

This Month's Working Fire...

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Volume 06-2: February 2006
Approx. Program Length 51:44

Fireline Incident Analysis

FIRELINE

Motel Fire
Knoxville, IL

Approx. length: 8:46

The first-in engine arrived in less than five minutes but eventually every department in the district responded. Being a daytime fire and with volunteer departments responding, it took a while for sufficient manpower to arrive. Apparatus was strategically placed. The main pumper took a hydrant about a half-block from the motel even though there was a hydrant directly in front of the motel, because the more remote hydrant could deliver 1500 GPM vs. the closer hydrant (500 GPM). Three engines off two hydrants supplied about 1200 GPM through three 2.5" lines and six 1.5" lines. Later on, a monitor was used. Based on the motel's construction and fireload, there was a concern for collapse even though it was a two-story building. Protected exposures from burning embers. Strategy turned to surround-and-drown; total extinguishment took 6-7 hours. Cause and origin were fuel tanks in the basement that ignited while being filled. For more information, contact Chief Jeff Vandamark, Knoxville Fire Dept., 137 N. Public Square, Knoxville, IL 61448 or call him at 309-289-2500.

"Quick Calls"

Approx. length: 13:01

This is a new feature you may see occasionally on Working Fire Training. We'll play short video clips of a fire or emergency incident, laying out the basics of what happened. In your training discussion, plan your strategy and tactics as to how your department would respond. Then Chief and Professor Bill Kramer, our educational consultant, will present his "take" on how to handle the incidents -- certainly not the only way, but it should spark some great discussion. This month we examine the merits of fighting a fire that's obviously lost, the dangers of overhauling a building following an explosion and fire, firefighter responsibility in a riot, and nonuse of SCBA on the fireground. *See the PowerPoint version of this Training Guide to see and hear Kramer's comments.* For more information, contact Chief Bill Kramer, College of Applied Science University of Cincinnati, 2220 Victory Parkway, Cincinnati, OH 45206-2839 or call him at 513-556-6567

HANDS-ON

Fire Attack Basics, Part III (Expanded Segment)

Approx. length: 19:00

Continuing our series, in this installment we cover a number of subjects such as the concept of Combative Command and the transfer to a formal incident commander, the coordination of PPV

Fireline Incident Analysis

ventilation with attack crew entry (Not all departments do this the same way), the wearing of PPE, laying supply lines safely, handling rubber hose, hooking multiple lines to hydrants, and more. For more information, contact Chief Russ Mason, Central County Fire & Rescue, 1 Timberbrook Drive, St. Peters, MO 63376 or call him at 636-970-9700.

FIRE MEDICS

Medical/Legal Issues, Pt. I

Approx. length: 7:57

In the first part of a multi-part series, we hear from Dan Leslie, a lawyer and a paramedic, who explores areas of the law that impact paramedics and EMTs. Knowing what is expected of you legally will help you protect your rights and those of your patient. Dan covers a brief description of the court system, the concept and kinds of patient consent including no affirmative opposition, establishing competency, and the caring for patients under arrest. For more information, contact Dan Leslie, Attorney-at-Law, 100 East Locust Street, Union, MO 63084-1830 or call him at (636) 583-4541.

EVOLUTIONS 2000

Kramer vs. Kramer: Wearing SCBA on the Fireground

Approx. length: 2:57

Working Fire Training and Professor/Chief Bill Kramer present our Continuing Education segment that's worth one credit from the University of Cincinnati. Picking up on this month's "Quick Calls," Bill raises questions about the use of SCBA in various situations. For more information, contact Bill at the Open Learning Fire Service Program, College of Applied Science, 2220 Victory Parkway, ML #103, Cincinnati, Ohio 45206 or call 513-556-6583.

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Fireline Incident Analysis

From the Departments Involved...

DISCUSSION QUESTIONS FOR THIS MONTH'S INCIDENTS

The departments involved in this month's incidents pose some discussion questions and situations that you can use as discussion-starters in your own department's training sessions.

Motel Fire / Knoxville, IL

Fire Chief Jeff Vandamark, Knoxville (IL) Fire Dept.

1. As with many volunteer departments, getting volunteers to respond during the day is always a struggle. If you're a volunteer department, how do you staff to generate enough responders?
2. In this incident, matching up the highest capacity hydrant with our #1 pumper was really important. Do your first-in crews consider such things when arriving on scene?
3. Collapse zones are a rarity for us since most of our jurisdiction's buildings are low-rise. But it's still an issue, even on a two-story structure. If you're going defensive and the building is going to burn out, beware of collapsing walls or debris.

"Quick Calls"

1. How actively do your firefighters get involved with fighting a fire that's obviously out of control?
2. What's your protocol on buildings that have exploded? If it was a gas explosion and the gas has been turned off, what about possible gas pockets? How do you handle those?
3. Do you have any protocols regarding personnel performing crowd control or becoming physical with citizens?
4. We all know we're supposed to wear SCBA on the fireground, but do we really do it? What are the possible consequences if we don't?

See the PowerPoint version of this Training Guide to see and hear Kramer's comments.

Hands-On Training

Fire Attack Basics, Part III (Expanded Segment)

Objectives

After watching this program, the student shall:

1. study the concept of Combative Command
2. the coordination of PPV ventilation with attack crew entry
3. the wearing of PPE
4. laying supply lines safely
5. handling rubber hose
6. hooking multiple lines to hydrants.

Standards and Regulations

This training is consistent with NFPA 1500 and appropriate OSHA regulations and practices.

Training Outline

I. FIREGROUND ISSUES

A. Combative Command

1. A temporary status (not formal command) assumed by first-in company officer. However, the combative “commander” can’t really direct action. With a first-in crew (maybe only 4-6 men), the commander still has to be actively involved.
2. If you’re on that first-in crew, inform the combative commander that you are making entry and get a reply. This doesn’t have to be via radio, it can be face-to-face and often is on a small incident or where you’re working in close proximity to each other. The point is to give an acknowledgment of the action.
3. Combative command should be officially transferred to formal command.

B. Ventilation

1. Have the PPV fan at the door on idle, but turned away. When the attack crew is ready, power the fan up and turn it toward the opening. Don’t place it too close to the opening. Let the structure ventilate; then the attack crew can make entry.
2. Open up additional windows to enhance ventilation sooner.
3. Don’t turn the fan while the crew is making entry and before the fire is extinguished, to avoid fanning the flames and perhaps causing a flashover.
4. *NOTE: Some departments’ SOGs call for ventilating before entry, being careful to identify the seat of the fire and ventilating accordingly so the fire is drawn away from the entry point of the attack crew, as noted in #3 above. Other departments prefer to enter reach the seat of the fire and attack it before ventilation, thereby ventilating smoke but*

Fire Attack Basics, Pt. III

not flame which could go the wrong way based on where the ventilation occurs in relation to the fire.

- a. Both are viable procedures.*
- b. Pre-ventilation provides better visibility for entering crews (and in rare cases, may actually extinguish the fire), but may present a flashover risk.*
- c. Post-ventilation provides less visibility but also less chance of incorrect ventilation jeopardizing interior crews. What is your department's preference?*

C. Personal Protective Equipment

1. Wear PPE at all times, especially when doing intensive tasks and during fire attacks. You don't want to take yourself out of action with a hand injury.
 - a. See related SCBA issue in this month's "Quick Calls" in Fireline.

D. Supply Lines

1. If possible, lay supply lines on the officer side of the truck, keeping it out of the pump operator's way so it's not underfoot.
 - a. The operator is out of harm's way if a hose fails.
2. Some departments requires a backup handline from an independent source should the main water supply fail for some reason. Your SOG may not require that. However, it is worthy of consideration if you have the manpower.
3. With rubber hose, flake it sideways rather than up-and-down as the tendency is for it not to feed well.
 - a. Rubber hose will not slide around fence posts (for example, like around the porch in our evolution).
 - b. Haul a good amount of slack to the point where the hose has to change direction. It may cause kinks when you charge it, but it will feed in straighter. It's a trial-and-error thing, so see what works best for you.
4. Don't charge the line until you're ready to enter; it makes the hose a lot easier to handle.
5. When using a hydrant valve to rig a second line, don't hook your primary hoseline to it. Put the valve on one orifice and hook your primary to the other. That way you'll have a secondary line option.

E. Ladders

1. In choosing a ladder length for a thrown ladder, it should be a taller than the window sill by 2-3 rungs. This way, it makes mounting the ladder safer by providing something to hold on to.

Answers to the quiz on page 7:

1. True
2. False
3. True
4. d
5. d. (a & c)

Fire Attack Basics, Pt. III

2. Make the ladder flush with the sill if it's intended to be an escape ladder. Rungs flush with the sill won't hang up a firefighter trying to "bail."
3. How high the ladder is placed and how many rungs are above the sill is really a function of what the ladder is for: escape ladder or entry ladder?

F. Apparatus Placement Tip

1. If your SOG calls for later-arriving trucks to have a secondary responsibility for water supply preparation, that truck should back in, should it need to lead off and/or to make hose more readily accessible by feeding off the back.
2. The exception to this would be where the situation dictates that you lay a line from a hydrant on the way in.
3. If the later-arriving truck is a ladder truck, then this truck would only back in if it made ladder acquisition more accessible.

G. Communications/Accountability

1. Clarify if crews are going to the basement or attic for primary or secondary search-and-rescue.
2. This seems rather obvious, but it would be easy for a searching crew to make such a decision on their own without informing command. Crews moving into such areas present red flags for Incident Commanders who need to provide backup resources for such movements like alerting Rapid Intervention Crews, planning for alternative exits, throwing additional ladders, etc.

Fire Attack Basics, Pt. III: Quiz

Date _____

Chief/T.O. _____

Firefighter (print) _____

Education Credits/
Hours/Units _____

Signature _____

Select the best answer:

1. True or False: If smoke is present in the hot zone, mask up!
2. True or False: Backing in a truck or pulling in forward is really not that big a deal.
3. True or False: If the I.C. doesn't acknowledge your response, don't assume that he/she heard what you said.
4. When handling supply lines, which is **not** desirable?
 - a. A backup water supply
 - b. Laying lines on the side of the truck away from the pump operator
 - c. Hauling sufficient slack of rubber hose to a place where it changes direction
 - d. Charging the line well in advance of a team entering the structure
 - e. All of the above
5. Pick the order below that is acceptable:
 - a. PPV fan is started -- Ventilation occurs -- Attack team enters -- Fire is located and attacked
 - b. Ventilation occurs -- PPV fan is started -- Fire is located -- Attack team enters
 - c. Attack team enters -- Fire is located and attacked -- Ventilation occurs -- Fire is extinguished
 - d. Two of the above
 - e. None of the above

(Answers can be found at the top of page 6)

Fire Medics

Medical/Legal Issues, Pt. I

Objectives

After watching this segment, the student shall understand:

1. the basics of the court system
2. the concept of consent
3. the obligation to treat patients.

Standards and Regulations

This training is consistent with NFPA 1500 and appropriate OSHA regulations.

Training Outline

I. COURT SYSTEM REVIEW

A. State Court System

There will be variations in terms and titles by state.

1. Municipal Court
 - a. In some areas this is called Associate Circuit Court or something similar.
2. Circuit Court
 - a. Cases will definitely be brought in this court if the case deals with amounts over \$35,000.
3. Courts of Appeal
4. Supreme Court

B. Federal Court System

Specific jurisdictional rules determine where cases are tried.

1. District Court (Circuit Level)
 - a. There are 94 federal districts in the 50 states and Puerto Rico, plus one each in the territories of the Virgin Islands, Guam, and the Northern Mariana Islands.
2. Courts of Appeal (Appellate Level)
 - a. There are 13 circuits (and one Federal circuit) where appeals are heard.
3. Federal Supreme Court

Medical/Legal Issues, Pt. I

II. CONSENT

A. Types of Consent

1. Express (Informed)
 - a. Verbal - spoken
 - b. Written - by release
 - c. Gestures - from people who can't speak, affirmative head nodding, etc.
2. Implied
 - a. Unresponsive or Unconscious - where circumstances exist that would lead one to believe that consent was given, although no direct, express or explicit words of agreement had been uttered; i.e. an unconscious patient who needs immediate treatment of a life-threatening injury.
 - b. Impaired or Incompetent - where competence is in doubt.
3. Minor
 - a. Anyone under 18 may give consent if no responsible adult is present; but try to find one.
 - b. Check laws in your area.
4. Law is a creative field
 - a. Cases will be fabricated on the interpretation by the courts as to whether consent was given or whether medical care was rendered without proper consent.
 - b. This represents possible danger to paramedics/EMTs rendering care!
5. Additional Indication of Consent: No Affirmative Opposition
 - a. Sometimes consent is implied through patient cooperation by answering questions and being compliant.
 - b. Some lawyers may try to argue that such cooperation is not explicit consent. However, using No Affirmative Opposition would be a good argument to justify care given to a patient.
 - c. **Establishing competency is essential and is done by asking the patient identifying questions such as "What is your name? What day of the week is it? Where are you? Where do you live? What's your wife's/mother's/father's name?, etc.**

B. Tort Reform

1. Cases involving Consent
 - a. Consent is important because of tort reform in many states. Personal injury cases are yielding smaller awards for attorneys so medical cases will come under greater scrutiny by them as sources of income.

Answers to the quiz on page 11:

1. False 2. True 3. False 4. c. 5. b.

Medical/Legal Issues, Pt. I

b. Paramedic reports should always note what kind of consent was given. Be explicit by mentioning one of the three types mentioned above and other corroborating observations.

C. Obligations to arrested patients

1. Should police order you to care for a patient who is in custody or under arrest, and the patient refuses, don't render care.
2. Just because a patient is under arrest doesn't mean he/she loses the right to make decisions about healthcare.
3. Unless consent given falls under one of the three types mentioned above, or there is no affirmative opposition, you have no right to care for someone.

Medical/Legal Issues, Pt. I: Quiz

Date _____

Chief/T.O. _____

Firefighter (print) _____

Education Credits/
Hours/Units _____

Signature _____

Select the best answer:

1. True or False: A person under arrest can't speak for themselves.
2. True or False: Law is a creative profession.
3. True or False: If a police officer orders you to render care to a patient, you better do it.
4. Which of the following is **not** a type of consent?
 - a. Express
 - b. Implied
 - c. Court-ordered
 - d. No affirmative opposition
 - e. Minor
 - f. None of the above
5. In which of the following courts would you **not** have to defend your actions?
 - a. District
 - b. Small Claims
 - c. Circuit Court of Appeals
 - d. Federal Appeals Court
 - e. Two of the above
 - e. All of the above

(Answers can be found at the top of page 10)

Evolutions 2000

University of Cincinnati Continuing Education Program

Wearing SCBA on the Fireground

If you're enrolled in the **Open Learning Fire Service Program** at the **University of Cincinnati**, here's your opportunity this month to earn one college credit hour for watching Working Fire Training.

VOLUME 06-2

Wearing SCBA on the Fireground

Complete written responses to the following three essay questions:

1. Should a self-contained breathing apparatus (SCBA) be required to be worn by all personnel involved in interior firefighting operations? Why or why not?
2. Should a self-contained breathing apparatus (SCBA) be required to be worn by all personnel involved in exterior firefighting operations in close proximity to a building? Why or why not?
3. For each of the answers above, describe whether or not the face piece should be in place and the air tank activated.

Submit your responses to:

**Mr. Bill Kramer
University of Cincinnati
College of Applied Science
2220 Victory Parkway, ML #103
Cincinnati, OH 45206**

ENROLLMENT INFORMATION:

For more information on enrolling in the Open Learning program to gain college credit, call *Working Fire* at 800-516-3473 for a brochure or, to register directly, call the University of Cincinnati at 513-556-6583. Associate and Bachelors programs are available. Call to have your transcripts evaluated.