BREEDE VALLEY

MEDICAL and PHYSICAL FITNESS POLICY
FOR THE RECRUITMENT, SELECTION AND RETAINMENT OF FIREFIGHTERS
MEDICAL & PHYSICAL FITNESS POLICY

POLICY STATEMENT
In recognition of the occupational hazards and risks associated with firefighting and in appreciation of the inherent and essential requirements of firefighting, all fire fighters should have and pass an initial comprehensive medical assessment with fitness for task evaluation and baseline biological screening upon entry and during their period of employment in the Fire Brigade Service.

1. PURPOSE
To ensure that all firefighters employed by the Fire Brigade Service meet acceptable standards for physical and medical fitness specifically designed to evaluate the member’s ability to perform the Essential Firefighting and other Emergency Response Job Functions, as identified in the applicable Job Descriptions.

2. SCOPE OF APPLICATION
All operational members will be required to fully participate in the Department’s Medical Evaluation Programme as described in this procedure. The Department will require all members to be declared medically eligible to perform the essential job functions. Any member not complying with program requirements will be placed on Medical Leave until they are in full compliance with this program.

PART A: MEDICAL REQUIREMENTS & EVALUATION PROGRAMME:

3. ESSENTIAL FIREFIGHTING FUNCTIONS
Essential functions are those that firefighters are expected to perform at emergency incidents and may be required to perform in training drills and emergency exercises. They are derived from the performance objectives stated in NFPA 1001, “Standard for Firefighter Professional Qualifications.”

3.1 General Essential Functions.
The examinee shall possess mental, sensorial, and motor skills as required to perform safely and effectively all essential job duties described below and those additional essential functions that are derived from the specific job task analysis that is developed for each firefighter. The specific job task analysis will be submitted to the Designated Physician prior to each medical evaluation of the candidate or current firefighter. The general essential functions include:

3-1.1 The ability to be stable with regards to consciousness and the control of voluntary motor functions, and to have the functional capacity to respond appropriately to routine and emergency situations of the job;
3-1.2 The ability to maintain the mental alertness, deductive and inductive reasoning, memory, and reliable judgment necessary to perform all essential functions without posing a direct threat to self or others;
3-1.3 Acuity of senses and ability of expression sufficient to allow essential, accurate communication by written, spoken, audible, visible, or other signals, while using required personal protective or other equipment; and
3-1.4 Motor power, dynamic strength, range of motion, neuromuscular coordination, stamina, gross body coordination, and dexterity adequate to perform essential functions under all required, routine and emergency duties.
3-2  **Specific Essential Functions.**
Each standard, firefighter essential function is listed with examples of medical conditions that may affect the ability of the individual to perform that function. These conditions, or others, when found to be present, require the Designated Physician to determine and record why that individual is, or is not, qualified to perform all the essential functions.

3-2a  **The individual must be stable with regard to consciousness and the control of voluntary motor functions and have the functional capacity to respond appropriately to routine and emergency situations.**
- **Examples of medical conditions that may affect performance include:**
  - All uncontrolled seizure disorders;
  - Myocardial insufficiency;
  - Congestive heart failure;
  - Documented predisposition to heat stress;
  - Malignant diseases not in remission;
  - Severe congenital deformities of the spine, trunk, or limbs; and
  - Narcolepsy.

3-2b  **Operate both as a member of a team and independently at incidents of uncertain duration.**
- **Examples of medical conditions that may affect performance include:**
  - Diabetes mellitus requiring careful control through management of diet, timed exercise, and/or insulin;
  - Sleep disorders;
  - Addison's Disease (adrenal insufficiency);
  - Allergic respiratory disorder; and
  - Disorders producing orthostatic hypotension.

3-2c  **Spend extensive time outside exposed to the elements.**
- **Examples of medical conditions that may affect performance include:**
  - Congenital ectodermal dysplasia;
  - Raynaud's Syndrome;
  - Chronic sinusitis;
  - Bronchial asthma; and
  - Severe arthritis.

3-2d  **Tolerate extreme fluctuations in temperature while performing duties. Must perform physically demanding work in hot (in excess of 200 °C), humid (up to 100% humidity) atmosphere while wearing equipment that significantly impairs body-cooling mechanisms.**
- **Examples of medical conditions that may affect performance include:**
  - Bronchial asthma:
  - Diabetes mellitus:
  - Pregnancy (after 1st trimester);
  - Chronic sinusitis:
  - Use of neuroleptic drugs (e.g., Thorazine); and
  - Eczema.

3-2e  **Experience frequent transition from hot to cold and from humid to dry atmospheres.**
- **Examples of medical conditions that may affect performance include:**
  - Bronchial asthma;
  - Chronic sinusitis;
  - Arthritis; and
  - Eczema.
3-2f  **Work, including walking, standing, pulling, and pushing in wet, icy, or muddy areas.**

Examples of medical conditions that may affect performance include:
- Neuromuscular injuries to the spine, or lower extremities with residual dysfunction of gait;
- Cerebral Palsy;
- Amyotrophic lateral sclerosis;
- Muscular atrophies;
- Arthritis;
- Cerebral vascular accident with residual dysfunction of gait; and
- Neurological disorders with ataxia

3-2g  **Perform a variety of tasks on slippery, hazardous surfaces, such as on rooftops or ladders.**

Examples of medical conditions that may affect performance include:
- Labyrinthine or vestibular disorders with vertigo;
- Severe limitations of motion of joints;
- All uncontrolled seizure disorders;
- Ataxias; and
- Progressive muscular dystrophy.

3-2h  **Work in areas where sustaining traumatic or thermal injuries are possible.**

Examples of medical conditions that may affect performance include:
- Impaired immune system;
- Diabetes mellitus;
- Predisposition to heat stress;
- Hemophilia, Von Willebrand's disease and other clotting/bleeding disorders;
- Anemia;
- Peripheral vascular disease;
- Raynaud's Disease; and
- Congenital multiple telangiectasia.

3-2i  **Ability to wear or use personal protective equipment without obstruction to prevent exposure to carcinogenic dusts, such as asbestos; toxic substances, such as hydrogen cyanide: acids; carbon monoxide; or organic solvents, either through inhalation or skin contact.**

Examples of medical conditions that may affect performance include:
- Emphysema;
- Eczema, including dyshidrotic types;
- Asthma;
- Chronic sinusitis; and
- Malignancies.

3-2j  **Face exposure to infectious agents, such as Hepatitis B or HIV.**

Examples of medical conditions that may affect performance include:
- Impaired immune system;
- Hemophilia;
- Severe eczema or other dermatitis;
- Cirrhosis; and
- Pregnancy (after the 1st trimester).

3-2k  **Wear personal protective equipment that weighs approximately 25 kilograms while performing fire-fighting tasks.**

Examples of medical conditions that may affect performance include:
- Hernia;
- Joint and limb deformities so severe that it would interfere with movement and flexibility;
- Arthritis;
- Ataxias; and
- Multiple sclerosis.

3-2l **Perform physically demanding work while wearing positive pressure breathing equipment with 1.5 inches of water column resistance to exhalation at a flow of 40 liters per minute.**

3-2l **Examples of medical conditions that may affect performance include:**
- Emphysema;
- History of previous pneumothorax;
- Eczema;
- Asthma;
- Spinal dysfunctions; and
- Chronic lung diseases.

3-2m **Perform complex tasks during life-threatening emergencies.**

3-2m **Examples of medical conditions that may affect performance include:**
- Psychological conditions;
- Cardiovascular conditions, including angina;
- Severe hypertension;
- Substance abuse;
- Migraine; and
- Progressive dementias.

3-2n **Work for long periods of time, requiring sustained physical activity and intense concentration.**

3-2n **Examples of medical conditions that may affect performance include:**
- Neuromuscular injuries to the spine, or lower extremities with residual dysfunction of gait;
- Cerebral Palsy;
- Amyotrophic lateral sclerosis;
- Muscular atrophies;
- Arthritis; and
- Cardiac conditions, including angina.

3-2o **Make life or death decisions during emergency conditions.**

3-2o **Examples of medical conditions that may affect performance include:**
- Psychological conditions;
- Cardiovascular conditions;
- Severe hypertension;
- Substance abuse;
- Migraine;
- Suicide threat or attempt; and
- Cardiac conditions, including angina.

3-2p **Be exposed to grotesque sights and smells associated with major trauma and burn victims.**

3-2p **Examples of medical conditions that may affect performance include:**
- Psychological conditions;
- Cardiac conditions, including angina;
- Recurrent syncope;
- Substance abuse; and
- Hypertension.

3-2q Make rapid transitions from rest to near maximum exertion without warm-up periods.
3-2q Examples of medical conditions that may affect performance include:
   - Cardiovascular conditions;
   - Arthritis and other chronic joint diseases;
   - Chronic, obstructive or restrictive lung diseases;
   - Progressive muscular dystrophy;
   - Labyrinthitis; and
   - Poor physical conditioning.

3-2r The ability to properly and effectively wear protective equipment.
3-2r Examples of medical conditions that may affect performance include:
   - Deformities of the skull, congenital or developmental facial deformities;
   - Oropharyngeal dysfunction, causing inability to communicate effectively;
   - Contraction of neck muscles, inability to rotate head;
   - Inflammatory skin diseases;
   - Pulmonary functions diseases;
   - Tracheotomy;
   - Branchial cleft or other oropharyngeal fistulas; and
   - Perforated eardrum.
   - Obesity

3-2s Freedom from frequent episodes of pain or inability to perform work or sudden incapacitation.
3-2s Examples of medical conditions that may affect performance include:
   - Pancreatitis;
   - Ulcers;
   - Acute hepatitis;
   - Severe hemorrhoids;
   - Hernia;
   - Chronic severe osteoarthritis; and
   - Lumbar disc disease or other low back pain syndromes.

3-2t Ability to maintain balance under adverse conditions, weight loads, and at aboveground heights; and maintain body flexibility.
3-2t Examples of medical conditions that may affect performance include:
   - Labyrinthitis;
   - Amputation or deformity of joint or limb;
   - Cerebral arteriosclerosis;
   - Multiple sclerosis;
   - Muscular dystrophy;
   - Chemical, drug, or medication abuse;
   - Obstructive or restrictive lung disease;
   - Ankylosing spondylitis; and
   - Chronic back conditions with decreased range of motion or pain.

3-2u Operate in environments of high noise, poor visibility, limited mobility, above ground heights, and in closed or confined spaces.
3-2u Examples of medical conditions that may affect performance include:
   - Hypertension:
   - Hearing loss, recruitment, or other hearing-related conditions;
   - Claustrophobia;
- Psychological conditions;
- Ulcers;
- Labyrinthine or vestibular disorders subject to vertigo;
- Syncope; and
- Acrophobia.

3-2v **Use manual and power tools in the performance of duties.**
3-2v **Examples of medical conditions that may affect performance include:**
- Progressive muscular dystrophy;
- Neuromuscular injuries to the spine or limbs;
- Hearing loss;
- Arthritis and other chronic joint diseases;
- Cerebral Palsy; and
- Carpal tunnel syndrome.

3-2w **Rely on sense of sight, hearing, smell, and touch to help determine the nature of the emergency; maintain personal safety; and make critical decisions in a confused, chaotic, and potentially life-threatening environment throughout the duration of the operation.**
3-2w **Examples of medical conditions that may affect performance include:**
- Hearing impairment with inability to hear the whispered voice at 3 metres in a quiet environment;
- Recurrent sinusitis;
- Visual acuity uncorrected worse than 20/100; and
- Anosmia.

3-2x **The ability to identify colors and to read placards and street signs or to see and respond to imminently hazardous situations in less than standard visual lighting conditions.**
3-2x **Examples of medical conditions that may affect performance include:**
- Color blindness;
- Retinal detachment;
- Progressive retinopathy;
- Optic neuritis;
- Radial keratotomy prior to full healing; and
- Cataracts.

3-2y **The ability temporarily to have useful vision in the event eyeglasses are broken or displaced by emergency activity.**
3-2y **Example of a medical condition that may affect performance:**
- Uncorrected vision worse than 20/100.

3-2aa **Ability to smell smoke and other odors that might indicate hazardous conditions.**
3-2aa **Examples of medical conditions that may affect performance include:**
- Anosmia; and
- Severe sinusitis.

3-2ab **Ability to verbally communicate effectively under noisy circumstances with a potential for voice obstruction by personal protective equipment.**
3-2ab **Examples of medical conditions that may affect performance include:**
- Hearing loss;
- Speech pathology;
- Laryngectomy;
- Tracheotomy;
Bronchial asthma; and
- Congenital acquired deformities of the face and neck that interfere with speech.

3-2ac Ability to distinguish low intensity voice sounds from background noise in order to respond to imminently hazardous situations.
3-2ac Example of a medical condition that may affect performance:
- hearing loss, including presbycusis.

3-2ad Ability to work in closed or confined spaces.
3-2ad Example of a medical condition that may affect performance:
- claustrophobia.

3-2ae Ability to judge distances closer than 4 metres demonstrated either by testing of depth perception or by a practical field test.
3-2ae Examples of medical conditions that may affect performance include:
- Monocular vision; and
- Amblyopia anopsia.

4. PRE-PLACEMENT/POST OFFER/BASELINE MEDICAL EXAMINATION

Medical examinations on all prospective new employees will be conducted prior to the signing of any written employment contract.

The medical examination will constitute the following:-

- Personal Medical History including occupational & exposure history
- Physical examination with 10-strip urine analysis
- Random Blood Glucose if Glucosuria
- Laboratory:
  - Fasting Blood Glucose if Glucosuria
  - Other tests on indication only
- Immunisations:
  - Hepatitis B
  - Tetanus toxoid
- Vision screening
  - Visual Acuity (Far)
    Standard should be set without correction (Contact lenses and spectacles). Snellen chart for acuity combined with Ishihara colour charts as a standard screening method followed by a formal optometrist evaluation in case of abnormality is suggested
- Audiometry:
  - Baseline Audiogram within 30 days of employment
  - Spirometry/Lung Function Test
  - Chest X-Ray
  - Stress ECG (treadmill)

4.2 INITIAL MEDICAL SCREENING

The Department will administer an Initial Medical Screening for established Firefighters for whom a Baseline has not been established or is considered to be outdated. Based on this initial screening, the Medical Physician will review the results and prioritize individuals for follow-up medical evaluations based on risk factors identified. Eventually, all established firefighters will have a medical evaluation in order to establish an acceptable baseline.
4.3 PERIODIC MEDICAL EXAMINATION - Operationally Active Firefighters

- Subsequent identical Physician medical assessments should be carried out every two years if the fire fighter is less than 35 years of age.
- If the individual is over 35 years of age medical assessments should be carried out annually,
- After health incident requiring fitness for work assessment (as listed in Category A & B - NFPA 1582)

- **Immunisations:**
  - Hepatitis B: booster every 5 years
  - Tetanus toxoid: booster every 10 years

- **TB Mantoux skin testing**
  - Sputum testing for TB should be performed on clinical indication only.

- **Hepatitis B**
  - Booster dosages to be given every 5 years.

This schedule may be accelerated for specific individuals at the discretion of the Medical Physician based on any risk factors identified during previous medical evaluations or exams or based on information obtained in the interim questionnaire.

4.4 EXIT MEDICAL EXAMINATION

An exit medical examination will be conducted on all employees leaving the service. Should a periodic examination have been performed less than 6 months prior to termination of employment, the results thereof will be accepted as an exit medical examination.

The exit medical will constitute the following:-

- Physical examination with 10-strip urine analysis
- Laboratory:
  - Repeat any test which had any abnormality in the past
- Vision screening
- Audiometry:
  - Exit Screening Audiogram
- Spirometry/Lung Function Test
- Stress ECG (treadmill)
  - On clinical indication only
- Chest X-Ray

4.5 CLEARANCE/CERTIFICATION FOR DUTY

- Based on a complete Medical evaluation, the Medical Physician will provide written documentation that indicates that the individual member is/or is not medically cleared to perform the essential job functions with/without physical restrictions.
- The written notification will be forwarded directly to the Chief Fire Officer.
- This clearance for duty will be kept in the individual’s personnel file.

4.6 MEDICAL CONDITIONS AFFECTING ABILITY TO PERFORM

Category A and Category B medical conditions shall help the examiner understand the type of condition that could result in rejection or acceptance. The medical conditions listed are organized by organ system. In NFPA 1582 (available upon request) Appendix A explanatory material, a diagnostic example is often included with the list. In addition, the rationale for the rejection is
presented in terms of the effect of the medical condition on the capability of the person to perform as a member.

- **Category A Medical Condition.**
  A medical condition that would preclude a person from performing as a member in a training or emergency operational environment by presenting a significant risk to the safety and health of the person or others.

- **Category B Medical Condition.**
  A medical condition that, based on its severity or degree, could preclude a person from performing as a member in a training or emergency operational environment by presenting a significant risk to the safety and health of the person or others.

4.7 MEDICAL EXAMINATION PROVIDER:
The provider for medical evaluations and examinations will be designated by the Municipality.

4.8 MEDICAL EXAMINATION PROCEDURE
• Based on the established interval and anniversary date, the member will be sent a letter advising of the need to schedule a Medical Evaluation.
• The member will call the designated Medical Provider to schedule appointments during established clinic hours.
• The Medical Provider will conduct the medical examination.
• Any potential life threatening conditions discovered during an examination will be immediately reported to the member.
• During the examination process, if the physician believes further testing is warranted to determine fit for duty status, a representative from the Clinic will contact the Assistant Chief: Safety & Administration for verification.
• Beyond the approved Medical Evaluation the member is responsible for the cost of additional testing or procedures.

4.9 MEDICAL RECORDS:
• All medical records will be maintained by the Medical Provider. Summary reports are available to the member in lieu of medical results. Copies of all reports will be made available to the individual member upon request at no charge.
• The Medical Provider will provide a written notice of Fit for Duty.
• If a member does not meet the Fit for Duty Status, a written notice specifically identifying the reason why they do not meet Fit for Duty Status will be provided.

4.10 OUTSIDE DEPARTMENT MEDICAL RECORDS:
• A member may submit current medical records to the Medical Provider for review. Based on this review, the Medical Physician may certify the member for duty without performing an actual medical examination.
• This clearance will be entirely at the discretion of the Medical Physician.
• The individual member needs to initiate this process.

4.11 CONFIDENTIALITY:
• The Medical Evaluation Programme is considered to be a confidential process with any discussions of medical issues to be limited to the individual member, the Medical Physician and the Chief Fire Officer or his designee.
4.12 MEDICAL (SICK) LEAVE OF ABSENCE:
Subject to Section 24 of the Basic Conditions of Employment Act and subject to the Compensation for Occupational Injuries and Diseases Act.

- Medical Leave of Absence is an employment status that is usually initiated by a recommendation from the Medical Physician to the Chief Fire Officer. An individual may also request to be put on Medical Leave of Absence.

- In the event that a member is not cleared for duty by the Medical Doctor, the member will be placed on Sick Leave until such medical clearance is obtained.

- Medical leave shall remain in effect until the member is medically/physically able to return to full duty and perform all the essential functions of the position.

- If the member has more than one job function with the Department the member will be medically evaluated as to their ability to perform separate job functions. The member may be on medical leave from one job function while performing another job function.

- After a period of one year, if the member is unable to return to full duty, the Municipality reserves the right to re-assign or initiate steps for the termination on medical grounds of the member’s employment with the Municipality.

- Medical Leave of Absence is terminated when the Medical Physician provides a clearance for work.

- If for any reason an individual requests a Medical Leave of Absence, a letter should be written to the Chief Fire Officer requesting such action. Documentation would be submitted to initiate and conclude the Medical Leave of Absence.

- A member who fails to participate fully in the Department’s Medical Evaluation program is subject to disciplinary action, leading up to and including termination.

4.13 RESTRICTED DUTY:
- In the event that the Medical Physician clears a member for duty with one or more physical restrictions, the member will meet with the Chief Fire Officer to discuss any temporary re-assignment alternatives that may be available, subject to the member of staff possessing the knowledge and skills necessary to perform such reassignment.
PART B. PHYSICAL and JOB TASK REQUIREMENTS
Physical Fitness Testing and Job Task Assessments should be carried out initially as per firefighter entry requirements and annually thereafter outlined below to ensure fitness maintenance. Such testing will be carried out on-site, but is to be supervised and controlled by an individual who is qualified to do so and who may not necessarily be an employee of the Municipality.

5.1. STANDARD
The Physical Fitness Standard is comprised of the following physical fitness tests. To satisfy the Standard, a fire fighter shall achieve or exceed the minimum level of performance required for each test.
These tests shall be taken as an initial entry assessment and once in employment, as a qualification evaluation for operational firefighting.

A candidate, who undergoes the initial entry assessment, can only proceed to next physical element if he/she successfully meets the preceding element in the Physical Fitness Standard.

(a) Cardiovascular/Respiratory Fitness

1. 2, 4 km Run.
**Entry Requirement:** - Complete 2,4 km run in under 12 minutes

**Operational Requirement:** -
- □ < 35 years: - Complete 2,4 km run in under 12 minutes
- □ > 35 years: - complete 2,4 km run in under 15 minutes

(b) Musculoskeletal Fitness

1. Sit-ups
**Entry Requirement:** - perform 40 sit-ups in 60 seconds

**Operational Requirement:**-
- □ < 35 years: - Complete 40 sit-ups in 60 seconds
- □ > 35 years: - complete 36 sit-ups in 60 seconds

2. Bench Press
**Entry Requirement:** - Bench-press \( \frac{2}{3} \) body weight with 15 repetitions.

**Operational Requirement:**-
- □ < 35 years: - Bench-press \( \frac{2}{3} \) body weight with 15 repetitions.
- □ > 35 years: - Bench-press \( \frac{2}{3} \) body weight with 12 repetitions.

(c) Job Simulation Physical Fitness Screening

1. Ladder Climb (Acrophobia Test; (timed)
**Entry Requirement:** - Climb up and down 3 storeys using proper demonstrated technique. A safety line is attached to the applicant.
   (Acceptable time limit 68 seconds; Maximum Time Limit 75 seconds)

**Operational Requirement:** - Wearing a SCBA cylinder, the candidate climbs up and down 3 storeys using proper technique. A safety line is attached to the candidate.
   (Acceptable Time Limit 50 seconds; Maximum Time Limit 60 Seconds)
2. Claustrophobia Test  
*Entry Requirement:* (timed)

i) Wearing a blacked-out face piece, the candidate moves through a smoke-room circuit.  
   *(Acceptable Time Limit 180 seconds; Maximum Time Limit 210 seconds)*  

ii) Wearing full bunker gear and blacked-out face piece, candidate moves through tunnel circuit. *(Acceptable Time Limit 180 seconds; Maximum Time Limit 210 seconds)*

*Operational Requirement:* (un-timed)

i) Wearing full bunker gear and SCBA, candidate moves through smoke-room circuit and retrieves 75 kg mannequin.

3. Water/ Swim Test  
*Entry Requirement (Hydrophobia):* (un-timed)

Candidate moves across shallow end of swimming pool and retrieves weighted object from floor of swimming pool whilst head is submersed under water.

*Operational Requirement:* (timed)

Candidate swims 50 metres across pool using free style swimming technique.  
*(Acceptable Time Limit 2 minutes; Maximum Time Limit 3 minutes)*

4. Stamina & Endurance

1. Foam Drum Carry (timed)

*Entry Requirement:* Candidate carries two standard full foam drums (25 kg) across a distance of 50 metres.  
   *(Acceptable Time Limit 60 Seconds; Maximum Time Limit 75 seconds)*

*Operational Requirement:* Candidate carries two standard full foam drums (25kg) across a distance of 50 metres whilst in full bunker gear.  
   *(Acceptable Time Limit 60 seconds; Maximum Time Limit 75 seconds)*

2. Simulated Hose Advance/Drag (timed)

*Entry Requirement:* With a loop of hose worn as a sash and the candidate looking forward the candidate pulls a weighted sled a distance of 15 metres. Dragging the sled simulates advancing two 30 metre sections of charged 65mm hose.  
   *(Acceptable Time Limit 36 seconds; Max. Time Limit 45 seconds.)*

*Operational Requirement:* Wearing full bunker gear, with a loop of hose worn as a sash and the candidate looking forward the candidate pulls a weighted sled a distance of 15 metres. Dragging the sled simulates advancing two 30 metre sections of charged 65mm hose.  
   *(Acceptable Time Limit 36 seconds; Max. Time Limit 45 seconds.)*
5. 2. INITIAL PHYSICAL FITNESS ASSESSMENT

(a) Initial assessments of the physical fitness of all new recruits will be completed and must reach the prescribed standards prior to any offer of employment being made.

(b) Initial assessments of the physical fitness of all current fire fighters shall be conducted at the earliest opportunity.

(c) The Chief Fire Officer, and/or other persons responsible for the coordination of the on-site fitness assessment program, will consult with the Human Resources Manager and nominated Medical Officer with regard to the readiness of fire fighters to take the initial assessment.

(d) Purpose
   The initial assessments will serve to establish the current level of fitness of fire fighters vis a vis the Standard, and facilitate the prescription of exercise programs appropriate for each fire fighter.

(e) Objective
   It is estimated that the Standard can be achieved in three to six months by most fire fighters. The objective is to have all current fire fighters meet the Standard, as a bona fide occupational requirement, within 1 year of the initial assessment.

(f) Implications
   (i) Fire fighters who are unable to take the initial assessment, for reasons of recent injury, shall be scheduled for assessment as soon as possible after the injury has healed.

   (ii) Fire fighters who are unable to take the initial assessment for reasons of long-term injuries or serious/chronic medical conditions shall be referred for a medical examination to verify medical fitness.

(g) Re-assessment
   (i) Re-evaluation as a result of failure of an initial assessment shall only be available to persons who are already employed by the Municipality as fire fighters.

   (ii) Such re-assessment should not be undertaken less than 30 days after the last assessment to allow a reasonable time within which effort can be made to produce appreciable improvement and enhance the possibility of success.

   (iii) The exact timing of a re-assessment will depend upon the results obtained by the fire fighter in the unsuccessful test and will be at the discretion of the Chief: Fire Services, whose decisions will be based on the previous evaluation results and the advice of the Medical Officer.
5. 3. QUALIFICATION EVALUATION

(a) Successful Fire Fighters

I. Fire fighters who meet the Physical Fitness Standard in the initial assessment, shall be required to pass qualification evaluations every six (6) months, except that fire fighters obtaining test results in (ii) below shall be required to submit to qualification evaluations every one (1) year provided those levels are maintained in subsequent tests.

ii. Qualification evaluations shall be conducted once a year where the results obtained during a single evaluation in the three (3) below listed elements are:

   a) **2, 4 km Run**
      - <35 years - completes run in under 10 minutes
      - >35 years - completes run in under 12 minutes

   b) **Sit-ups**
      - <35 years - performs 45 sit-ups in 1 minute
      - >35 years - performs 40 sit-ups in 1 minute

   c) **Bench Press**
      - <35 years - performs 18 repetitions
      - >35 years - performs 14 repetitions

(b) Unsuccessful Fire Fighters

Twelve months following the initial physical fitness assessment, as stated in paragraph (2b) above, steps shall be taken to address the Human Resource circumstances resulting from continued failure to meet the Standard.

Actions/Options to be explored shall include but not be limited to the following:

i. Extension(s) of the one (1) year period by a maximum of 3 months at a time, where:

   - due to severe injury on the job or illness, the fire fighter has been unable to undertake activities to improve physical fitness during a significant portion of the one year period, or

   - the fire fighter's qualification evaluation results are not less than:
     a) **2, 4 km Run**
        - <35 years - completes run in 14 minutes
        - >35 years - completes run in 17 minutes

     b) **Sit-ups**
        - <35 years - performs 34 sit-ups in 1 minute
        - >35 years - performs 30 sit-ups in 1 minute

     c) **Bench Press**
        - <35 years - performs 12 repetitions
        - >35 years - performs 10 repetitions
ii. Retraining, and reassignment, to any suitable position that might be available having regard to the fire fighter's education, skills, abilities, and experience.

iii. Retirement, earlier than anticipated, with the application of any plans that might be in effect at the time that offer some related financial consideration.

iv. Release of fire fighters due to incapacity/inability to meet the bona fide occupational requirements.

(c) Confidentiality
(i) All information shall be treated in strictest confidence and in a manner that satisfies the requirements of the relevant legislation.

(ii) Levels of fitness performed by individual fire fighters shall be available to management on a need to know basis, or more generally available with the individual's consent.

(d) Timing of Qualification Evaluations
The Chief Fire Officer, or other persons responsible for the coordination of the on-site fitness assessment program, must consult with the Medical Officer with regard to the readiness of fire fighters to take the qualification evaluation.

(e) Re-evaluation
(i) Re-evaluation as a result of failure of a qualification evaluation should not be undertaken less than 30 days after the last qualification evaluation. This allows a reasonable time within which sufficient training can be done to produce appreciable improvement and enhance the possibility of success.

(ii) The exact timing of a re-evaluation will depend upon the results obtained by the fire fighter in the unsuccessful test. Decisions will be based on the previous evaluation results and the advice of the Medical Officer.

(iii) An individual who fails to pass a qualification evaluation shall be granted a period of three (3) months in which to pass a re-evaluation. Should the individual not attain the required standard within that three month period the provisions of paragraph 3(b) above shall apply.

5.4. Medical Examinations and Physical Fitness Evaluations

(a) The recurrent physical fitness qualifying evaluation should be scheduled to take place after the (annual or biennial) medical examination.
References:
1. NFPA 1001 Edition Standard on Firefighter Professional Qualifications
2. NFPA 1582 Edition Standard on Standard on Medical Requirements for Fire Fighters
3. NFPA 1500 Edition Standard on Fire Department Occupational Safety and Health Program
5. Basic Conditions of Employment Act 75 of 1997