A badge should be considered lost whenever it is not in the direct control of the member.

1021.5 UNAUTHORIZED USE OF BADGES

No badge shall be issued to anyone other than a current or honorably retired member of the Department. Department badges are for official use only.

The department badge, uniform patch or any likeness thereof shall not be used for personal or private reasons including, but not limited to, letters, memoranda or electronic communications, such as e-mail, websites or web pages.

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Badges

Members may not use the department badge, uniform patch or department name in any material (printed matter, products or other items) without approval of the Board of Directors.

Members shall not loan their department badge to others and shall not permit the badge to be reproduced or duplicated.

1021.6 PERMITTED BADGE USE BY MEMBER GROUPS

The likeness of the department badge shall not be used by any member group without the express prior authorization of the Board of Directors and shall be subject to the following:

- (a) The member associations may use the likeness of the department badge for merchandise and official association business provided the merchandise is used in a clear representation of the association and not the Bear Valley - Indian Valley Fire Protection District. The following modifications shall be included:
 - 1. Any text referring to the Bear Valley - Indian Valley Fire Protection District shall be replaced with the name of the member association.
 - 2. The badge number portion of the image shall display the name or acronym of the member association.

Identification Cards

1022.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the guidelines for issuing and possessing Bear Valley - Indian Valley Fire Protection District identification cards. Any image or likeness of the identification card and the name of the Bear Valley - Indian Valley Fire Protection District are the property of the Department and their use shall be restricted as specified in this policy.

1022.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that identification cards shall be issued to all department members. All members shall be in possession of their department-issued identification card at all times while on-duty or otherwise acting in an official or authorized capacity. The use and display of department identification cards shall be in compliance with this policy.

1022.3 IDENTIFICATION CARD CONTENT

Department-issued identification cards shall include the following information:

- The department name
- An image of the department badge
- The full name of the member
- The rank of the member
- The member's signature
- The department's mailing address
- A statement indicating that the identification card is the property of the Bear Valley - Indian Valley Fire Protection District and that if found, the card must be returned to the Department

1022.4 UNAUTHORIZED USE

Department identification cards may not be displayed for any purpose other than official use.

Members may not use an image or likeness of the department identification card in any material (printed matter, products or other items) without prior written approval from the Board of Directors.

Members shall not loan department identification cards to others and shall not permit the identification card to be reproduced or duplicated.

1022.5 LOSS OF DEPARTMENT IDENTIFICATION CARD

The loss of the department identification card must be immediately reported to the Department. An identification card should be considered lost whenever it is not in the direct control of the member.

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1022.6 REPLACING IDENTIFICATION CARDS

Identification cards should be replaced whenever they become damaged, faded or otherwise difficult to read, whenever a member changes rank or when the member's photograph becomes outdated or no longer presents an accurate depiction of the member.

On-Duty Injuries

1023.1 PURPOSE AND SCOPE

The purpose of this policy is to assist the Bear Valley - Indian Valley Fire Protection District in accurately reporting work-related illnesses and injuries and managing workers' compensation costs. The policy also provides department members with information concerning California state-mandated workers' compensation benefits and assistance to members who are either injured or develop a work-related illness as a result of their employment (8 CCR 9880).

Nothing in this policy is intended to confer any rights greater than those provided by state workers' compensation laws.

1023.1.1 DEFINITIONS

Definitions related to this policy include:

Permanent and stationary - The status of an injured member whose medical condition has reached maximum medical improvement.

Permanent disability - The status of an injured member who is permanently disabled.

Temporary disability - The status of an injured member who is unable to return to work because the member has not yet achieved a permanent and stationary status.

Third-party administrator - An entity responsible for adjusting workers' compensation claims on behalf of an employer.

Work-related injury - Any injury, disease, or mental health issue arising out of employment or occurring in the course of employment duties (Labor Code § 3208; Labor Code § 3208.3; Labor Code § 3212 et seq.); includes the contraction of a communicable disease (Labor Code § 5500.5).

1023.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to provide workers' compensation benefits and assistance to all members who incur a work-related illness or injury. The Department shall display a notice to employees regarding access to benefits and provide new members with a written notice concerning their rights, benefits, and obligations under workers' compensation laws (8 CCR 9880 and 8 CCR 9881).

1023.3 PROCEDURE

Work-related injuries or illnesses incurred by members may be covered by workers' compensation through the Bear Valley - Indian Valley Fire Protection District. To be considered work-related, the injury or illness must arise from and occur in the course of employment. When authorized by a physician, medical expenses related to the treatment of a work-related injury or illness may include doctor, hospital, surgical, physical therapy, prescription medication, or medical equipment. Workers' compensation may pay for wages lost as a result of an injury or illness, provided that absence from work is related to a work injury or illness and is authorized by a physician.

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1023.3.1 MEMBER RESPONSIBILITIES

A member who is injured on the job must immediately report his/her injury to a supervisor or the Board of Directors. Any member who is involved in any accident while on-duty shall report such injury, illness, or accident as soon as practicable to his/her supervisor (8 CCR 14300.35).

An injured member or member who has suffered a work-related illness shall report as soon as practicable to his/her immediate supervisor the medical findings concerning the injury, the extent of any work restrictions and the anticipated duration, if known. In addition, such members are required to promptly submit all medical releases, whether partial or full releases, to a supervisor.

Members should contact the person designated by the Department for more information concerning workers' compensation benefits and payment of wages while off-duty due to a work-related injury or illness.

A member may be treated for an on-duty injury or illness by a personal physician that the member pre-designates in writing, prior to the injury or illness. The member may use the optional DWC Form 9783 Pre-designation of Personal Physician for this purpose (8 CCR 9780.1).

Members shall report any near-miss incident to their supervisor as soon as practicable. A near-miss incident is one where a mishap occurs but the member avoids serious injury or illness (e.g., slipping on an uneven surface but not falling).

1023.3.2 SUPERVISOR RESPONSIBILITIES

If injury is life-threatening, Emergency Medical Services (EMS) should begin or be summoned immediately.

If the injury is of a less emergent nature, the supervisor should ensure the member contacts the department-designated occupational medical provider. If the member has a pre-designated personal physician on file, the member may be treated by that physician.

If the injury does not require medical attention, the supervisor shall report the injury. The supervisor shall sign the report and indicate that the member desired no medical attention at the time of the report.

Within 24 hours of notification of an injury, the supervisor shall give the member a DWC-1 Worker's Compensation Claim Form. The supervisor should have the injured member complete the member's portion of the form. If the member is unable to complete the DWC-1, the form may either be sent to the member's home or completed by the supervisor. The supervisor should complete the employer's portion as well.

The supervisor shall ensure that an Employer's Report of Occupational Illness/Injury (Form 5020) is filed with the Department of Industrial Relations within five days of the notice of injury (8 CCR 14004).

Supervisors receiving a report of a near-miss incident should prepare a detailed description of the incident and any recommendations or efforts to mitigate any identified hazards. Supervisors should forward the report to the Board of Directors Division.

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1023.3.3 BOARD OF DIRECTORS RESPONSIBILITY

The Board of Directors should evaluate the request to return to work and any necessary medical verification and make a determination whether:

- The member may return to work based on the medical documentation provided by the member.
- It is necessary to engage in an interactive process to determine a reasonable accommodation.
- It is necessary and appropriate to send the member to a fitness-for-duty evaluation.

The Board of Directors, in consultation with the Fire Chief will make a recommendation on whether the member should be returned to full-duty or modified-duty, and will communicate the decision to the member regarding his/her return to work.

1023.3.4 RETURN TO WORK FOLLOWING INJURY OR ILLNESS

It is the member's responsibility to keep the Department informed regarding his/her absence and to immediately advise the person designated by the Department when the member believes that he/she will be released to return to work, with or without limitations. If practicable, the member shall provide advance notice of his/her potential return to work. If requested, it is the member's responsibility to provide medical verification.

A summary of steps for returning to work following an injury or illness can be located in the Return to Work Policy.

1023.3.5 TEMPORARY MODIFIED-DUTY ASSIGNMENT

A temporary modified-duty assignment may be available for a member with temporary limitations on his/her ability to perform normal job duties. See the Temporary Modified Duty Assignments Policy for additional information.

1023.4 SETTLEMENT OF INJURY CLAIMS

Occasionally, a member's work-related injury or illness results from the negligent or wrongful acts of another, for which the member, the District, and/or other insurers are entitled to recover civilly. To ensure that the District's interests are protected and that the member has the benefit of the District's experience in these matters, the following procedure shall be followed.

1023.4.1 MEMBER OFFERS TO SETTLE

When a member sustains a work-related injury or illness caused by another person and is then approached by the person or an agent, insurance company or attorney and offered a settlement of claims, that member shall take no action other than to make a written report of this contact to his/her supervisor as soon as possible.

1023.4.2 SETTLEMENT AUTHORIZATION

No less than 10 days prior to accepting and finalizing the settlement of any third-party claim arising out of or related to an on-duty injury, the member shall provide the Board of Directors with written notice of the proposed terms of such settlement. In no case shall the member accept a settlement

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without first providing such written notice to the Board of Directors. The purpose of such notice is to permit the District to determine whether the offered settlement will affect any claim the District may have regarding payment for damages to equipment or reimbursement for wages against the person who caused the accident or injury and to protect the District's right of subrogation, while ensuring that the member's right to receive compensation for injuries is not affected.

1023.5 YEARLY WORKERS' COMPENSATION CLAIM REVIEW

A representative from the Board of Directors will ensure there is a yearly workers' compensation claim review with the Board of Directors, any third-party administrator, and the Fire Chief. At these yearly meetings, the following should be reviewed and discussed:

- Notable cases, such as those with customer relations, legal, time lost, medical, and other related claim issues.
- Number of claims categorized by battalion and or section.
- Number of permanent disability settlements approved.
- Notable positive claim results.
- Any actuarial studies, workers' compensation program audits, and injury trends.
- Executive management direction on complex cases, such as those with organization-wide impact, future precedent, sub-rosa investigations and the direction of the workers' compensation and the safety and injury prevention programs.

1023.6 MANAGEMENT REPORTS

There are three key management reports that shall be completed. These reports will provide management with the necessary reports to ensure the department's workers' compensation program is accomplishing the following:

- Meeting the needs of members following an injury or illness
- Complying with workers' compensation laws
- Minimizing workers' compensation costs while ensuring the provision of benefits to injured/ill members.

The three management reports shall be:

Annual Workers' Compensation Program Report - This report will summarize the past calendar year of program activity, including but not limited to settlements, loss control, injury analysis, and recommendations for program improvement.

Annual Actuary Report - An independent actuary shall complete an analysis to project the reserves needed by the Department to insure its workers' compensation program. Annual funding needs are generally based on the actuary's analysis of the department's loss history, insurance levels, and changes in state law.

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Annual Third-Party Administrator Stewardship Report - The stewardship report will assist the Department in measuring the effectiveness of the services contract with the workers' compensation program third-party administrator. The report will include the following:

- Utilization of the third-party administrator's services
- Cost savings achieved
- The average incurred and total costs paid per claim
- Workers' compensation and temporary disability costs paid by fiscal year
- Injuries by body part and nature of loss (e.g., sprain, contusion, laceration)

Temporary Modified Duty Assignments

1024.1 PURPOSE AND SCOPE

This policy establishes procedures for providing temporary modified-duty assignments. This policy is not intended to affect the rights or benefits of employees under federal or state law, District rules, or current collective bargaining agreements. For example, nothing in this policy affects the obligation of the Department to engage in a good faith, interactive process to consider reasonable accommodations for any employee with a temporary or permanent disability or limitation that is protected under federal or state law.

1024.2 POLICY

Subject to operational considerations, the Bear Valley - Indian Valley Fire Protection District may identify temporary modified-duty assignments for employees who have an injury or medical condition resulting in temporary work limitations or restrictions. A temporary assignment allows the employee to work, while providing the Department with a productive employee during the temporary period.

1024.3 PROCEDURE

Employees may request a temporary modified-duty assignment for short-term injuries or illnesses.

Employees seeking a temporary modified-duty assignment should submit a written request to their Fire Chief or the authorized designee. The request should, as applicable, include a certification from the treating medical professional containing:

- (a) An assessment of the nature and probable duration of the illness or injury.
- (b) The prognosis for recovery.
- (c) The nature and scope of limitations and/or work restrictions.
- (d) A statement regarding any required workplace accommodations, mobility aids, or medical devices.
- (e) A statement that the employee can safely perform the duties of the temporary modified-duty assignment.

The Fire Chief will make a recommendation through the chain of command to the Board of Directors regarding temporary modified-duty assignments that may be available based on the needs of the Department and the limitations of the employee. The Board of Directors or the authorized designee shall confer with the Board of Directors or the County Counsel as appropriate.

1024.4 MAINTENANCE OF CERTIFICATION AND TRAINING

Employees assigned to temporary modified duty shall maintain all certification, training, and qualifications appropriate to both their regular and temporary duties, provided that the certification, training, or qualifications are not in conflict with any medical limitations or restrictions. Employees who are assigned to temporary modified duty shall inform their supervisors of any inability to maintain any certification, training, or qualifications.

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Temporary Modified Duty Assignments

1024.5 MEDICAL EXAMINATIONS

Prior to returning to full-duty status, employees shall be required to provide certification from their treating medical professionals stating that they are medically cleared to perform the essential functions of their jobs without restrictions or limitations.

The Department may require a fitness-for-duty examination prior to returning an employee to full-duty status.

1024.6 PROBATIONARY EMPLOYEES

Probationary employees who are assigned to a temporary modified-duty assignment may have their probation extended by a period of time equal to their assignment to temporary modified duty.

Release of HIPAA-Protected Information

1025.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a pre-authorization process for the release of a member's personal health information, which is protected by Health Insurance Portability and Accountability Act (HIPAA) regulations, in the event of an on-duty injury or illness.

1025.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to allow members to complete a pre-authorization for the release of their personal health information to a family member in the event the member becomes injured or ill on-duty.

1025.3 GUIDELINES

The following topics should be considered for inclusion in this policy:

- (a) The right of members to voluntarily complete a pre-authorization for the release of personal health information to specific individuals
- (b) The location of storage and method of security of completed pre-authorization forms.
- (c) Expiration, renewal and revocation processes for the pre-authorization form
- (d) Define a list of situations or circumstances in which members can expect the Department to release their personal health information to the pre-authorized individuals

Return to Work

1026.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the process through which an employee, who has been off work for an extended period of time due to an injury or illness, may return to work.

1026.1.1 DEFINITIONS

Definitions related to this policy include:

Interactive process - An informal meeting between employer and employee, designed to identify the precise limitations resulting from a disability and any potential reasonable accommodations that could overcome those limitations and allow the employee to return to work, either in their usual and customary position or some other type of work.

1026.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to assist injured employees, to the extent reasonably practicable, in returning to work as soon as they are medically able to perform meaningful work for the Department.

1026.3 EMPLOYEE RESPONSIBILITIES

It is the employee's responsibility to inform the Department of his/her absence and to immediately advise the Department when the employee believes that he/she will be medically released to return to work, with or without restrictions. If practicable, the employee shall provide advance notice of his/her potential return to work and shall provide written medical verification of the clearance and any restrictions.

If an employee has restrictions prescribed by a qualified health care professional, it is the responsibility of the employee to ensure he/she is not performing work that violates any restriction. If the employee believes he/she has been requested or directed to perform work that violates the restrictions, the employee should make a prompt report to the Fire Chief.

1026.4 DEPARTMENT RESPONSIBILITIES

The Department will evaluate the employee's request to return to work and the written medical verification, and will consult with the Fire Chief in order to make a determination whether:

- (a) The employee may return to full duty based on the medical verification provided by the employee.
- (b) The employee may return to work to a temporary modified-duty assignment and whether the Department has a need that fits with the employee's restrictions.
- (c) The employee should have a fitness-for-duty evaluation.
- (d) The employee has reached a permanent and stationary rating and it is necessary to engage in an interactive process to determine a reasonable accommodation.

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The Board of Directors, should make a recommendation regarding the status of the employee. The Board of Directors should communicate with the employee about plans for the employee to return to work.

Line-of-Duty Deaths

1027.1 PURPOSE AND SCOPE

The purpose of this policy is to provide the necessary guidelines and protocol for a line-of-duty death.

The death of any department member while on-duty, while traveling in connection with such duty, or while engaged in firefighting or EMS activities off-duty is considered a line-of-duty death. The death of any department member while undergoing medical treatment for any injury or disease potentially resulting from a job duty may be medically determined to be a line-of-duty death and for purposes of this policy may be handled as a line-of-duty death.

This policy defines and describes the guidelines and responsibilities to be followed in the event of a line-of-duty death and can be escalated in the event of multiple deaths or when a number of department members are seriously injured.

1027.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to assist and support the family members and coworkers of fallen members to the extent reasonably practicable, while also investigating the cause of death, making appropriate notifications, and fielding press inquiries.

1027.3 RESPONSIBILITIES

1027.3.1 BOARD OF DIRECTORS

In the event of being notified of a line-of-duty death, the Board of Directors or the authorized designee should:

- (a) Conduct briefings in order to communicate activities to the assigned officers.
- (b) Make an announcement to the Department at the appropriate time. Immediately after the announcement, all flags at fire stations and other department facilities should be lowered to half-staff and all badges should be shrouded. Flags should remain at half-staff and badges shrouded for a specified time, but in no event should that be for longer than 14 days.
- (c) Request that the Board of Directors Division assemble personal data, such as date of birth, file photograph, marital status, dependents, and names of next of kin, to facilitate the application for state and federal line-of-duty death benefits.
- (d) Assign a chief officer to act as the auditing officer to secure the personal effects of the deceased and deliver them to the Board of Directors .
- (e) Assign a Family Support Liaison to facilitate communication between the deceased member's family and the Department.
- (f) Document all actions, contacts, requests, and other pertinent data.
- (g) Preserve any equipment, turnouts, and breathing apparatus used by the deceased firefighter for the investigation.

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The Board of Directors should determine if it is necessary to request outside resources to assist in the staffing or investigation of the incident, as needed.

1027.3.2 CAPTAIN

In the event of a line-of-duty death, the Captain or the authorized designee shall:

- (a) Secure the scene of the incident with the assistance of the Incident Commander, fire prevention personnel, and local law enforcement.
- (b) Immediately notify the Fire Chief and the Board of Directors.
- (c) Preserve any equipment, turnouts, and breathing apparatus used by the deceased firefighter for the investigation.
- (d) Preserve all tactical worksheets, video, and/or audiotapes for the investigation.
- (e) Gather all available information concerning the incident and circumstances leading to the death.
- (f) Consider the need for members who may need or request Critical Incident Stress Debriefing (CISD) services.

1027.3.3 FIRE CHIEF

In the event of a line-of-duty death, the Fire Chief shall:

- (a) Collect facts of the incident from the Captain or the authorized designee and keep in contact to maintain available current information and direction on what information should be released.
- (b) Withhold any release of personal information relating to the member's death pending notification of next of kin and until approval is given by the Fire Chief.
- (c) Instruct the involved incident crews that they shall not release any statements to the media or anyone else and should direct any inquiries to the Fire Chief.
- (d) Prepare a written press release.
- (e) Ensure that the release of any member medical information complies with the Health Insurance Portability and Accountability Act (HIPAA) and the Release of HIPAA Protected Information Policy in this manual.

1027.3.4 AUDITING OFFICER

The auditing officer is responsible for ensuring the security and proper disposition of the personal effects of a member in the event of a line-of-duty death. Personal effects include all property owned by the deceased member that are kept on department property, as well as personal items carried by the member once those items have been released by investigators, in accordance with the Line-of-Duty Death Investigations Policy.

In the event of a member's line-of-duty death, whether on- or off-duty, the following steps shall be followed in gathering and disposing of personal effects:

- (a) All personal effects at the station house shall be taken to the Board of Directors Division to be kept in a secure location.

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- (b) The deceased member's vehicle will be secured at the work site and the keys forwarded to the Board of Directors division and secured.
- (c) A designee from the Board of Directors Division should conduct an inventory of all personal items received and make a written report.
- (d) The next of kin will be given priority consideration to receive the member's property. Care should be exercised in selecting a tactful time for the delivery of personal effects to the next of kin. Documentation is required indicating the date, time, and location of the disposition of the property. The name and the relationship of the individual accepting the property will also be noted. The documentation will be forwarded to the Board of Directors Division for placement in the deceased member's personnel file.

1027.3.5 BOARD OF DIRECTORS DIVISION

The Board of Directors Division will have the following responsibilities:

- (a) Receive, inventory, and secure the deceased member's personal belongings and hold them until such time as the investigation team approves their release.

1027.4 FAMILY SUPPORT LIAISON

The appointed family support liaison should conduct all duties in accordance with the Family Support Liaison Policy.

1027.5 FUNERAL ARRANGEMENTS

Funeral arrangements should be made in accordance with the Funerals Policy.

1027.6 LINE-OF-DUTY DEATH INVESTIGATIONS

For line-of-duty death investigation procedures, see the Line-of-Duty Death Investigations Policy.

Line-of-Duty Death and Injury Notification

1028.1 PURPOSE AND SCOPE

The purpose of this policy is to describe the communication activities that should occur in the event a member is seriously injured or killed in the line of duty. The policy establishes a priority for notifications, outlines steps for conducting each set of notifications, and identifies roles and responsibilities.

1028.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to ensure to the extent reasonably practicable that immediate and compassionate notification is made to the family of members who are injured, hospitalized, or killed in the line of duty. The Department shall make it a priority to offer assistance and support to the member's family.

1028.3 PROCEDURE

- (a) For the purpose of this policy, an injury or hospitalization is defined as a medical condition that is life threatening or has the potential to disable the member for a substantial period of time.
- (b) The Incident Commander or Captain at the scene of the injury or death will immediately notify the Fire Chief and provide the necessary information.
- (c) The Fire Chief will be the point of contact for making assignments and will coordinate actions with the Board of Directors and others.
- (d) All inquiries related to the incident should be referred to the Incident Commander, the Fire Chief, or the Captain, as appropriate.
- (e) In the event of the death of a member, the Captain must immediately initiate the procedures in the Line-of-Duty Death Investigation Policy.

1028.4 DEATH NOTIFICATIONS

The Fire Chief, in coordination with Board of Directors or the authorized designee, will assign a two-person notification team consisting of either a Captain and department chaplain or two Captains to locate and inform the member's family. If more than one member has been injured or killed in an incident, separate teams will be assigned to each affected family. The team should:

- (a) Contact the Board of Directors division to obtain information regarding the employee's next of kin.
- (b) Call-back operations staff, if necessary.

1028.4.1 NOTIFICATION TEAM RESPONSE

The notification team shall make the necessary family notification as quickly as practicable, with the goal of making the notification within two hours of the Captain learning of the injury or death. The following should be considered when planning the notification:

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1028.4.2 NOTIFYING THE FAMILY

The team members should adhere to the following notification guidelines:

- (a) The team should not park directly in front of the family's home or workplace. The person who will make the notification should make introductions at the door and ask to be invited in.
- (b) In most cases, if a chaplain is part of the notification team, the chaplain should make the notification.
- (c)
- (d) Notification should be made briefly and directly.
- (e) Information regarding precipitating factors or information that is not verified should not be provided until an investigation has been completed.
- (f) Team members should communicate the support and sympathy of the Board of Directors and all members of the Department.
- (g) Team members should ask family members whether they would like the team to notify other parties, such as clergy or grief counselors.

1028.4.3 NOTIFICATION OF FAMILY OUT OF THE AREA

If the immediate next of kin of the deceased employee lives more than two hours away, the Captain may make arrangements to have someone in the family's area make the notification. The following should be considered:

- (a) Whether the notification should be made by the local clergy or another person in the area who has a relationship with the family.
- (b) Whether the fire department in the family's city of residence may be the most appropriate entity to make the notification or whether that department can assist in obtaining information about the family.
- (c) Whoever is selected to make the notification should be provided with the information contained in this policy.
- (d) The notification plan must include a coordinated telephone call with the family and the Fire Chief.
- (e) The Fire Chief or the authorized designee should be prepared to speak to the family by phone as soon as the notification is made.

1028.4.4 INTERNAL DEPARTMENT NOTIFICATIONS

The following internal notifications should be made in advance of any media release:

- (a) All on-duty Captains should be notified.
- (b) All employees should be notified as soon as possible after the family notification is made.

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1028.4.5 GOVERNING BODY AND LABOR NOTIFICATIONS

The Captain will ensure that additional notifications are made as required, after the next-of-kin notification. Notifications that are required as soon as practicable after a confirmed line-of-duty death or injury include the following:

- (a) Elected officials or board of directors
- (b) Board of Directors
- (c) Employee labor representatives
- (d) Department safety officer who will make the necessary notifications.
- (e) Other notifications as determined by the Board of Directors

1028.4.6 EXTERNAL NOTIFICATIONS

The following external notifications will be made:

- (a) Notification to other local county fire agencies
- (b) Notification to the California Governor's Office of Emergency, Fire and Rescue Branch, should be made for a line-of-duty death.
- (c) Notification to the California Office of Emergency Services (OES) Fire and Rescue Operational Area Coordinator

1028.5 FAMILY SUPPORT

The Captain should appoint a Family Support Liaison, who should refer to the Family Support Liaison Policy for duties and responsibilities.

In the event of a line-of-duty death, the Board of Directors or the authorized designee should appoint a funeral detail officer to administer the Funerals Policy.

1028.6 NEWS MEDIA RELATIONS

It is the policy of the Bear Valley - Indian Valley Fire Protection District to follow the News Media Relations Policy when communicating with the media. In the case of a line-of-duty death, additional considerations include, but are not limited to the following:

- (a) The employee's family must have received proper notification prior to any information regarding the identity of the deceased being released to the media.
- (b) All information must be validated prior to its release to the media.

The PIO or the authorized designee shall be the spokesperson on most aspects of these events. However, the announcement or confirmation of a line-of-duty death and/or the release of the employee's name should be made by the Board of Directors or the authorized designee.

Prior to confirmation that the employee's family has been notified, no details will be released concerning the death. If the news media is on-scene and aware of the death, the Fire Chief will simply confirm that a death has occurred and communicate the department's compassion and concern for the employee's family and colleagues. The Fire Chief will advise the media that the

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full details will be provided as soon as they are known and after proper notification of next of kin has been made.

If an employee death occurs in the midst of ongoing news coverage of a fire or other emergency, the Fire Chief will focus on handling the details concerning the death. Another trained spokesperson will be assigned to handle the media relations for the incident.

1028.7 SERIOUSLY INJURED OR HOSPITALIZED EMPLOYEE

All of the notification and support procedures described in this policy for a line-of-duty death should be applied to any instance of an employee who has been seriously injured in the line of duty, except as noted below:

- (a) If the injured employee has been taken to a hospital, a Fire Chief should assign a Captain who is not involved in the incident, to go to the hospital and become the hospital liaison.
- (b) The Captain should establish communications with the hospital and report regularly to the Fire Chief on the employee's condition.
- (c) A representative of the employee's labor organization will also be sent to the hospital, if possible.

The hospital liaison and labor representative should work cooperatively for the benefit of the employee and the employee's family. In addition, the Fire Chief should ensure close coordination with the treating medical facility.

1028.8 INJURY OR HOSPITALIZATION NOTIFICATION TEAM

The same practices and procedures detailed in **DEATH NOTIFICATIONS** shall apply to an employee who is seriously injured in the line of duty.

Family and Medical Leave

1031.1 PURPOSE AND SCOPE

The purpose of this policy is to provide general guidance for managing unpaid leave for eligible employees for qualified medical and family reasons, including (29 USC § 2612; Government Code § 12945.1; Government Code § 12945.2):

- The birth, adoption, or foster care placement of a child.
- To care for an immediate family member with a serious health condition.
- When an employee is unable to work because of his/her own serious health condition.
- To care for a spouse, son, daughter, parent, or next of kin service member of the United States Armed Forces who has a serious injury or illness incurred in the line of duty. Under the California Family Rights Act (CFRA), this includes care for a domestic partner.
- Under CFRA, leave due to a qualifying exigency (as defined in Unemployment Insurance Code § 3302.2) related to the covered active duty or call to active duty of an employee's spouse, domestic partner, child, or parent in the Armed Forces of the United States.

This policy does not address all possible situations and circumstances that may arise when an employee requests leave for family or medical reasons. As these leave situations arise, supervisors should consult with the Board of Directors or legal counsel to obtain specific guidance regarding leave rights and obligations.

Nothing in this policy supersedes any provision of any collective bargaining agreement, civil service or other local rule, or any law that provides greater family or medical leave rights.

1031.1.1 DEFINITIONS

Definitions related to this policy include:

CFRA - California Family Rights Act (Government Code § 12945.1; Government Code § 12945.2).

Child - A child under the age of 18 years of age, or 18 years of age or older who is incapable of self-care because of a mental or physical disability (29 USC § 2611; 29 CFR 825.102; 29 CFR 825.122). An employee's child is one for whom the employee has actual day-to-day responsibility for care and includes a biological, adopted, or foster child; stepchild; or a child for whom the employee is standing in loco parentis (in place of a parent). Under CFRA, a child includes a legal ward and child of a domestic partner (Government Code § 12945.2).

FMLA - The federal Family and Medical Leave Act (29 USC § 2601 et seq.).

Qualified health care professional - A physician, surgeon, doctor of osteopathy, podiatrist, dentist, psychologist, optometrist, nurse practitioner, nurse midwife, clinical social worker, or physician assistant duly licensed and authorized to practice medicine; chiropractors for some purposes; any health care provider from whom the department benefits plan will accept

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certification of the existence of a serious health condition to substantiate a claim for benefits (29 CFR 825.125).

Spouse - The person with whom an employee has entered into a marriage as defined or recognized by the location in which the marriage was entered into (29 USC § 2611; 29 CFR 825.102; 29 CFR 825.122).

Family member(under CFRA) - A child, parent, grandparent, grandchild, sibling, spouse, or domestic partner as defined in Family Code § 297, or a designated person as defined by Government Code § 12945.2.

Family member(under FMLA) - A spouse, child, or parent as defined by 29 CFR 825.122.

1031.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to manage unpaid leave for eligible employees for qualified medical and family reasons in compliance with federal and state law and any applicable collective bargaining agreement.

1031.3 ELIGIBLE EMPLOYEES

Employees are eligible for FMLA/CFRA after working for the Bear Valley - Indian Valley Fire Protection District for at least one year and completing 1,250 hours over the 12 months prior to the commencement of the leave (29 USC § 2611; 29 CFR 825.110; Government Code § 12945.2).

For leave under FMLA, employees may not be eligible for leave if there are less than 50 other employees within 75 miles of the employee's work site (29 USC § 2611; 29 CFR 825.110).

1031.4 TYPE AND DURATION OF LEAVE

Generally, eligible employees are entitled under FMLA/CFRA to 12 work weeks of unpaid leave during a 12-month period (29 USC § 2612; 29 CFR 825.100). Up to 26 weeks of unpaid leave during a single 12-month period may be available to care for certain injured military service members. The 12-month period is measured backward from the date leave is taken and continuously with each additional leave day taken.

1031.4.1 SERIOUS HEALTH CONDITIONS

Eligible employees may take up to 12 weeks of leave to care for a family member with a serious health condition or when the employee is unable to work because of his/her own serious health condition (29 USC § 2612(a)(1); 29 CFR 825.200; Government Code § 12945.2).

Under FMLA, if both spouses are employed by the Bear Valley - Indian Valley Fire Protection District, the combined number of work weeks to care for a sick parent is limited to 12 work weeks during any 12-month period (29 USC § 2612(f); 29 CFR 825.201).

Generally, a serious health condition is an illness, injury, impairment, or physical or mental condition that involves (29 USC § 2611; 29 CFR 825.113):

- An overnight stay in a hospital, hospice, or residential medical care facility (29 CFR 825.114).

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- Continuing treatment by a qualified health care professional due to a serious health condition of more than three full consecutive calendar days (29 CFR 825.115(a)).
- Any period of incapacity due to pregnancy complications or prenatal care (29 CFR 825.115(b)).
- A chronic condition which requires treatment (29 CFR 825.115(c)).
- A permanent condition for which treatment may not be effective (such as Alzheimer's or the terminal stages of a disease) (29 CFR 825.115(d)).
- Any period of absence to receive multiple treatments, including any recovery period, either for restorative surgery after an accident or other injury, or for a condition that would likely result in a period of incapacity of more than three consecutive calendar days without medical intervention or treatment (such as cancer chemotherapy or physical therapy for arthritis) (29 CFR 825.115(e)).

1031.4.2 BIRTH OR PLACEMENT OF A CHILD

Eligible employees may take up to 12 weeks of leave for the birth, adoption, or foster care placement of a child of the employee (29 USC § 2612; 29 CFR 825.200; Government Code § 12945.2). The leave must be concluded within one year of the birth or placement of the child (29 CFR 825.120; 29 CFR 825.121).

Under FMLA, if both parents are employed by the Bear Valley - Indian Valley Fire Protection District, the combined number of work weeks of leave is limited to 12 work weeks during any 12-month period (29 USC § 2612(f); 29 CFR 825.120; 29 CFR 825.121).

1031.4.3 MILITARY EXIGENCY LEAVE

Eligible employees may take service member leave of up to 12 weeks for qualifying exigencies occurring because a spouse, child, or parent is on covered active duty or has been notified of an impending order to active duty (29 USC § 2612(a)(1)(E); 29 CFR 825.200). This type of leave is available to a family member of a person in the National Guard, Reserves, or members of the regular Armed Forces deployed to a foreign country. Qualifying exigencies include (29 CFR 825.126):

- Addressing issues that arise from a short notice (seven or less days) deployment.
- Attending military events related to the active duty or call to duty.
- Attending family support or assistance programs.
- Making child care or educational arrangements or attending school activities arising from active duty or a call to active duty.
- Making financial and legal arrangements.
- Spending time with a military member who is on short-term rest-and-recuperation leave during a period of deployment.
- Attending post-deployment activities.

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- Addressing issues that arise from the death of a military member, such as making funeral arrangements.
- Caring for a military employee's parent who is incapable of self-care, such as providing care on an immediate need basis or arranging for alternative care.

1031.4.4 MILITARY CAREGIVER LEAVE

Eligible employees may take up to 26 weeks of leave in a single 12-month period to care for a spouse, son, daughter, parent, or next of kin who has incurred an injury or illness in the line of duty while on active duty in the Armed Forces, provided that such injury or illness may render the family member medically unfit to perform work (29 USC § 2612; 29 CFR 825.200).

Military caregiver leave is also available to family members of covered veterans who were members of the Armed Forces, including the National Guard or Reserves, at any point in the five years preceding the date on which the covered veteran undergoes medical treatment, recuperation, or therapy (29 USC § 2612; 29 CFR 825.127).

During the single 12-month period, employees are entitled to no more than a combined total of 26 weeks of FMLA leave. In any case in which both spouses are employed by the Bear Valley - Indian Valley Fire Protection District, the combined number of work weeks of leave is limited to 26 during any 12-month period (29 USC § 2612(f); 29 CFR 825.127).

Service member FMLA leave runs concurrent with other leave entitlements provided under federal, state, and local law. Where FMLA leave qualifies as both military caregiver leave and care for a family member with a serious health condition, the leave will be designated as military caregiver leave first.

1031.4.5 FAMILY MILITARY LEAVE

An employee who is a spouse or registered domestic partner of a member of the military who is deployed to designated combat zones is entitled to take up to 10 days unpaid leave (Military and Veterans Code § 395.10).

1031.4.6 INTERMITTENT LEAVE

An employee may take leave for the employee's own serious health condition, for the serious health condition of the employee's spouse, child, or parent, or to care for a covered service member with a serious injury or illness, intermittently or on a reduced schedule if medically necessary, and if that medical need can best be accommodated by an intermittent schedule as defined in federal law (29 USC § 2612(b); 29 CFR 825.202; 29 CFR 825.124).

Leave due to a military exigency may be taken on an intermittent or reduced-leave schedule (29 CFR 825.202).

Intermittent leave for the birth, adoption, or foster care placement of a child is only available if granted at the discretion of the Board of Directors, unless the employee has a serious health condition in connection with the birth or if the newborn child has a serious health condition (29 CFR 825.120; 29 CFR 825.121).

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Intermittent leave for any employee shall be tracked and calculated.

1031.4.7 PREGNANCY DISABILITY LEAVE

FMLA is separate and distinct from disability leave for pregnant employees. Pregnant employees may be entitled to a disability leave as provided in the Pregnancy Disability Leave Policy in addition to any FMLA/CFRA leave.

1031.4.8 LEAVE FOR VICTIMS OF CRIME OR ABUSE

Eligible employees may take leave if the employee is the victim of a crime, abuse, or sexual assault and needs leave for any of the purposes specified in Labor Code § 230.1. Reasonable advance notice of leave is required except in cases where notice is not feasible. Information relating to this leave shall be kept confidential to the extent permitted by law (Labor Code § 230.1).

The Department shall provide written notice of the rights specified in this section to newly hired employees and upon request (Labor Code § 230.1).

1031.5 EMPLOYEE BENEFITS WHILE ON LEAVE

While on leave, employees will continue to be covered by any group health insurance to the same extent that coverage is provided while the employee is on the job (29 USC § 2614(c); 29 CFR 825.209). However, employees will not continue to be covered under non-health benefit plans.

Employees are responsible for any health plan employee contributions while on leave (29 CFR 825.210). Employee contribution rates are subject to any change in rates that occurs while the employee is on leave. If an employee fails to return to work after his/her leave entitlement has been exhausted or expires, the Department may recover its share of health plan premiums for the entire leave period unless the employee does not return because of the continuation, recurrence, or onset of a serious health condition of the employee or his/her family member that would entitle the employee to leave, or because of circumstances beyond the employee's control (29 CFR 825.213). The Department may recover premiums through deduction from any sums (e.g., unpaid wages, vacation pay).

Employees may not earn additional time off while on unpaid leave.

1031.6 SUBSTITUTION OF PAID ACCRUED LEAVES

Subject to applicable collective bargaining agreements and civil service rules, employees are required to exhaust all applicable paid leave before taking unpaid leave. Paid accrued leave includes vacation leave, sick leave, personal leave, and compensatory time earned in lieu of overtime, pursuant to the Fair Labor Standards Act, during FMLA and/or CFRA leave. Employees may not use paid accrued leave to extend FMLA/CFRA leave beyond 12 work weeks per year.

1031.6.1 USE OF SICK LEAVE

Employees are required to first exhaust paid sick leave concurrently with FMLA/CFRA leave if the leave is for the employee's own serious health condition.

Employees may choose to use paid sick leave concurrently with leave under this policy (Labor Code § 233):

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- To care for a family member (as defined by Labor Code § 245.5) with a serious health condition.

1031.7 USE OF FMLA/CFRA LEAVE

If an employee takes a leave of absence for any reason that is FMLA/CFRA-qualifying, the Department may designate that non-FMLA/CFRA leave as running concurrently with the employee's 12-week FMLA/CFRA leave entitlement. The only exception is for Firefighters who are on workers' compensation leave pursuant to Labor Code § 4850.

1031.8 PROCEDURES

The following procedures will apply for all employees requesting leave under FMLA/CFRA:

- (a) When a leave is requested for a medical or other FMLA/CFRA-related treatment appointment, the employee must make a reasonable effort to schedule the appointment at a time that minimizes disruption to the department's operations (29 USC § 2612; 29 CFR 825.302).
- (b) An employee who wishes to take FMLA/CFRA must provide his/her supervisor with 30 days' advance notice when the leave is foreseeable or as soon as practicable if the need for leave is not foreseeable (29 USC § 2612; 29 CFR 825.302; 29 CFR 825.303).
- (c) At the time of the request, the employee must complete a FMLA/CFRA request form.

Requests for medical leave shall be accompanied by a qualified health care professional statement, including the date on which the serious health condition began and the estimated date of return to work (29 USC § 2613; 29 CFR 825.302).

Once the leave is requested or designated by the Department, the supervisor should forward the request and any medical certifications to the Board of Directors and ensure the employee is provided the necessary forms and FMLA/CFRA information within five days (29 CFR 825.300).

Employees are required to provide medical certification of a qualified health care professional or military documentation, if requested (29 CFR 825.305; 29 CFR 825.308; 29 CFR 825.309; 29 CFR 825.310).

Employees shall be required to periodically report on their status and intent to return to work (29 USC § 2614; 29 CFR 825.311). This may assist in avoiding a delay in reinstatement when the employee is ready to return to work.

Employees returning from a medical leave from the employee's own serious health condition will be required to present medical verification from a qualified health care professional of the employee's ability to return to work and a list of any restrictions that need to be accommodated (29 USC § 2614; 29 CFR 825.100; 29 CFR 825.312).

1031.9 REINSTATEMENT FOLLOWING LEAVE

Generally, employees returning from FMLA/CFRA within the qualified period will be restored to their original job or to an equivalent job with equivalent pay and benefits (but not seniority), unless

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the employee would not otherwise have been employed at the time reinstatement is requested (e.g., in the case of a layoff) (29 USC § 2614; 29 CFR 825.214; 29 CFR 825.216).

If the same position is no longer available, such as in a layoff, the employee will be entitled to a position that is comparable in pay, job content, and promotional opportunities and geographic location, if such a comparable position exists.

If upon return from leave an employee is unable to perform the essential functions of the job because of a physical or mental disability, the supervisor should work with the Board of Directors or legal counsel to engage in an interactive process with the employee to identify a potential reasonable accommodation.

After exhausting paid FMLA/CFRA leave, non-paid leave will continue until the conclusion of the protected 12- or 26-week time limit. Following the protected leave, the Board of Directors, in consultation with the legal counsel or the Board of Directors, will determine whether non-FMLA/CFRA leave should apply.

1031.10 RESPONSIBILITY

Supervisors should work with the Board of Directors or legal counsel regarding questions relating to leave or reinstatement from leave under this policy. The Board of Directors should advise the supervisor and inform members of their rights and responsibilities.

1031.11 RECORDS

The Department will maintain leave-related records as required by 29 CFR 825.500 for at least three years and in compliance with the department's established records retention schedule.

Records and documents related to doctor certifications and other medical information created for purposes of complying with FMLA/CFRA and this policy shall be maintained as confidential medical records in separate files from employee personnel files.

1031.12 NOTICE TO EMPLOYEES

The Board of Directors should ensure that a notice explaining the FMLA's provisions and procedures is prominently posted in conspicuous places in the Department where it can be readily seen by all employees and applicants for employment. Electronic posting is sufficient as long as the other posting requirements have been met as provided by 29 CFR 825.300 (29 CFR 825.300).

Pregnancy Disability Leave

1033.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for the Bear Valley - Indian Valley Fire Protection District to manage pregnancy disability leave in accordance with the California Fair Employment and Housing Act (FEHA) (Government Code § 12945; 2 CCR 11040) and the Pregnancy Discrimination Act of 1978 (42 USC § 2000e(k)).

1033.1.1 DEFINITIONS

Definitions related to this policy include:

Interactive process - An informal meeting between employer and employee, designed to identify the precise limitations resulting from a disability and any potential reasonable accommodations that could overcome those limitations and allow the employee to return to work, either in their usual and customary position or some other type of work.

1033.2 POLICY

The Bear Valley - Indian Valley Fire Protection District recognizes pregnancy as a disability and shall treat pregnant members in a manner consistent with other members with disabilities. The Department shall defer to a pregnant member's qualified health care provider in assessing the member's ability to work.

1033.3 ELIGIBLE MEMBERS

Members who are disabled by pregnancy, childbirth or related medical conditions are eligible for pregnancy disability leave. There is no required minimum amount of service time or number of hours worked in order to be eligible (2 CCR 11037).

1033.4 TIME AND DURATION OF LEAVE

Under certain circumstances, an eligible member may be entitled to take pregnancy disability leave of up to four months and leave allowed under the Family and Medical Leave Act (FMLA) of up to 12 weeks, for a combined total of approximately seven months.

Members may take up to four months of pregnancy disability leave per pregnancy for any actual disability caused by pregnancy, childbirth or related medical conditions (Government Code § 12945).

Pregnancy disability leave need not be taken in one continuous period of time and may be taken intermittently, on an as-needed basis (2 CCR 11042).

Time off needed for prenatal care, severe morning sickness, doctor-ordered bed rest, childbirth and recovery from childbirth is allowed by pregnancy disability leave.

If affected by pregnancy, childbirth or related medical conditions, a member may be permitted to transfer to a less strenuous or hazardous position or to less strenuous or hazardous duties, if such a transfer is recommended by the member's physician after reviewing the member's job description and required duties (2 CCR 11041).

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A member may also receive reasonable accommodation for conditions related to pregnancy, childbirth or related medical conditions, if recommended by a qualified health care professional (Government Code § 12945(3)).

1033.5 BENEFITS DURING LEAVE

A member on pregnancy disability leave may receive any group health insurance coverage that was provided before the leave (2 CCR 11044; Government Code § 12945) if:

- (a) The member is eligible for concurrent family medical leave.
- (b) The member has not already exhausted the 12-week group health insurance coverage benefit in the current FMLA eligibility period.

The Department shall maintain and pay for the coverage for the duration of the leave as required in Government Code § 12945(2).

The Department may recover premiums it paid to maintain health coverage, as provided by FMLA laws and Government Code § 12945(2), if a member does not return to work following pregnancy disability leave.

A member on pregnancy disability leave, who is not eligible to receive group health insurance coverage, may receive health insurance coverage in conjunction with Consolidated Omnibus Budget Reconciliation Act (COBRA) guidelines by making monthly premium payments to the District.

Sick leave, vacation leave and seniority do not accrue while a member is on unpaid pregnancy disability leave.

1033.6 USE OF OTHER LEAVES

Members are required to use accrued sick leave for any authorized pregnancy disability leave. At the member's option, accrued vacation or other accrued time off may be applied toward the pregnancy disability leave. If no accrued sick or vacation leave is available, pregnancy disability leave is unpaid (2 CCR 11044).

Pregnancy disability leave will run concurrently with FMLA and any short-term disability leave for those members who are eligible for both.

1033.7 PROCEDURE

The following procedures apply to all members requesting pregnancy disability leave:

- (a) Members who wish to take pregnancy disability leave shall provide their supervisor with 30 days of advance notice if the need for leave is foreseeable or as soon as practicable if the need for leave was not foreseeable (2 CCR 11050). The 30-day advance notice may be waived with the supervisor's written approval.
- (b) A member shall submit a written request for pregnancy disability leave approved by the member's supervisor or the Board of Directors before the leave begins. The request shall be supported by a written certification from a physician or qualified health care

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professional that the member is disabled from working by pregnancy, childbirth or a related medical condition. The certification must state the expected duration of the disability and the expected date of return to work (Government Code § 12945; 2 CCR 11050).

- (c) The supervisor should forward requests for pregnancy disability leave, including medical certifications, to the Board of Directors and ensure that the pregnancy disability leave or transfer request is responded to as soon as practicable and in no event later than 10 days after receiving the request (2 CCR 11050).
- (d) Members shall submit any request for an extension of leave in writing to their supervisor prior to the agreed date of return. The request for extension must be supported by a written certification from the attending physician that the member continues to be disabled by pregnancy, childbirth or a related medical condition.
- (e) Members returning from pregnancy disability leave shall provide a written statement from a qualified health care professional attesting that the member is fit to return to full duty (2 CCR 11050).

1033.8 REINSTATEMENT FOLLOWING LEAVE

Upon the expiration of pregnancy disability leave or transfer, and the department's receipt of a written return to full duty certification, the member will be reinstated to her original or an equivalent position, unless the position has been eliminated for a legitimate business reason during the leave (2 CCR 11043).

If the same position is no longer available, as in a layoff, the member will be entitled to a position that is comparable in pay, location, job content, promotional opportunity and geographic location if such a comparable position exists.

If upon return from pregnancy disability leave a member is unable to perform the essential functions of the job because of a disability, the member's supervisor should work with the Board of Directors or legal counsel to engage in an interactive process with the member to identify a potential reasonable accommodation.

1033.9 RESPONSIBILITY

Supervisors should work with the Board of Directors to review requests for leave and any request to return to duty under temporary modified duty limitations. The Board of Directors should advise the supervisor and inform members of their rights and responsibilities. Also see the Temporary Modified Duty Assignments Policy and the Return to Work Policy.

1033.10 RECORDS

The Department will maintain leave-related records for at least four years or in compliance with the department's established record retention schedule (Government Code § 12946).

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Records and documents related to doctor certifications and other medical information created for purposes of complying with FMLA/California Family Rights Act (CFRA) and this policy shall be maintained as confidential medical records in separate files from the member's personnel files.

Driver License Requirements

1034.1 PURPOSE AND SCOPE

The purpose of this policy is to establish procedures to ensure that all Bear Valley - Indian Valley Fire Protection District members who drive as a part of their duties have and maintain required driving licenses.

1034.2 POLICY

In order to promote driver safety, it is the policy of the Bear Valley - Indian Valley Fire Protection District that any member who is assigned duties that require him/her to drive department vehicles or equipment, or drive a privately owned vehicle while conducting department business, has and maintains driving privileges and licenses consistent with their duties.

1034.3 REQUIREMENTS

Any member who is assigned duties that require him/her to drive department vehicles, equipment or private vehicles shall be required to obtain and maintain a valid driver license and complete and sign a Department of Motor Vehicles (DMV) Authorization to Release Driver Record (Form INF 1101) (Vehicle Code § 12500(a); Vehicle Code § 12500(d)).

The Fire Chief will ensure that the both the form and a Government Employer Pull Notice Form (INF 1103) to enroll the member in the DMV Employer Pull Notice (EPN) Program are submitted to the DMV.

Enrollment in the EPN program will result in the DMV generating a driver license report for the Department for each member annually and any time one of the following occurs:

- Conviction
- Failure to appear
- Collision
- Driver license suspension or revocation
- Any other action taken against the driving privilege
- Expiration of medical certification for a commercial driver license

Any member who is assigned duties that require him/her to operate firefighting equipment, including a tiller operator, is also required to obtain and maintain a Class A or B license appropriate for the size and configuration of the firefighting equipment or a firefighter endorsement issued by the DMV in addition to obtaining and maintaining a class C license, a restricted class A license, or a non-commercial class B license (Vehicle Code § 12804.11).

1034.3.1 REVIEW OF RECORDS

The Board of Directors shall appoint an officer to monitor the driving records of all members who are assigned duties that require driving while conducting department business, to confirm each driver has a valid driver license and to monitor driving records for potential problem behavior.

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Driver License Requirements

The employee appointed to monitor driving records shall be responsible for reviewing the driver license reports as part of the hiring process and any time an incident occurs that affects a member's eligibility to drive.

Whenever the employee appointed to monitor driving records becomes aware of changes that could affect a member's eligibility to drive, the employee should notify the affected member, the member's immediate supervisor and the Health and Safety Officer.

When a member leaves employment, the employee appointed to monitor driving records shall complete and submit to the DMV the appropriate form to delete the member from the EPN program.

1034.3.2 NEW EMPLOYEES

Prospective member driving records shall be evaluated to confirm that the applicant has a valid driver license and to review the type and number of traffic violations and collisions on the record.

At the time of hire, a new member whose duties require driving a vehicle while conducting department business shall be required to present a valid license.

1034.3.3 CURRENT EMPLOYEES

Driving records of existing members shall be evaluated to confirm that the member has a valid driver license and to review any traffic violations and collisions.

Any member who drives a vehicle while conducting department business must immediately notify his/her supervisor of any suspension, revocation or other change in the status of the driver license. Any violation of this procedure may result in disciplinary action, up to and including termination.

Any member who does not possess a valid license shall not drive any vehicle while conducting department business.

If a member's driver license is suspended, revoked or becomes invalid, the Department may, at its discretion, take any combination of the following actions:

- (a) Assign a member to duties which do not require driving, for up to 60 calendar days from the date of the DMV report, to allow the member an opportunity to seek the reinstatement of his/her driver license, provided:
 - 1. The member can still perform the majority of his/her job duties.
 - 2. There is minimal impact on the department work output.
- (b) Place a member on leave without pay for up to a maximum of six months from the date of the DMV report pending license reinstatement, or up to a maximum of four months if the member has already been assigned to non-driving duties for 60 calendar days.

Any member who is unable to obtain reinstatement of his/her driver license may be subject to disciplinary action, up to and including termination.

Nepotism and Conflicting Relationships

1035.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure equal opportunity and effective employment practices by avoiding actual or perceived favoritism, discrimination or actual or potential conflicts of interest by or between members of this department (Government Code § 12940). These employment practices include: recruiting, testing, hiring, compensation, assignment, promotion, use of facilities, access to training opportunities, supervision, performance appraisal, discipline and workplace safety and security.

1035.1.1 DEFINITIONS

Definitions related to this policy include:

Business relationship - Serving as an employee, independent contractor, compensated consultant, owner, board member, shareholder or investor in an outside business, company, partnership, corporation, venture or other transaction, where the employee's annual interest, compensation, investment or obligation is greater than \$250.

Conflict of interest - Any actual, perceived or potential conflict of interest in which it reasonably appears that an employee's action, inaction or decisions are or may be influenced by the employee's personal or business relationship.

Nepotism - The practice of showing favoritism to relatives over others in appointment, employment, promotion or advancement by any public official in a position to influence these personnel decisions.

Personal relationship - Includes marriage, cohabitation, dating or any other intimate relationship beyond mere friendship.

Public official - A supervisor, officer or employee vested with authority by law, rule or regulation or to whom authority has been delegated.

Relative - An employee's parent, stepparent, spouse, domestic partner, significant other, child (natural, adopted or step), sibling or grandparent.

Subordinate - An employee who is subject to the temporary or ongoing direct or indirect authority of a supervisor.

Supervisor - An employee who has temporary or ongoing direct or indirect authority over the actions, decisions, evaluation and/or performance of a subordinate employee.

1035.2 POLICY

The Bear Valley - Indian Valley Fire Protection District is committed to fair and equitable treatment of all members and to creating a work atmosphere that is free of both actual and apparent conflicts of interest that could compromise this principle.

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Nepotism and Conflicting Relationships

1035.3 RESTRICTED DUTIES AND ASSIGNMENTS

The Department will not prohibit all personal or business relationships between employees. However, in order to avoid nepotism or other inappropriate conflicts, the following reasonable restrictions shall apply:

- (a) Employees are prohibited from directly supervising, occupying a position in the line of supervision or being directly supervised by any other employee whenever possible who is a relative or with whom they are involved in a personal or business relationship.
 - 1. If circumstances require that such a supervisor/subordinate relationship exist, the supervisor shall make every reasonable effort to defer matters pertaining to the involved employee to an uninvolved supervisor.
 - 2. When personnel and circumstances permit, the Department will attempt to make every reasonable effort to avoid placing such employees in supervisor/subordinate situations. The Department, however, reserves the right to transfer or reassign any employee to another position within the same classification in order to avoid conflicts with any provision of this policy.
- (b) Employees are prohibited from participating in, contributing to or recommending promotions, assignments, performance evaluations, transfers or other personnel decisions affecting an employee whenever possible who is a relative or with whom they are involved in a personal or business relationship.
- (c) Whenever possible, trainers should not be assigned to train relatives. Whenever possible trainers are prohibited from entering into or maintaining personal or business relationships with any member they are assigned to train until such time as the training has been successfully completed and, if an employee, off probation.
- (d) To avoid actual or perceived conflicts of interest, members of this department should refrain from developing or maintaining personal or financial relationships with victims, witnesses or other individuals during the course of or as a direct result of any official contact.
- (e) Except as required in the performance of official duties or, in the case of immediate relatives, employees shall not develop or maintain personal or financial relationships with any individual they know or reasonably should know is under criminal investigation, is a convicted felon, parolee, fugitive or registered sex or arson offender or who engages in serious violations of state or federal laws.

1035.3.1 EMPLOYEE RESPONSIBILITY

Prior to entering into any personal or business relationship or other circumstance which the employee knows or reasonably should know could create a conflict of interest or other violation of this policy, the employee shall promptly notify his/her uninvolved, next highest level of supervisor.

Whenever any employee is placed in circumstances that would require the employee to take enforcement action or provide official information or services to any relative or individual with whom the employee is involved in a personal or business relationship, the employee shall promptly notify his/her uninvolved, immediate supervisor. In the event that no uninvolved supervisor is

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immediately available, the employee shall promptly notify dispatch to have another uninvolved employee either relieve the involved employee or minimally remain present to witness the action.

1035.3.2 SUPERVISOR'S RESPONSIBILITY

Upon being notified of, or otherwise becoming aware of any circumstance that could result in or constitute an actual or potential violation of this policy, a supervisor shall take all reasonable steps to promptly mitigate or avoid such violations whenever possible.

Supervisors shall also promptly notify the Board of Directors of such actual or potential violations through the chain of command.

Member Speech, Expression, and Social Networking

1036.1 PURPOSE AND SCOPE

This policy is intended to address issues associated with member use of social networking sites and to provide guidelines for the regulation and balancing of member speech and expression with the needs of the Department.

Nothing in this policy is intended to prohibit or infringe upon any communication, speech or expression that is protected or privileged under law. This includes speech and expression protected under state or federal constitutions as well as labor or other applicable laws. For example, this policy does not limit an employee from speaking as a private citizen, about matters of public concern, such as misconduct or corruption.

Members are encouraged to consult with their supervisor regarding any questions arising from the application or potential application of this policy.

1036.1.1 APPLICABILITY

This policy applies to all forms of communication, including but not limited to film, video, print media, public or private speech, use of all internet services, including the web, email, file transfer, remote computer access, news services, social networking, social media, instant messaging, blogs, forums, video, and other file-sharing sites.

1036.2 POLICY

Public employees occupy a trusted position in the community, and thus, their statements have the potential to contravene the policies and performance of this department. Due to the nature of the work and influence associated with the fire profession, it is necessary that members of this department be subject to certain reasonable limitations on their speech and expression. To achieve its mission and efficiently provide service to the public, the Bear Valley - Indian Valley Fire Protection District will carefully balance the individual member's rights against the department's needs and interests when exercising a reasonable degree of control over its members' speech and expression.

1036.3 SAFETY

Members should consider carefully the implications of their speech or any other form of expression when using the internet. Speech and expression that may negatively affect the safety of the Bear Valley - Indian Valley Fire Protection District members, such as posting personal information in a public forum, can result in compromising a member's home address or family ties. Members should therefore not disseminate or post any information on any forum or medium that could reasonably be anticipated to compromise the safety of any member, a member's family, or associates. Examples of the type of information that could reasonably be expected to compromise safety include:

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- Disclosing the address of a fellow firefighter.
- Otherwise disclosing where another firefighter can be located off-duty.

1036.4 PROHIBITED SPEECH, EXPRESSION, AND CONDUCT

To meet the department's safety, performance and public-trust needs, the following is prohibited unless the speech is otherwise protected (for example, an employee speaking as a private citizen, including acting as an authorized member of a recognized bargaining unit, on a matter of public concern):

- (a) Speech or expression made pursuant to an official duty that tends to compromise or damage the mission, function, reputation, or professionalism of the Bear Valley - Indian Valley Fire Protection District or its members.
- (b) Speech or expression that, while not made pursuant to an official duty, is significantly linked to, or related to, the Bear Valley - Indian Valley Fire Protection District and tends to compromise or damage the mission, function, reputation, or professionalism of the Bear Valley - Indian Valley Fire Protection District or its members. Examples may include:
 1. Statements that indicate disregard for the law of the state or U.S. Constitution.
 2. Expression that demonstrates support for criminal activity.
 3. Participating in sexually explicit photographs or videos for compensation or distribution.
- (c) Speech or expression that could reasonably be foreseen as having a negative impact on the credibility of the member as a witness. For example, posting statements or expressions to a website that glorify or endorse dishonesty, unlawful discrimination, or illegal behavior.
- (d) Speech or expression of any form that could reasonably be foreseen as having a negative impact on the safety of the members of the Department.
- (e) Speech or expression that is contrary to the canons of the Firefighters' Code of Ethics as adopted by the Bear Valley - Indian Valley Fire Protection District.
- (f) Use or disclosure, through whatever means, of any information, photograph, video or other recording obtained or accessible as a result of employment with the Department for financial or personal gain, or any disclosure of such materials without the express authorization of the Board of Directors or the authorized designee.
- (g) Posting, transmitting, or disseminating any photographs, video or audio recordings, likenesses, or images of department logos, emblems, uniforms, badges, patches, marked vehicles, equipment or other material that specifically identifies the Bear Valley - Indian Valley Fire Protection District on any personal or social networking or other website or web page, without the express authorization of the Board of Directors.
- (h) Accessing websites for non-authorized purposes, or use of any personal communication device, game device or media device, whether personally or department owned, for personal purposes while on-duty, except in the following circumstances:

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Member Speech, Expression, and Social Networking

1. When brief personal communication may be warranted by the circumstances (e.g., inform family of extended hours).
2. During authorized breaks; however, such usage should be limited as much as practicable to areas out of sight and sound of the public and shall not be disruptive to the work environment.

Members must take reasonable and prompt action to remove any content, including content posted by others, that is in violation of this policy from any web page or website maintained by the member (e.g., social or personal website).

1036.4.1 UNAUTHORIZED ENDORSEMENTS AND ADVERTISEMENTS

While members are not restricted from engaging in the following activities as private citizens or as authorized members of a recognized bargaining unit, members may not represent the Bear Valley - Indian Valley Fire Protection District or identify themselves in any way that could be reasonably perceived as representing the Bear Valley - Indian Valley Fire Protection District in order to do any of the following, unless specifically authorized by the Board of Directors (Government Code § 3206; Government Code § 3252):

- (a) Endorse, support, oppose, or contradict any political campaign or initiative
- (b) Endorse, support, oppose, or contradict any social issue, cause, or religion
- (c) Endorse, support, or oppose any product, service, company, or other commercial entity
- (d) Appear in any commercial, social, or nonprofit publication or any motion picture, film, video, public broadcast, or on any website

Additionally, when it can reasonably be construed that a member, acting in an individual capacity or through an outside group or organization (e.g., bargaining group), is affiliated with this department, the member shall give a specific disclaiming statement that any such speech or expression is not representative of the Bear Valley - Indian Valley Fire Protection District.

Members retain their right to vote as they choose, to support candidates of their choice, and to express their opinions as private citizens, including as authorized members of a recognized bargaining unit, on political subjects and candidates at all times while off-duty. However, members may not use their official authority or influence to interfere with or affect the result of an election or a nomination for office. Members are also prohibited from directly or indirectly using their official authority to coerce, command or advise another member to pay, lend, or contribute anything of value to a party, committee, organization, agency, or person for political purposes (5 USC § 1502).

1036.4.2 POLITICAL ACTIVITY

The following rights are retained by firefighters by statute and are extended to all other members by the Bear Valley - Indian Valley Fire Protection District (Government Code § 3252).

- (a) No member shall be prohibited from engaging in political activity, unless otherwise prohibited by law, in violation of department policy, or any time a member is on-duty or in uniform.

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Member Speech, Expression, and Social Networking

- (b) Members shall not be coerced or required to engage in political activity.
- (c) A member can seek election to, or serve as a member of, the governing board of a school district or any local agency where the member is not employed, including but not limited to any city, county, special district, or political subdivision.

1036.5 PRIVACY EXPECTATION

Members forfeit any expectation of privacy with regard to emails, texts, or anything published, shared, transmitted, or maintained through file-sharing software or any internet site that is accessed, transmitted, received, or reviewed on any department technology system (see the Information Technology Use Policy for additional guidance).

The Department shall not require a member to disclose a personal username or password for accessing personal social media, or open a personal social website; however, the Department may request access when it is reasonably believed to be relevant to the investigation of allegations of work-related misconduct (Labor Code § 980).

1036.6 CONSIDERATIONS

In determining whether to grant authorization of any speech or conduct that is prohibited under this policy, the factors that the Board of Directors or the authorized designee should consider include:

- (a) Whether the speech or conduct would negatively affect the efficiency of delivering public services.
- (b) Whether the speech or conduct would be contrary to the good order of the Department or the efficiency or morale of its members.
- (c) Whether the speech or conduct would reflect unfavorably upon the Department.
- (d) Whether the speech or conduct would negatively affect the member's appearance of impartiality in the performance of duties.
- (e) Whether similar speech or conduct has been previously authorized.
- (f) Whether the speech or conduct may be protected and outweighs any interest of the Department.

1036.7 TRAINING

Subject to available resources, the Department should provide training regarding member speech and the use of social networking to firefighters and supervisors.

Anti-Retaliation

1037.1 PURPOSE AND SCOPE

This policy prohibits retaliation against members who identify workplace issues, such as fraud, waste, abuse of authority, gross mismanagement or any inappropriate conduct or practices, including violations that may pose a threat to the health, safety or well-being of members.

This policy does not prohibit actions taken for nondiscriminatory or non-retaliatory reasons, such as discipline for cause.

These guidelines are intended to supplement and not limit members' access to other applicable remedies. Nothing in this policy shall diminish the rights or remedies of a member pursuant to any applicable federal law, provision of the U.S. Constitution, law, ordinance or collective bargaining agreement.

1037.2 POLICY

The Bear Valley - Indian Valley Fire Protection District has a zero tolerance for retaliation and is committed to taking reasonable steps to protect from retaliation members who, in good faith, engage in permitted behavior or who report or participate in the reporting or investigation of workplace issues. All complaints of retaliation will be taken seriously and will be promptly and appropriately investigated.

1037.3 RETALIATION PROHIBITED

No member may retaliate against any person for engaging in lawful or otherwise permitted behavior; for opposing a practice believed to be unlawful, unethical, discriminatory or retaliatory; for reporting or making a complaint under this policy; or for participating in any investigation related to a complaint under this or any other policy.

Retaliation includes any adverse action or conduct, including, but not limited to:

- Refusing to hire or denying a promotion.
- Extending the probationary period.
- Unjustified reassignment of duties or change of work schedule.
- Real or implied threats or other forms of intimidation to dissuade the reporting of wrongdoing or filing of a complaint, or as a consequence of having reported or participated in protected activity.
- Taking unwarranted disciplinary action.
- Spreading rumors about the person filing the complaint or about the alleged wrongdoing.
- Shunning or unreasonably avoiding a person because he/she has engaged in protected activity.

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Anti-Retaliation

1037.4 COMPLAINTS OF RETALIATION

Any member who feels he/she has been retaliated against in violation of this policy should promptly report the matter to any supervisor, a command staff member, or the Board of Directors.

Members shall act in good faith, not engage in unwarranted reporting of trivial or minor deviations or transgressions, and make reasonable efforts to verify facts before making any complaint in order to avoid baseless allegations. Members shall not report or state an intention to report information or an allegation knowing it to be false or with willful or reckless disregard for the truth or falsity of the information, or otherwise act in bad faith.

Investigations are generally more effective when the identity of the reporting member is known, thereby allowing investigators to obtain additional information from the reporting member. However, complaints may be made anonymously. All reasonable efforts shall be made to protect the reporting member's identity. However, confidential information may be disclosed to the extent required by law or to the degree necessary to conduct an adequate investigation and make a determination regarding a complaint. In some situations, the investigative process may not be complete unless the source of the information and a statement by the member is part of the investigative process.

1037.5 SUPERVISOR RESPONSIBILITIES

Supervisors are expected to remain familiar with this policy and ensure that members under their command are aware of its provisions.

The responsibilities of supervisors include, but are not limited to:

- (a) Ensuring complaints of retaliation are investigated as provided in the Personnel Complaints Policy.
- (b) Receiving all complaints in a fair and impartial manner.
- (c) Documenting the complaint and any steps taken to resolve the problem.
- (d) Acknowledging receipt of the complaint, notifying the Board of Directors via the chain of command and explaining to the member how the complaint will be handled.
- (e) Taking appropriate and reasonable steps to mitigate any further violations of this policy.
- (f) Monitoring the work environment to ensure that any member making a complaint is not subjected to further retaliation.
- (g) Periodically following up with the complainant to ensure that retaliation is not continuing.
- (h) Not interfering with or denying the right of a member to make any complaint.
- (i) Taking reasonable steps to accommodate requests for assignment or schedule changes made by a member who may be the target of retaliation if it would likely mitigate the potential for further violations of this policy.

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Anti-Retaliation

1037.6 COMMAND STAFF RESPONSIBILITIES

The Board of Directors should communicate to all supervisors the prohibition against retaliation.

Command staff shall treat all complaints as serious matters and shall ensure that prompt actions take place, including, but not limited to:

- (a) Communicating to all members the prohibition against retaliation.
- (b) Reviewing complaint investigations in a timely manner.
- (c) Taking steps toward remediation of any inappropriate conduct or condition and instituting measures to eliminate or minimize the likelihood of recurrence.
- (d) Communicating the outcome to the complainant in a timely manner.

1037.7 WHISTLE-BLOWING

California law protects members who (Labor Code § 1102.5; Government Code § 53296 et seq.):

- (a) Report a violation of a state or federal statute or regulation to a government or law enforcement agency, including the member's supervisor or any other member with the authority to investigate the reported violation.
- (b) Provide information or testify before a public body if the member has reasonable cause to believe a violation of law occurred.
- (c) Refuse to participate in an activity that would result in a violation of a state or federal statute or regulation.
- (d) File a complaint with a local agency about gross mismanagement or a significant waste of funds, an abuse of authority or a substantial and specific danger to public health or safety. Members shall exhaust all available administrative remedies prior to filing a formal complaint.
- (e) Are family members of persons who have engaged in any protected acts described above.

Members are encouraged to report any legal violations through the chain of command (Labor Code § 1102.5).

Members who believe they have been the subject of retaliation for engaging in such protected behaviors should promptly report it to a supervisor. Supervisors should refer the complaint to the Board of Directors or authorized designee through the appropriate supervisory chain of command for investigation pursuant to the Personnel Complaints Policy.

1037.7.1 DISPLAY OF WHISTLE-BLOWER LAWS

The Department shall display a notice to members regarding their rights and responsibilities under the whistle-blower laws, including the whistle-blower hotline maintained by the Office of the Attorney General (Labor Code § 1102.8).

1037.8 RECORDS RETENTION AND RELEASE

The Custodian of Records shall ensure that documentation of investigations is maintained in accordance with the established records retention schedules.

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Anti-Retaliation

1037.9 TRAINING

This policy should be reviewed with each new member.

All members should receive periodic refresher training on the requirements of this policy.

Chapter 11 - Facility

Facility Security

1100.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for the physical security of fire stations and other department facilities. The safety and security of department members is the primary purpose of this policy. Department members should be mindful of their responsibility to protect themselves from any potential physical threats and to protect the security of department facilities.

1100.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to provide physical security measures for all facilities under department control.

1100.3 PROCEDURE

Members are responsible for ensuring that all department facilities remain secured from unauthorized access at all times. Any unauthorized access, security breach or suspicious activity involving the department facility should be reported, through the chain of command, to the appropriate level. Any criminal activity should be immediately reported to law enforcement and then through the chain of command.

Department members should apply the following guidelines whenever practicable.

1100.3.1 ADMINISTRATION, FIRE PREVENTION AND OTHER PUBLIC ACCESS AREAS

Public access facilities should only be accessible to the public during published business hours and only when sufficient staffing is available to monitor the movement of visitors and restrict access to areas containing confidential or sensitive materials or information. Any facility allowing access to the public should have a designated reception area and some method of limiting public access to controlled areas.

A visitor control process should be implemented at each facility that allows public access. The control process should include a visitor's log. Each visitor should record his/her name and purpose of the visit. Completed visitor logs should be retained for the period prescribed in the department's records retention schedule. All visitors entering controlled areas of any facility that allows public access should be issued a visitor's badge. The badge should be prominently displayed on the outermost layer of the visitor's clothing throughout the visitor's stay in the facility. Visitors should be accompanied at all times while inside the controlled areas of the facility and monitored throughout the visit.

Members of the public should be prohibited from using photographic, electronic imaging or recording equipment while inside the controlled areas of the facility, unless such use is necessary for the business purpose of the visit and then only with the approval of the facility's manager or a chief officer.

No public access to the facility should be permitted outside of the published business hours. The facility should be secured against unauthorized entry when closed or when sufficient department personnel are not available to monitor visitor access.

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Facility Security

1100.3.2 FIRE STATIONS

Fire stations are considered secure facilities with limited public access. Public access to a fire station shall only be permitted into the designated public access area, which should be kept free of confidential records, reports or other protected materials.

A member of the Department should accompany any visitor entering the controlled areas of the fire station. All visitors should be monitored throughout their stay in the fire station. The public should not be allowed access to the member sleeping quarters of the station or to any area where members have private lockers or storage for personal belongings. Visitors should not be allowed to take photographs, electronic images or other recordings while inside a fire station, unless it is essential to the purpose of the visit.

All exterior doors should be kept closed and locked at all times, including apparatus bay doors, unless a member is present to prevent unauthorized access. All points of access to the fire station should be closed and locked any time no members are present. All exterior storage rooms, lockers or other facilities should remain locked at all times unless directly observed by a member. Secure parking areas (fenced/gated) should be kept secured at all times unless directly observed by a member.

1100.3.3 BREACH OF SECURITY

All members are responsible for assisting in maintaining the security of department facilities. Members should adhere to the following guidelines regarding any breach in security at any department facility:

Any breach in security should be reported as soon as practicable, through the chain of command, to the Chief Officer or Division Manager responsible for the facility. If the breach of security is criminal in nature, the appropriate law enforcement agency should be notified and the incident reported as soon as practicable.

Any criminal activity that occurs and posed or poses a threat to department members should immediately be reported, through the chain of command, to the Board of Directors. If warranted by conditions or circumstances, all on-duty members should be notified of the incident and any recommended precautions as soon as practicable. Other members of the Department should be notified of the incident as soon as practicable, given the totality of the circumstances.

1100.3.4 SUSPICIOUS ACTIVITY

Department members should be vigilant about any suspicious activity occurring in or around department facilities and should report any such activity, through the chain of command, to the Chief Officer or Division Manager responsible for the facility. In some circumstances it may be necessary to immediately contact law enforcement to investigate a suspicious activity or circumstance. Suspicious activity may include, but is not limited to:

- Anyone loitering in the vicinity of the facility for an extended period of time.
- Unknown individuals photographing or taking images of the facility, of members of the Department assigned to the facility or of department vehicles or apparatus.

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Facility Security

- Unknown individuals who appear to be monitoring the activities taking place at the facility.
- Anyone attempting to gain access or requesting access to department facilities without proper authorization.
- Any abandoned packages or other items left on department grounds or adjacent to department facilities.
- Any unknown or abandoned vehicles left on department grounds or adjacent to the department facility.

Emergency Power

1101.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process for identifying emergency power needs or relocation plans for critical facilities and/or equipment. The Department provides critical emergency services to the community and must be able to respond to incidents with fully functioning equipment, regardless of commercial power failures.

1101.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to provide emergency power sources at its facilities where necessary.

1101.3 RESPONSIBILITIES

The Board of Directors or the authorized designee shall develop a plan to:

- (a) Identify critical resources and the equipment necessary for the department's mission and determine the department's needs for emergency power.
- (b) Equip facilities and/or equipment identified as crucial to the mission of the Department with electrical generators, Uninterruptible Power Sources or other means of sustaining critical business components in the event of a loss of commercial power.
 1. All emergency power sources selected shall be in compliance with all building code, environmental and California Division of Occupational Safety and Health (Cal/OSHA) rules and regulations governing the use of such equipment.
- (c) In the event that an alternative source of power for critical equipment cannot be found, relocate to reduce the risk of having inoperative equipment.

1101.4 PROCEDURE

The following aspects of maintaining and operating emergency power sources for fire stations and other facilities should be identified in the plan:

- Specific apparatus, equipment, computers or systems that should be served by the emergency power at each facility
- Permit requirements associated with the type of equipment proposed in the plan
- Identification of the person responsible for periodically testing and maintaining the proposed equipment
- Fueling procedure for any generator fuel tanks in the proposed system
- Details of any fuel service contracts
- Identification of the person responsible for ensuring the tanks are full at all times and for refilling the tanks in the event of a protracted event

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Emergency Power

- Identification of the person responsible for annually procuring a maintenance contract for the proposed equipment
- Identification of the vendor and how the vendor is contacted, during and after hours
- Details of the record-keeping system for testing and maintenance of the proposed equipment
- Contingency plans for a failure of the back-up system
- In the event of no power contingency plan for the back-up system, identification of alternatives to the critical equipment or apparatus needed to accomplish the mission

Flag Display

1103.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidance to members of the Bear Valley - Indian Valley Fire Protection District regarding the proper display of the flags of both the United States and the State of California.

1103.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District to display flags at department facilities in compliance with California and federal laws.

1103.3 DISPLAYING THE FLAG OF THE UNITED STATES

Federal law providing for the use and the display of the U.S. flag is contained in Title 4 Chapter 1 of the United States Code, commonly referred to as "The Flag Code." Members of this department will display the flag of the United States in accordance with the provisions of 4 USC § 1 through 4 USC § 10.

1103.3.1 DISPLAY OF THE U.S. FLAG IN DAILY OPERATIONS

Department members should consult the Flag Code for guidance whenever the flag of the United States is to be displayed in any manner. This is to ensure that the display is presented in accordance with the Flag Code and as follows:

- (a) The United States flag should be conspicuously posted on all department facilities during hours of operation (Government Code § 431).
- (b) It is the universal custom to display the flag only from sunrise to sunset on buildings and on a stationary flagstaff in the open. However, the flag may be displayed 24 hours a day if it is properly illuminated during the hours of darkness (4 USC § 6).
- (c) The flag should not be displayed on days when the weather is inclement, except when an all-weather flag is displayed (4 USC § 6).
- (d) The U.S. flag may only be flown at half-staff by Presidential or Gubernatorial decree, and on Memorial Day until noon (4 USC § 7).

Whenever the U.S. flag is displayed in conjunction with other flags or symbols it should occupy the "Place of Honor" (4 USC § 7).

1103.4 DISPLAY OF THE CALIFORNIA STATE FLAG

State law provides for the use and the display of the flag of the State of California. Members of the Bear Valley - Indian Valley Fire Protection District will display it in accordance with these provisions (Government Code § 430 et seq.).

1103.4.1 DISPLAY OF THE CALIFORNIA FLAG IN DAILY OPERATIONS

Department members should consult the Adjutant General's rules for guidance whenever the California flag is to be displayed in any manner, to ensure that the display is presented

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Flag Display

appropriately. Displays of the California flag should be as provided by the Adjutant General's rules and as follows:

- (a) The California flag should be conspicuously posted on all department facilities during hours of operation (Government Code § 431).
- (b) Generally, the California flag should be displayed only from sunrise to sunset on buildings and on a stationary flagstaff in the open. However, the flag may be displayed 24 hours a day if it is properly illuminated during the hours of darkness.
- (c) The California flag should not be displayed on days when the weather is inclement, except when an all-weather flag is displayed.
- (d) The California flag shall be flown at half-staff whenever the flag of the United States is flown at half-staff, and may only be flown at half-staff at other times by order of the Governor of California.
- (e) Whenever the California flag is displayed in conjunction with the United States flag, the United States flag shall occupy the position of first honor (Government Code § 436). When the California flag is displayed in conjunction with other flags or symbols, it should occupy the position of honor.

For flag display protocol subsequent to a line-of-duty death, see the Line-of-Duty Deaths Policy.

Standardization of Station Files

1105.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines regarding the files, forms and other written instruments that should be maintained and available at all fire stations.

1105.2 POLICY

It is the policy of the Bear Valley - Indian Valley Fire Protection District that all files, forms and other written or electronic records maintained at the fire stations shall be retained within District policy and state and federal laws, and that appropriate safeguards are implemented for protected or confidential information.

1105.3 CREATING THE STANDARD FILES PROCEDURE

The scope of the forms and written instruments that should be maintained at all fire stations is quite extensive. It will vary considerably from agency to agency and from county to county.

Agencies should create a policy addressing the files, forms and written instruments that should be kept at each fire station. Agencies will also need to address how many types of files are stored at the stations. Some of the guidelines in this policy will be based on local practice, some on requirements for forms that are relevant to outside entities and some based on codes and other mandates. Agencies should work with legal counsel when developing this policy to ensure consistency with other policies and laws and that the appropriate safeguards are in place.

Agencies should consider addressing the following topics when creating this policy:

- (a) The person responsible for maintaining the station files
- (b) Specific forms, documents and other written instruments that should be kept in the station files
- (c) Specific forms, documents and other written instruments that should not be kept in station files, such as employee medical information
- (d) Security for the station files
- (e) Secure files versus open access files
- (f) Confidential employee records, documents, evaluations
- (g) Information protected by the Health Insurance Portability and Accountability Act (HIPAA)
- (h) Storage of confidential business or occupancy information
- (i) County-required forms
- (j) Emergency Medical Service (EMS) forms, blank forms, completed forms
- (k) The department's records retention requirements

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Standardization of Station Files

- (l) The timetable for periodic purging of station files and the person responsible

Attachments

Purchasing-Procurement Policy.pdf

Bear Valley Indian Valley Fire Department

PURCHASING & PROCUREMENT POLICY

SECTION 1 - PURCHASING POLICIES

- A. In order to guarantee competitive and advantageous procurement, it is the policy of the Bear Valley Indian Valley Fire Department, as a quasi-state government agency in the State of California, that all purchases authorized by the department will follow:
1. Code of Federal Regulations Title 2: Grants and Agreements: Chapter II: Part 200-UNIFORM ADMINISTRATIVE REQUIREMENTS, COST PRINCIPLES, AND AUDIT REQUIREMENTS FOR FEDERAL AWARDS; Subpart D-Post Federal Award Requirements; 200.320 Methods of procurement will be followed.
- B. The following methods of procurement will be followed:
1. **Micro-purchases:** Procurement by micro-purchase is the acquisition of supplies and or services, the aggregate dollar amount which does not exceed \$3,500. To extent practicable the department will distribute micro-purchases equitably among qualified suppliers. Micro-purchases may be awarded without soliciting competitive quotations if the department considers the price to be reasonable.
 2. **Small purchases:** Small purchase procedures are those relatively simple and informal procurement methods for securing services, supplies, or other property that do not cost more than the \$15,000. If small purchase procedures are used, price or rate quotations must be obtained from an adequate number of qualified sources.
 3. **Sealed bids:** The sealed bid procedure will apply to the acquisition of services, supplies, or other property that cost in excess of \$15,000. Bids will be solicited and a firm fixed contract prices is awarded to the responsible bidder whose bid, conforming to all material terms and conditions of the invitation for bids, is the lowest qualified price. If sealed bids are used, the following requirements apply:
 - a. Bid specifications will not be proprietary to any one product or manufacturer.
 - b. Bids must be solicited from an adequate number of known suppliers, providing them sufficient response time prior to the date set for opening bids. The invitation for bids must be publicly advertised (published in a public location – i.e. U. S. Post Office, Website, etc.)
 - c. The invitation for bids will include any specifications and pertinent attachments.
 - d. All bids will be opened at the time and place prescribed in the invitation for bids and must be opened publicly.
 - e. A firm fixed price contract award will be made in writing to the lowest responsive, responsible, QUALIFIED bidder. Where specified in bidding documents, factors such as discounts, transportation costs, and life cycle costs will be considered in determining the lowest qualified bid.
 - f. Any and all bids may be rejected if there is a sound documented reason.
 - g. The contract award may be made to a second qualified bidder without a rebid in cases where the awarded bidder defaults and the terms and conditions applicable to the second qualified bidder are the same and the price is not higher than the second qualified bidder's original price. (Ala. Code 41-16-57(a)).
 4. **Competitive Proposals:** The technique of competitive proposals is normally conducted with more than one source submitting an offer, and either a fixed price or cost-reimbursement type contract is awarded. If this method is used, the following requirements apply:
 - a. Requests for proposals must be publicized and identify all evaluation factors and their relative importance. Any response to publicized requests for proposals must be considered to the maximum extent practical.
 - b. Proposals must be solicited from an adequate number of qualified sources.
 - c. The department will have a written method for conducting technical evaluations of the proposals received and for selecting recipients.
 - d. Contracts will be awarded to the responsible vendor whose proposal is most advantageous to the program with price and other factors considered.
 5. **Noncompetitive Proposals:** Procurement by noncompetitive proposals is procurement through solicitation of a proposal from only one source and may be used only when one or more of the following circumstances apply:
 - a. The item is available only from a single source.
 - b. The public emergency for the requirement will not permit a delay resulting from competitive solicitation
 - c. After solicitation of a number of sources, competition is determined inadequate.
 6. **Cooperative and/or Group Purchasing Agreements and Supplier Schedules**

- a. Purchases may be made from a prequalified lists of products, for example, Government Services Administration (GSA) schedule; state contract price; co-operative or group purchasing agreements.
 - b. The list of products must be current.
 - c. A solicitation period will still be conducted, which will allow any potential bidders to qualify with the co-operative.
- 7. **Existing previously bid or state contracts** (tag along contracts) may be utilized as long as they also confirm to the applicable federal procurement regulations in effect at the time of bid solicitation.
- 8. **Cooperative Purchasing Agreements**
 - a. Two or more Departments or Agencies within the same county or adjoining counties or the governing bodies of two or more counties may provide by joint agreement for the purchase of labor, services or work or for the purchase or lease of materials, equipment, supplies or other personal property for use by their respective agencies.
 - b. The agreement shall be entered into by similar executive orders or resolutions issued or adopted by each of the participating governing authorities which shall set forth the categories of labor, services or work or the materials, equipment, supplies, or other personal property to be purchased; the manner of advertising for bids; and the awarding of contracts; the method of payment by which each participating contracting agency deemed necessary to fulfill the purposes of the agreement.
 - c. Each contracting agency's share of expenditures for purchases under any agreement shall be appropriated and paid in the manner set forth in the agreement.
- 9. **Procurement Records**
 - a. Records documenting for the method of procurement, selection of contract type, and basis for the contracted price to detail the history of the procurement will be maintained for each purchase for a minimum of 3 years.

C. Factors Considered for Awards

- 1. Factors considered in bid evaluation will be: the quality of the item proposed to be supplied; conformity to specifications; terms of delivery; transportation charges; dates of delivery.
- 2. The Department reserves the right to select the product that is in the best interest of the department and shall have the right to reject any bid based on pre-determined criteria.
- 3. Each bid, with the name of the bidder, shall be entered on a record. Each record, with the successful bid indicated thereon and with the reasons for the award if not awarded to the lowest bidder shall, after award of the contract, be open to public inspection.

D. Award to a Preferred Vendors

- 1. Preference priority may be given to a vendor according to the following:
 - a. Vendor Produces or manufacturers the product within the state.
 - b. Has an assembly plant or distribution facility for the product within the state.
 - c. Is organized for business under the applicable laws of the state as a corporation, partnership, or professional association and has maintained at least one retail outlet or service center for the product within the state for not less than one year prior to the deadline date for the competitive bid.
- 2. In the event a bid is received for the product or service from a person, firm, or corporation deemed to be a responsible bidder and a preferred vendor and the bid is no more than five (5) percent greater than the bid of the lowest responsible bidder, the awarding authority may award the contract to the preferred vendor.

E. Emergency Situations

- 1. In the case of emergency affecting public health, safety, or convenience, so declared in writing by the head of the agency involved, setting forth the nature of the danger to public health, safety, or convenience involved in delay, contracts may be awarded to the extent necessary to meet the emergency without public advertisement. Such action and the reasons therefore shall immediately be made public by the awarding authority.

F. Advertisement for and solicitation of bids; opening of bids; public inspection; reverse auction procedures; certain partial contracts void.

G. Effect of agreements or collusion among bidders in restraint of competition; sworn statements as to agreements to accompany bids.

H. Effect of advance disclosure of terms of bid

1. Any disclosure in advance of the terms of a bid submitted in response to a solicitation of bids shall render the proceedings void and require a new solicitation and award anew.
2. Any vendor given information in advance of the terms of the bid shall be excluded from the bid solicitation.

I. Fire Truck and Equipment Purchases

1. See Attachment A.

J. Bid Protests

1. A protest challenging the award of a contract must be filed in writing by the unsuccessful bidder within 10 days of the contract award date.
2. The Department will respond to the protest in writing within 30 days of the protest.

K. Conflicts of Interest

1. No employee, officer, or member may participate in the selection, award, or administration of any contract if he or she has a real or apparent Conflict of Interest.
2. No member, employee, or volunteer of the Department shall have a financial interest or have any personal beneficial interest, either directly or indirectly, in the purchase of or contract of any personal property or service, nor in any firm, partnership, association or corporation furnishing any such personal property or service to the Department.
3. No member, employee, or volunteer of the Department shall solicit, accept or receive, directly or indirectly, from any person, firm, association or corporation to whom any contract may be awarded, by rebate, gifts, or otherwise, any money or item of value whatsoever or any promise, obligation or contract for future reward or compensation.
4. Items purchased from vendors that employ any volunteers/members must document how they avoided a Conflict of Interest during the procurement process.

L. Prohibited Practices

1. No purchase shall ever be intentionally split into smaller lots in order to circumvent bidding requirements.
2. No provides of goods of or services will be awarded to a vendor based upon preferential treatment or unlawful discrimination.
3. No Vendor member will be a participant on a selection committee or in any way be responsible for awarding a contract to a vendor with which he/she has a related party affiliation.

M. Utilization of Small Businesses, Minority owned firms, and Women's Business Enterprises

1. Positive efforts shall be made by recipients to utilize small businesses, minority-owned firms, and women's business enterprises, whenever possible. Recipients of Federal awards shall take all of the following steps to further this goal.
 - a. Ensure that small businesses, minority-owned firms, and women's business enterprises are used to the fullest extent practicable.
 - b. Make information on forthcoming opportunities available and arrange time frames for purchases and contracts to encourage and facilitate participation by small businesses, minority-owned firms, and women's business enterprises.
 - c. Consider in the contract process whether firms competing for larger contracts intend to subcontract with small businesses, minority-owned firms, and women's business enterprises.
 - d. Encourage contracting with consortiums of small businesses, minority-owned firms and women's business enterprises when a contract is too large for one of these firms to handle individually.
 - e. Use the services and assistance, as appropriate, of such organizations as the Small Business Administration and the Department of Commerce's Minority Business Development Agency in the solicitation and utilization of small businesses, minority- owned firms and women's business enterprises.

APPENDIX A

BID EVALUATIONS

To ensure objective evaluation of bid proposals, the following bid evaluation will be performed for all bid proposals received.

1. Successful Experience with other fire departments.(20 points)
2. Key Staff and Qualifications (15 points)
3. Ability to Address the Needs of the Project (20 points)
Include Understanding of the Department Needs and Approach to Project
4. Local Client References (20 points)
5. Certified Minority/Women Owned Business (5 points)
Certification may be by state, federal, City or local government.
The federal definition of MBE/WBE must be met.
To receive these points, proof must be submitted with the proposal.
6. Fee and Proposed Fee Basis (Administration only) **OR** (5 points)
Ability to Work within the Grant Budget (5 points)

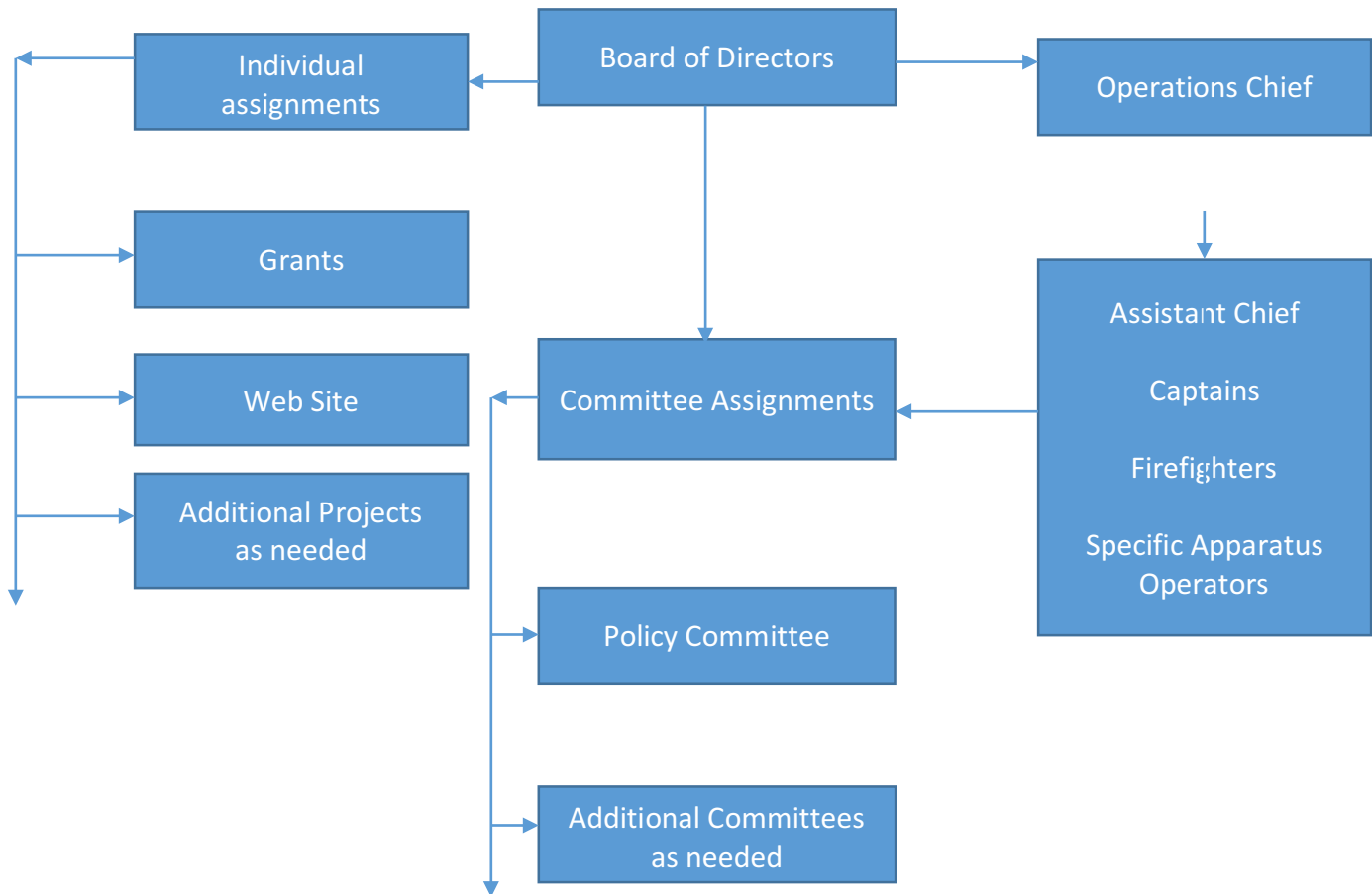
Fire Truck and Equipment Purchases

Fire Truck and Equipment Purchases will be made following the policies set forth in the Department's Purchasing and Procurement Policies with the addition of the following:

1. All fire trucks and equipment purchased will meet the latest edition of NFPA.
2. A purchasing committee will be appointed by the fire chief.
3. The committee will research features and options to enhance department operations.
4. For trucks an outline of preliminary requirements using NFPA Standards (Annex B) will be developed. For other purchases NFPA Standards will be used.
5. Specifications will not be proprietary to one product or manufacturer.
6. Specifications obtained from vendors for any solicitation will not be used.
7. The Committee will present recommendation to the fire chief or board of directors, who will then make the final determination for bid specifications to be distributed to vendors for solicitation of bid proposals.
8. Bids will be evaluated equally and fairly using a standard evaluation form by persons designated by the fire chief.
9. A recommendation of award of contract based on the lowest qualified bid that is most advantageous to the department will be made.

Organizational Structure for the BVIVFPD.pdf

Organizational Structure for the BVIVFPD



Individual assignments will be made by the BOD.

Committee assignments will be made by the Chairperson of the BOD.

Committees will be chaired by a Director and have at least one member.

Individuals will report back to the BOD.

Committees will report back to the BOD.

Individual assignments and committee assignments can include additional Directors, Members, interested or qualified parties from the community willing to volunteer their time.

Operations Chief can organize the Operations Division as circumstances dictate.

Specific Apparatus Operators are members trained and/or licensed for specific pieces of equipment, such as, but not limited to water tenders, dozers, excavators, cranes etc.

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