The new SOP **09.08 Health Monitoring and Rehabilitation Teams (HMRT) SOP** replaces the existing **09.08 Health Monitoring and Rehabilitation Teams (HMRT) SOP** (endorsed 2007)

- Update of existing 2007 SOP to reflect current Rehab processes.
- Alignment with legislative requirements.

The terminology has changed from Health Support Teams (HST) to Health Monitoring and Rehabilitation Team (HMRT)

This new SOP is considerably longer and more detailed than the past SOP, it requires HMRT's to undertake more assessment and consultation with other agencies as well as more rigorous monitoring and reporting.

#### Colour code

Minor change in wording
Small updates in the wording but the intent is the same as the old SOP
Significant change or new procedure in the new SOP

	NEW SOP 09.08	OLD SOP 09.08
Scope	This procedure applies to all CFA members	This Standard Operating Procedure applies to all CFA
		members involved with operational activities.
Objective	To outline the requirements for the deployment of Health Monitoring and	To monitor and provide medical and welfare advice
	Rehabilitation Teams (HMRT).	and treatment for firefighters whilst operating on the
		fire/incident ground in adverse conditions, particularly
		where conditions are extreme.
Procedure	Activation of Health Monitoring and Rehabilitation Teams (HMRT)	1. Regional management and IMTs shall consider
		deployment of HST for any of the following:
	(3) The consideration to activate a HMRT is required where operations may	a. Wildfires involving activation of strike
	require the constant monitoring of firefighter vital signs	teams.
		b. Incidents in extreme conditions such as
		alpine related incidents, cool stores and
		confined spaces.
		c. Structural fires where stage 2 breathing
		apparatus has been implemented and
		large numbers of operators are operating.
		d. HAZMAT incidents that are extended in
		duration and have the potential to be long
		term.

			e. Rescue incidents that are extended in time and adverse conditions are present.
Officer (DDO)	Incident Controller or State Duty Officer (SDO) / District Duty ) is considering the deployment of a HMRT they should have factors outlined in Table 1 and make the request via FireCom.	2.	Activation of the HST may be requested by the incident controller, Regional Duty Officer or State Duty Officer.
Table 1 – Cor	nsiderations for Activation of a HMRT		
Condition	Criteria		
Heat	Activity extended in duration and has the potential to be long-term or on days of high temperatures.     Where the Bureau of Meteorology has issued a heatwave warning for the area of operations.		
Structure Fire	Stage 2 breathing apparatus has commenced.     Where operations extend beyond single BA cylinder use.		
Hazmat and Rescue	Extended in duration or has the potential to be long-term.		
Extreme cold	Extreme conditions such as alpine related incidents, cool stores and confined spaces.		
Other	Toxic atmospheres, Oxygen deficiency, Elevated temperatures and Smoke (TOES).		
			The HST shall report to Staging Area Manager/Incident Controller and work from the Staging Area or control points.
		4.	The HST shall liaise with the Safety Advisor or Medical Unit Leader, where appointed
members car	ntion of CFA members during an incident ensures that CFA rest and restore their hydration levels and core body to a level that is appropriate to continue participating in the activity.		
(6) Health mo wellbeing of make inform	onitoring during an incident ensures that the health and all CFA members are actively monitored and members can ed decisions about managing their health whilst also ensuring s Occupational Health and Safety Obligations	5.	The HST shall monitor:  a. Hydration  b. Hygiene  c. Safety Issues (health and wellbeing);  d. Nutrition; and  e. Injury assessments.
		6.	A team leader shall be nominated for each HST. The leader and team members shall be registered on IMS and shall be included in all incident action plans. Issues and findings shall be noted as the incident progresses.

(7) The HMRT	will respond Code 3 unless specifically requested by the	
	roller to respond Code 1.	
(8) The table I	below outlines the required endorsements to be maintained	
by CFA memb	ers conducting health monitoring and rehabilitation roles.	
Role	Requirements	
Rehab Team Member	HLTAIDD11 Provide First Aid; or     HLTAIDD15 Provide Advanced Resuscitation and Oxygen Therapy;     CFAMSF Maintain safety on the Fireground;     CFAREH Provide Rehabilitation to Responders; and     CFAHEA Provide Health Monitoring to Responders.     CFAHEA Provide Health Monitoring to Responders.     CFATHW Tree Hazard Awareness Training (if member has not completed GFF).	
HMRT Team Member	HLTAID011 Provide First Aid; or     HLTAID015 Provide Advanced Resuscitation and Oxygen Therapy;     CFAMSF Maintain safety on the Fireground;     CFAREH Provide Rehabilitation to Responders; and     CFAHEA Provide Health Monitoring to Responders.     CFAHEA Provide Health Monitoring to Responders.     CFATHW Tree Hazard Awareness Training (if member has not completed GFF).     Requirements for carbon monoxide exposure management:     1. Advanced First Aiders should have the above qualifications or equivalent Senior First Aid qualifications from the relevant Industry Advisory Group.	
HMRT Team Leader	Current Health Professional Registered with the Australian Health Practitioner Regulation Agency (AHPRA);     CFAMSF Maintain safety on the Fireground;     CFAREH Provide Rehabilitation to Responders; and     CFAHEA Provide Health Monitoring to Responders.     CFATHW Tree Hazard Awareness Training (if member has not completed GFF).	
provide interv	of a HMRT conding to an HMRT call, HMRT team members must only rentions to the level of their training, within their scope of with the authorised equipment approved by CFA.	
•	omprises of two teams: alth Monitoring Team; and the	7. The HST shall be a minimum of two (2) and a maximum of four (4) personnel. However, HSTs
b. Rel	nabilitation Team	shall normally operate as a team of two (2). Back up teams shall be available to ensure that appropriate shift durations can be maintained.
	will deploy both the rehabilitation and health monitoring the Incident Controller directs otherwise	
trained in the and at least o	will consist of at least two or three members sufficiently competencies approved by the Chief Officer in rehabilitation ne member trained in health monitoring. The member trained sitoring will be a health professional and act as the Team	
Leader.		

respond, the Rehab Teams of	monitoring are required in complex increased exposure to carbon practicable, HMRT Teams can also d CFA members to complete general	
assessments. This will be overseen to	y a HMRT Team Leader.	<ul> <li>8. HST team members shall be required to wear the appropriate PPC, which shall be as a minimum wildfire ensemble and a tabard to ensure that they are properly identified.</li> <li>9. HST team members shall be issued with CFA identification to ensure that these personnel can be included as a Part of the IMT.</li> </ul>
and work from: DRAFT This docume replaced at any time. Printed copies uncontrolled and should not be relied responsibility of the person printing	or part thereof, are regarded as d upon as the current version. It is the this document to always refer to the Page 3 of 6 a. the Staging Area; b. fill	10. The HST leader shall ensure that Staging Area Manager and IMT are provided with ongoing briefings, to assist in planning and managing personnel whilst on the fireground.
(15) The Incident Controller (and/or with the HMRT Team Leader is respondent for the HMRT to work from (16) During a significant event, the Notice of the Victoria for health monitoring purposes (17) Health monitoring may occur as	Staging Area Manager) in consultation onsible for identifying the appropriate IMRT may be supported by Ambulance ses:  a. the commencement of each shift; umption of duty; and d. the completion	
Health Monitoring Outcomes		

	bound by the Privacy Data and Protection Act 2014 (Vic) and the Health	Operations, Planning and Logistics sections as well
	(25) The HMRT collect medical data of personnel at an incident and are	11. The information collected shall be provided to the
	Note: Some CFA members will have a Personal Medical Management Plan (PMMP). This will assist in providing an overview of the medical history of the individual, and the PMMP must be taken into consideration by the HMRT Team, particularly in relation to health assessments and readings.	
	provided by a medical practitioner.	
	from operational duties until a medical clearance certificate has been	
	Crew Leader or Incident Controller of their decision; and b. stand down	
	If a member chooses not to accept this advice, they must: a. advise their	
	treatment/advice, it is recommended that this be undertaken immediately.	
	(24) Where a CFA member is referred to seek further medical	
	further assessment	
	b. assessed by Ambulance Victoria and transported to hospital for	
	a. further assessed by an alternative medical provider (e.g. GP); or	
	CFA member not return to operational duty and be:	
	wellbeing of a CFA member, the HMRT Team Leader may recommend the	
	guidelines, if health concerns are still present after re-assessment, following 40 minutes of rest, and it is considered detrimental to the health and	
	(23) In order for CFA to comply with its occupational health and safety	
	additional twenty minute rest period.	
	standards set out in the above guidelines, then they should undertake an	
	of the CFA member and their readings do not reasonably meet the	
	(22) Upon re-assessment, if there are still concerns regarding the condition	
	provided, this will be followed by a re-assessment of the individual.	
	period of at least twenty minutes with basic care and rehabilitation	
	(21) If health concerns are identified, initial management will include a rest	
	operational response duties.	
	(20) Where no health concerns are identified on the initial completion of health monitoring by the HMRT, CFA members may continue with	
	representative upon arrival at the HMRT site.	
	be initially assessed by a HMRT Team Leader or Ambulance Victoria	
	(19) All CFA members who are required to undergo health monitoring will	
	the clinical guidelines outlined in JSOP 8.05 Health Monitoring.	
I	(18) Health Monitoring practices should be undertaken in accordance with	

Records Act 2001 (Vic) when collecting, accessing, storing and disposing personal and health information of CFA members	as the Incident Controller as some of the information may assist in planning for resources as well as catering.
(26) HMRT personnel shall maintain a log of activities as per Chief Officer's SOP 9.13 – Keeping Logs and Documents.	12. HST personnel shall maintain a log of activities as per Chief Officers SOP 9.13 – Keeping Logs and
	Documents.

### Roles and Responsibilities

Role	Responsibilities
HMRT Team	1. Undertake a dynamic risk assessment to ensure the safety of the HMRT Team and CFA members undergoing health monitoring or rehabilitation.  2. Monitor persons in attendance at the scene vital signs.  3. Provide a rehabilitation service that reduces and treats the incidence of heat stress.  4. Ensure appropriate record keeping and maintain a log of activities as per <a href="Chief Officer's SOP 9.13">Chief Officer's SOP 9.13</a> - Keeping Logs and Documents.
HMRT Team Leader (Health Professional)	<ol> <li>Provide relevant information to the Manager, Health Monitoring and Rehabilitation.</li> <li>Manage the HMRT site.</li> <li>Report to and provide ongoing briefings and updates to the Incident Controller and/or Safety Officer to assist with managing personnel whilst on the fireground.</li> <li>Liaise with the Field Safety Officer, Medical Unit Leader, HAZMAT technicians or Scientific Officers where appointed.</li> <li>Take health monitoring readings and interpret the results.</li> <li>Provide health advice and treatment to CFA members.</li> <li>When required, make recommendations to CFA members to seek further medical treatment or advice.</li> </ol>
Health Monitoring Team Member	Monitor and assess the following:  1. Take health monitoring readings and interpret the results.  2. Hydration levels.  3. Heat stress.  4. Biological signs and symptoms of exposures (smoke etc).  5. Hygiene.  6. Safety issues (health and wellbeing.  7. Nutrition.  8. Injury assessments.
Rehabilitation Team Member	Provide support and monitor the following:  1. Establishment of the rehabilitation station in a shaded area that is free of smoke and atmospheric pollutants.  2. Providing support for Health Monitoring Teams (if activated).  3. Take health monitoring readings and interpret the results.  4. Use of rehabilitation equipment such as cooling chairs, arm bands, rest chairs etc.  5. Adequate stocks of water and electrolyte replacement drinks and snacks.  6. Responsibilities of Incident Controller, Staging Area Manager and CFA members

Incident Controller	<ol> <li>Manage task rotation of crews to assist with heat stress, fatigue and exposure to smoke.</li> <li>Establish and request activation of HMRT.</li> <li>Ensure firefighters are replaced to relieve fatigued or injured crew members.</li> <li>Appoint a Safety Officer/Medical Unit Officer/HAZMAT Technician/Scientific Officer if required.</li> </ol>
Staging Area Manager (or IC if not established)	Select an appropriate location for the establishment of the HMRT.
CFA members	<ol> <li>Report through their chain of command if they feel unfit for duty prior to or whilst responding to an operational incident.</li> <li>Maintain responsibility for their own health and safety, including managing fatigue levels, monitoring adverse reactions to smoke or air quality and maintaining adequate hydration.</li> <li>Undertake regular health monitoring and rehabilitation services, if established.</li> </ol>

### Safety Notes

(27) Nil

#### **Environmental Note**

(28) Nil

#### Section 4- Definitions

(29) Commonly defined terms are located in the CFA centralised glossary. Document-specific definitions are listed below.

#### Section 5- Related Documents

- (30) Occupational Health and Safety Act 2004 (Vic)
- (31) Privacy Data and Protection Act 2014 (Vic)
- (32) Health Records Act 2001 (Vic)
- (33) JSOP J08.05- Health Monitoring Emergency Personnel
- (34) EMV Standard for Managing Exposure to Significant Carbon Monoxide Emissions Responder Health
- (35) EMV State Smoke Framework V3.0
- (36) Chief Officers SOP 9.31 Welfare of CFA members DRA